

Operation Rossetti: Recommendations and Action Plan

No	Recommendation and scope ¹	Action ²	Key milestones ³	Target Date ⁴	Lead ⁵	Progress ⁶	Revised Target date ⁷	Status (RAG) Rating ⁸
#1	Attach a full and un-redacted copy of this Overview Report to the social care records of Azaan and Zainab so that it is available to them should they seek it in the future.	Will attach full and un-redacted Overview Report once advised of approval for publication by Home Office.		On publication	Julie Boot, Children's Social Care	Overview Reports made available 12 September 2019		
#2	All midwives and doctors involved in care of women and their babies should receive training in how to view and record DV questioning in the EPR record.	Embed this training into DA element of mandatory safeguarding children training Level 3 (face to face); Compliance recording using CUH system CHEQS.	In-service training facilitators trained to demonstrate electronic DV documentation during sessions. Monitoring of CHEQS.	March 2018	Toni van Voorst, Cambridge University Hospitals NHS Foundation Trust	Training compliance with Level 3 safeguarding children training is 91.6% for May 2018		
#3	The importance of DV questioning and appropriate use of	Add to list of DA Risk Factors in CUH DA policy:	Policy is updated and available for	September 2018 Target	Toni van Voorst, Cambridge	Maternity guidance for identifying DV	November 2018	

¹ What is the over-arching recommendation? Should this recommendation be enacted at a local, regional level or national level?

² How is the relevant agency going to make this recommendation happen?

³ What are the key milestones to complete the action?

⁴ When should this happen?

⁵ Who is responsible for monitoring progress and ensuring delivery?

⁶ What has been achieved? What was the outcome? (If a revised targeted date is required, provided an explanation)

⁷ If required - what is the revised target date?

⁸ Is the action on complete or due to be complete by the target date (green), in progress (amber) or outstanding (red)?

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	professional interpreters should be recognised throughout the maternity service, and measures should be taken to increase awareness amongst all clinical staff by a consistent and sustained programme of actions	'Women where English is not a first language, or there are communication difficulties'. Embed link to Interpreting and Translating Services Policy, v5;Dec 2017 into DA Policy.	staff reference on hospital intranet, 'Merlin'. DA Audit of staff demonstrates awareness of updated policy.	date now November 2018	University Hospitals NHS Foundation Trust	by use of sensitive routine enquiry is embedded in the text, added to CUH DA Policy and achieved in November 2018.		
#4	The guideline on routine questioning on domestic violence should be reviewed and updated to include the procedure for recording questioning and responses in EPR record and the roles and responsibilities of all clinical staff. There should also be clarification of the required standard as there is a discrepancy in the current guideline	Review and update guideline to include the procedure for recording questioning and responses in EPIC record and the roles and responsibilities of all clinical staff. Eliminate the discrepancy in the current guideline between the audit standards and the minimum standard	Policy is updated; Audit and minimum standards correlate.	September 2018	Toni van Voorst, Cambridge University Hospitals NHS Foundation Trust	Guidance is updated and now offers staff full details on recording DA screening, and staff actions and responsibilities	January 2023	

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	between the audit standards and the minimum standard set out within the body of the document.							
#5	There should be a repeat baseline audit of compliance with guidance on routine questioning on domestic violence, with the results disseminated throughout the maternity service.	Baseline audit standards and questionnaire compiled Audit undertaken in conjunction with Audit department; evidence to inform Report and recommendations, leading to action plan for maternity department. Inform Divisional Board and maternity staff of outcome.	Baseline audit is completed, and Report written and submitted to Divisional Board and maternity staff; Named Midwife using data as basis for agreed Action Plan and repeat audits.	March 2018	Toni van Voorst, Cambridge University Hospitals NHS Foundation Trust	Audit standards and questionnaire have been developed. Cycle one, two and three completed.	Rolling programme of re-audit. Evidence of disseminated results and actions. October 2018	
#6	A repeating audit cycle should be implemented to ensure satisfactory compliance has been has been	Using baseline audit, audit standards to be reviewed to ensure relevant comparative data	Audit interval agreed.	March 2018	Toni van Voorst, Cambridge University Hospitals NHS Foundation	Audit standards and questionnaire have been developed. Cycle one	Rolling programme of re-audit. Evidence of disseminated results	

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	consistently demonstrated at a frequency to be determined by the named midwife for safeguarding. The audits and the resultant action plans will be monitored by the Patient Experience and Quality Midwife.	can be elicited going forward. Agree Audit interval with audit department and responsible Named Midwife for Safeguarding. Clear trail of progress via serial Reports and Action plans, monitored by the Patient Experience and Quality Midwife and reported to the Joint Safeguarding Committee.			Trust	completed.	and actions. October 2018	
#7	Recording in EPIC of domestic violence questioning undertaken and the response received should be made easy to view for the clinical team providing care during pregnancy, labour and the postnatal period. An	Effect necessary alteration to EPIC DA screening process in pregnancy; ensure this is simple and readily accessible to staff view	All women have a full safeguarding assessment at booking appointment, including DA screening. EPIC process altered. EPIC record displays	March 2018	Toni van Voorst, Cambridge University Hospitals NHS Foundation Trust	All Midwifery staff expected to undertake a full safeguarding assessment at booking appointment, including DA screening. Recording of screening and	January 2023	

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	agreed method should be established within maternity services and changes made to EPIC as required.		evidence of serial screening in pregnancy. Appropriate safeguarding flag(s) applied to EPR for guide clinical staff, e.g. DA alert flag is available from a 'pick list' of 'risks' and can be applied to any patient record.			number of times asked is readily evident on opening this electronic page. Where there has been a positive screening result: DA alert flag is available from a 'pick list' of 'risks' and can be applied to any patient record, as can other safeguarding risks.		
#8	Include a session on 'Life in the UK, Your Rights' into their existing programme of work with refugees and asylum seekers.	This is already included in the induction programme for resettled refugees. We will look at including it into the requirements on the Asylum Seekers and	On review of CEDF Asylum Seekers and Refugee service contract.	Mid 2019	Lynda Kilkelly, Cambridge City Council. Change of personnel, Lynda was replaced by Keryn Jalli in January 2022.	In 2022 the contract for Asylum Seeker and Refugee services was renewed. Outcomes of the current contract include - Number of		

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		Refugee contract with CECF when it is next reviewed.				clients who report increase in understanding of rights and access to services in the UK.		
#9	Undertake an audit of GPs to establish the extent to which they have implemented the training and policy guidance on domestic abuse recommended by NICE in 2014 taking remedial action if necessary.	<p>1) Review NICE guidance and its implications on primary care.</p> <p>2) Design audit for use within clinical GP practices.</p> <p>3) Write report on findings.</p>	See left	December 2019	<p>Kate Calvert, Cambridge-shire & Peterborough Clinical Commissioning Group (CCG)</p> <p>Change of personnel</p>	<p>Update 11 Oct 2019: David Parkes has replaced Kate Calvert.</p> <p>Update May 2023: Due to Covid -19 there was a delay in the audit completion with primary care. In 2022-2023, the Integrated Care Board (ICB) formerly CCG, Safeguarding people team asked primary</p>	April 2023	

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						<p>care, as part of a safeguarding audit the following:</p> <ul style="list-style-type: none"> •Are staff aware of the Domestic Abuse (DA) Act and the Workplace Support for Victims of DA. •Are staff aware of how these can be used to support and improve the lives of victims. This must include a practice DA Policy. <p>91% of practices in Cambridgeshire & Peterborough confirmed their</p>		

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						<p>compliance with the statements with 9% reporting that their practice has a DA policy in place, but it is due for review. And/or the practice cannot evidence that all staff are aware of the DA Act and the Workplace Support for Victims of DA - further education is needed.</p> <p>The overall executive report is in its final stages of approval. These practices will be supported by the ICB</p>		

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						<p>safeguarding team to implement the policy and any learning identified from the audit.</p> <p>The overall report will be shared with the ICB executive team.</p> <p>DA training continues to be delivered by the Domestic Abuse Sexual Violence Board to primary care as requested.</p>		
#10	Undertake work with the county wide Muslim Women's Group to raise awareness of domestic abuse and help available. This to include support for partners from	<ul style="list-style-type: none"> Undertake needs assessment with the County-wide Muslim Women's Group to ascertain 	<ul style="list-style-type: none"> Establish focus groups. 	July 2019	Julia Cullum, Cambridgeshire and Peterborough Cambridge-Shire and Peterborough Domestic Abuse and	- Since 2021 the IDVA service has had a specialist IDVA for Ethnic Minorities.	April 2023	

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	abroad.	<p>best ways to raise awareness of domestic abuse.</p> <ul style="list-style-type: none"> • Develop community champions from within and outside the Muslim community. 	Identify and train community champions.		Sexual Violence Partnership	<p>- Dr Mirna Guha, Anglia Ruskin University, has been taking research forward and in early 2023, there was a successful bid to the Home Office by Peterborough Women's Aid for countywide support to South Asian victims of domestic abuse. There is also work by Cambridge Women's Aid to develop community champions</p>		

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		<ul style="list-style-type: none"> Develop awareness-raising campaign. 	Develop materials and identify methods to raise awareness.			<p>through the Ask Me programme.</p> <p>– There are specific resources in relation to South Asian victims not Muslim victims such as Posters and Youtube videos available explaining support in relevant languages.</p>		
#11	To receive six monthly updates on the progress of implementing this action plan until such time as it is complete.	The progress of the action plan will be a twice-yearly agenda item for the CSP Board meeting until it is completed.	Reports to CSP Board and monitoring over the next year.	First report October 2018	Lynda Kilkelly, Cambridge CSP. Change of personnel, Lynda was replaced by Keryn Jalli in January 2022.		Ongoing to completion of Action Plan.	

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#12	To produce and implement a single countywide commissioning and administrative agreement to ensure statutory requirements are complied with in respect of commissioning Domestic Homicide Reviews.	Multi-agency Task Group to develop a template for the procedure.	Draft the procedure ready for consultation. Final procedure agreed and adopted across CSPs.	Draft June 2019	Julia Cullum / Vickie Crompton, Cambridgeshire & Peterborough Domestic Abuse & Sexual Violence Partnership	Task Group set up and a model developed and taken to County Community Safety Strategic Board in October 2019.	Model agreed by County Community Safety Strategic Board in October 2019 and as a countywide process has been successfully in place since April 2021 and will continue as a countywide process.	
#13	Whilst recognising that commissioning cycles will vary, all agencies involved in this Review are to ensure the inclusion of the following in their contracts with interpreting services: Confidentiality; impartiality; DBS	Brief CSP on need for reviews in relation to interpreting services.	CSP agencies briefed in mid-2019.	CSP meeting dates	Lynda Kilkelly, Cambridge CSP	All relevant agencies have been asked to include in future contracts.	Achieved. For example, the NHS Standard Contract includes a mandatory Safeguarding Clause which	

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	checks, training in domestic abuse awareness training and an agreed form of wording for the term 'domestic abuse' in provided languages ⁹ .						covers this recommendation.	
#14	The above recommendation to be communicated to the Local Medical Committee for dissemination to GPs and for inclusion within their own guidance on accessing and using interpreters.	Inform Local Medical Committee		June 2019	Sarah Hamilton, Cambridgeshire & Peterborough CCG. Change of personnel, Sarah was replaced by Claire Saggiorato in 2022.	Sarah Hamilton raised this at the Local Medical Committee meeting on 5 November 2019.	Achieved 5 November 2019	
#15	Staff to be reminded of the importance of accessing professional interpreters and the preference not to 'make do' with family members. This	Incorporate into County-wide training.		Ongoing	Julia Cullum / Vickie Crompton, Cambridgeshire & Peterborough Domestic Abuse &	All training and awareness sessions since 2020 have highlighted that any translators should be independent,	Incorporated into learning since 2020.	

⁹ Domestic abuse is not a term which exists in all languages. As such, interpreters should be made aware of alternative forms of wording.

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	reminder should also include best practice guidance for working with interpreters ¹⁰				Sexual Violence (DASV) Partnership.	citing the Cambridge City DHR. County DASV Partnership to provide best practice guidance for working with interpreters on their website.	Completed 8 August 2023	
#16	Spousal visa applicants to be given access to their sponsors criminal record and previous marital history in advance of the visa being granted	The Chair of Cambridge CSP to write to the Home Secretary regarding these recommendations and enclosing a copy of this DHR report.	Letter to be sent when the Home Office has given permission to publish and circulate the report.	October 2019	Debbie Kaye, Cambridge CSP	Letter sent on 23 October 2019.		
#17	Persons entering the UK on a spousal visa to be provided with information about their legal	The Chair of Cambridge CSP to write to the Home Secretary regarding these	Letter to be sent when the Home Office has given permission to	October 2019	Debbie Kaye, Cambridge CSP	Letter sent on 23 October 2019.		

¹⁰ County DASV Partnership guidance available at https://www.cambsdav.org.uk/web/guidance_for_professionals/86057 and Cambridge City Council has a document for colleagues: Supporting Customers with Protected Characteristics experiencing domestic abuse

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	rights in relation to marriage and relationship breakdown, including information about agencies that can help such as Women's Aid.	recommendations and enclosing a copy of this DHR report.	publish and circulate the report.					
#18	Health Education England to consider reviewing their curriculum content regarding postgraduate training and mandating domestic violence training for all GPs.	The Chair of Cambridge CSP to write to Health Education England regarding this recommendation and enclosing a copy of this DHR report.	Letter to be sent when the Home Office has given permission to publish and circulate the report.	October 2019	Debbie Kaye, Cambridge CSP	Letter sent on 23 October 2019.		

Recommendations that are outside the scope of the Cambridge CSP and the DASV Delivery Board will be communicated to the relevant agencies.