

## DHR Action Plan – David – Central Bedfordshire CSP



	Recommendation	Scope of recommendation	Action to take	Lead Agency	Milestones	Target Date	Outcome
1	Probation ensures that partner agencies involved in an individual's risk management or sentence plan objectives are aware, and a mechanism for gathering information is agreed upon to enable monitoring of those objectives	Local	<ul style="list-style-type: none"> <li>- Review process</li> <li>- Update and embed</li> <li>- Ongoing awareness raising/refresher</li> <li>- Monitoring/evaluation</li> </ul>	National Probation Service	26.11.2025 – LS met with LJ Head of PDU and discussed action. LJ is happy that there has been significant process changes since this incident and that the response has improved. LJ will provide wording to update the action.	January 2026	ONGOING
2	Where requirements are imposed at sentencing concerning the treatment of offenders and victims subject to domestic abuse, details will be recorded on Athena for future monitoring to encourage compliance	Local	<ul style="list-style-type: none"> <li>- Review process</li> <li>- Update and embed</li> <li>- Ongoing awareness raising/refresher</li> <li>- Monitoring/evaluation</li> </ul>	Police	This has been scoped and Athena does not have the functionality to handle this tracking request.	August 2024	CLOSED
3	Supervisors must be reminded of their	Local	<ul style="list-style-type: none"> <li>- Reminder to all staff</li> </ul>	Police	Supervision of DA crime has been reviewed since	January 2024	CLOSED

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	responsibility to investigate reported crimes, whether or not a victim may be a suspect		<ul style="list-style-type: none"> <li>- Ongoing quality review process</li> <li>- Monitor in 121s</li> <li>- Refresher process</li> <li>- Audit/Evaluate</li> </ul>		this DHR and there are now further review processes in place before a DA crime can be closed. This includes a DA checklist. DA is a priority for the whole force and had better governance structures and oversight in place.		
4	All must be reminded of the importance of accurately completing Athena entries	Local	<ul style="list-style-type: none"> <li>- Reminder to all staff</li> <li>- Ongoing quality review process</li> <li>- Monitor in 121s</li> <li>- Refresher process</li> <li>- Audit/Evaluate</li> </ul>	Police	The force has an investigation standards & vulnerability process manager who QAs DA investigations as part of his general work. He also delivers inputs to student officers and on various CPD/training days that teams hold.	January 2024	<b>CLOSED</b>
5	Officers must be reminded to submit intelligence whether or not it is corroborated and grade accordingly	Local	<ul style="list-style-type: none"> <li>- Continue to flag importance of submitting intelligence</li> <li>- Supervisory review of submissions</li> </ul>	Police	The force has set up an Intelligence Board led by the DCS for the intelligence command. This has DCI and above attendance from every	January 2024	<b>CLOSED</b>

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			<ul style="list-style-type: none"> <li>- Identify/act on low submitters</li> <li>- Ongoing review and evaluation</li> </ul>		<p>team across the force and there is a delivery plan to increase the intelligence submission across the force that is supported by local plans.</p>		
6	Staff employed within the intelligence hub to be reminded of highlighting intelligence concerning vulnerable persons to PPU so partnership intervention can be considered	Local	<ul style="list-style-type: none"> <li>- Review current process</li> <li>- Update where needed</li> <li>- Promote and embed process</li> <li>- Ongoing review and evaluation</li> </ul>	Police	<p>The intelligence unit carry out daily scanning of intelligence submissions and logs of note/concern are shared with the PPU Hub.</p>	January 2024	CLOSED
7	When DVPNs are issued, ensure automatic referrals are made to DA services		<ul style="list-style-type: none"> <li>- Develop a referral process following the issue of a DVPN</li> <li>- Embed process</li> <li>- Ongoing evaluation</li> </ul>	Police	<p>A significant amount of work has gone into improving the number of DVPNs that are issued by not only the Emerald Team but by other teams too. This has an oversight process built in. Cases that meet the criteria for a DVPN are considered to be high risk and all high risk cases are referred to</p>	January 2024	CLOSED

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						the appropriate partner agencies by the PPU Hub and are referred to victim support services too.		
8	When researching the domestic history of perpetrators or victims, consider using professional judgement in using legislative policies and processes. E.g. Domestic Violence Disclosure Scheme (DVDS) – Clare's Law	Local	<ul style="list-style-type: none"> <li>- Review current knowledge of policies and processes</li> <li>- Identify knowledge gaps</li> <li>- Ongoing training/refresher training</li> <li>- Monitor/evaluate</li> </ul>	Police	<p>Increasing the use of the DVDS scheme has been a focus for the force for the past year. We have been consistent with the right-to-know applications but behind the expected volume for right-to-ask. The work over the last year has led to a significant increase in right-to-know disclosures and as of Q2 2025 a new AI tool is being used to identify cases where a right-to-know could be applicable which is then reviewed by the PPU team to start the DVDS process off. This AI tool is identifying a huge proportion more than</p>	January 2024	CLOSED	

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						would otherwise have been readily identifiable.		
9	All staff must be reminded to research victims and suspects when considering appropriate action.	Local	<ul style="list-style-type: none"> <li>- Review current process</li> <li>- Embed process</li> <li>- Supervisor review</li> <li>- Evaluation</li> </ul>	Police	<p>This is in place across investigation teams within the PPU and also the PPU Hub. This theme crosses over from other reviews and has been reiterated to Crime Teams too.</p> <p>It is also included in the DA training for FCR staff.</p>	January 2024		CLOSED
10	When a need for a SIG marker has been identified, or a DVPO has been issued, these should be placed immediately	Local	<ul style="list-style-type: none"> <li>- Review current SIG marker process</li> <li>- Update process if required</li> <li>- Embed process</li> <li>- Supervisor review</li> <li>- Ongoing evaluation</li> </ul>	Police	<p>Confirmed with the force control room that there is a dedicated email address for investigators to use to notify of the need for a SIG marker. This is monitored 24/7 by FCR staff and will be actioned as soon as seen.</p>	January 2024		CLOSED
11	A record under Sharon of the domestic dispute should be recorded on Athena	Local	<ul style="list-style-type: none"> <li>- Recorded to be added</li> </ul>	Police	Record has been added	October 2024		CLOSED

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12	Missing Persons Team to remind officers to be mindful of making appropriate referrals on conclusion of 'Return Interviews'	Local	<ul style="list-style-type: none"> <li>- Referral process to be reviewed and update where necessary</li> <li>- Staff to be update</li> <li>- Ongoing supervision review</li> <li>- Evaluation</li> </ul>	Police	<p>This now in place. A referral is made that includes a summary of the return interview.</p>	January 2024	CLOSED
13	Reinforcement of DVPN/DVPO policies, particularly in standards across the workforce, to ensure consistency of practice, auditing and early intervention for vulnerable victims and perpetrators of domestic abuse	Local	<ul style="list-style-type: none"> <li>- Review of current process</li> <li>- Review of training</li> <li>- Embed training</li> <li>- Ongoing training/refresher training</li> <li>- Supervisor review</li> <li>- Evaluation</li> </ul>	Police	<p>Links to action 6 above, but in addition, an updated process was introduced in Q2 2023/24 to Emerald officers and CID. Patrol officers were directed to complete the updated training in CPD days. There were 50 DA champions trained across the force at that time and new champions were trained last week. These officer/staff are</p>	January 2024	CLOSED

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					responsible for CPD re orders and interventions incl. any new superintendents who are authorising DVPNs.		
14	Supervisors, Gatekeepers and Managers to ensure all risk assessments and any referrals pertinent to any of the subjects have been: <ul style="list-style-type: none"> <li>• Physically seen and endorsed accordingly</li> <li>• Reviewed and revisited any significant developments or changes in the investigation for accuracy and recording</li> <li>• Submitted to the relevant specialists and agencies for support</li> </ul>	Local	<ul style="list-style-type: none"> <li>- Review current process</li> <li>- Update and embed new process</li> <li>- Regular monitoring and evaluation</li> <li>- Ongoing refresher training</li> </ul>	Police	<p>There is an initial risk assessment by attending Patrol officers that is checked by PPU Hub. THRIVE+ is revisited during the lifetime of the investigation. Monthly Supervisor reviews check on the quality of investigation and the referral status.</p>	January 2024	<b>CLOSED</b>
15	Consider revisiting the DVPO policy and updating it with details of ongoing	Local	<ul style="list-style-type: none"> <li>- Review current process</li> <li>- Update where needed</li> </ul>	Police	A Power BI dashboard has been created to enable effective monitoring of	August 2024	<b>CLOSED</b>

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	responsibility of service, where the audit is held, and audited failed attempts to locate		<ul style="list-style-type: none"> <li>- Promote and embed process</li> <li>- Ongoing awareness raising/refresher training</li> <li>- Evaluation/monitoring</li> </ul>		DVPO conditions. The Emerald proactive team or Patrol officers are tasked daily to carry out checks and update the records. The process is overseen by the ACC at the daily force management meeting.		
16	Consider recording the incident as a domestic abuse on Athena	Local	<ul style="list-style-type: none"> <li>- Consider whether to record</li> <li>- If agreed – record on Athena</li> </ul>	Police	No additional DA record has been recorded.	December 2024	<b>CLOSED</b>
17	Bedfordshire Hospitals NHS Foundation Trust to review the process around escalation “did not attend” for Adults	Local	<ul style="list-style-type: none"> <li>- Process to be reviewed</li> <li>- Process updated accordingly</li> <li>- Raise awareness and embed process</li> <li>- Review and evaluate</li> </ul>	Bedfordshire Hospital NHS	LS chased TMD for update on action 26.11.2025	January 2026	<b>ONGOING</b>
18	The CSP to receive assurance from partners concerning their inclusion of the NICE Quality Standards (QS116) in their service policies and procedures. Practitioners should be able to enquire	Local	<ul style="list-style-type: none"> <li>- Partners to share their assurances that NICE standards are in their policies &amp; procedures</li> <li>- Monitor responses</li> <li>- Chase responses and escalate where needed</li> </ul>	All agencies	26.11.2025 – all partners have been contacted regarding their NICE Quality Standards.	January 2026	<b>ONGOING</b>

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	about domestic abuse and respond to disclosures		<ul style="list-style-type: none"> <li>- Regular review and reassurance</li> </ul>					
19	The Domestic Abuse Service and Workforce Development have facilitated public campaigns to identify and respond to domestic abuse. These should be ongoing and should continue to involve male survivors of domestic abuse	Local	<ul style="list-style-type: none"> <li>- Create a programme of public campaigns</li> <li>- Deliver campaigns</li> <li>- Review impact</li> </ul>	CBC	<p>The Workforce Development training, Recognising the Signs and Assessing Risk in DA have both been updated with information about the male survivors. Toolkit has also been updated. All training is reviewed and evaluated on an annual basis.</p>	August 2024	CLOSED	
20	The Domestic Abuse Services and Workforce Development will review the Respect toolkit and incorporate its contents into its domestic abuse training and processes	Local	<ul style="list-style-type: none"> <li>- Review current training provision against Respect toolkit</li> <li>- Identify any gaps</li> <li>- Update training provision where required</li> </ul>	CBC	<p>The Workforce Development training, Recognising the Signs and Assessing Risk in DA have both been updated with information about the counter allegations toolkit.</p> <p>The Counter Allegations Toolkit is recommended</p>	August 2024	CLOSED	

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					as best practice and guidance offered on how to complete if for every query involving counter allegations from frontline services. It is listed as MARAC action for the lead professional in MARAC discussions.  All training is reviewed and evaluated on an annual basis.		
21	The Domestic Abuse Service and Work Force Development to develop a partnership-based strategy for addressing bidirectional abuse	Local	- Add bi-directional abuse to DA Strategy	CBC	Strategy Outcomes are currently being worked through into the Domestic Abuse Action Plan, bidirectional abuse will form part of the Action Plan and the Golden Threads around training and comms.	August 2024	Ongoing
22	The Domestic Abuse Service and Work Force Development is tasked with developing resources to aid	Local	- Review current training/provisions - Identify gaps	CBC	Completed. New resources and revised training will be evaluated	August 2024	CLOSED

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	in the identification of bidirectional abuse and the availability of support for victims/survivors		<ul style="list-style-type: none"> <li>- Resources to be created/implemented</li> <li>- Ongoing evaluation of resources</li> </ul>		<p>and reviewed in 12 months.</p> <p>Themes from all DARDR will remain a priority and key point of evaluation for training moving forward.</p>		
23	The Local Suicide Prevention Strategy should address the correlation between domestic violence and suicide, as well as alcohol and suicide	Local	<ul style="list-style-type: none"> <li>- Suicide prevention strategy to include domestic abuse</li> <li>- Strategy to be shared and agreed by the Local Partnership Board</li> </ul>	Public Health	<p>This has been discussed at the local Carers Board and several actions have been completed. The strategy is currently under review and will be present to the local DARDR Scrutiny Panel in May 2025.</p>	August 2024	<b>CLOSED</b>
24	The Partnership to improve awareness of the suicide timeframe	Local	<ul style="list-style-type: none"> <li>- Programme of awareness raising to be agreed and implemented</li> <li>- Training</li> <li>- Action to be added to Suicide Prevention Strategy</li> <li>- Evaluation</li> </ul>	BDAP/Public Health	<p>BLMK have published a Suicide Prevention Action Plan 2024-28.</p> <p>Timelines have been incorporated into Domestic Abuse Training – DA Responder Workshops</p>	August 2024	<b>CLOSED</b>

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		<ul style="list-style-type: none"><li>- Identification of knowledge gaps</li></ul>		<ul style="list-style-type: none"><li>- DA Level 3 GP Safeguarding Training</li><li>- Pan Bedfordshire DA training for professionals</li></ul> <p>Training has been updated to incorporate signs/symptoms and suicidal ideation.</p> <p>CBCs DA Team sit on the Suicide Prevention Board and have contributed to the Suicide Prevention Plan to include domestic abuse, and have consulted with them to creating a learning package for Health Professionals on suicide and DA.</p> <p>There is a BDAP Domestic Abuse and Health Outcome Subgroup</p>		
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					<p>meeting regularly which is attended by mental health and suicide partners.</p> <p>A 7-minute briefing on DA &amp; Suicide has been produced and shared with professionals across the Local Partnership Board.</p> <p>Posters on DA and mental health and suicide have been created and shared with professionals such as GP surgeries and designated safeguarding leads.</p>			
25	Central Bedfordshire Community Safety Partnership to achieve assurance from partners concerning how they	Local	<ul style="list-style-type: none"><li>- Partners to share their assurances how they support staff</li><li>- Regular review and reassurance</li></ul>	CSP	CSP has contacted all partners to ask how they support staff.	January 2026	<b>ONGOING</b>	

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support staff to understand when consent can be overruled and use the resource provided by the UK Caldicott Guardian						
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