

Domestic Homicide Review into the death of Henrietta - 1 page learning summary

DHRs are a way to improve our local coordinated community response. Looking at the death of a person aged 16+ as a result of DVA, they aim to: understand what happened; identify where agency responses could be improved; learn lessons including how agencies work together; identify how to improve responses; and to prevent something similar happening to others in the future.

What we have learned

- After an assault, the Police completed a Domestic Abuse Stalking and Harassment Risk Identification Checklist (DASH RIC) but the statement taken did not detail Henrietta's relationship with her ex-partner. As there was a previous incident, and given the presence of children, the risk should have been graded as medium rather than standard risk
- Henrietta was a social housing tenant. Her housing officer did not recognise indicators of domestic violence and abuse. As Henrietta was a young mother they could have also thought about early help support
- Henrietta had contact with a range of health services – there were opportunities for increased professional curiosity regarding non-specific symptoms, her partner and other family members and the source of concerns
- Henrietta's ex-partner was seen by mental health professionals, but they did not ask about his risk to others
- Read the full report at www.safeineastsussex.org.uk/Domestic%20Homicide%20Reviews.html

Did you know?

- 1) Domestic abuse isn't just about physical violence – Henrietta experienced coercive and controlling behaviour like not being permitted to see friends, or being contacted by phone or text hundreds of times a day
- 2) Henrietta spoke to her sister about feeling that she would be “better off single” - family and friends can be a vital source of support for someone affected by domestic abuse
- 3) Separation does not necessarily mean someone is safe - the homicide happened three weeks after Henrietta separated from her ex-partner

What works and what you need to do now

- 1) Are you confident in using the [DASH RIC](#) to identify risk?
- 2) Do you know about local support services, including referral pathways?
- 3) Do you have good links with local safeguarding front doors, like the [Single Point of Access](#) for children and families, or [Health and Social Care Connect](#)?
- 4) Would you recognise the risk factors, signs, presenting problems or conditions that can warn (health) professionals that someone may be experiencing abuse?
- 5) If someone presents with a problem (such as drinking, carer issues, stress or depression) but does not refer to their abusive behaviour, would you be confident in asking their abusive behaviour if you had a concern?
- 6) Do you know about referral pathways for people perpetrating abuse, including referral to perpetrator programmes where available or the [Respect PhoneLine](#)?

