| **Recommendation** | **Scope of recommendation** | **Action to Take/Taken** | **Lead agency** | **Key milestones in enacting recommendation** | **Target date** | **Date of completion and outcome** |
| --- | --- | --- | --- | --- | --- | --- |
| Health visitors to robustly record the details and outcomes taken when safeguarding advice is provided. | Local | Introduce the SBAR model for recording including advise given by safeguarding service that will include adhoc consultancy supervision, safeguarding supervision template for regular supervision  Learning and action-  Record keeping guidelines to be to reflect change in practice | Public Health Nursing (Health Visiting) | SBAR training delivered to all PHN practitioners and being used as daily record keeping practice.  Review Guidelines to include SBAR | 31.7.22  Practitioner training completed:  16/12/21  05/01/22  06/01/22  01/02/22  01/03/22  Take to Best Practice on 14th June 2022 for discussion and agreement on guideline | Complete  All practitioners using SBAR as standard when completing records and when accessing safeguarding supervision/advice.  Planned audit SBAR process on September 26th 2022 - results and any actions identified from the audit process to PHNM and BPG. Any individual practice concerns will be highlighted to the appropriate Team Lead for action.  New starters to the service will need to have a session about the SBAR process to ensure we have consistency in our standards for record keeping.  Updated record keeping guidelines to be completed by July 2022 |
| Historic information to be shared by SomPar Safeguarding Service via MARAC when information relevant to domestic abuse concerns. | Local | Currently PHN information presented to MARAC by somersetFT safeguarding service who represent somersetFT and PHN | Public Health Nursing (Health Visiting) |  |  | Complete  PHN services will execute their duty to cooperate and share risk information in MARAC as of September 2022  Actions  understand and explore how digital systems can contribute to MARAC (transform/SIDeR) and explore options for collaborative contribution of health information to MARAC. Concluding by September 2022 with clear outlined process for sharing PHN information at MARAC in new operating protocol October 2022. |
| Health visitors to demonstrate robust attempts to contact parents when concerns raised by professionals and telephone contact unsuccessful in line with the Trust No Response Standard Operating Procedure. | Local | SomFT named professional for SG adults to liaise with PHN named nurse regarding action | Taunton and Somerset NHS Foundation Trust (as was Somerset Partnership NHS Foundation Trust) |  | 31.12.2020 | Complete and ongoing |
| Ensure Staff are aware that it is safe to leave brief messages requesting contact with their service in the event a telephone answerphone message does not identify the patient/client by name. | As above – Standard Operating Procedure ‘Public Health Nursing, No access, child not brought and disengagement guidelines’ 2020 - version 1  Point 6.2 states ‘Try calling the parent/carer yourself and again consider an answerphone as ‘no response’  **Learning and action-**  **Whilst the SOP mentions using the telephone and answerphone it is not prescriptive with the message that should be left.** | Public Health Nursing (Health Visiting) | Review the policy to include prescriptive message in point 6.2 as suggested below:  **‘Hello, please can you call *name* on *telephone number’*** | Take to Best Practice on 14th June for discussion and agreement | 1.4.2022  To be embedded in practice across the PHN service | Complete and ongoing |
| Ensure staff complete DASH whenever domestic abuse is disclosed to Trust staff and then follow Trust domestic abuse pathway | Local |  | Taunton and Somerset NHS Foundation Trust (as was Somerset Partnership NHS Foundation Trust) |  | 31.12.2020 | Complete and ongoing  “Have taken a drive during DA 16 days of action week to remind staff of this.  All supervision teams sent DA procedural guidance doc  Plan to offer ad hoc DASH training” |
| This agency to ensure that messages regarding the outcome of a domestic abuse investigation should be part of a two way conversation with the victim unless exceptional circumstances. | Local |  | Avon and Somerset Constabulary |  |  | Complete  Ministry Of Justice Victims Code Of Practice (MOJ VCOP) compliance audit led by Office Police Crime Commissioner (OPCC) |
| Officers and Staff to ensure that where a domestic abuse investigation has not resulted in a charging decision that appropriate safety advice and information about support available from other agencies is provided to victims in case of further incidents of abuse. | Local |  | Avon and Somerset Constabulary |  | 31.01.2020 | Complete (November 2019)  The results of a MOJ VCOP compliance audit led by OPCC highlighted inconsistencies with regard to victim updates at key intervals within the pre charge to charge stage of the CJP. This may however be due to recording of victim contact on Niche by officers not being done in a way that is then accurately or easily obtainable, rather than non being completed. Post charge updates were routinely provided by LSU in all cases audited. Back to basics measures regarding victim contact are in place to support officer compliance. Full feedback was provided to NH&P SLT with actions for information and case studies provided to be disseminated to Sgt’s in order to inform their understanding and review of cases  Work has since been undertaken as part of the MOJ VCOP compliance returns and the NPCC Regional V&W group regarding compliance. MOJ audits will continue quarterly. Recommendations closed as MOJ reporting and NPCC V&W group has been established |
| This agency to assure itself that the VCOP (Victim Code of Practice) is being consistently applied in respect of informing victims of their entitlement to receive information about charging decisions, where they can obtain further information and their right to review. | Local |  | Avon and Somerset Constabulary |  | 31.01.2020 | Complete (November 2019)  The results of a MOJ VCOP compliance audit led by OPCC highlighted inconsistencies with regard to victim updates at key intervals within the pre charge to charge stage of the CJP. This may however be due to recording of victim contact on Niche by officers not being done in a way that is then accurately or easily obtainable, rather than non being completed. Post charge updates were routinely provided by LSU in all cases audited. Back to basics measures regarding victim contact are in place to support officer compliance. Full feedback was provided to NH&P SLT with actions for information and case studies provided to be disseminated to Sgt’s in order to inform their understanding and review of cases  Work has since been undertaken as part of the MOJ VCOP compliance returns and the NPCC Regional V&W group regarding compliance. MOJ audits will continue quarterly. Recommendations closed as MOJ reporting and NPCC V&W group has been established |
| Reminders about the Somerset Integrated Domestic Abuse Service could be sent out to GPs in the regular Safeguarding Newsletter to remind Primary Care of this important resource | Local | CCG regular newsletter ‘The Safeguard’ to all GP Practices every quarter. Domestic Abuse special edition sent on 6.3.2020 including reminder about SIDIAS and upcoming changes | Somerset Clinical Commissioning Group | Special edition newsletter 6.3.2020, also ongoing quarterly reminder | 31.07.2020 | Complete and ongoing  Newsletters produced and information included |
| Case workers to be more curious professionals- staff to be reminded about seeking clarification and becoming more curious. | Local | The You Trust provide CCB and DASH workshops to discuss professional curiosity with staff. Motivational Interviewing is also available to all staff to encourage open questions.  Case reviews enables managers to discuss cases with the worker and explore the support and situation of the client. This is every 4 weeks (IDVA) and 6-8 weeks OR and Refuge | Somerset Integrated Domestic Abuse Service | CCB and DASH training cancelled in January 2021 due to COVID – Virtual workshop to be delivered in February 2021  Ongoing training dates available throughout 2021 | December 2020 | Complete  Controlling Coercive Behaviour training in February 2021 and regularly thereafter. |
| Case notes to reflect why appointments are cancelled | Local | Within our case management system all workers are expected to create a case note explaining why appointments have been cancelled either by the client or the worker. | Somerset Integrated Domestic Abuse Service | This is standard practice within the You Trust. Workshops are being developed for SIDAS staff who TUPE’d from previous contracted provider | June 2021 | June 2021  Workshops developed to improve practice and ongoing |
| Staff to be reminded about the need to complete and utilise genograms where there are complex relations/family dynamics. | Local |  | Somerset County Council- Children Social Care |  |  | Complete- Ongoing  team managers have oversight of all cases and would push back where genograms not completed. |
| DASH risk assessments to be undertaken/used, if appropriate, to inform assessments and work with families in this situation. | Local |  | Somerset County Council-Children Social Care |  |  | Roll out of domestic abuse training and CDP across the service – Dash used to support referral to SIDAS Monitored. |
| Staff to be reminded that all work should be recorded factually so that the child journey is captured and there is a clear evidence trail of decision making. | Local |  | Somerset County Council-Children Social Care |  |  | Complete-  Management oversight should be clearly evident at completion of assessment, plans and any significant changes within case progression. |
| Staff to be curious and share hypothesis about people’s intentions and be mindful of domestic abuse as a potential in any relationship. | Local |  | Somerset County Council- Children Social Care |  |  | Complete and  Ongoing and part of standard practice |
| Staff to be reminded that it is expected that they respectfully challenge concerning behaviour of families they work with. | Local |  | Somerset County Council-Children Social Care |  |  | Complete and Ongoing and part of standard practice, evidenced in plans, assessment and significant events pertaining to the child’s life. Strategy chaired by team managers and legal decisions are authorised by deputy director- which offers level of challenge and scrutiny in regards to work completed. |
| Where domestic abuse is a risk factor in the home and children attend either a school or early years settings then these settings should be routinely contacted by Children Social Care as part of any assessment | Local | Children Social Care to ensure that schools and early years contribute to child and family assessment | Somerset County Council- Education |  |  |  |
| Where there are concerns in relation to current or historical mental health or any kind of health issues Children Social Care should consult with relevant health professionals as part of their enquiries and assessment | Local | Children Social Care to ensure contact is made with health professionals identified as being involved or holding information as part of the child and family assessment | Somerset County Council- Education |  |  |  |
| The Education Safeguarding Partnership should consider implementing Operation Encompass across Somerset County. | Local | To be agreed and implemented between schools, settings and Lighthouse Unit (Police) | Somerset County Council- Education |  |  |  |
| Schools and settings must access the Somerset Effective Support for Children and Families to guide decisions as to when to refer to and when to escalate concerns | Local | Review training to re-empathise the document and application of same | Somerset County Council- Education |  |  |  |
| All professionals should exercise ‘professional curiosity’ | Local | Designated Safeguarding Lead and their deputy in schools and settings to receive bespoke training | Somerset County Council- Education |  |  |  |
| Designated Safeguarding Lead and Deputy Designated Safeguarding Lead in schools and settings should have training in undertaking ‘courageous conversations’ | Local | Designated Safeguarding Lead and their deputy in schools and settings to receive bespoke training | Somerset County Council- Education |  |  |  |
| Designated Safeguarding Lead and Deputy Designated Safeguarding Lead in schools need as part of their core training to understand how perpetrators groom professionals and the types of behaviours that they exhibit | Local | Designated Safeguarding Lead and their deputy in schools and settings to receive bespoke training | Somerset County Council- Education |  |  |  |
| Case workers to be more curious professionals- staff to be reminded about seeking clarification and becoming more curious. | Local | The You Trust provide CCB and DASH workshops to discuss professional curiosity with staff. Motivational Interviewing is also available to all staff to encourage open questions.  Case reviews enables managers to discuss cases with the worker and explore the support and situation of the client. This is every 4 weeks (IDVA) and 6-8 weeks OR and Refuge | Somerset Integrated Domestic Abuse Service | CCB and DASH training cancelled in January 2021 due to COVID – Virtual workshop to be delivered in February 2021  Ongoing training dates available throughout 2021 | December 2020 | Complete  CCB in February and regularly thereafter.  April 2022: Ongoing DASH masterclass and CCB training throughout 2022, for new starters and existing staff |
| Case notes to reflect why appointments are cancelled |  | Within our case management system all workers are expected to create a case note explaining why appointments have been cancelled either by the client or the worker. | Somerset Integrated Domestic Abuse Service | This is standard practice within the You Trust. Workshops are being developed for SIDAS staff who TUPE’d from previous contracted provider | June 2021 | Complete  April 2022: All cases have active supervision. All staff have advice pro (case management system) training  CMR and dip samples show quality and content of staff case notes |
| The MARAC Steering Group to seek assurance that there is a safe and embedded pathway which GPs can use to share information with the MARAC and likewise from the MARAC to GPs. |  |  |  |  |  |  |
| Training for Professionals to be revised to reflect the importance of empathy and sensitivity when working with vulnerable cohorts such as domestic abuse victims. |  |  |  |  |  |  |
| Awareness raising of services for those experiencing domestic abuse and mental health issues to encourage individuals to seek help and professionals to signpost to the most relevant services.  Awareness campaigns should also be tailored for those living in rural communities. |  |  |  |  |  |  |