

APPENDIX 3 - ACTION PLAN

Recommendation	Lead Agency	Scope of recommendation i.e. local or regional	Action	Key milestones/outcome achieved in enacting recommendation	Target and completion date
Query from the Home Office: 'The Nursing and Midwifery Council (who were represented on the panel) will be using the findings from this review to consider the future of the perpetrator as a nurse given that the Council do not appear to be conducting their own investigation'	The Nursing and Midwifery Council	Local	Letter from NMC has been attached as appendix 5		
1. When a child and family assessment is being conducted, it should include all household/family members	Brent Children's Social Care	Local	<ol style="list-style-type: none"> 1. To be reinforced for staff in assessment training and related guidance 2. Guidance to be cascaded to all teams. 3. Management oversight on individual cases 4. Regular Audit of cases throughout 	<ul style="list-style-type: none"> • Guidance to be issued to staff • Guidance and advice to be addressed in team meetings • Procedures in place and audits check on compliance • Audits Assessments 	<p>November 14</p> <p>December 14</p> <p>Feb 14</p> <p>Monthly</p>

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			the year	show full compliance with requirements	
2. Each new allocated case worker must read back files	Brent Children's Social Care	Local	<ol style="list-style-type: none"> 1. Management instruction for newly allocated workers 2. Induction reminds social workers of key activity. 	<ul style="list-style-type: none"> • All Team Meetings and forum discuss new action • Include guidance in new procedures 	<p>By December 2014</p> <p>By December 14</p>
3. Where sexually inappropriate behaviour is suspected by a person working or volunteering with children this must be discussed with the LADO who will in turn discuss this with the police. If such a situation arises and the person is an employee of Brent we will invoke the disciplinary procedures. If the person works for another agency we will recommend the employer invokes their own disciplinary procedures.	Brent Children's Social Care	Local	<ol style="list-style-type: none"> 1. Training of MASH workers to re direct LADO referrals 2. Evaluation of the MASH to ensure the process actively picks up all cases that should be referred on. 	<ul style="list-style-type: none"> • MASH workers are trained through induction. • Audits and evaluation of the MASH show it risk assess all cases where sexual offences have been committed by an adult who is also a parent to 	<p>Completed</p> <p>Completed by Dec 16</p>

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				ensure children are safeguarded	
4. Greater coordination and liaison is required between the CSC LADO and the Adult Safeguarding Manager on cases involving adults who may pose a risk to any vulnerable person.	Brent Children's Social Care	Local	1. Joint protocol and procedures updated to reflect new arrangements.	<ul style="list-style-type: none"> Agreed protocol and procedures of cases of shared interest and concern now in place regular meetings to share information take place. 	Completed
5. Accurate written records must be kept of all referrals into and out of CSC and the subsequent actions agreed from the referral clearly recorded.	Brent Children's Social Care	Local	<ol style="list-style-type: none"> The introduction of the MASH to effectively manage the referral system LADO arrangements address HR issues when staff behave in an unsatisfactory manner to in ensure robust response and recording of allegations 	<ul style="list-style-type: none"> The LADO referrals are reported on a quarterly basis and highlight areas where referrals are low. LSCB offer training on the LADO referral process and the need for professionals to 	Completed

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				be aware of how to refer, attendance is reported on the appropriate sub group	

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6. Children with special needs should have their progress notes/records transferred to school health following a: a. Verbal communication with lead health professional b. Written summary of history and current health needs c. Any outstanding interventions required	Ealing Hospital NHS Trust	Local	1. To incorporate within new Community Safeguarding Procedures 2. To audit a sample of Care Plans for CIN/ CPP for 4 -5 year olds	<ul style="list-style-type: none"> Procedures to be launched in Brent October 2014 	30-11-14 31-12-14
7. To review the border arrangements between Brent/Harrow to ensure children and young people are followed	Ealing Hospital NHS Trust	Local	1. For discussion at Trust safeguarding children Group	<ul style="list-style-type: none"> Robust follow-up of children 	31-12-14

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up by the Named HV or School Nurse.					
8. Key Principles of Child Protection Supervision to be addressed at all safeguarding training for all clinical staff that have contact with or work directly with children.	Ealing Hospital NHS Trust	Local	1. Safeguarding Children's Training for clinicians to include principles of CP supervision	Clinical staff aware of importance of child protection supervision in clinical practice	31-10-14 28-2-15
9. To remind all District Nurses to follow-up no-access visits as outlined in the Trust No Access Policy.	Ealing Hospital NHS Trust	Local	1. Meeting with Heads of Service across Trust 2. Memo to all District Nurses 3. No access policy to be re-circulated to all District Nurses	District Nurses aware of importance of following-up all no-access visits	30-11-14
10. All patients who are dependent on others for their assisted daily living should be seen as 'adults at risk' and be given an opportunity to be seen on their own, at least in part,	Ealing Hospital NHS Trust	Local	1. Meeting with Heads of Service 2. Memo to all community nursing staff and therapists	<ul style="list-style-type: none"> This will enable the voice of the patient to be heard and provides the patient with an 	30-11-14

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without any family member/carer present during the initial assessment.			3. Safeguarding adult training to include the lessons learnt from this case	opportunity to express any concerns/issues they may have which they do not wish to share with family or carers.	
11. Where a number of professionals and agencies are involved, a multi-disciplinary team (MDT) meeting should take place to establish a joint care plan and discuss any concerns.	Ealing Hospital NHS Trust	Local	Where a clinician has a concern about a patient and is aware of other services/agencies being involved, they should consider requesting a multi-disciplinary meeting to discuss these concerns and develop a joint care plan	Appropriate sharing of information and co-ordinated care	31-3-2015
12. All referral forms to be reviewed and ensure that they include information to establish the patient's mental capacity and if the patient is housebound or not.	Ealing Hospital NHS Trust	Local	1. Service managers to review their service's referral form to include mental capacity and if patient is housebound or not	<ul style="list-style-type: none"> This information will help in the process of triage, offering the right type of appointment and avoid delays. 	31-12-14

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<p>13. All healthcare professionals to be reminded that during an assessment they need to identify and document:</p> <ul style="list-style-type: none"> • the patient's preferred language and communication abilities • whether the patient has mental capacity or not • whether the patient is able to express views, concerns or anxieties • the name and relationship of people who may answer the telephone or door at home visits and provide information about a patient <p>This will be incorporated into annual record keeping audits to ensure improved documentation.</p>	Ealing Hospital NHS Trust	Local	1. Learning to be shared in writing with staff		31-12-14
14. Safeguarding adult training to incorporate lessons learnt from this case	Ealing Hospital NHS Trust	Local	1. Share report with Safeguarding Lead Practitioner and incorporate into training material	<ul style="list-style-type: none"> • Incorporated the learning into the training material 	30-11-14

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15. To remind all staff that trained interpreters (telephone or face to face) should be used where the service user does not speak English as a first language in line with Trust policy, particularly for initial assessments	Ealing Hospital NHS Trust	Local	<ol style="list-style-type: none"> 1. Memo to staff 2. Discuss at service manager meetings 	<ul style="list-style-type: none"> • Regular use of interpreters for all initial health assessments 	30-11-14
16. Trust to review its guidance to clinical staff regarding mental capacity assessments	Ealing Hospital NHS Trust	Local	<ol style="list-style-type: none"> 1. To review the guidance and amend if appropriate in the light of learning from this report 	<ul style="list-style-type: none"> • Amend guidance and re-launch 	31-12-14

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17. All GP's in Brent to be offered refresher training in adult safeguarding including recognising vulnerable adults	NHS Brent CCG (Clinical Commissio	Local	<ol style="list-style-type: none"> 1. Training sessions 	<ul style="list-style-type: none"> • Training sessions planned – Completed 	Sept 2014

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	ning Group)			<ul style="list-style-type: none"> • Training commence- November 2014 • Training complete 	<p>November 2014</p> <p>March 2015</p>
18. All GPs in Brent to be offered refresher training in the MCA.	NHS Brent CCG	Local	1. Training sessions	<ul style="list-style-type: none"> • Training sessions planned – Completed • Training commence- November 2014 • Training complete 	<p>Sept 2014</p> <p>November 2014</p> <p>March 2015</p>
19. All GP's in Brent to be offered refresher training in confidentiality	NHS Brent CCG	Local	1. Training sessions	<ul style="list-style-type: none"> • Training sessions planned Sept 2014 • Training commence- November 2014 • Training complete 	<p>Sept 2014</p> <p>November 2014</p> <p>March 2015</p>

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20. All health professionals should recognise twin pregnancies as vulnerable and offer enhanced services following the birth	NHS Brent CCG	Local	<ol style="list-style-type: none"> 1. To write to providers asking them to disseminate the message to ensure risk factors for twins are better understood and identified 2. Request providers audit a set of records to evidence 	<ul style="list-style-type: none"> • Letter • Message delivered to all health staff by providers • Provider audits completed 	<p>October 2014</p> <p>December 2014</p> <p>March 2015</p>
21. Domestic abuse should be considered in the family context or household including the impact on children	NHS Brent CCG	Local	<ol style="list-style-type: none"> 1. To write to providers asking them to cascaded the message 'think adult, think parent/carer' and the impact on children 	<ul style="list-style-type: none"> • Letter sent to all providers • Message delivered to all health staff by health providers 	<p>October 2014</p> <p>December 2014</p>
22. The learning from this Domestic Homicide Review to be shared with all GPs in Brent and with those GPs interviewed as part of this process.	NHS Brent CCG	Local	<ol style="list-style-type: none"> 1. DHR Workshop to be organised – Brent CCG Children's and Adult's 		June/July 2015

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			<p>Safeguarding Leads</p> <p>2. Further discussion in place regarding developing a domestic abuse training programme for GPs which could be taken to the RCGP for accreditation.</p>		
<p>23. The GP surgeries involved in this case to review their policies and procedures for identifying and responding to domestic abuse and ensure all staff receive appropriate training to support contemporary practice for healthcare practitioners.</p>	<p>NHS Brent CCG</p>	<p>Local</p>	<p>1. Level 2 MCA and Adult Safeguarding Training has been provided Jan –Mar 2015 to GPs and healthcare practitioners.</p> <p>2. There was Level 1 Safeguarding on 13th March for non-clinical staff</p>	<ul style="list-style-type: none"> • Training provided by BHH Safeguarding Lead 	<p>Completed by end of Mar 2015.</p>
<p>24. All GP practices to develop and make use of a system that</p>	<p>NHS Brent CCG</p>	<p>Local</p>	<p>1. Brent CCG working with NHSE</p>	<ul style="list-style-type: none"> • Consideration will be given to 	<p>01/04/15 and ongoing</p>

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records what information their patients who are being cared for want sharing, who with, and in what circumstances.			2. NHSE to work with GPs on developing the Case Management Register	addressing carer's needs more specifically within the GP contract. In addition, GPs to be required to use a risk stratification tool	
25. GP practices should maintain a record code for self-reported domestic violence issues in the same way they would code a domestic violence notification. This would allow for all relevant incidents to be recognised when a review of notes is undertaken.	NHS Brent CCG	Local	1. Brent CCG working with NHSE 2. NHSE to work with GPs on developing the Case Management Register		01/04/15 and ongoing
26. All GP practices to be encouraged to develop a flagging system to identify vulnerable adults.			1. Brent CCG working with NHSE 2. NHSE to work with GPs on developing the Case Management Register		All the Brent DHR cases were registered with GPs and issues regarding recording and flagging of domestic

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					abuse were raised for General Practice.

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27. During their next appraisal, GP performers involved will be required to reflect upon their responses to Domestic Homicide. This may include making changes to their clinical practice as a result of this DHR.	NHS England, London, Medical Directorate, Practitioner Performance Team	Regional and local	1. NHS England, London will ensure the performer's annual appraisal includes reflection on their responses to Domestic Homicide.	<ul style="list-style-type: none"> Process for checking the appraisal content regarding DH reflection to be defined and implemented. 	At next appraisal.

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28. NHS England, London will circulate advice to GPs and practice staff on the use of interpreters who act in a professional capacity to ensure staff meet a professional standard with the intention to lessen risks associated with using relatives or friends as interpreters.	NHS England, London, Medical Directorate	Regional and local	1. NHS England, London will develop and collate a summary of guidance and advice for GPs and Practice Managers on good practice in recognition and response to domestic violence and abuse.	<ul style="list-style-type: none"> NHS England, London CCG Assurance leads will be informed they have the option to include evidence of commissioning of interpreter services, in their CCG Assurance meetings. 	By July 2015
29. NHS England, London will forward the Royal College of General Practitioners' (RCGP) 'Responding to Domestic Abuse: guidance for general practices (2012) to all GPs and Practice Managers commissioned by NHS England, London.	NHS England, London, Medical Directorate	Regional and local	1. NHS England, London will develop and collate a summary of advice and guidance for GPs and Practice Managers. It will incorporate the Royal College of General Practitioners'	<ul style="list-style-type: none"> This will be circulated to all London based GP Practices and Practice Managers, commissioned by NHS England, London and will also be 	By July 2015

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			(RCGP) 'Responding to Domestic Abuse : guidance for general practices' ¹ (2012). The summary of advice and guidance will also include information on NHS England's Responsibilities to Carers highlighted in May 2014 'Commitment to Carers' publication ²	shared with the London wide LMC for information.	
30. Recommend a 'major alert' note on the front page of electronic notes (which should be	NHS England, London,	Regional and local	1. NHS England, London will develop and provide a	<ul style="list-style-type: none"> This will be circulated to all London based 	By July 2015

¹ http://www.rcgp.org.uk/clinical-and-research/clinical-resources/~/_media/Files/CIRC/Clinical%20Priorities/Domestic%20Violence/RCGP-Responding%20to%20abuse%20in%20domestic%20violence-January-2013.ashx

² <http://www.england.nhs.uk/wp-content/uploads/2014/05/commitment-to-carers-may14.pdf>

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closed down before the patient enters the room) which will indicate those at risk of domestic violence, or perpetrators of domestic violence.	Medical Directorate		summary of guidance and advice for GPs and Practice Managers on good practice in recognition and response to domestic violence and abuse.	GP Practices and Practice Managers, commissioned by NHS England, London and will also be shared with the Londonwide LMC for information.	
31. Highlight best practice for patient notes to feature the correct EMIS codes which will indicate domestic violence and abuse. Where such notes are archived, to ensure that coded notifications are transferred along with the notes.	NHS England, London, Medical Directorate	Regional and local	1. NHS England, London will develop and provide a summary of guidance and advice for GPs and Practice Managers on good practice in recognition and response to domestic violence and abuse.	<ul style="list-style-type: none"> This will be circulated to all London based GP Practices and Practice Managers, commissioned by NHS England, London and will also be shared with the Londonwide 	By July 2015

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				LMC for information.	

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32. All Staff to be offered refresher training in adult safeguarding including recognising vulnerable adults with an emphasis on domestic homicide and domestic violence.	North West London Hospitals Trust	Local	1. Training sessions	<ul style="list-style-type: none"> • Training sessions planned • Training commenced • Training complete 	Sept 2014 November 2014 March 2015
33. All Trust staff to be offered refresher training in the MCA.	North West London Hospitals Trust	Local	1. Training sessions	<ul style="list-style-type: none"> • Training sessions planned – Ongoing • Training commence- November 2014 	Sept 2014 November 2014

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				<ul style="list-style-type: none"> • Training complete 	March 2015
34. All staff to understand DOLs process and MCA.	North West London Hospitals Trust	Local	1. Training sessions	<ul style="list-style-type: none"> • Training sessions planned Sept 2014 • Training commenced November 2014 	Sept 2014 November 2014
35. Best Interest Assessors to be named	North West London Hospitals Trust	Local	1. Training sessions	<ul style="list-style-type: none"> • IMCA assessors to be named and training completed by March 2015 	March 2015
36. Domestic abuse should be considered in the context of the family or household, especially the impact on children	North West London Hospitals Trust	Local	1. To write to providers asking them to cascade the message 'think adult, think parent/carer' and the impact on children	<ul style="list-style-type: none"> • Letter sent to all providers • Message delivered to all health staff by health providers 	October 2014 December 2014

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37. To establish and fund a Safeguarding Team	North West London Hospitals Trust	Local	1. Post advertised and substantive teams in place	<ul style="list-style-type: none"> In post and substantive 	Completed by October 2014.
38. To provide supervision and development of the Adults & Children's Safeguarding teams	North West London Hospitals Trust, Clinical psychologist	Local	1. Adults safeguarding supervision for staff on a regular basis, (using this case study to form a basis).	<ul style="list-style-type: none"> To provide monthly supervision ad hoc. 	January 2015.
39. The development of a risk assessment tool to assist staff in identifying adults at risk, especially where the adult does not speak English should be considered. This risk assessment tool should be a generic tool for all adults who present to the emergency department. This tool should be incorporated in the North West London Hospital's NHS Trust Safeguarding Adults at Risk Policy (2013) and form part of the level 3 safeguarding adult training.	North West London Hospitals Trust, Safeguarding Team	Local	1. Design, embed into training and allow a period of time for the assessment tool to be evaluated and audited	<ul style="list-style-type: none"> Adult Safeguarding Lead and ICO Safeguarding Lead 	March 2015

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40. To review screening tool for Adult Safeguarding to ensure Pan London and Brent's procedures are followed, checks on the system are completed and the records are updated appropriately.	Brent Adult Social Care	Local	Adult Safeguarding screening tool to be reviewed and updated	<ul style="list-style-type: none"> • Complete 	Completed November 2014
41. To review the current recording policy to evaluate what can be recorded on an alleged perpetrators file	Brent Adult Social Care	Local	<p>The case recording policy is to be reviewed in conjunction with Brent Legal Services and Information Technology department to establish what can be recorded on the alleged perpetrator's file.</p> <p>This is then to be built into the Safeguarding Adults Team process.</p>	<ul style="list-style-type: none"> • Partially complete 	December 2014
42. To incorporate a mini risk assessment for all safeguarding alerts (including allegations screened out of the process) to enable the professionals to identify any other potential	Brent Adult Social Care	Local	Adult Safeguarding screening tool to be updated to include consideration of any children or other adults who may be at risk with	<ul style="list-style-type: none"> • Complete 	Completed August 2014

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vulnerable adults or children at risk.			<p>details of action to take if people are identified.</p> <p>The Safeguarding Adults' computer system to be updated to confirm/confirm if there are other adults or children at risk.</p>	<ul style="list-style-type: none"> • Complete 	Completed April 2014
43. To create a Lado process for Adult Social Care Safeguarding team to ensure any safeguarding concerns raised regarding professionals working with vulnerable adults is investigated and followed up in accordance with Adult Safeguarding procedures.	Brent Adult Social Care Brent Children's Social Care	Local	A referral process to be developed between the Children's LADO service and the Safeguarding Adults Team.	<ul style="list-style-type: none"> • Complete 	Completed February 2014
44. To develop a local Adult Lado protocol in Brent to further safeguard vulnerable adults	Brent Adult Social Care	Local	<p>The Adult LADO process is to be developed in Brent.</p> <p>To attain sign up to Adult LADO process from all key partners / commissioners via Safeguarding Adults Board</p> <p>To publicise and</p>	<ul style="list-style-type: none"> • Ongoing 	February 2015

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			<p>provide expectations of process and referrals to providers of commissioned services by key commissioners in the borough</p> <p>Commissioners to monitor compliance via contract meetings with commissioned providers</p>		
<p>45. To improve operational links with Children's services and Adult Safeguarding to encourage joint understanding and identification of potential children at risk and to develop understanding of Children's services of potential adults at risk. To complete awareness raising across departments.</p>	<p>Brent Adult Social Care</p>	<p>Local</p>	<p>A staff member from the Safeguarding Adults Team to attend MASH Team meetings and Children's Services Team meetings to raise awareness of potential adults at risk and the process thereafter.</p> <p>Staff roles and responsibilities toolkit relating to Safeguarding Adults to be shared with Children's Services staff.</p>	<ul style="list-style-type: none"> • Ongoing • Ongoing 	<p>December 2014</p> <p>December 2014</p>

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			<p>The Safeguarding Adults Duty Team to sit next to the MASH team to enhance joint working.</p> <p>To incorporate awareness of children's need with ASC staff in Team Mangers meeting and team meetings</p> <p>To monitor referrals between departments to measure improved joint working</p>	<ul style="list-style-type: none"> • Complete • Complete • Ongoing 	<p>September 2014</p> <p>September 2014</p> <p>Feb 2015</p>
46. To review Brent Adult Social Care's expectation on language interpreters and ensure this is cascaded to all Adult Social Care staff and adhered to.	Brent Adult Social Care	Local	<p>To attain agreement from DMT regarding the use of interpreters</p> <p>To role out expectation to ASC staff team</p>	<ul style="list-style-type: none"> • ongoing 	December 2014
47. To ensure that the Reablement Team are aware of the importance of engagement with the customer to ascertain their view in relation to how their	Brent Adult Social Care	Local	<p>Include the topic in a team meeting with discussion forums.</p> <p>Facilitate discussion /</p>	<ul style="list-style-type: none"> • completed 	September 2014

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personal care is met and to ensure staff know where to refer for further support if they need assistance to communicate with adults with communication needs and cognitive disabilities			practice forums regarding the topic		
48. To embed Mental Capacity Assessments and Risk Assessment tools into the case recording systems and develop good practice guidelines regarding Mental Capacity and Risk assessments and reviews and implement this across Adult Social Care.	Brent Adult Social Care	Local	All Adult Social Care Staff to participate in core skills training where Mental Capacity Act Assessments and Risk Assessments are included. Review and implement a new structure for training on mental capacity assessments To embed the assessments on the FWi system	<ul style="list-style-type: none"> • Completed • Review completed • Ongoing 	December 2014
49. To improve awareness of signs of abuse and adults and children safeguarding across Adult Social Care with the aim to increase proactive identification	Brent Adult Social Care	Local	A risk triggers tool to be developed to promote professional curiosity and assist staff in the identification of potential/actual harm	<ul style="list-style-type: none"> • completed 	February 2015

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of safeguarding concerns.			relating to adults. Risk trigger to be rolled out at staff quarterly and then within practice forums with all ASC staff	<ul style="list-style-type: none"> planning stage 	

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50. SOIT Officers to submit intelligence at an earlier stage of the investigation rather than the conclusion.	Herts Constabulary	Local	1. All SOIT staff to be given additional training	<ul style="list-style-type: none"> This has already taken place. Intelligence is now submitted early on in the investigation. However all the information regarding the arrest will now be on PND for all Forces to view whether he 	Complete

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				is charged or not.	
51. To review the policy regarding data protection surrounding suspects arrested for sexual offences where vulnerable persons are at risk.	Herts Constabulary	Local	1. Liaison with Constabulary legal department regarding drawing up a policy surrounding possible justified breaches of data protection.		01/02/15

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52. Brent BOCU should remind officers of the importance of generating MERLIN records for children of persons coming to notice of police whether present	Met Police (MPS)	Local	1. Training sessions	<ul style="list-style-type: none"> • Training sessions on-going • Continuous training for front 	On-going

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or not at the incident (domestic violence/abuse). ³				line responders and secondary investigators by way of General Investigation Professional Development Days being rolled out across the MPS.	

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53. The team manager should ensure that all team members are	Brent School	Local	Team members access LSCB and Brent	<ul style="list-style-type: none"> All staff report accessing 	November 14

³ Since 2002 the MPS have made significant improvements in the way it responds to domestic abuse (DA). Regular reviews are made of the DA policy, processes and procedures to ensure they are appropriate and robust to support the identification and positive investigation of any domestic related incident. This includes:

- ensuring mandatory elements of the MPS Police and checklists are adhered to.
- That the protection and safeguarding of vulnerable adults and children are assessed in line with the Vulnerable Assessment Framework (VAF), and relevant Adult Coming to Notice (ACN) or Pre Assessment check (PAC for Children) records made on the MERLIN system.

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aware of the Brent Safeguarding procedures.	Admissions		Council safeguarding procedures on line	protocols	
54. Team members should access the level 1 and level 2 multiagency safeguarding training provided by the Local Safeguarding Children Board.	Brent School Admissions	Local	All team member book and complete the level 1 and level 2 multiagency safeguarding training provided by the LSCB	<ul style="list-style-type: none"> All staff trained 	March 2015
55. Responsibilities for safeguarding should be included in all job descriptions.	Brent School Admissions	Local	Managers to include safeguarding responsibilities in all new job descriptions	<ul style="list-style-type: none"> All new job descriptions contain safeguarding responsibilities 	September 2015

Recommendation	Lead Agency	Scope of recommendation i.e. local or regional	Action to take	Key milestones/outcomes achieved in enacting recommendation	Target and completion date
56. The team manager should ensure that all team members are aware of the Brent Safeguarding procedures.	Brent Special Educational Needs	Local	Team members access LSCB and Brent Council safeguarding procedures on line	<ul style="list-style-type: none"> All staff report accessing protocols 	November 14

Recommendation	Lead Agency	Scope of recommendation i.e. local or regional	Action to take	Key milestones/outcomes achieved in enacting recommendation	Target and completion date
	Service				
57. Managers should monitor whether team members have accessed the level 1 and level 2 multiagency safeguarding training provided by the Local Safeguarding Children Board. Retraining should be requested every 3 years.	Brent Special Educational Needs Service	Local	All team member book and complete the level 1 and level 2 multiagency safeguarding training provided by the LSCB. Training is monitored by management	<ul style="list-style-type: none"> • All staff trained • And retrained in 3 years 	On going
58. Managers should check that the responsibilities for safeguarding are included in all job descriptions and induction programmes.	Brent Special Educational Needs Service	Local	Managers to include safeguarding responsibilities in all new job descriptions and induction programmes	<ul style="list-style-type: none"> • All new job descriptions contain safeguarding responsibilities. • All induction programmes include safeguarding. 	September 2015
59. During the statementing process, all notes and assessments from Educational Psychologists should be stored on the SENAS Tribal database.	Brent Special Educational Needs Service	Local	Managers to instruct team members to store all notes and assessments on the Tribal System	<ul style="list-style-type: none"> • All notes and assessments are stored on the system 	October 2014
60. As part of the statementing process, SENAS should check	Brent Special	Local	All staff are trained to use the Framework I	<ul style="list-style-type: none"> • All SENAS staff check all cases 	January 2015

Recommendation	Lead Agency	Scope of recommendation i.e. local or regional	Action to take	Key milestones/outcomes achieved in enacting recommendation	Target and completion date
social care involvement through accessing the Framework I database.	Educational Needs Service		system	referred on framework I for social care involvement and contact as necessary	

Recommendation	Lead Agency	Scope of recommendation i.e. local or regional	Action to take	Key milestones/outcomes achieved in enacting recommendation	Target and completion date
61-66. The Chair of Brent Community Safety Plan should write to ACPO, Home Secretary, National College of Policing, Secretary of State for Education, Secretary of State for Justice, University of West London and Nursing and Midwifery Council regarding issues raised in this review	Brent Community Safety	Local	To write letters regarding issues raised in this review	All letters to be written by June 2015	June 2015

Formal response to the Home Office regarding the Domestic Homicide Overview Report

We are the independent regulator for nurses and midwives in the UK. Our role is to protect patients and the public through efficient and effective regulation.

In this response we set out information in relation to our role in education and registering student nurses and midwives who have successfully completed their undergraduate degree. We also provide information in relation to how we consider the character of a student as part of the registration process.

Our legislation does not permit us to regulate or register student nurses or midwives. However we do have a role in the education and training of student nurses and midwives. We set standards of education for the delivery of pre-registration nursing and midwifery programmes and we take appropriate steps to assure ourselves that approved education institutions (AEIs) delivering these programmes are enabling students to meet the standards needed for registration. We do this by setting requirements for AEIs. All requirements must be met before an AEI can run an approved programme and we annually monitor a selection of AEIs to ensure our standards continue to be met.

In accordance with our Quality assurance framework (published in 2013 and refreshed annually in 2014 and 2015) AEIs are required to provide evidence of having formal processes in place to ensure that all necessary Disclosure and Barring Service (DBS) checks meet our requirements. Students cannot enter a practice placement without a completed and satisfactory DBS.

Our 2004 Standards of proficiency for pre-registration nursing education were applicable in the case of MY. The standards stated:

“Applicants must demonstrate that they have good health and good character, sufficient for safe and effective practice as a nurse, **on entry** to, and for continued participation in, programmes leading to registration with the NMC.”

Following notification of the charges against MY, we conducted a monitoring exercise at the relevant AEI (where student MY had been studying as a nurse) to seek assurance that health and character requirements were being met and that pre-registration nursing

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education was being delivered in accordance with our standards. This was completed on 12 February 2014. We found that all standards were met and that the AEI had the required internal processes and procedures in place to deal with the admission and progression of their students.

Those standards have since been revised and strengthened. Our Standards for pre-registration nursing education (2010) now state that AEIs must require students to immediately declare any cautions and convictions they receive, including charges pending, **before** entering and throughout the programme. There is also an additional safeguard which requires AEIs to have systems in place to identify and address any concerns regarding the character, conduct or health of any student.

Once a student has successfully completed their undergraduate degree and, at the point of initial registration with the NMC, we ask all applicants to make declarations about their character. As part of that process we ask for information about any cautions and/or convictions including pending charges.

We have also published new character and health decision-making guidance which is used by the Registrar and registration appeal panels when considering applications for admission, readmission and renewal (or revalidation) of registration. This also provides the public and AEIs with information about the decisions that we make regarding registration.

The Registrar then decides whether an applicant (including students successfully completing their course) is capable of safe and effective practice, taking into account the charge, caution or conviction. The Registrar may make a different decision to the AEI.

We would also like to draw your attention to our revised Code (published in 2015) which requires nurses and midwives to preserve safety:

“You make sure that patient and public safety is protected. You work within the limits of your competence, exercising your professional ‘duty of candour’ and raising concerns immediately whenever you come across situations that put patients or public safety at risk. You take necessary action to deal with any concerns where appropriate.”

We have strengthened our position for renewal to the register by introducing revalidation for registered nurses and midwives. We piloted this model in 2015 and Council agreed to introduce revalidation at their meeting in October 2015. The first nurses and midwives to revalidate will do so on 1 April 2016. Registered nurses and midwives have to demonstrate that they are capable of safe and effective practice in accordance with the Code. This includes making a declaration of their health and character.

We would expect nurses and midwives who come into contact with students to raise any concern they may have immediately. This is supplemented by our Raising concerns guidance which states that nurses and midwives have a professional duty to put the interests of the people in their care first and to act to protect them if they consider they may be at risk.

These measures all form part of our commitment to perform regular reviews of our rules and standards in order to ensure that we continue to protect the public and maintain the public's trust and confidence in the professions and in our regulatory function.