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|  | Recommendation | Scope of recommendation i.e. local or regional | Action to take | Lead Agency | Key milestones achieved in enacting recommendation | Target Date | Completion Date and Outcome |
| 1 | CFT to continue to roll out its two day domestic abuse training module to all appropriate staff. | Local | * Maintain current training delivery. * Ensure all relevant staff are trained. * Undertake review of training outcomes. | CFT | * Completion of training. * Qualitative review of training outcomes reviewed. | 30/06/20 |  |
| 2 | CFT to assist with the development of the adult safeguarding (including domestic abuse) training commissioned by Safer Cornwall Partnership. | Local | * Undertake joint review current adult safeguarding. * Identify areas for joint delivery if appropriate. * Implement Training Strategy. * Deliver Training. * Review outcomes of training. | CFT | * Course content reviewed. * Training Strategy Implemented. * Training delivered. * Outcomes of training reviewed. | 31/05/20 |  |
| 3 | CFT to deliver a learning from experience workshop about this case and share learning and changes to practice. | Local | * Plan and deliver workshop. * Review outcomes of workshop. | CFT | * Workshop planned. * Workshop delivered. * Outcomes of workshop reviewed. | 31/7/20 |  |
| 4 | CFT to implement and disseminate to all staff the new SAB multi agency ‘high risk behaviours policy’ and the ‘self-neglect, rough sleepers and hoarding protocol’. | Local | * Publish protocol and policy. * Implement communications strategy to ensure all relevant staff are aware of policy/protocol. | CFT | * Policy & protocol published. * Details circulated to all frontline staff. | 30/04/20 |  |
| 5 | CFT to develop a self-neglect campaign / strategy to raise awareness in services which includes providing training on self-neglect, testing/assessing capacity and executive capacity / legal perspectives. | Local | * Develop campaign /Strategy. * Develop communications Strategy. * Implement strategy | CFT | * Campaign/Strategy developed. * Communications strategy developed. * Communications strategy implemented. | 31/07/20 |  |
| 6 | CFT to review MDTs, referral meetings and one to one supervision to ensure that adult/children safeguarding is part of these discussions (including appropriate referrals to CFT’s Adult Safeguarding Team) and there is evidence of challenge. | Local | * Review current policy and & practice. * Re-write and implement policy where necessary. * Communicate policy to all staff. * Quality assure operational practice. | CFT | * Policy & practice Reviewed. * Revised policy implemented. * Changes communicated to all relevant staff. | 31/05/20 |  |
| 7 | CFT to audit all cases of adults who use substances to identify numbers where there are concerns about capacity, self-neglect and exploitation to consider whether a review of case is needed under SAB protocols. | Local | * Conduct audit. * Refer relevant cases. * Communicate areas for improvement to all staff. * Quality assure operational practice. | CFT | * Audit conducted. * Relevant cases referred. * Changes implemented as necessary. | 31/06/20 |  |
| 8 | CFT to implement plans for a health based IDVA to be available at Treliske Hospital within the new Service Level Agreement/Contract with Firstlight. | Local | * Implement Service level agreement. * Recruit IDVA. | CFT | * Service level agreement implemented. * IDVA in post. | 30/09/19 |  |
| 9 | Adult Social Care services to undertake a review of all current cases to identify issues impacting on adherence to agreed time scales for the completion of safeguarding meetings. | Local | * Review current cases. * Identify relevant issues. * Implement change where necessary. * Communicate areas for improvement to all staff. * Quality assure operational practice. | Adult Social Care | * Review completed. * Policy & practice reviewed. * Changes implemented. | 31/06/20 |  |
| 10 | Adult Social Care to reinforce the need for comprehensive recording practices to all staff and review current supervision practices to ensure that quality assurance measures are effective within the service. | Local | * Review current supervision practices and identify gaps. * Amend policies/practice. * Deliver Communications Strategy to ensure staff are aware of changes. | Adult Social Care | * Practice reviewed. * Policies amended. * Communications plan delivered. | 30/06/20 |  |
| 11 | Addaction staff to undertake additional training specific to dealing with  ‘crack users’. | Local | * Identify relevant training. * All staff to undertake training. * Quality review training. | Addaction | * Training delivered and reviewed. | 31/05/20 |  |
| 12 | Devon and Cornwall police to review and improve the current mobile data technology to ensure frontline officers access to research subjects on their devices and to ensure a timely upload of dash information onto force systems. | Local | * Review existing mobile data technology. * Implement change (where feasible). | Devon and Cornwall Police | * Review completed. * Change implemented. | 30/06/20 |  |
| 13 | GP surgery to review current practice to ensure that domestic abuse is routinely explored with patients. | Local | * Review existing practice. * Review existing DA policy. * Implement changes to practice. * Quality assure changes and practice | GP Surgery | * Review completed. * Change implemented. * Training delivered if required. | 30/04/20 |  |
| 14 | Addaction to review its information sharing processes to ensure that all relevant material is shared in a timely manner with GP’s. | Local | * Review current process. * Implement process change where necessary. * Communicate policy to all staff. * Quality assure operational practice. | Addaction | * Process review completed. * Change implemented. * Communications policy delivered. | 31/05/19 |  |
| 15 | The relevant GP surgery to implement a formal process were risks and concerns are clearly communicated to Addaction in relation to high risk patients. | Local | * Review current process. * Implement process change where necessary. * Communicate policy to all staff. * Quality assure operational practice. | Primary Care | * Process review completed. * Change implemented. * *Communications policy delivered.* | 31/05/20 |  |
| 16 | Health and Local Authority Commissioners to jointly oversee the implementation of the Dual Diagnosis Strategy, including multi-agency service leads. | Local | * Implement strategy. * Implement process change where necessary. * Communicate policy to all staff. * Quality assure operational practice. | Health & Local Authority | * Strategy Implemented. * Communications strategy delivered. * Practice quality assured. | 31/05/20 |  |
| 17 | Safer Cornwall to review current refuge facilities in the County to identify capacity for victims of domestic abuse who are experiencing addiction or mental illness. | Local | * Review current refuge facilities. * Implement change were necessary. | Safer Cornwall | * Review completed. * Change implemented. * Communications strategy delivered. | 30/06/20 |  |
| 18 | Cornwall Local Authority to ensure that the new SAB multi-agency ‘High Risk Behaviours Policy and the ‘Self-neglect, Rough Sleepers and Hoarding Protocol’ is effectively implemented across all relevant agencies, incorporated into training and circulated to staff. | Local | * Publish protocol and policy. * Implement communications strategy to ensure all relevant staff are aware of policy/protocol. * Quality assure practice. | Cornwall Local Authority | * Policy & protocol published. * Details circulated to all frontline staff. | 30/06/20 |  |
| 19 | All agencies to ensure that current domestic abuse training programmes include relevant input in relation to executive capacity, duress and freewill. | Local | * Review existing training programmes and lesson plans. * Implement change where necessary. * Quality assure operational practice. | All agencies | * Training reviewed. * Lesson plans amended. * Operational practice reviewed. | 30/06/20 |  |
| 20 | Addaction and mental health services to write, publish and implement an escalation process. | Local | * Review existing practice and policies. * Write process and policy. * Publish process * Quality assure operational practice. | Addaction & CMHT | * Process and policy written. * Process and policy published. * Communications policy delivered. * Practice quality assured. | 31/05/20 |  |
| 21 | The current high risk behaviours policy should be amended to ensure that in complex cases a statutory agency should take the lead role in coordinating services. | Local | * Review Policy. * Amend Policy. * Changes communicated to all relevant staff. | Safer Cornwall. | * Policy reviewed. * Policy amended. * Changes communicated to all relevant staff. | 30/04/20 |  |
| 22 | CMHT and Addaction to implement a meeting structure to enable discussions to take place regarding joint care plans. | Local | * Implement meeting structure. * Review meeting structure. | CMHT & Addaction | * Meeting structure implemented. | 30/04/20 |  |