

## Safer Cornwall Partnership Multi-Agency Action Plan for DHR13

Recommendations	Outcome to be achieved	Specific actions to achieve outcome	Action completion deadline	Action owner (named lead for your agency)	How outcome will be evidenced and measured
<b>Recommendations 1-12</b>	The overarching outcome to be achieved from these recommendations is that informal carers in Cornwall receive the medial and emotional support they need, and the wider family are engaged positively with services in providing help and support to their loved ones.	<p>Since the time of the DHR occurring there have been a number of key changes being made to support carers within our community. These being:</p> <ol style="list-style-type: none"> <li>1. <u>Strategic</u> = Carers Strategy being produced, leading to contractual arrangement being made with the Cornwall Carers Service</li> <li>2. <u>Practice</u> = Updates training for all Adult Social Care staff and continued with the Safeguarding Adults board for wider staff</li> <li>3. <u>Procedure</u> = The implementation of a quality assurance framework</li> </ol> <p>The Carers Strategy has been produced and Cornwall Council have implemented contractual arrangement with the Cornwall Carers Service, who provide, not just only assessment for carers, but early and ongoing support and signposting advice.</p> <p>As this service relies on referrals being made not just by the Council's Adult Social Care staff, but by partners, ongoing work is taking place to ensure:</p> <ol style="list-style-type: none"> <li>1. Information is accessible to adults and their carers</li> <li>2. Training is provided for professionals.</li> </ol> <p>Assessment documentation have been updated, ensuring clear evidence is recorded around practice, including the exploration of the support being provided by informal care givers and carers needs being consider.</p>	Completed and subject to ongoing review	Adult Social Care	<p>Strategic = As a part of the contract arrangements the provider submits quarterly workbooks detailing both volumes of individuals supported, including prior to formal assessment, and aggregated data around carer outcome post self-assessments.</p> <p>Quartey contract review meeting and KPI reported to health and wellbeing board provide governance and assurance of quantity and quality of services being offered and delivered to carers</p> <p>Practice = The council has a robust training offer available to Adult Social Care staff and to the wider corporate workforce.</p> <p>Adult Social Care Workforce training engagement is monitored both centrally by the Learning and Development service and at place, via supervision the council Performance and Development Framework.</p> <p>The council continue to work with the Safeguarding Adult Board in ensuring partner agencies and accessible information on how to access support and services is available to adult, their carers and the professionals supporting them.</p> <p>Procedure = Adult Social Care have created three lead Locality Social Worker roles, in September 2022. Working with the Principle Social Worker, the Practice Education department and senior Locality Management teams an interim Audit cycle has been developed, pending the development and implementation</p>

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					of a full assurance framework. Monitoring of the assurance activity takes place in the Practice assurance Group (establish in November 2022)
<b>Rec 1 – The ICB to work with partner agencies to make system changes that overcome help-seeking barriers and improve the way people interact, engage, and access the specialist support available.</b>	<p>There will be evidence of an increase in self-referrals to specialist agencies offering support to both caregivers and those they care for.</p> <p>Referral to memory clinic would always be through a GP. This is so tests can be conducted to check the cause of the symptoms and to make sure that no other causes are missed. The GP would then refer to the memory clinic. Once a diagnosis is made, people are able to access the specialist support such as the admiral nurses and carers services. Therefore, the data that demonstrates effectiveness is the data dementia diagnosis.</p> <p>How we support carers to access services is described in recommendation 4</p>	<ol style="list-style-type: none"> <li>1. ICB to work with the Cornwall Council adult social care in the development and implementation of the carers strategy which will include the strategy support people to self-refer.</li> <li>2. ICB and CFT to provide an assurance statement to Safer Cornwall, via the SAR implementation group of the data in relation to this recommendation.</li> <li>3. Recommendation 4 describes how the ICB will provide data in relation to care givers.</li> <li>4. As part of our strategic function, the ICB will undertake extensive consultation with the public about the barriers to accessing services and what our population needs to be able to access services. This will be published, along with our response and actions in the ICB joint forward plan. There will be a key focus on tackling inequalities. This work will inform our adult mental health strategy</li> <li>5. Our offer to people who are affected by dementia will be much wider than secondary services, making use of the voluntary sector</li> </ol>	January 2025	ICB	<ol style="list-style-type: none"> <li>1. The strategy is published and contains this information- complete</li> <li>2. Data on dementia referral rates. This is improving and an assurance statement will be prepared containing the data</li> <li>3. Recommendation 4 describes how the ICB will provide data in relation to care givers</li> <li>4. This work to undertake consultation is complete and published in <a href="#">our joint forward plan</a>. There is a key focus on tackling inequalities An assurance statement will be provided to Safer Cornwall describing how we aim to support people to access services. This consultation work informed our mental health strategy, which is published. This work to understand the needs of our population is embedded as business as usual. The ICB is also undertaking an extensive series of consultation events in relation to the governments national consultation '<a href="#">change NHS</a>'</li> <li>5. Our wider offer arose from our consultation work and is set out in our <a href="#">adult mental health strategy</a> and our joint forward plan</li> </ol>

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<b>Rec 2 – If an individual needs another person to help them function on a day-to-day basis, all professionals should routinely enquire about unpaid, informal caregiving arrangements. This should extend to family members and community members who may also be providing unpaid informal care.</b>	<p>There will be an increase in the number of informal carers in Cornwall receiving personalised support appropriate to their needs and circumstances.</p> <p>CFT/RCHT - All services involved in direct patient care to consider the needs of informal carers</p>	CFT/RCHT Identify areas who are not considering the needs of the person and family members.	<p>Revision of actions 23/11/23- these are actions relating to recommendation 2 + 3 (below): Audit to be developed to understand the baseline, and track progress against the delivery of actions against recommendation.</p> <p>Education session has been developed for January 2024 which has a focus on identification of carers and offer of support. Primarily targeted at Dementia and Older People Mental Health Services (DOPMH) but is open to all CFT staff.</p> <p>Reminders to be sent to all DOPMH staff regarding Wayfinders, who can provide signposting for additional support for patients and carers.</p> <p>Close working with CFT GP colleagues to encourage the consideration of carers as part of the drive behind increasing the numbers of identified cognitive impairments.</p> <p>Development of patient and carer experience feedback surveys.</p> <p>Target date for action completion: 31 March 2024.</p> <p>October 2024 Update A carers education session was held on 15th Jan 2024. This was the DOPMH Service Line quarterly education session. The theme for this was 'how to care for carers well'.</p> <p>All staff have been reminded of the importance of referring for carers assessments.</p> <p>The service is starting to work towards the Aspire accreditation which is benchmarked</p>	<p>March 2023</p> <p>CFT/ RCHT – Area Directors</p> <p>This already forms part of CFT's DOPMH initial assessment processes.</p>	<p>Increase in referrals to Cornwall carers.</p> <p>Increase in the number of informal carers receiving personalised support appropriate to their needs and circumstances.</p> <p>Practice will be to return to the sensitive conversation with informal care giver if declined</p>

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			<p>across the Royal College of Psychiatry's Community Mental Health Standards.</p> <p>There is a Golden Thread Team comprising of four carers that represent the carer's voice. They also sit on the Dementia Carer Board (System wide)</p> <p>The Service is working with Care Opinion to gain enhanced feedback regarding services. Care Opinion also attend the Divisional Quality and Governance Meeting. Updated deadline of 31st December 2024</p>		
		<p>'Think Family' has been included in the mandatory Adults at Risk Police Protection Notification (PPN) training. This training includes a case study to illustrate why this is so important following another recent SAR whereby a son was providing care to his mother when he had his own care and support needs and was unfit to do so. Further awareness raising is also planned to encourage officers to submit PPNs when they are concerned about unpaid, informal caregiving arrangements.</p>	<p>Completed</p> <p>Our Central Safeguarding Team (CST) are routinely reminded to think about the informal carer. Regular communications are sent to our teams to inform them of recent SARs and the learning that comes from them.</p>	DCP	
		<p>Cornwall Council have implemented contractual arrangement with the Cornwall Carers Service in April 2021.</p> <p>The council continue to work with the SAB in exploring how we ensure all partner agencies are aware of the Carers Strategy; the services Cornwall Carers Service provide and how to access them.</p> <p>As this service relies on referrals being made not just by partners, but by the Council's Adult Social Care staff. As a result of the findings within this DHR the council has and continues to routinely raise internal awareness of the ability of the service to</p>	<p>Completed: March 2023</p> <p>Contractual arrangement with the Cornwall Carers Service were initiated in April 2021</p> <p>Communication were initiated as part of the Carers week campaign in June 2022, with further communication taking place throughout 2023 .</p> <p>These include a planned seven-minute briefing, post the DASV agreement to share the Executive Summary of this DHR.</p>	<p>Adult Social Care Commissioning</p> <p>Adult Social Care Commissioning; working with the Statutory Assurance, Policy and Practice Senior Manager; and the Specialist Professional Development Lead</p>	<p>The provider submits quarterly workbooks detailing both volumes of individuals supported, including prior to formal assessment, and aggregated data around carer outcomes of self-assessments.</p> <p>Quartey contract review meeting and KPI reported to health and wellbeing board provide governance and assurance of quantity and quality of services being offered and delivered to carers</p> <p>The Contract Monitoring Returns provide the assurance framework for</p>

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		<p>work with people at an earlier stage, regardless of the scope of their caring role.</p> <p>We have added prompts in our assessment documentation, to support practice, within our assessment process. This will ensure we evidence explore any care being provided by “informal carers”; ensuring the care being provided is sustainable and opportunity is given to the carer for their needs to be explored</p> <p>To support this the then Chief Social Worker issued updated practice guidance (to reflect current policy and national guidance) and produce an accompanying training video.</p> <p>The quality of assessment being undertaken are now subject to routine quality audits. We have updated our training offer to all adult social care staff, delivering Care Act assessments. This training includes practice guidance around supporting carers.</p>	<p>Assessment documentations were updated in March with the practice guidance being issued in May 2022</p> <p>Audit process was initiated in November 2022</p> <p>The training cycle is ongoing</p>	<p>This action has been completed by the Statutory Assurance, Policy and Practice Senior Manager. The success will be monitored by the Lead Locality Social Workers and the practice Assurance group</p> <p>This action has been completed and continues to be monitored by Specialist Professional Development Lead, Principe Social Worker and the Practice Assurance Group</p>	<p>measuring the outcome. By providing quantitative numbers of people who are engaged with the service and there are Key Performance Indicators for the number of carers supported and number of newly identified carers.</p> <p>Practice Quality continues to be monitored by the Lead Locality Social Workers and the practice Assurance group</p> <p>Attendance at training is monitored by the Specialist Professional Development Lead. The impact on practice is monitored via supervision under the new Supervision framework (introduced in September 2022) and benchmarked against the draft practice Quality Standards</p>
<p><b>Rec 3 – Once an unpaid informal caregiver has been identified, all professionals should refer to the Carers’ Service and discuss a carer’s needs assessment, its purpose, the best placed agency to undertake the assessment, and the specialist support that can follow.</b></p> <p><b>If a caregiver declines support a sensitive one-to-one discussion should take place to understand and alleviate their reservations.</b></p>	<p>There will be percentage increase in the number of carers assessments and personalised support plans in place including the issue of emergency carers cards containing contingency planning</p>	<p>CFT/RCHT Ongoing reassessment of needs, recognising needs increase and change as situations become more complex.</p> <p>Provision of practice guidance to support extensive one to one discussion.</p> <p>Support for staff to hold sensitive conversations and feedback observations (educational need)</p> <p>Practice will be to return to sensitive conversations with care giver if declined</p>	<p>Revision of actions 16/11/23: These are actions relating to recommendation 2 (above) + 3: Audit to be developed to understand the baseline, and track progress against the delivery of actions against recommendation. Education session has been developed for January 2024 which has a focus on identification of carers and offer of support. Primarily targeted at Dementia and Older People Mental Health Services (DOPMH) but is open to all CFT staff.</p> <p>Reminders to be sent to all DOPMH staff regarding Wayfinders, who can provide signposting for additional support for patients and carers.</p> <p>Close working with CFT GP colleagues to encourage the consideration of carers as part of the drive behind increasing the</p>	<p>CFT/RCHT –</p>	<p>Increase in the number of informal care givers receiving assessment and personalised support appropriate to their needs and circumstances.</p> <p>Practice will be to return to the sensitive conversation with informal care giver if declined</p>

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			<p>numbers of identified cognitive impairments.</p> <p>Development of patient and carer experience feedback surveys.</p> <p>Target date for action completion: 31 March 2024.</p> <p>October 2024 Update: A carers education session was held on 15th Jan 2024. This was the DOPMH Service Line quarterly education session. The theme for this was 'how to care for carers well'.</p> <p>All staff have been reminded of the importance of referring for carers assessments.</p> <p>The service is starting to work towards the Aspire accreditation which is benchmarked across the Royal College of Psychiatry's Community Mental Health Standards.</p> <p>There is a Golden Thread Team comprising of four carers that represent the carer's voice. They also sit on the Dementia Carer Board (System wide)</p> <p>The Service is working with Care Opinion to gain enhanced feedback regarding services. Care Opinion also attend the Divisional Quality and Governance Meeting.</p> <p>Updated deadline of 31st December 2024</p>		
		Devon and Cornwall have a dedicated Adults at risk Sharepoint page. Contained within this page is useful information for officers including how to make a referral. We plan to add this guidance to our Sharepoint page alongside future training and awareness raising in this specific area.	<p>Completed</p> <p>As mentioned for Rec 2, our PPN process would also instigate conversations with other agencies with who is best placed to undertake assessment, we acknowledge that for most assessments this will not be the police, but we are dedicated in playing our part in the identification.</p>	DCP	

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		<p>Cornwall Council have implemented contractual arrangement with the Cornwall Carers Service in April 2021.</p> <p>The council continue to work with the SAB in exploring how we ensure all partner agencies are aware of the Carers Strategy; the services Cornwall Carers Service provide and how to access them.</p> <p>As this service relies on referrals being made not just by partners, but by the Council's Adult Social Care staff. As a result of the findings within this DHR the council has and continues to routinely raise internal awareness of the ability of the service to work with people at an earlier stage, regardless of the scope of their caring role.</p> <p>We have added prompts in our assessment documentation, to support practice, within our assessment process. This will ensure we evidence explore any care being provided by "informal carers"; ensuring the care being provided is sustainable and opportunity is given to the carer for their needs to be explored</p> <p>To support this the then Chief Social Worker issued updated practice guidance (to reflect current policy and national guidance) and produce an accompanying training video.</p> <p>The quality of assessment being undertaken are now subject to routine quality audits. We have updated our training offer to all adult social care staff, delivering Care Act assessments. This training includes practice guidance around supporting carers</p>	<p>Completed: Contractual arrangement with the Cornwall Carers Service were initiated in April 2021</p> <p>Communications were initiated as part of the Carers week campaign in June 2022, with further communication taking place throughout 2023 .</p> <p>These include a planned seven-minute briefing, post the DASV agreement to share the Executive Summary of this DHR.</p> <p>Assessment documentations were updated in March with the practice guidance being issued in May 2022</p> <p>Audit process was initiated in November 2022</p> <p>The training cycle is ongoing</p>	<p>Adult Social Care Commissioning</p> <p>Adult Social Care Commissioning; working with the Statutory Assurance, Policy and Practice Senior Manager; and the Specialist Professional Development Lead</p> <p>This action has been completed by the Statutory Assurance, Policy and Practice Senior Manager. The success will be monitored by the Lead Locality Social Workers and the practice Assurance group</p> <p>This action has been completed and continues to be monitored by Specialist Professional Development Lead, Principle Social Worker and the Practice Assurance Group</p>	<p>The provider submits quarterly workbooks detailing both volumes of individuals supported, including prior to formal assessment, and aggregated data around carer outcomes of self-assessments.</p> <p>Quartey contract review meeting and KPI reported to health and wellbeing board provide governance and assurance of quantity and quality of services being offered and delivered to carers</p> <p>The Contract Monitoring Returns provide the assurance framework for measuring the outcome. By providing quantitative numbers of people who are engaged with the service and there are Key Performance Indicators for the number of carers supported and number of newly identified carers.</p> <p>Practice Quality continues to be monitored by the Lead Locality Social Workers and the practice Assurance group</p> <p>Attendance at training is monitored by the Specialist Professional Development Lead. The impact on practice is monitored via supervision under the new Supervision framework (introduced in September 2022) and benchmarked against the draft practice Quality Standards</p>

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<b>Rec 4 - Identified unpaid informal caregivers should be encouraged to contact their GP to add themselves to the GP carers register. Or, if they are a member of the Carer's Service, the Carers Service should offer to contact their surgery on their behalf. GPs should code unpaid informal caregivers for their practice area accordingly on SNOWMED.</b>	There will be evidence of an increase in unpaid informal carers on the GP register	<p>Cornwall Rural Carers Service have reached out to all GP surgeries in Cornwall to support them with Carer Identification, supporting them to use their coding systems to identify Carers and an offer of support to look at how GP surgeries can better support Carers and signpost to support</p> <p>The ICB will determine if validated data about the number of people who have a snomed code to identify them as an informal care giver. The ICB will then provide an assurance statement to Safer Cornwall about the data.</p> <p>Devon and Cornwall Police - within our CST teams we have a dedicated PPN review team. They will share PPNs with partner agencies including Adult Social Care and GPs when deemed appropriate to do so.</p>	<p>February 2025</p> <p>Completed</p>	<p>CRCC ICB</p> <p>DCP</p>	<p>CRCC continues to ensure that GP surgeries in Cornwall are supported with Carer Identification, numbers are increasing and that signposting is taking place.</p> <p>Update 29 November 2024 - a data request has been submitted to the ICB business intelligence team</p>
<b>Rec 5 – Public health (Cornwall) should work with the Carer's Service to design a community campaign to raise awareness of the definition of unpaid informal caregiving and the support available to them in the county to encourage self-identification and help-seeking. Relevant and accessible literature and campaign events should not be reliant on a formal diagnosis but exist to improve the wellbeing of the caregiver and acknowledge their vital contribution</b>	There will be an increase in the number of unpaid informal carers in Cornwall requesting personalised support appropriate to their needs and circumstances whether there is a formal diagnosis in situ or not.	CRCC and Cornwall Council Public Health with CloS Safeguarding Adults Board, developed a campaign during Carers week in June 2023, this featured the support that is available to carers, the importance of Carer identification to ensure access to self-care opportunities and access to respite and short breaks from the caring role are available.	<p>Completed:</p> <p>Resources available from Cornwall and Isles of Scilly Safeguarding Adults Board conference focused on Carers June 2023, including live recording, case study for Carers lived experience panel discussion, videos of local carers' experiences.  <a href="https://ciossafeguarding.org.uk/sab/p/sab-annual-conferences/2023-safeguarding-and-carers">https://ciossafeguarding.org.uk/sab/p/sab-annual-conferences/2023-safeguarding-and-carers</a></p>	<p>CC Public Health/ Comms CloS SAB Carers Service</p>	
<b>Rec 6 – Commissioners should make dementia practitioners available to patients and carers on the pathway, not just post-diagnosis. At the very least, a system to check on the welfare of patients on the waiting list should be introduced.</b>	There will be evidence that patients and carers on the dementia pathway are receiving appropriate support prior to any formal diagnosis.	This is the responsibility of the provider organisation leading the memory service. Commissioners to ensure this is in place with the provider organisation.	Completed	ICB	Update 29 November 2024 - The ICB confirm that there are contracts in place with our providers to both provide the service and manage the risk of those who are on the waiting list- complete.

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<b>Rec 7 – Cornwall should have a county-wide delirium policy with a strategy for professional and public health awareness training. A screening tool for delirium (similar to that of sepsis) should be made available to professionals involved in dementia care and shared with informal caregivers. Information leaflets, such as the one designed by the NHS and Royal College of Psychiatrists should be shared with families<sup>1</sup>.</b>	Patients with delirium are identified at an early stage and the necessary treatment is provided reducing the onset of severe illness	<p>CFT/RCHT: to support Cornwall wide delirium policy</p> <ul style="list-style-type: none"> <li>Complete consultation of system wide delirium policy before sign-off.</li> <li>Policy to advocates the use of 4AT, a well- established screening tool for delirium.</li> <li>delirium policy specific to frail, older patients is to be backed up by an education programme,</li> <li>We have an information leaflet for patients at RCHT and plan to edit this for suitability across wider settings.</li> <li>As part of a plan to offer management of delirium via the Virtual Ward, we are trialling use of a delirium toolkit/checklist (bundle) for clinicians</li> </ul>	<p>16 November 2023 - System-wide delirium policy has been ratified by RCHT, but not yet ratified by CFT. Nurse consultant to escalate to Chief Operating Officer</p> <p>October 2024 update The system wide Delirium Policy has been ratified by RCHT and CFT and was published on 10th January 2024.</p> <p>Completed</p>	<p>CFT/ RCHT</p> <p>ICB -</p>	<p>There is one single ratified policy that covers our secondary services in Cornwall and the Isles of Scilly.</p> <p>ICB update: For general practice, this policy has been shared with general practice by the policy author for awareness. There are clinical tasks in the policy that should not be provided in a non acute setting. We confirm that the system standards for general practice would be the <a href="#">NICE guidelines</a></p>
<b>Rec 8 - Integrated care areas should work with caregivers to create a bespoke coordinated care plan that reflects the multi-disciplinary treatment needs for people living with dementia and those on the diagnostic pathway with comorbid conditions requiring regular treatment. Attempts should be made to listen to carer's concerns and coordinate treatment in a way that reduces the number of visits and appointments, enabling families to establish a routine and improve their quality of life.</b>	There is evidence of a multi-disciplinary integrated approach to providing the right help at the right time for people with dementia and comorbid conditions and families report an increase in their quality of life as a result.	<p>Training on personalised care to be made available to general practice</p> <p>The ICB should have mechanisms in place to ensure personalised care and supporting care givers is considered through all its strategies and plans</p>	December 2025	ICB	<p>Training about personalised care is now business as usual, with three trainers in place now providing this training on an ongoing basis. The focus on training is 'shared decision making' which encompasses all the elements in this recommendation. This is complete.</p> <p>How we have and continue to deliver this is set out in our plan and included below.</p> <p>The Health and Care Act 2022 requires ICBs to prepare a plan, setting out how they plan to exercise their functions in the next 5 years. NHS England provide guidance on what this should contain. The plan should be reviewed annually, and this should be an opportunity to 'update plans based on updated assumptions or priorities, including those set out in</p>

<sup>1</sup> <https://www.nhs.uk/ipgmedia/national/Royal%20College%20of%20Psychiatrists/Assets/Delirium.pdf>

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					<p><i>the 2024/25 priorities and operational planning guidance) and address the last year of the five-year look ahead'. Therefore, any ICB joint forward plan will set out ICB priorities for the next five, years, updated annually. If something is included in a joint forward plan it is a priority for the ICB.</i></p> <p>Our joint forward plan for Cornwall and Isles of Scilly ICB states that supporting informal carers is a priority for us. The key statement that references this is on page 24 which is 'Our overall aims for our population are to start well, live well and age well. 'Helping people at risk of health inequalities to live well' and to achieve our aims, 'we are focusing on ... carers...'</p> <p>For personalised care, we give the following commitment</p> <p><i>We are developing integrated care and support in the community, which will be personalised, prevent health problems getting worse, and be close to home.</i></p> <p><i>And</i> <i>We will make sure we understand what matters to each person, for example, to be able to walk their dog on the beach, and what is needed to help them achieve it. We will plan their care and support with them and the people caring for them and ensure they have the information they need to be able to plan ahead for deteriorating health.</i></p> <p>Both personalised care and supporting carers are referenced throughout our plans and our system</p>

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					<p>strategy, recognising that they are an integral part of all service delivery</p> <p>We set out in our joint forward plans the actions we will take to implement these strategic aims. Practical examples include setting up dementia cafes to support people and their carers and provision of community hubs provided by the voluntary sector for people to have conversations about what matter to them and to plan their care.</p>
<b>Rec 9 – All agencies should undertake an immediate review of their accessibility to services post-COVID to ensure vulnerable populations are not excluded due to restrictive digital access to information, assessments, forms, and appointments.</b>	Families in Cornwall who are not able to access information and services via digital platforms all continue to receive the help they need.	Cornwall Carers Service is a well-established and key participant in Cornwall's Carers Partnership Board and, as part of their contract support a network of Carers Forums in which unpaid carers can access peer to peer support. The service itself is configured to accept contact by telephone and via peripatetic support workers active in the community. The Carers Service is delivered by a consortium of organisations, and there are organisational links to Cornwall Council's Social Inclusion service provider which allows for a broad range of inbound referral origins.	Completed: Cornwall Carers Service has updated practice, policy and procedures to focus on managing appointments holistically/ around the needs of the person and will conduct face to face appointments where required. The Carers Service is aligned with the national campaign to improve accessibility for informal carers including work on coding with GPs to identify carers and provide support with their needs, connecting with local care services.	All agencies  Cornwall Carers Service	
		<p>All clinics are now face to face either at the home address or in clinic</p> <p>All information provided in paper form across all older persons' services</p>	Completed as returned to pre-covid practice	CFT/RCHT – Area Directors	<p>All clinics are now face to face either at the home address or in clinic</p> <p>All information provided in paper form across all older persons services</p>
		Devon and Cornwall have no service restrictions post COVID, whilst we have increased our reporting channels, to those that are unable to access these digital services we still attend in person. PPNs are completed in person to fully understand circumstances, environment and behaviours.	Completed	DCP	
<b>Rec 10 – The Memory Assessment Service to develop a strategy to bring the waiting times for initial dementia</b>	There is evidence that people waiting for an assessment by the memory assessment	CFT/RCHT:	<p>Completed</p> <p>16 November 2023 – this is a known risk on the CFT risk register (3700) and has</p>	ICB  CFT – Area Director	

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<b>assessments in line with commissioned timescales (28 days).</b>	service receive an appointment in line with commissioned timescales.	Referral rate into MAS is higher than capacity. Commissioners have been made aware, but this will need further discussion with ICB as this is not achievable within the current available resources  Need more investment in service development  Pilot in Penzance area 'One stop shop' whereby all investigations, intervention with MAS nurse and consultant happen simultaneously – additional clinic space being sought	been escalated to the ICB due to demand being more than commissioned capacity. Without financial investment, this recommendation will not be met.		All referred patients will be assessed within 28 days
<b>Rec 11 – Routine Enquiry must be a priority and further training is required to ensure professionals supporting older populations feel confident to ask about domestic abuse, know the difference between domestic abuse and behaviours deriving solely from cognitive impairment and know how to engage the correct specialist services when required.</b>	There is evidence that routine enquiry is taking place and professional skills and knowledge support a sensitive approach which distinguishes between domestic abuse and behaviours deriving solely from cognitive impairment	Ongoing partnership work is taking place with the Safer Cornwall Partnership Board on ensuing training commissioned from Safer Future covers this area of practice.  Safer Cornwall DASV Team commissioned the Women's Centre Cornwall to undertake some dedicated work to improve support for older people.	Completed The Older People's Community Engagement 2022/23 was completed and a final report 'Making a difference' was disseminated widely to partners and presentations delivered, such as at the DASV System's Day and the SAB Conference 2022/23 to disseminate learning, and to identify gaps and learning opportunities. This included raising awareness of toolkits such as for addressing gaps in practitioners' knowledge on the co-existence of domestic abuse and dementia. Training and awareness raising was also delivered as part of the project.	Safer Cornwall Safer Futures	Phase 2 of the project to be delivered across the southwest peninsula is being rolled out via the EOS Board.
		CFT/RCHT – bespoke DA training package to be developed for staff working with older people. November 2023 — Older persons service to add the SAB conference to new starters induction. Discussions underway as to what this staff group needs to support them. SG link worker involved.	Completed	CFT – Consultant Nurse for Integrated Safeguarding services for RCHT & CFT	CFT/RCHT - Trusts staff working with older persons will have specialist DA training available assisting staff to have understanding of DA and behaviours related to cognitive impairment and confidence in asking DA risk questions
		Devon and Cornwall police have various vulnerability training. Initial training for every new officer includes a 'vulnerability fortnight'. This includes identifying vulnerability, adult safeguarding, professional curiosity, responsibilities and referral.	Completed	DCP	

## Safer Cornwall Partnership Multi-Agency Action Plan for DHR13

Recommendations	Outcome to be achieved	Specific actions to achieve outcome	Action completion deadline	Action owner (named lead for your agency)	How outcome will be evidenced and measured
		<p>Cornwall Council have updated its training offer to all staff, as well as bespoke training to adult social care staff, delivering Care Act assessments. This training offer includes:</p> <ol style="list-style-type: none"> <li>1. Courageous conversations training</li> <li>2. A suit of Domestic abuse sessions. From a foundation level awareness training to a specialist level three Domestic Abuse Training</li> </ol> <p>Adult Social Care is in the process of updating the Safeguarding recording tools and as part of the work plan, bespoke practice training is being explored, around this particular area of need.</p>	<p>Completed</p> <p>The training cycle is ongoing.</p> <p>The bespoke Adult Social Care practice training is planned to be available in April 2023</p>	<p>This action has been completed and continues to be monitored by Specialist Professional Development Lead and the corporate Mandatory Learning team.</p>	<p>Attendance at training is monitored by the Specialist Professional Development Lead. The impact on practice is monitored via supervision under the new Supervision framework (introduced in September 2022) and benchmarked against the draft practice Quality Standards</p>
		<p>ICB to monitor the effectiveness of the GP domestic abuse support service.</p>	<p>Completed</p>	<p>ICB</p>	<p>GP domestic abuse support service update. Since the start of the review, the GP domestic abuse support service has been implemented providing training about domestic abuse to GP practices and provides a direct e mail contact for referrals. This has seen a 500% increase in referrals since inception. This is the mechanism by which we address this issue. Although continual work is ongoing to carry out training and improve practice, from a GP perspective this action is complete as we have a mechanism that is monitored through contract review.</p>
<p><b>Rec 12 - The family of Adult B raised three specific questions related to Adult B's treatment post-homicide which sits outside of the remit of this DHR but has significant importance for future work in this area. These issues will be followed up by a nominated lead panel member representing the Carers Service (Cornwall). This representative should be supported by the Safeguarding Adults Board in their ongoing communication with C2 to improve dementia care across Cornwall, using</b></p>	<p>The family of Adult A have their additional questions answered and the learning from this review is shared to improve dementia care across the wider adult safeguarding arena.</p>	<p>Learning from the review informs practice and enables organisational, cultural and system-wide change.</p>	<p>Completed:</p>	<p>Cornwall Carers Service CloS SAB</p>	<p>The DHR has been used by the Carers Service to educate and support teams within local carer organisations to recognise the seriousness of early intervention and support. The DHR has generated better engagement with the Carers services and Safeguarding, increased partnership working (including with the CloS SAB), and the Carers services is a more valued partner as a result. The DHR has ensured more awareness across</p>

Safer Cornwall Partnership Multi-Agency Action Plan for DHR13

Recommendations	Outcome to be achieved	Specific actions to achieve outcome	Action completion deadline	Action owner (named lead for your agency)	How outcome will be evidenced and measured
the learning from this review to support the wider aims of the family					the system of the impact of carers and carer support .