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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 |  |