



# **North East Lincolnshire Community Safety Partnership Domestic Homicide Review**

**Action Plan in Respect of the Death of 'Edie'**

**Independent Chair and Author of Report: *Peter Maddocks***

**Date: *January 2024***

No.	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	The Domestic Abuse Strategy Delivery Group should explore national best practices regarding the provision that could be put in place to focus on repeat victims of domestic abuse along with perpetrator interventions and breaking the cycle and put forward recommendations as relevant.	Local	Commission new DA service provision informed by outcomes of the Local Area Needs Assessment and based on proven models of provision that demonstrate regional / national best practice.  Instruct SafeLives to undertake an audit / assessment of MARAC and wider DA arrangements in NEL and implement recommendations arising from it. Identify 'Repeat cases' as a key	North East Lincolnshire Council  (Helen Cordell)	Complete annual refresh of current NEL Needs Assessment.  Undertake commissioning process and mobilise new service provision.  All contracts to be subject to monitoring / assessment throughout duration of contract.  Instruct SafeLives (funding already secured). Complete audit / assessment as per project plan. Recommendations to be presented at relevant	Annual Refresh – documents awaiting sign-off at Domestic Abuse strategic Board 30/01/24  Commissioning – Aiming to award contracts imminently with new provision live from 01/04/24  Ongoing, with quarterly contract monitoring meetings and annual review.  Audit / Assessment – nearing completion, report should be available end March / early April	Increased provision for victims of DA across all levels of risk. Outcome will be that overall support available to DA victims (including repeat victims) is strengthened in terms of quality and availability.  A better understanding of reasons behind / triggers for repeats, allowing local service providers / wider agencies to tailor provision for

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			<p>theme to be considered.</p> <p>Commissioning sustainable, universal non-convicted perpetrator provision in NEL, including wrap-around support for the victim and child(ren). An evaluation will be built into years 1 &amp; 2 to assess impact and inform ongoing delivery.</p> <p><i>(Note: The DASDG has been replaced by new governance arrangements and any decisions around commissioning / funding are subject to relevant sign off as per those arrangements)</i></p>		<p>Groups / Boards and action plan developed for implementation. Secure funding on a sustainable basis.</p> <p>Commission and mobilise new service provision.</p> <p>Evaluate provision at end of years 1 &amp; 2 to inform ongoing delivery.</p> <p>Continue regular monitoring of contract.</p>	<p>Implementation within 6-12 months (depending on nature of recommendations)</p> <p>As above.</p> <p>Evaluations to begin taking place March 2025 and March 2026.</p> <p>Will be ongoing one contracts awarded and new provision is up and running.</p>	<p>repeat victims, leading to better outcomes for them.</p> <p>Will close gap in current provision for perpetrators and improve support for repeat victims of domestic abuse. Will contribute to an overall reduction in repeat domestic abuse incidents.</p> <p>Evaluation and ongoing monitoring will ensure the provision is achieving best possible impact / outcomes.</p>

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2	CCG to work with GPs on using flags and codes on patient records of high-risk markers of self-harm and that patient summaries include this information.	Local	<p>Named GPs to scope the use of flagging with colleagues across the North East and Yorkshire region.</p> <p>Local consultation with Safeguarding Lead GPs at the next GP Forum to encourage consistency.</p> <p>The importance of “flagging records” to be included within CCG safeguarding training and Quarterly safeguarding briefings.</p>	<p>CCG (Julie Wilburn)</p> <p>Named GP for Safeguarding Adults – Jedah Zaro</p> <p>Named GP for Safeguarding Children – Marcia Pathak</p>	<p>Scoping exercise</p> <p>Discussion at safeguarding GP forum</p> <p>Rollout of updated level three safeguarding training</p>	<p>Three to six months</p> <p>21 June 2022</p> <p>September 2022</p>	<p><b>Completed September 2022.</b></p> <p>Consultation completed and flagging used discretely and consistently across the local area. This has also been raised across the region and nationally and continues to be discussed. However as this is now out of our ability to influence the action has been marked as completed.</p> <p>Level three safeguarding training</p>

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							instigated and continues on a rolling programme. Patients at high risk of self-harm are identified at all relevant points of contact to ensure appropriate support can be provided.
3	The prison review and ensure that domestic abuse training is provided to staff working in prisons and ensure that staff completing reception and health screening processes with	Local	Provide an appropriate level of domestic abuse training to all staff working in prisons.  Provide enhanced domestic abuse training to staff who complete reception and health screening, to include an understanding that	Serco – HMP Doncaster  (Sara Lockwood)	Roll out of two levels of training.	June 2022	<b>Completed May 2022.</b>  All staff are trained in dealing with individuals arriving into custody who may have DV markers on their files.  All contacts of a DV perpetrator

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	prisoners have enhanced levels of training and awareness about checking for evidence of domestic abuse whether or not it is associated with offences relating to the prisoner arriving at the prison.		this should be explored whether or not it is associated with the current offences.				are contacted to ensure they are happy for contact to go ahead and they can also phone the prison directly and remove their number if they feel they do not want to be contacted further by the individual in question.
4	The prison should provide a summary of learning for the reception and health care team and review operational guidance on checking for risk flags on	Local	<p>Introduce a second check to ensure all risk markers are captured.</p> <p>Ensure alerts are uploaded to the system.</p> <p>A summary of the learning from this review is to be shared with the</p>	Serco – HMP Doncaster <a href="#">(Sara Lockwood)</a>	<p>Introduce day two check</p> <p>Ensure alerts are recorded</p> <p>Learning to be shared</p>	<p>May 2022</p> <p>May 2022</p> <p>When the overview report is finalised.</p>	<p><b>Completed May 2022.</b></p> <p>We have introduced a day two check to ensure we are capturing all risk markers when prisoners are arriving into custody. This</p>

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	community-based data systems.		reception and health care team.				enables a thorough check of all documents that they arrive with and for the alerts to be uploaded onto the systems allowing for the correct process to be followed.
5	The police and probation services should ensure that information about a prisoner having a history of domestic abuse is included and forwarded with the prisoner to the prison.	Local	Probation service to ensure that the domestic abuse flag is recorded in all relevant cases and court staff / sentence management staff communicate risks to the prison offender management unit (OMU).	Humberside Police / Probation <a href="#">(Mark Skelton / Nick Hamilton-Rudd)</a>	Instruction to be given to all probation staff	May 2022	<b>Completed May 2022.</b> Information is shared between Police and Probation on any history of domestic abuse to ensure risk is identified and prison staff can take appropriate safeguarding action. There is a

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							project underway to enhance this further by providing Probation with direct access for Police checks.
6	Ensure each GP practice has a mechanism by which vulnerable patients and / or safeguarding issues are discussed in-house, inviting multi-disciplinary colleagues as necessary.	Local	Introduction of Primary Care Safeguarding Nurses. CCG safeguarding team to hold weekly safeguarding drop-ins for Primary Care.	CCG (Julie Wilburn)	Introduction of Primary Care Safeguarding Nurses Safeguarding drop-ins established	First appointee due in post July 2022.  December 2022	<b>Completed December 2022</b> Two posts have been now recruited to. This provides consistency of application of safeguarding mechanisms. Weekly safeguarding drop ins are now running and provide support and advice to



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							Primary Care staff.
7	Each GP practice should have appropriate arrangements in place to ensure robust follow up arrangements where patients do not attend appointments. This should include a relevant “did not attend / was not brought” policy and consideration of wider vulnerability factors which inform any risk assessment and	Local	<p>Primary Care Safeguarding Lead Nurses will be recruited to and established across Primary Care.</p> <p>A “was not brought” policy for both vulnerable adults and children will be developed.</p> <p>Focussed awareness sessions related to the policy and wider vulnerability factors will be rolled out across Primary Care.</p>	CCG (Julie Wilburn)	<p>Develop “was not brought” policy.</p> <p>Deliver awareness raising sessions.</p>	<p>September 2023</p> <p>December 2023</p>	<p>A “was not brought” policy for both children and vulnerable adults will ensure appropriate follow up for all patients. This has been delayed due to the transfer from CCGs to ICBs. However it has now been agreed that this will be a local policy and is now in progress.</p> <p>Awareness raising on the forthcoming policy has been started and will</p>

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	escalation processes.						continue when finalised. Primary Care safeguarding Lead Nurses now in post. These roles will help improve safeguarding practice across Primary Care, supporting with operational discussions and practice.
8	Where adults at risk are under services, to have recorded contact details of professionals involved in the patient's care; such as the details of an	Local	Awareness raising across Primary Care to encourage contacts to be added to electronic records. Primary Care Lead Nurses can support this once in post.  Ensure this is included in all training	CCG (Julie Wilburn)	Awareness raising  Discussion at Safeguarding GP forum  Rollout of updated level	Dec 2022  21 June 2022	<b>Completed December 2022.</b>  Information has been shared via email, during safeguarding training, and at the GP forum.  This will ensure that information

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	IDVA or social worker. This can be recorded in the safeguarding template on the computer system so is hidden from online access.		delivered across Primary Care.		three safeguarding training	September 2022	is shared and relevant enquiries can be made as appropriate.
9	Ensure the Prison service has contact details of the victim so they can put measures in place to prevent contact by both parties.	Regional	<p>Review existing arrangements in place in the MATAC process locally.</p> <p>Benchmarking with regional Police forces for existing approaches to the issue.</p> <p>Consultation between Police, Prisons and Probation for potential solutions which consider consent and</p>	<p>Humberside Police</p> <p>(Cat Slaughter)</p>	<p>Completion of review</p> <p>Benchmarking and consultation</p>	<p>August 2022</p> <p>June 2022</p>	<p><b>Completed January 2023</b></p> <p>A national procedure has been established by HMPP to prevent unwanted prisoner contact. A non-contact request can be made by anyone on behalf of the victim, in the case of domestic abuse, even</p>

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			<p>information sharing principles.</p> <p>Develop agreement for the sharing of relevant victim information.</p>		Information sharing agreements	July 2022	<p>without their consent.</p> <p><a href="https://www.justice.gov.uk/unwanted-prisoner-contact">Unwanted Prisoner Contact (justice.gov.uk)</a></p> <p>Awareness raising has been disseminated within HMPP and Humberside Police.</p> <p>This procedure prevents contact between victim and abuser which safeguards both parties.</p>
10	Appropriate completion of DASH RIC, utilising professional curiosity to	Local	Refresher training and ongoing awareness with all practitioners to ensure that DASH RIC is undertaken	The Blue Door ( <a href="#">Steph Price</a> )	Refresher training held.	Ongoing in quarterly team meetings	<b>Ongoing.</b> Practitioners have the confidence and practical

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	ensure sufficient information is captured.		when aware of new abusive relationship. Managers to DIP sample current caseload to review practice.		DIP sample conducted.	Ongoing DIP samples in 30-day supervision	skills needed to appropriately respond to victims of domestic abuse, and to complete the DASH RIC giving consideration to repeat incidents to ensure risk is assessed accurately. This will ensure the victim receives the right specialist support.
11	Provide feedback to staff team regarding the impact and importance of ensuring the service recognises and	Local	Provide feedback and coaching session to current staff team. Incorporate session into a rolling programme of practice review	We Are With You (Lisa Pidd)	Feedback and coaching sessions Introduce rolling programme of practice review sessions.	July 2022  September 2022	<b>Completed October 2022.</b>  Training sessions completed in September and October with the

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	<p>responds appropriately to changing circumstances that may affect risk.</p>		<p>sessions for all Recovery Workers held at service level.</p> <p>Feedback to be given to With You learning and development department so consideration can be given to inclusion in organisational training and practice review sessions.</p>		<p>Feedback shared with learning and development department for inclusion in future training and practice review sessions.</p>	<p>June 2022</p>	<p>full team around key areas of practice and risk assessment. There will be ongoing coaching sessions to ensure that this knowledge is regularly and routinely updated. All recovery workers at WithYou are also receiving face to face training sessions from our Learning and Development team between now and March 2023 to "reboot" skills and knowledge on the essential</p>

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							<p>skills needed for their role, again risk assessment is included.</p> <p>Staff are provided with guidance and instruction in order to undertake assessments of changes in relationship status or family make up and will be better equipped to explore these areas at assessment and review.</p>