

# London borough of Haringey Domestic Homicide Review (Adult A)

## Action plan update report February 2016

Neil Blacklock, the independent chair of the Haringey Domestic Homicide Review (Adult A) completed his overview report in February 2013. The report and recommendations were then agreed by the CSP-designated group. The report has been agreed by the Home Office Quality Assurance Panel and has been published on the Community Safety Partnership website (in accordance with Home Office Multi-agency Statutory Guidance for the Conduct of Domestic Homicide Reviews)

[www.haringey.gov.uk/sceb\\_board.htm](http://www.haringey.gov.uk/sceb_board.htm)

As part of the review an action plan was produced to ensure the recommendations are implemented. The independent DHR chair had contact with all relevant organisations. These agencies liaised directly with the independent DHR chair with their actions and timescales (the action plan was submitted with the overview report to the CSP – designated group).

In July 2013, the CSP Chair authorised the (interim) Strategic Violence Against Women and Girls Lead to contact all leads for the action plan, and gain updates on progress. This was completed and shared. At the May 2014 Strategic Domestic and Gender Based Violence Group it was agreed that the learning from the review should be summarised and presented to the group along with an updated action plan.

The table below outlines the DHR recommendations and the progress made to date.

Organisation and recommendation	Progress against recommendations	Next Steps	Status
<p><b><u>VAWG Operational Group*</u></b></p> <p>To consider the key role that family law solicitors have in providing routes to safety for those experiencing domestic violence. The solicitor or paralegal may be the only professional who has any knowledge that someone may be at risk and they may need support to work safely and appropriately. The Borough's specialist domestic violence services work closely with some of the family law solicitors in the area, to the benefit of clients of both services.</p> <p>The Operational Group to consider a recommendation that Haringey domestic violence services will recommend legal firms that have achieved the kite mark.</p> <p>*now the Violence Against Women and Girls Advisory Group.</p>	<p>Shared with the violence against women and girls Advisory Group on 11 Feb 2015.</p> <p>Work has progressed with the solicitors engaged with Hearthstone.</p> <p>Solace Women's Aid have shared the list of local solicitors which are legal aid and have the family law panel kite mark. Circulated to the partnership and included in the violence against women and girls service directory</p>	<p>N/A</p>	<p><b>Complete</b></p>
<p><b><u>VAWG Strategic Group</u></b></p> <p>Should consider the development of an awareness raising programme to assist recognition, response and referral of those at risk from domestic violence to specialist services. This should focus on behaviour and situations of risk beyond physical violence.</p>	<p>Communications campaign to launch in 2016 to coincide with new DV pathway and IDVA/IRIS Service contract</p>	<p>Complete procurement of IDVA and IRIS and award contract which is underway, for award in March 2016. Discussions to agree a communication plan underway with LBoH Communications</p>	<p><b>In progress</b></p>

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<p><b><u>Haringey Advisory Group on Alcohol (HAGA)</u></b></p> <p>To change their records retention policy and bring this in line with other agencies attending the Haringey Multi Agency Risk Assessment Conference (MARAC)</p> <p>To improve the assessment process in relation to domestic violence. This will require improving the skills and knowledge of staff undertaking these assessments, including skills in exploring abusive behaviour with those who may be perpetrating domestic violence. This approach will need to be risk focussed as well as acknowledging the vulnerability of HAGA service users.</p> <p>To improve the level of expertise available to HAGA staff in responding to domestic violence, specifically skills in responding to domestic violence perpetrators. This will</p>	<p>A 7-year retention policy is now in place for paper files/records for all clients who receive tier 3 structured treatment. In addition, The Haringey Drug and Alcohol Recovery Partnership (HDARP) now share a case management system which is a comprehensive system designed to store client information and associated records and documentation on a live environment.</p> <p>The HDARP comprehensive assessment is now universal throughout Haringey substance misuse services. This assessment asks specific questions in relation to domestic abuse. Further to this the assessment is currently being revised to add additional prompting questions in relation to clients intimate relationships and home environment. These open questions aim to prompt practitioners to initiate conversations with clients allowing for disclosure from perpetrators and well as V/S. This then forms the basis for components of the associated risk assessment.</p> <p>HAGA has a full-time Domestic Abuse and Substance Misuse practitioner who is a resource for clients and staff within the HDARP. This worker is a core</p>	<p>Team</p>	<p><b>Complete</b></p> <p><b>Complete</b></p> <p><b>Ongoing</b></p>

<p>require external expertise and training for HAGA staff, particularly in relation to risk assessment and management.</p> <p>To develop a service response to perpetrators of domestic violence that responds to the risk, alcohol issues and the use of violence and abuse in relationships</p> <p>To work with the Community Mental Health Services to strengthen and clarify referral pathways and joint working arrangements, ensuring these are clear and understood across the service.</p>	<p>member of the MARAC, and works closely with statutory and non-statutory agencies. All HAGA staff have in-house yearly mandatory training with includes domestic abuse, risk assessment and risk management. Since 2014 all staff have also received DVIP perpetrator training facilitated by Cranston, and MARAC workshops facilitated by Standing Together.</p> <p>Perpetrators of domestic abuse are more visible within HAGA treatment services. With a strong presence at the MARAC, an integrated case management system and strong links with probation services perpetrators of abuse are being identified and the risks associated are being addressed from the first point of contact. This awareness aims to lead to appropriate treatment/recovery plans as well as risk management plans that responds to current and potential risk.</p> <p>HAGA has strong links with the Dual Diagnosis Network (DDN) and has a direct point of contact (Yannie) who visits the service to carry out triage assessment, which acts as a point of entry to mental health services at BEH-MHT. The DDN use the HDARP assessments, which can then be used to open up a client episode at HAGA. All internal referrals within HDAP come directly through the Day Centre Team Leader (Catherine Bryant) who will then liaise with the client and the DDN worker to coordinate appropriate alcohol support/treatment and ensure the allocation to a keywork is smooth which</p>		<p><b>Ongoing</b></p> <p><b>Ongoing</b></p>
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<p><b><u>Drug and Alcohol Action Team</u></b></p> <p>To require commissioned services to have training on identify domestic violence perpetrators and victims, in line with the Recognise, Respond, Risk Assess and refer model</p> <p>To monitor the level of service users of DAAT commissioned services identified as experiencing domestic violence or perpetrating domestic violence to ensure that current screening processes are effective</p> <p>To ensure that commissioned services are in no doubt as to the need to respond effectively to service users who are using domestic violence by referring to and working with Respect Accredited Services and London Probation Trust</p> <p>All DAAT commissioned services should have a clear contractual direction regarding their file retention policy</p>	<p>limits disruption to the client</p> <p>4 training sessions completed re perpetrators. DV lead in the service is providing DV training for our staff on a rolling basis, all staff encouraged to attend local learning events</p> <p>Information is now being collected by services, all information is on a data base so reports can be run as required.</p> <p>Workers are aware of London wide services</p> <p>This is now included in all new contracts</p>	<p>DV community perpetrator programme in process of being designed and commissioned. This will be collocated within CYPS but will also comprise a self referring route which drug and alcohol services can access. Target for service launch date April 2016.</p> <p>Local pathway has been established for substance misuse services when they identify a perpetrator</p>	<p><b>In progress</b></p> <p><b>Complete</b></p> <p><b>Complete</b></p> <p><b>Complete</b></p>

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<p><b><u>North Middlesex University Hospital Trust</u></b>            To review its guidance on how the Trust will respond where domestic violence is identified, specifically where perpetrators and victims will be referred or signposted to</p>		N/A	Complete
<p><b><u>University A</u></b>            To explore ways to promote its support services in ways that speak specifically to young men, to consult with agencies with expertise in engaging with men and access appropriate materials</p>		N/A	Complete
<p><b><u>University B</u></b>            To improve consistency across all the university's sites of the information displayed about sources of help for domestic violence</p>		N/A	Complete
<p><b><u>London Probation Trust</u></b></p> <p>Should establish such a mechanism so that in the future GPs will be informed when their patient is sentenced to attend an alcohol or substance misuse treatment programme.</p> <p>The current compliance with enhanced risk management processes is not consistent and LPT should put in place quality assurance processes that bring practice in line with procedures in assessing hidden harm</p>		N/A	Complete
Organisation and recommendation		Next Steps	

	<b>Progress against recommendations</b>		<b>Status</b>
<p><b><u>Solicitor</u></b></p> <p>To ensure that all staff working with clients who are at risk from domestic violence, or who may be perpetrating abuse, have training on how to recognise risk, how to respond effectively (including referrals to MARAC) and to have information visibly available in its offices about local domestic violence services and services for perpetrators of abuse</p> <p>To review whether sending a letter outlining the legal options for removing an ex-partner from the family home should continue as a standalone response when someone is experiencing threats from an ex-partner, or whether this be accompanied by actions that identify and respond to risk</p>		N/A	<b>Complete</b>
<p><b><u>School</u></b></p> <p>The school can be commended for having a peer mentoring scheme. This could be strengthened by ensuring that domestic violence and issues around parental separation are covered as part of the peer mentor training. The school should explore effective ways of developing this.</p> <p>The visibility of sources of advice and help, and invitations to pupils to access these, should be reviewed. The school may wish to consider using the peer mentors to shape and inform this review.</p> <p>The school should review the breadth of its PSHE curriculum to ensure that issues on domestic violence, risk and sources of help are effectively covered.</p>		N/A	<b>Complete</b>
<b>Organisation and recommendation</b>		<b>Next Steps</b>	

	Progress against recommendations		Status
<p><b><u>Circle 33 Housing Association</u></b></p> <p>To check all records to ensure that no other requests for transfer or support were missed during the period of time where administration systems were weak.</p> <p>To ensure that current systems and procedures are able to identify tenants who may be at risk of domestic violence as early as possible.</p> <p>All staff to have domestic violence training that is commensurate with their role, this includes administration staff where appropriate.</p> <p>To review the current Domestic Violence and Safeguarding policy and ensure it is fit for purpose and in line with best practice in the housing sector.</p> <p>To seek out learning from other housing associations on how to improve responses to domestic violence and adopt best practice from elsewhere (e.g. Metropolitan Housing Association and Peabody Trust).</p>		N/A	<b>Complete</b>
<p><b><u>General Practice</u></b></p> <p>GP to develop a policy on domestic violence that includes a requirement that all staff have training on domestic violence in line with their responsibilities</p> <p>That information on sources of help for those experiencing domestic violence and for perpetrators of domestic violence is visible and readily available within the Practice</p> <p>The Panel would wish the General Practice to consider adopting the RCGP guidance on responding to domestic violence.</p>		N/A	<b>Complete</b>



<p><b><u>Haringey Clinical Commissioning Group and Enfield Clinical Commissioning Group</u></b></p> <p>The Panel would like clinical commissioning groups to be assured that primary care are adopting the RCGP guidance and considering the IRIS model to improve the early identification of domestic violence</p>	<p>Haringey CCG has agreed to pilot Project IRIS in 25 GP surgeries in the borough. To be commissioned as part of the new borough IDVA service</p>	<p>IRIS part of new IDVA service being commissioned – expect to award contract in March 2016 and service go live in June 2016</p>	<p><b>In progress</b></p>
<p><b><u>Haringey Children and Young People’s Service</u></b></p> <p>To find a way to recognise the valuable contribution that can be played by a family friend when they step into a crisis where children are suddenly bereaved.</p>	<p>Family friend acknowledged that they felt their contribution was recognised and valued. CYPS have confirmed that they would conduct a family and friends assessment under foster regulations to establish support and needs and suitability to care for Regulation 24.</p>	<p>N/A</p>	<p><b>Complete</b></p>