Domestic Homicide Review Executive Summary Report

Subject of the report: "Rabia" Month of death: January 2014

INDEPENDENT CHAIR AND AUTHOR OF THE REPORT:

ADRIAN SPANSWICK, RGN, RHV, MA.



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THE REVIEW PROCESS

- 1.1 This summary outlines the process undertaken by the Safer Leicester Partnership's Domestic Homicide Review (DHR) Panel in reviewing the homicide of "Rabia", who was a resident in Leicester.
- 1.2 Pseudonyms have been in used in this review for the victim and perpetrator (and other parties as appropriate) to protect their identities and those of their family members.
- 1.3 The victim: "Rabia". Age at the time of her death: 34 years.
- 1.4 The perpetrator: Ahmed. Age at the time of the time of the offence: 44 years.
- 1.5 The perpetrator's disabled brother: Shahid. Deceased by the time of the murder.
- 1.6 Criminal proceedings were completed in June of 2015 and the perpetrator was found guilty. He was sentenced to life imprisonment for the murder of Rabia, with a requirement to serve a minimum prison term of 22 years.
- 1.7 The DHR process began in January 2014 when local agencies were contacted and asked to confirm whether they had involvement with the victim, the perpetrator and their family members prior to the point of death.
- 1.8 Eight of the thirty agencies contacted, confirmed contact with the victim and/or perpetrator and were asked to secure their files.

2. CONTRIBUTORS TO THE REVIEW

Multiple services within Leicester City Council (Adult Education, Adult Social Care, Housing, Libraries).

Leicestershire Police.

Leicestershire Partnership Trust.

University Hospitals of Leicester NHS Trust.

The Home Office.

Local provider of Black and Minority Ethnic services.

Independent Consultant, with experience in psychiatry and systemic therapy.

3. THE REVIEW PANEL MEMBERSHIP

Name of Panel member	Role/job title	Agency represented
Mina Bhavsar	Head of Adult Safeguarding	Leicester City Clinical Commissioning Group
Stephanie McBurney	Domestic and Sexual Violence Team Manager	Safer Leicester Partnership
Jenny Williams	Partnership and Strategy Manager	Leicester City Council Adult Social Care
Philip Akiens	Supported Residents Care Team Leader	Leicester City Council Adult Social Care
Sarah Statham	Property Lettings Team Manager	Leicester City Council Housing
Sharon Hames	Specialist Nurse	Leicestershire Partnership Trust
Jonny Starbuck	Detective Chief Inspector, Serious Crime Unit	Leicestershire Police
Claire Weddle	Domestic Violence Services Manager	Women's Aid Leicester
Lindsey Bampton	Leicester Safeguarding Adults Board Officer	Leicester Safeguarding Adults Board

3.1 The Panel met a total of five times and were consulted by e-mail on the final draft of the reports in July 2018.

4. TERMS OF REFERENCE FOR THE REVIEW

- 4.1 To review whether practitioners involved with Rabia and Ahmed were knowledgeable about potential indicators of domestic violence and aware of how to act on concerns about a victim or perpetrator.
- 4.2 To establish how professionals and agencies carried out risk assessments, including:
- 4.3 Whether risk management plans were a reasonable response to these assessments.
- 4.4 Whether there were any warning signs of serious risk leading up to the incident in which the victim died that could reasonably have been identified, shared and acted upon by professionals.

- 4.5 To identify whether services involved with Ahmed were aware of the circumstances of Rabia's presence in the home and whether connections were made and information shared between these services in order to establish a full picture of the wider family's vulnerability and risks.
- 4.6 To establish whether agencies involved made routine enquiries about domestic violence when working with these adults, whether relevant procedures were followed and if any opportunities were missed.
- 4.7 To establish whether Ahmed and Rabia's social needs around housing, benefits and caring responsibilities were adequately supported by local agencies.
- 4.8 To establish whether the mental health needs of Ahmed were supported and managed appropriately by local agencies.
- 4.9 To establish if there were any barriers experienced by Ahmed, Rabia or family / friends that prevented them from accessing support, including how their wishes and feelings were ascertained and considered.
- 4.10 To identify whether more could be done locally to raise awareness of services available to victims of domestic abuse.
- 4.11 To consider how issues of diversity and equality were considered in assessing and providing services to Ahmed and Rabia (protected characteristics under the Equality Act 2010 age; disability; race; religion or belief; sex; gender reassignment; pregnancy and maternity; marriage or civil partnership).
- 4.12 To establish how effectively local agencies and professionals worked together.
- 4.13 To establish whether domestic violence policies, protocols and procedures (including risk assessment tools) that were in place during the period of review were applied and whether they were fit for purpose.
- 4.14 To identify any areas of good practice.

SUMMARY CHRONOLOGY

- 5.1 Rabia was born and lived in Pakistan until she came to the UK on a student visa in May 2010. Her family continued to live in Pakistan. After moving to the UK and before her arranged marriage, Rabia lived with family friends in the Midlands. Information obtained by the Panel describes Rabia as a clever well-educated woman who was regarded as polite and hardworking, and able to stand up for herself. She was seen as someone who wanted to make more of her life. She taught herself English and hoped to pursue a career in nursing. She is described as caring, kindly and "never lost her temper".
- 5.2 Ahmed lived in another part of the East Midlands in his parents' home until 2009 when he moved to live in Leicester. He had a brief first marriage in 1991.

Ahmed's mother, Rehana, lived with him until her death in the family home the same month that Ahmed and Rabia first met (February 2011). Ahmed was described as behaving aggressively towards paramedics treating his mother at the time of her death and was asked to leave the room to let the paramedics get on with their work. Later that same month (February) he was seen in a local Emergency Department feeling "suicidal" after his mother's death. General practice records describe this being regarded as a "bereavement reaction".

- 5.3 That same month (February 2011) Rabia first met her future husband, Ahmed. She moved to live with his family shortly before the couple married in a religious ceremony in May 2011. This was after Ahmed's mother died.
- 5.4 After the religious ceremony, Rabia and Ahmed married in a civil/ legal ceremony in June 2011. Around that time Rabia got a job working at a local nursing home and became the primary earner for the family. At that time Ahmed's brother, was living in the family home and being cared for in respect of long-standing mental health and physical health problems. Ahmed had varying levels of caring responsibilities for Shahid over a number of years and assessments of Shahid refer to Ahmed suffering carer stress that impacted on his life.
- 5.5 Between February 2011 and Rabia's death, the Panel learned of five occasions when Shahid mentioned to support staff situations that indicated potential for harm/ abuse but retracted the comments straight away on each occasion. These concerns were documented and discussed by his Intensive Community Support Team (ICST) worker, Community Psychiatric Nurse and Adult Mental Health Social Work Team. They were seen within a complex context involving: repeated retractions by Shahid; the nature of his mental health problems (which included "paranoia"); and discussion with family members. One incident involved Shahid saying that he was frightened because Rabia was crying and he didn't know what was going on at home. On this occasion Shahid was described as very preoccupied with Rabia and scared of going home in case something happened. The ICST worker phoned Ahmed and his response was that he and Rabia had an argument and Shahid had overheard it. When Shahid returned home Rabia opened the door and indicated that she was fine. Other incidents involved allegations that Ahmed had hit Shahid, assaulted him, pushed him, and/ or shouted at him.
- 5.6 Shahid remained with the family until his death from physical illness in December 2012. Ahmed had to cope with the loss of his brother coupled with the impact that had on family finances in respect of benefits and housing.
- 5.7 In 2013 Ahmed was referred from the GP to the IAPT service with anxiety and depression thought to be related to the deaths of his mother and brother and subsequent financial problems. In May 2013 he was seen four times by an

IAPT counsellor and in June he missed two appointments. Also in May-June 2013 he had two interviews with the local authority related to investigations for possible benefits fraud: at these he was accompanied by a student social worker. At the second interview he was described as forgetful and confused when answering simple questions. He was referred to the Fit for Work (FFW) service. The IAPT service assessed Ahmed as at minimal risk of harm to self or others and noted fears that he might lose his partner and house, also that he would like to be referred to a care home as he felt he would be unable to look after himself if his wife abandoned him.

- In July 2013 Rabia and Ahmed attended a fifth IAPT appointment together. Ahmed reported feeling worse and unable to cope. It was thought that he was unable to engage with talking therapy due to high levels of stress and anxiety and the case was closed to IAPT with the suggestion of regular GP appointments to review medication and risk issues. Crisis advice was also given. At that time Ahmed was described as reporting fleeting thoughts of suicide with no plans or intentions to act on the thoughts. A week later he saw his GP and was given a 13 week sickness certificate for anxiety and depression.
- In September 2013 Ahmed telephoned Property Lettings to refuse the offer of a flat, stating that he needed a ground floor flat not a first floor flat as offered. He told them that he suffered from a depressive condition that sometimes affected his concentration.
- 5.10 In early October 2013 Ahmed saw a Mental Health Therapist at the GP surgery and was again referred to FFW. He was assessed as having no thoughts of harm to self or others at that time. Later the same month Leicester City Council Housing service offered Ahmed a ground floor flat, and he accepted the offer. Rabia was then on a spousal visa and had no recourse to public funds, so Ahmed was the sole applicant. She had, however, applied for indefinite leave to remain in October 2013.
- 5.11 In early November 2013 Ahmed was reviewed by a Mental Health Therapist at the GP surgery and reported no improvement. He expressed the fear that his wife would leave him and showed no evidence of harm to self/ others. He saw the Therapist twice more later that month and then missed an appointment. He reported being confused, depressed and anxious and was again referred to FFW.
- 5.12 In early December 2013 Ahmed attended for FFW assessment. The assessment was followed up by five phone calls: four (the last being on 8 January 2014) went unanswered, but the third on 23 December 2013 was answered with the information that he was away for Christmas.
- 5.13 On 16 December 2013 Ahmed did not attend an escorted viewing of the new property and did not contact Housing. Consequently the housing application was suspended.

- 5.14 In mid December 2013 Rabia was granted indefinite leave to remain in the UK.
- 5.15 Towards the end of December 2013 Ahmed's anti-depressant medication was changed following a telephone contact with the surgery.
- 5.16 One week into January 2014 Ahmed saw a Mental Health Therapist at the surgery and was still low in mood. He was assessed as having no thoughts of harm to self/ others.
- 5.17 The following day Rabia was stabbed to death at the family home. Ahmed was seen in the Emergency Department of a local hospital after ingesting antifreeze.
- 5.18 Ahmed was subsequently convicted of Rabia's murder and it emerged in court that the Police had evidence that he had been researching methods of killing his wife and himself for a number of months prior to the murder.

6. KEY ISSUES ARISING FROM THE REVIEW

- 6.1 Despite the best efforts of this review to find out, it must be acknowledged that, to local services (with the exception of the GP) Rabia remains 'anonymous'. Health and social care professionals did engage with Ahmed. In this context Rabia was seen, not as an individual in her own right but as a support to her husband. At no time was Ahmed, even the day before Rabia's death, seen as a risk to her by the professionals involved with him.
- 6.2 The Panel was unaware of what Rabia's life was like after she relocated to the UK and married Ahmed. Efforts to engage neighbours, friends, her employer and family members proved to be unsuccessful.

7. CONCLUSIONS

- 7.1 Rabia showed incredible strength by coming to a foreign country, caring for a brother-in-law with complex needs. Rabia had no rights until she was granted leave to remain in the UK in December 2013. Despite this, Rabia learnt English, studied and found work. It appears she had aspirations for her life. It must be noted that she made no disclosure to professionals or colleagues as far as we are aware from information provided to this review.
- 7.2 This review concludes that agencies had only limited contact with Rabia. There has been no evidence to suggest that agencies were aware of any abuse within the relationship. In addition, there is no evidence to suggest that opportunities were missed, or that policies related to domestic abuse were not followed.

- 7.3 The review has highlighted the importance of continuing the important work of reaching out to individuals who are new to Leicester (and new to the UK) to ensure that they are aware of the support services available to them despite any lack of recourse to public funds.
- 7.4 It is unclear how much the family were aware of any abuse suffered by Rabia. The role that employers, neighbours and friends can play is important. They require confidence to approach the services which could help.
- 7.5 No action was taken by those who were aware of the abuse to attempt to stop the abuse, or to seek outside intervention from agencies in Leicester City.

8. LESSONS TO BE LEARNED

8.1 The review has highlighted the importance of continuing the important work of reaching out to individuals who are new to Leicester (and new to the UK) to ensure that they are aware of the support services available to them despite any lack of recourse to public funds.

9. RECOMMENDATIONS FROM THE REVIEW

- 9.1 Improve awareness of domestic abuse services available to individuals in Leicester City. Specifically:
 - Individuals who have no recourse to public funds
 - Individuals new to Leicester City
 - Individuals also new to the United Kingdom
- 9.2 Improved awareness in Leicester City for friends, community and family of how to refer concerns confidentially if required, and encouragement to do so, where Domestic Abuse is known or suspected.