



# London Borough of Bexley Community Safety Partnership

## Domestic Homicide Review

## Lessons learnt summary into the death of 'Blue'

# 1. Introduction

Bexley Community Safety Partnership (BCSP), commissioned a Domestic Homicide Review (DHR) in order to determine what lessons could be learnt following the death of 'Blue', a 36 year old white British woman who took her own life in 2019.

The review followed the statutory guidance for Domestic Homicide Reviews (2016) issued following the implementation of Section 9 of the Domestic Violence Crime and Victims Act 2004 and looked to explore the way in which local professionals and organisations work individually and together to safeguard victims and how BCSP can improve its overall response to victims of domestic abuse. The full review will not be published in order to safeguard wider family members. This approach has been agreed by the Home Office DHR Quality Assurance Panel.

## 2. Key themes and learning identified

**Trauma based work:** Blue experienced trauma from her teenage years through to her death. She experienced emotionally harmful events throughout her relationships and ultimately lost parental responsibility for her children. Women who have experienced such abuse and trauma will be more likely to experience mental ill-health and substance misuse problems. Services need to be actively aware of this association with domestic abuse and provide services tailored to their needs and welfare.

**Suicide and domestic abuse:** Agencies should have an increased awareness of the potential for self-harm and suicide for people subject to domestic abuse. It is essential that the risk of suicide is always considered in risk assessment and steps are taken to address the care and support needs of a victim. This requires a multi-agency approach to provide a network of support.

**Child safeguarding, child access and domestic abuse:** Child safeguarding processes need to routinely assess the impact of domestic abuse and the associated risks. Whilst some victims may be able to remove themselves from abusive situations, the abusive partner can still exert control through childcare and safeguarding processes. Professionals need to be alive to this risk and procedures need to formally consider this in every case.

**Routine enquiry is an action not just a policy:** The healthcare agencies accessed by Blue all had appropriate policies around routinely asking clients about domestic abuse and healthy relationships, but they were not routinely used. For a policy to be effective it needs to be applied, and this requires training and supportive management.

Trauma based work	
Local	Single agency
<p>That BCSP and Bexley Clinical Commissioning Group establish a review of trauma informed practice across the key agencies. Consideration should be given to supporting training for professionals through the established domestic abuse for professionals learning portal.</p>	<p><b>GP for Blue and children to:</b></p> <ul style="list-style-type: none"> <li>• Audit of those with mental health codes or alcohol addiction, to check that there is a record of if they have parental responsibility, or any caring responsibility for any vulnerable adult.</li> <li>• Training for practitioners in self-harm, alcohol and substance misuse.</li> </ul> <p><b>Bexley Children’s Social Care:</b></p> <ul style="list-style-type: none"> <li>• Risk assessments must take account of historical and social context as well as cumulative risk. DASH risk assessment sessions to be incorporated into core training programme for CSC. The impact of domestic abuse, both current and historic, needs to be fully considered, even when other risk factors are the focus of the intervention.</li> </ul> <p><b>London &amp; Quadrant Housing:</b></p> <ul style="list-style-type: none"> <li>• More intervention or support with mental health issues, drug and alcohol dependency.</li> <li>• Sharing of concerns or vulnerability with housing as we were not aware of the history of issues experienced by Blue.</li> </ul> <p><b>Oxleas NHS Foundation Trust (Adult Safeguarding):</b></p> <ul style="list-style-type: none"> <li>• Training on the critical impact on a mother’s mental health and sense of self-worth when she is no longer the primary carer of her children.</li> <li>• To improve the liaison with primary care enabling GPs to share information with regards to discharged service users who present in crisis with long standing and repeated mental health risks.</li> <li>• To promote closer joint working with drugs and alcohol services and for staff to have a better understanding of the local Trust policy and putting it into operation.</li> <li>• Care co-ordinators to gain a more comprehensive account of the full circumstances of service users which could include undertaking a Care Act assessment and carer assessment.</li> </ul>

<b>Trauma based work</b> <i>(continued)</i>	
<b>Local</b>	<b>Single agency</b>
	<p><b>Oxleas NHS Foundation Trust (Adult Safeguarding):</b></p> <ul style="list-style-type: none"> <li>Consider the allocation of very complex cases from PCP to allow time to build up a relationship and understand the full situation and the interaction of clinical, personal and environmental factors.</li> </ul> <p><b>South London and Maudsley NHS Foundation Trust (SLaM):</b></p> <ul style="list-style-type: none"> <li>PRP keyworkers to ensure contact with mental health colleagues is standard practice in the same way GPs are contacted at the start of a treatment journey. Staff can be supported by having a template letter they can use to write to the relevant mental health team for further information.</li> </ul>

<b>Suicide and domestic abuse</b>	
<b>Local</b>	<b>Single agency</b>
<p>That the Bexley Safeguarding Adults Board and BCSP develop a training and awareness programme to increase awareness of suicide in circumstances of domestic abuse. This should highlight the DASH risk factors around self-harm and suicide for victims, and ensure that there is a consistency of training across the Borough.</p> <p>That Bexley Safeguarding Adults Board develop an independent audit process on referrals for Adult Social Care to ensure that all referrals are assessed appropriately to support people in need of care and support.</p>	<p><b>GP for Blue and children:</b></p> <ul style="list-style-type: none"> <li>Training for practitioners in self-harm, alcohol and substance misuse.</li> </ul> <p><b>Oxleas NHS Foundation Trust (Adult Safeguarding):</b></p> <ul style="list-style-type: none"> <li>Care co-ordinators to gain a more comprehensive account of the full circumstances of service users which could include undertaking a Care Act assessment and carer assessment.</li> </ul>

Child safeguarding, child access and domestic abuse	
Local	Single agency
<p>That the Bexley SHIELD review policy to ensure that DASH risk assessments are included in Child Protection meeting processes. This includes the MPS considering the service-wide guidance on CPC to ensure that DASH risk assessments are prompted in CPC guidance. Consideration should also be given the adopting the Safe &amp; Together Model in managing cases that involve child safeguarding and domestic abuse.</p> <p>That London Borough of Bexley Children’s Social Care department review the training for IMR authors and establish robust Quality Assurance processes for submissions to Domestic Homicide Reviews. Representation at DHRs should be in line with the 2016 Multi-agency Statutory Guidance for the Conduct of Domestic Homicide Reviews.</p>	<p><b>Bexley Children’s Social Care:</b></p> <ul style="list-style-type: none"> <li>• Risk assessments must take account of historical and social context as well as cumulative risk. DASH risk assessment sessions to be incorporated into core training programme for CSC. The impact of domestic abuse, both current and historic, needs to be fully considered, even when other risk factors are the focus of the intervention.</li> <li>• Where ‘family arrangements’ are part of the safety planning, risk assessments to be undertaken and professional oversight to remain for a period to ensure progress is maintained. CSC and S.H.I.E.L.D training to include a ‘Think Family’ focus.</li> <li>• Information sharing with other boroughs and professionals to be clear and timely when cases transfer, to inform further risk assessment and safety planning, to be included in risk assessment training.</li> </ul> <p><b>Oxleas NHS Foundation Trust (Adult Safeguarding):</b></p> <ul style="list-style-type: none"> <li>• Improve the communication and joint working between mental health and children’s services, particularly where children’s safeguarding is an issue. There are Trust policies to guide on this.</li> </ul>

<b>Routine enquiry is an action not just a policy</b>	
<b>Local</b>	<b>Single agency</b>
<p>That all healthcare agencies involved in this review establish a process for audit of routine enquiry into domestic abuse and present those reviews to the BCSP. The partnership should then examine the outcomes to establish the need for any further training or support.</p>	<p><b>Nursery:</b></p> <ul style="list-style-type: none"> <li>As a nursery we have a lot of opportunities to talk to families and gain their trust. We must use such opportunities to offer them support, signpost them to the correct professionals, but also work closely with the professionals for continuity.</li> </ul> <p><b>The Hurley Group to:</b></p> <ul style="list-style-type: none"> <li>Continue staff training in Adult Safeguarding as per current mandatory training requirements.</li> <li>An audit of Adult Safeguarding referrals made from both Erith and Queen Mary's Hospital Urgent Care Centres over the past year to look at patterns/ lessons.</li> </ul> <p><b>King's College Hospital (KCH) NHS Foundation Trust:</b></p> <ul style="list-style-type: none"> <li>KCH Emergency Departments (Denmark Hill and Princess Royal University Hospital sites) to make routine enquiries about domestic abuse for all patients accessing the service.</li> </ul> <p><b>Lewisham &amp; Greenwich NHS Foundation Trust:</b></p> <ul style="list-style-type: none"> <li>To develop ongoing training and development of Trust staff on domestic abuse, to include targeted work on information for referrals. This will be led by the hospital IDVA, practice development leads for A&amp;E Dept and Maternity, providing face-to-face training for staff. Sessions commenced in March 2019. This is supported by an ongoing audit of referrals.</li> </ul> <p><b>London Ambulance Service NHS Trust:</b></p> <ul style="list-style-type: none"> <li>New Governance and Training lead, starting July 2020, will undertake a dip sample of the domestic abuse cases to review what advice has been given regarding pathways.</li> </ul> <p><b>Oxleas NHS Foundation Trust (Adult Safeguarding):</b></p> <ul style="list-style-type: none"> <li>For the multi-disciplinary team to have greater professional curiosity around partners and consideration of referral to domestic abuse services.</li> <li>PRP keyworkers to ensure contact with mental health colleagues is standard practice in the same way GPs are contacted at the start of a treatment journey. Staff can be supported by having a template letter they can use to write to the relevant mental health team for further information.</li> </ul>

## **Other single agency recommendations:**

### **Nursery:**

- Any family who need a priority place, requested by an outside professional due to circumstance, will automatically flag up the need for detailed records to be kept providing solid evidence.
- Nursery staff to work more closely with schools and other settings for the benefit of the families and to share information to ensure that all areas of the family's needs are identified.

### **Primary School:**

- Key decisions about stepping up or stepping down should be joint decisions preferably taken at a meeting by all professionals involved.
- The access to medical information by other agencies is a difficult area but sharing needs to take place to protect children.
- If professionals are unhappy with decisions, they must challenge them through the managerial ladder.

### **The Hurley Group:**

- To disseminate learning around Adult Safeguarding cases through protected teaching sessions for clinical staff.

### **London Ambulance Service NHS Trust:**

- Trust will hold Continuing Professional Development (CPD) events on across London for domestic abuse.
- Staff will be wearing a sticker on uniform that will provide details of Domestic Violence Support.

### **Oxleas NHS Foundation Trust (Adult Safeguarding):**

- Staff to record decisions on cases discussed in supervision in the clinical record.

### **Oxleas NHS Foundation Trust (Children):**

- Training for practitioners to explore the indicators of fabricated or induced illness in an adult, which the adult themselves makes, and the possible impact of this on their parenting capacity.

### **Victim Support:**

- Ensure staff are carrying out their duties to the standard expected in the Domestic Abuse Operating Procedure. Line managers and Heads of Service to continue to carry out frequent dip sampling checks of cases. Any issues identified by managers to be taken up in individual staff member supervisions.
- Review compliance regarding timeframe of initial contact attempts, this is monitored monthly by the Heads of Service.

## 4. DHR follow up

An action plan has been created for this DHR and agencies will be held to account by BCSP ensuring that the learning is implemented borough-wide.

For more information about the DHR process or the action plan for this DHR please contact London Borough of Bexley Domestic Abuse and Sexual Violence Strategy Manager & Commissioner,  
Deborah.Simpson@bexley.gov.uk

**Domestic abuse is**  
**everyone's business**