Southampton Domestic Homicide Review Action Plan

DHR reference: Peter

Updated 27th July 2023

Action Plan following the death of: Peter

Action Plan produced by Kerry Owens

Date 8th November 2022

All feedback and target dates to complete actions are dependent on the DHR Governance being agreed by the Domestic Abuse and Violence against Women and Girls Strategic Partnership

Recommendation	Scope of the recommendation	Action to take	Lead Agency	Key milestones achieved in enacting the recommendation	Target Date	Completion Date and Outcome
What is the over-arching recommendation?		How exactly is the relevant agency going to make this recommendation happen? What actions need to occur?	Which agency is responsible for monitoring progress of the actions and ensuring enactment of the recommendation?	Have there been key steps that have allowed the recommendation to be enacted? List the evidence for outcomes being achieved	When should this recommendation be completed by?	When is the recommendation completed? What does outcome look like? What is the overall change or improvement to be achieved by this recommendation?
Recommendation 1: Advice to be sought from the Home Office on the effectiveness of DASH as a risk checklist in cases where an adult child poses a threat to a parent.	National	Letter to Home Office outlining the issue.	Chair of SCP to send letter.	Write letter to Home Office Letter has been drafted and sent to Home Office. Confirmation from Home Office	31 st March 2023	
Recommendation 2: Southampton City Council harnesses the powerful messages expressed by this family concerning the impact the tragedy has had on them and their hopes for how families like theirs might be better helped in the future. To work with the family to produce a short video to be used by all agencies in their DA training for front line and associated workers.	Local	Contact agreed introduced by Karen Marsh Technical support arranged for production of video Video clip edited and approved by family Video clip launched with leadership support Video clip and wrap around training material embedded in local training	Southampton City Council – Karen Marsh – a trusted person to contact family	Discussion had with Communications around producing video. Seeking quotes and identifying a budget as no set budget to use for this.	30 th June 2023	
Recommendation 3: All agencies are explicit when risk assessing victims and family members about why an assessment is being undertaken and to be able to identify and evidence their assessment of the nature, level of seriousness and imminence of the risk they believe exists. If professionals believe victims to be minimising the risk posed by a family member, they should use their professional judgement to make	Local	 All agencies to review their Domestic Abuse Training ensuring all current DA Guidance specifically DASH is followed. Domestic Abuse Training Co- ordinator to support agencies reviewing guidance and training. Ensure multi-agency and single agency training is maintained and updated in line with changes in knowledge and 	SCC - Domestic Abuse Training Co-ordinator	SCC Domestic Abuse Training Co-ordinator appointed. Started in post 3 rd April 2023. One year post, contract extension subject to agreement of further funding. DA Training Coordinator to develop ongoing programme of DASH training inc. awareness of referral pathways in the city. To inc.	1 st April 2023 July 2023	

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HRDA referral in line with learning from the Standing Together research.		research, local issues, and legislation- in particular, those relating to IFV and IFA. • Monitor and evaluate the number of staff attending specialist local domestic abuse training courses in the region and provide feedback to managers regarding these in terms of overall quality and relevance to their role. Ask for % of staff who have undertaken the training.		IFA/IFV and specific training/resources on IFA/IFV DA Training Coordinator to review current best practice/training in relation to IFA/IFV and present to DSA Ops Group and submit update to partners at Strategic Board. DA Training Coordinator to gather data from agencies and provide report via Operational Group and Strategic Board.	September 2023 September 2023	
		All agencies to ensure they have PiPPA Helpline publicity displayed clearly for staff and clients.	PiPPA Coordinator - (SCC)	Solent NHS Trust – L3 Domestic Abuse training and L2 Adult/Children combined training covers DASH. Solent NHS Trust - Pippa helpline is displayed on staff intranet site. However, I cannot see this on the public website. This is to be reviewed and amended by 06.01.23. Solent NHS - Pippa helpline is included in DA policy and training slides which are		

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				shared with staff members who attend that training. Solent has a new Training Facilitator in post who will regularly review and update all training with changes in knowledge, research, local issues including learning from reviews, legislation changes, etc. Solent Domestic Abuse training covers intra-familial violence and abuse. Integrated Care Board: All staff within the ICB are required to be compliant with their statutory and mandatory safeguarding training which includes Domestic Abuse. In addition, the ICB has a safeguarding Learning and Improvement lead who oversees a wealth of resources and training programmes within the organisation.		
Recommendation 4: Southern Health NHS Foundation Trust review the format of its Serious Incident reports to reflect the whole person and does not frame the individual purely by any negative,	Local	This investigation was undertaken external to Southern Health Foundation Trust so there were limited options to amend this despite feedback to the Investigating Officer.	Southern Health NHS Foundation Trust	This investigation was undertaken external to Southern Health Foundation Trust so there were limited options to amend this	August 21	Completed. Feedback provided to the external organisation who undertook the report.

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criminal, or anti-social behaviour or other discriminatory identifiers.		The Trust are one of only a few Trusts nationally to be awarded SIRAN (Serious Incident Review Accreditation Network) and we conduct quality audits to ensure our serious Incident investigations continue to meet these standards. Southern Health are undertaking plans for the introduction of the new Patient Safety Incident Framework.		despite feedback to the Investigating Officer. The Trust are one of only a few Trusts nationally to be awarded SIRAN (Serious Incident Review Accreditation Network) and we conduct quality audits to ensure our serious Incident investigations continue to meet these standards. Southern Health are undertaking plans for the introduction of the new Patient Safety Incident Framework	April 23	SIRAN audits completed to date and summary included in the quarterly Serious Incident report to Learning from Events and Quality and Safety Committee. Update 27/4/23 Interim SIRAN review 20/2/23 – maintained accreditation.
Recommendation 5: Southern Health NHS Foundation Trust review its 'Carers Strategy' to ensure that initial Psychiatric assessments are shared and communicated with the wider family where possible while working with and in event of serious events involving their family or the patient/client.	Local	Southern Health to allocate an identified SPOC so that the family members can be communicated with sensitively and compassionately and to reduce re-traumatisation due to having to repeat their circumstances and background each time they speak to a member of staff. Expansion of Family Liaison Officers recently to support an enhanced resource able to support families in the event of a Serious Incident, ensuring SPOC	Southern Health NHS Foundation Trust	Southern Health Foundation Trust will liaise with carers and clarify who the named person is in the team for ongoing communication with the carer. All staff have access to Triangle of Care training. Recruitment of an additional Family Liaison Support Officer.	January 2023	Completed June 2022 with the introduction of a carer's communication plan which is agreed at the Corporate Incident Review panel. General Information Checklist V2.docx January 2023 Completed Two additional Family Liaison Support officers successfully recruited and are now in post.

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Recommendation 6: Southern Health NHS Foundation Trust to ensure a distressed caller receives-a follow up call or if not operationally possible a signposting to an appropriate agency at the time and that they secure a separate and confirmed assurance that the distressed caller has support from family or friends.	Local	Communication policy to be developed, this is currently a work in progress.	Southern Health NHS Foundation Trust	Assertive Outreach Team SOP updated to ensure staff know what to do in these circumstances. Communication policy approved and disseminated.	December 2022	Evidence is embedded the Trust SI 2020/2680 action plan: CMHT SOP SOT.pdf Audit results from MDT format use in E evidence.msg
Recommendation 7: Commissioners of services to require as a condition of contract an assurance that such services offered are fit for purpose for this group of service users with mental health needs. And that the additional vulnerabilities of both client and carers and linked risks of domestic abuse are recognised and factored into any contract agreement, with a protocol (or agreed terms in the contract) in place to ensure service providers accept and respond to their duty to help to protect potential victims.	Local	ICB to draft and agree wording to be included in SCC and NHS Contracts. Annual Survey of commissioned providers working with vulnerable adults within Southampton to be developed and undertaken to monitor the identification of and responses to potential victims.	ICB	Draft wording has been agreed. The Care Act 2014 places a duty on the Council to support and protect vulnerable adults. As a condition of this contract the Service Provider is required to identify both Service Users and carers of Service Users with vulnerabilities. Where the Service Provider identifies Service Users and/or carers with vulnerabilities, the Service Provider shall consider risks beyond the immediate and presenting issue, in particular the risk of domestic violence towards carers from vulnerable people	End of June 2023 for draft.	

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				experiencing increased difficulties and challenges in their lives. Where Service Users and carers of Service Users with risks beyond the immediate issue are identified, the Service Provider should respond to support and protect/safeguard individuals, seeking assistance from specialist services if required.		
				Confirmation required of date which draft wording is being included in the contracts.	End of September 2023	
				Draft wording and questions for survey being developed for comments.	End of August 2023	
				Agreed survey to be circulated to providers, responses collated by ICB.	End of December 2023	
				Responses shared with the DA&VAWG Strategic Partnership Board for appropriate action to be taken.	March 2024	
Recommendation 8: All Health organisations' Domestic Abuse Policies need to be embedded in practice and relate to staff as well as patients. This must go beyond	Local	 All NHS DA polices to be reviewed to ensure they include IFV and IFA by (date). Knowledge and understanding of IFV &IFA and its relevance in their work with service users 	Health Colleagues to identify leads & liaise with Domestic Abuse Training Coordinator – Southampton City Council – (when in post)	All Health colleagues to contact DA Training Co-Ordinator with lead names.	31st July 2023	

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intimate partner abuse, which is generally recognised but also to include intra familial violence, which as research and this specific case shows is not so well recognised or even known of.		and their families to be embedded with relevant staff. • Appropriate training to be identified compliant with NICE guidelines in liaison with the Domestic Abuse Training Coordinator of Southampton City Council (The Complexities programme perhaps) and rolled out to all client facing staff and their managers by. • This training should also include a 'skills based' element that will enable frontline staff to safely and sensitively enquire and establish whether the service user poses a risk to his/her family, the level of risk and impact of the service users' behaviour on them and their own emotional and physical well-being, as well as the appropriate steps to follow in such cases. • To ensure all relevant staff and services within Southampton are able to identify and respond to IFA and IFV and work successfully with partner agencies. • A comprehensive multi-agency training programme is to be developed focussing on IFA and IFV.		Kate Lawson, Named Nurse for Children, Solent NHS Trust. Solent NHS Trust to review our DA policy in relation to inclusion of IFV/IFA by 06.01.23. Wording updated to reflect new DA Act – inc. family violence. UHS – specific DA guideline/policy re. employees/managers – ratified December 2022. Familial violence included alongside IPV. Southern Health – have DA policies for staff and patients. Confirmed policies have been updated and contain explicit reference to 'familial violence'. The ICB has its own DA policy to support staff who are at risk or experiencing domestic violence and abuse. In addition, the ICB has a Domestic Violence and Abuse Portfolio. Within the organisations intranet there are numerous resources to support staff on the Domestic Abuse agenda.	September 2023	

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Recommendation 9: SCP and SSAB in light of this case, review agency cohesion and joint working in the Southampton area. The Review heard of a complex landscape of agencies and Health bodies with often difficult and fractured lines of communication.	Local	 All relevant agencies in Southampton will work together to establish an audit of cases of adults whose care needs involved a number of agencies. The focus will be on assessing the frequency and quality of joint working in the area between agencies. The results of the audits to be shared with all relevant staff and stakeholders. SSAB will identify relevant agencies and arrange a planning meeting to plan, develop the audit document, coordinate and timetable the audits. 	Southampton Safeguarding Adults Board Commissioned review of Safe City Partnership (including SCP and SSAB) – proposed Practice Review Group. Bringing statutory partners together to do reviews/decision making/sign off action plan/ensure partnership learning.	Review commissioned and underway.	October 2023	
Recommendation 10: All agencies in Southampton to have an action Plan in place to prepare for the introduction and need to implement the Domestic Abuse Act 2021.	Local	 Domestic Abuse and VAWG Strategy to be implemented. Action plan includes a policy and process on the risk assessment and management of domestic abuse. 	Domestic Abuse Co-Ordinator	Domestic Abuse and VAWG Strategy consultation completed.	December 2022	Strategy approved at SCC Cabinet on 20 th December 2022
Recommendation 11: This recommendation builds on the Southampton wide Carers Strategy which has been developed in an ongoing partnership with carers and whose governance sits with the Better Care Board (under the Health and Wellbeing Board).	Local	The Better Care Board is assured staff (paid or unpaid) across the city can identify carers and know how to respond to their safety, wellbeing, and support needs, including sharing information with relevant services where this is needed.	Better Care Board	Known unpaid carers to be registered within Care Director. Unpaid carers registered with their GP practice to be verified as still undertaking a caring role.	April 2023 March 2024	

 The Southampton wide Carers Strategy includes an emphasis on carers and safeguarding, a focus on both the carer and th adult they care for, including why carers may be at risk of harm and what may prevent, reduce or stop the risk. The learning within the recent Carers and safeguarding: a briefing for people who work with carers / Local Government 	ne t	Carers support staff to undergo annual safeguarding training. Unpaid Carers information is available through Care Director to identify and manage risk. Role of Principle Social Worker to be identified in	April 2023 July 2023	
reduce or stop the risk. • The learning within the recent Carers and safeguarding: a briefing for people who work		Worker to be identified in	July 2023	
with taleis / Lutai Guverillile		the carers pathway.		
Association would support thi To support the effective safeguarding of carers the strategy should also include a link to guidance for frontline workers in speaking privately with carers, using an agreed li of questions that cover issues of coping, fear, threat and	is.	Review of Carers Assessment process to be built into Care Director	July 2023	
assessment and response to any identified areas of concer • The 4LSAB Family Approach is due for revision and should be relaunched with a focus on identifying risk and needs of carers as well as adults with care and support needs. This includes an expectation of using the Multi Agency Risk Management framework and any other multi-agency forum for the management of any risks to carers/family member	S e e e e e e e e e e e e e e e e e e e	Review of Carers Assessment process to be built into Care Director	July 2023	
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Recommendation 12: Southern Health Foundation Trust agree the safeguarding pathway they are currently (as of June 2022) reviewing. This will provide a streamlined procedure for responding to safeguarding concerns. Including finalising the safeguarding module on the Rio recording system which will enable them to record safeguarding concerns if the Section 42 threshold has been met and the outcome of the safeguarding concern.	Local	The safeguarding pathway has been agreed, there is a Standard operating procedure, and the pathway is in place. There are a couple of teams that require some training which has been arranged.	Southern Health NHS Foundation Trust	Training to be rolled out to the remaining teams. The Safeguarding pathway is in place and the relevant teams are recording this on Rio.	March 2023	Update 27.4.23 SOP completed and in practice. Effectiveness monitored through the quarterly Section 75 Partnership Operational Group. Training ongoing to capture new staff to the Southampton division. FINAL SOP Safeguarding v11.pc
Recommendation 13: All front facing workers and managers receive training that enables them to identify risks posed to family and carers in non-intimate familial relationships and ensure all workers understand and appropriately assess the impact of known risk factors such as substance abuse and poor mental health which may increase risk to family members. The Panel accept that this is a long-term project which will involve a cultural shift in how workers see and approach their work with the client/patient.	Local	It is anticipated that achieving this shift will involve four steps; Raising the awareness of workers to non-intimate familial violence/control, sourcing or developing the training material and Committing to, providing, and resourcing the training, and Embedding and ensuring that the learning is being applied in practice through clinical supervision and evidence in casework files	SCC - Domestic Abuse Training Co-ordinator	SCC Domestic Abuse Training Co-ordinator appointed, due to start on 1st April 2023 Multi-agency comprehensive training programme to be developed and delivered. Learning Event to be arranged March 2023 – SCC and DHR author/chair.	Linked to Recommendation 3 actions/dates. See details in Recommendation 3. Learning Event planned September 2023. Date shared with family.	

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Recommendation 14: The Authority request that the Home Office commission the development of a brief and user-friendly Domestic Abuse assessment tool that can be used for non-intimate partner and inter family violence and abuse with confidence.	National	Letter to Home Office – in connection with recommendation 1	DHR lead in conjunction with SCP Chair / DA Coordinator	Flagged with SafeLives	March 31 st 2023	
Recommendation 15: Southern Health NHS Foundation Trust will seek to move recording of events and the presentation of service users from one which is primarily clinical, and evidence based to one that also includes an assessment of that evidence- how reliable? What might it mean? What and why where the causes and consequences of a given behaviour or statement? For instance, " states they have been drug free for 2 months however the house smelt heavily of cannabis. When I asked him about this, he said" Given this I think risks could be increasing. We will need to"	Local	 Risk paperwork has been reviewed and being implemented as a pilot across Southampton and then Trust Wide. New documentation will be focused on formulation of all key factors to provide a narrative around the dynamic aspect of an individual's risk. Validation of notes to monitor standards, performance indicators and improve the quality of documentation. This action had been reviewed as part of our serious incident process. 	Southern Health NHS Foundation Trust	Completion of the pilot in Southampton. Performance around validation of notes is monitored through both local and Divisional Quality and Performance meetings which then is fed into the team meetings where there are actions required from performance indicators. All serious incident investigations commissioned by Southern Health will analyse this type of information as part of the investigation and feedback to teams if the Investigating Officer notices any inappropriate entries in RIO notes.	April 2023	Completed. Action signed off by ICB. FW 20192680 update on agreed a Evidence is embedded in the Trust SI 2020/2680 action plan: Chairs Report for QSC MHSF May 2022 Rio Risk template development.docx
Recommendation 16: All GPs in the area are aware of and subscribe to the good practice identified in the Royal College of	Local	All GP surgeries within the Southampton Health Authority can demonstrate knowledge and practical use of the Royal College of General Practice	CCG – Now known as the Integrated Care Board (ICB)	Piloting the development with Woolston & Townhill PCN and roll out to others, linking to national support and best practice.	Commence April 2023 to complete by March 2024	

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General Practice 2013 Policy document (updated 2020) "Supporting carers in general practice: a framework of quality markers".		2013 Policy document (updated 2020) "Supporting carers in general practice: a framework of quality markers". • GP Practice Managers to be requested to provide evidence of their knowledge and use of this policy – letter to surgeries asking for this.		PRC to develop Carers Support Improvement plans to be shared with Carers Partnership Board.	April 2024	
Recommendation 17: CCG promote a consistent approach with Carers across the GP Surgeries they commission to include: - • As a minimum all GP surgeries (if they do not already have in place) to develop a list of all patients who are also carers and to have a marker system so that such patients are identified automatically to both GP, reception and any other auxiliary nursing staff linked to the practice. • To encourage all GPs in the area to develop a process to actively identify, refer, and support carers including children and young people, to reduce or prevent inappropriate caring responsibilities, because of taking on caring roles. • To ensure all GP's provide written advice to carers, including young carers, of their right to request a carer's needs assessment.	Local	GP Surgeries within the Southampton Health Authority to be notified by the CCG of the need to evidence that as a minimum they: i) have or will develop a system that identifies in the practice register which patients have the responsibility of caring for a family member. ii) Practice's will develop a process to actively identify, refer, and support carers including children and young people, to reduce or prevent inappropriate caring responsibilities. iii) Ensure all GP's provide written advice to carers, including young carers, of their right to request a carer's needs assessment. iv) Ensure all carers are encouraged and reminded to book a separate appointment for themselves to discuss their own needs and issues and the impact of their caring responsibilities on them.	CCG – Now known as the Integrated Care Board (ICB)	PCN's to be supported to develop Carers Support Improvement plans using NHS England Primary Care Quality Markers Scheme. To cover recommendations	April 2024	

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To ensure carers are encouraged to book a separate appointment for themselves to discuss what matters to them, including their own health and wellbeing needs.						
Recommendation 18: SSAB and SCP share all agencies assessment and management tools for when 'Threats to Kill' are made with a view to learning from each other and establishing what is best practice.	Local	ssab and scp to share all agencies assessment and management tools. • Workshop(s) to be held. • Agenda item to be requested to ensure sharing risk of harm understood	SSAB and SCP Domestic Abuse Coordinator to lead on work.	Executive Director to discuss with Safeguarding Partnerships Manager (Becca Holdsworth); Children's (Stuart Webb) and Adults (Eric Smith)	September 2023	