

Item 10i



MEETING TITLE:
HIGHLAND CHILD PROTECTION COMMITTEE MEETING via MICROSOFT TEAMS

DATE:
11th May 2023
1030 - 1300

PRESENT:

Highland CPC – Mhairi Grant (Chair), Donna Munro (Lead Officer), Fiona Mackintosh (L&D Officer), Mike Mawby (S&T), Mary Cameron (Minute)
Highland Council Social Care – Margaret McIntyre (Head of Service), Katrina Beaton (Principal Officer)
Highland Council Health – Jane Park (Head of Health), Nancy Healy (Lead Nurse – Child Protection)
Highland Council Education – Tina Stones (Safeguarding Lead)
Highland Council Performance and Improvement – Ian Kyle (Head of Integrated Children’s Services), Mark Morrison (Business Intelligence Officer)
The Promise Programme Manager – Carrie McLaughlan
Police Scotland – DCI Calum Smith, DI Reuben Lindsay
NHS Highland – Tracey Gervaise (Head of Operations, Women & Child Health Directorate), Isla Barton (Director of Midwifery),
Highlife Highland – James Martin (Director Corporate Services)
Third Sector – Beverley Hart (Chair of KCS Sub-Group/Aberlour), Sandra Brown (Chief Executive, Inspiring Young Voices)
SCRA – Karen Erskine (Authority Reporter)
Children’s Hearings Scotland – George Hogg (Area Convener)
Care Inspectorate – Caroline Doherty

PAPERS FOR INFORMATION ONLY:

Highland Council Housing – Brian Cameron (Service Lead Housing Policy & Performance)

	AGENDA ITEM	SUMMARY OF DISCUSSION	ACTION/DECISIONS	RESPONSIBLE
1	Welcome & Apologies	Chair opened by requesting members respond to meeting invites. Introductions were made as Caroline Doherty was welcomed as the new Care Inspectorate representative.		Mhairi Grant
2	Minute of Previous Meeting & Matters Arising (minute attached)	Minute of the last meeting (23/02/2023) was checked and agreed. Note regarding future CPC meetings: there are currently no plans for a face-to-face CPC meeting to ensure we have as many members as possible in attendance.		Mhairi Grant
3.	ICR/SCR/Learning Review Updates (in camera)	In Camera		Donna Munro
4.	Quality Assurance (paper attached)	<p>Mark talked committee through the papers. The report is being submitted next week. It has been on-going for some time and follows a themed approach to mirror the new minimum dataset 2 model (MD2). This report contains minimum dataset 1 information with ongoing work for the MD2 and how to retrieve all the required information. It is progressing well and there are no foreseeable problems for when the new model comes in.</p> <p>Work continues to break the data into family teams, the only problem being with CPR de-registrations as they are recorded differently, again being worked on. The report is currently a Highland overview rather than regional (eg. North, Lochaber, south) but this will also be addressed.</p> <p>There is a noticeable decrease in the number of children on the CPR but it is too soon for national comparisons as those figures are yet to be confirmed.</p> <p>0 to 4 years make up 50 % of cases with a decrease in primary age children – perhaps an indication that Highland is beginning to perform well with early intervention. The number of recorded concerns has also decreased and the charts (in attached paper) are split between the main reasons for registration.</p> <p>There is also a decrease in the number of SCRA referrals but Highland are still above average (in the top half of the national picture). Donna pointed out we don't want to lose sight of the smaller categories for registration eg. Risk of Harm to Self as small increases could support development of improvement work to address these</p>		Mark Morrison

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		<p>IRDs will form part of the data for MD2 which will improve the data going forward.</p> <p>George queried the statistical importance of the number changes and hope that the QA group will look at this.</p> <p>Also, we are looking to increase the child's voice in CP meetings</p> <p>SCRA referrals remain high but better than past numbers.</p> <p>Children's Care Justice Bill is imminent and this is likely to impact on data for 16 to 17year olds.</p> <p>Karen advised that Highland has a long history of high SCRA referrals and since the launch of GIRFEC their own QA constantly check those referrals are appropriate. A recent meeting between SCRA, the HUB and Calum and after a revision of criteria it was agreed referrals are appropriate, SCRA are conscious of the pressure on social work and where possible will use verbal reports rather than ask for full child plans. Fully aware that Highland is higher than the national average but want committee to know the process is constantly reviewed and police contact is high. Although Highland have higher figures than national average we do have a 'gold standard' which cannot be faulted.</p>	<p>Margaret proposed a WG QA meet on 23/05/2023 it will be put as an agenda item.</p>	<p>Ian Kyle/Donna Munro</p>
<p>5.</p>	<p>Integrated Children's Service Plan (verbal update)</p>	<p>Ian updated committee.</p> <p>It is led by the Integrated Children's Services Planning Board.</p> <p>Strategic lead assessment (led by Tracey) to determine priorities in children's planning.</p> <p>Group led by Sandra Brown is developing a 'voice & participation' Publication will be late spring with child protection one of its main priorities</p> <p>The Corporate Parenting Board is to be renamed The Promise Board</p> <p>Job adverts placed on My Job Scotland for Locality Co-ordinators.</p> <p>The Plan will take a Life Course approach:</p> <ul style="list-style-type: none"> • Getting Started – birth to 5 years • Growing Up – primary age • Focus on Growing up – adolescent to younger adults <p>Workshop planned to decide priorities under each of the Partnership Groups</p> <p>Final plan draft will be put to the Partnership board at the June meeting</p>		<p>Ian Kyle</p>

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6.	Child Protection Committee Development Day 2 (CPC discussion)	A follow up event to the Improvement Plan session held on 13/01/2023. Aim is to establish how we follow the Life Course approach without too much duplication. More 'round the table' activities planned this time.		
7.	Missing People Proposal (paper attached)	It is known there are multiple cases where young people go missing for short periods of time. We have applied for support from the National Missing People project. It involves ALL missing people and we have joined with APS and D & A groups to proceed together. We will know by the end of June if we are part of it. Calum thanked Donna for pulling this together, The scope and challenges of missing persons is immense (and largely untold). It is good to have coherent movement around such a huge problem.		Donna Munro
8.	Scottish Child Interview Model (SCIM) (Project Plan attached)	Donna talked committee through the work to date and the attached detailed project plan. Immense amount of work involved – it has two strategic boards and an implementation group below them. Highland intends to fully adopt the SCIM (5 day interview) model and every child will be interviewed by a highly specialised team. The requirement is for 4 x social workers and 4 x police officers. We now have 4 police officers identified and 3 social workers and their training starts on 22/05/2023. Working closely with Jillian Ingram and feedback is positive. Need to recruit a co-ordinator, particularly from the social work perspective and HC have agreed funding. As the plan shows we are reaching milestones, it will be a long process but we are moving forward; ultimately this will become our day to day practice. SCIM will also impact on data collection, there will be a lot of data to gather.		Margaret McIntyre/ Donna Munro
9.	Bairn's Hoose Development (verbal update)	Lots of queries asking what the Highland proposal is. There is still no national approach or agenda but it is thought it will come under public protection.		Donna Munro

	AGENDA ITEM	SUMMARY OF DISCUSSION	ACTION/DECISIONS	RESPONSIBLE
		<p>Do we want to be part of the path-finder pilot? If so, do we extend the remit of the SCIM strategic board to cover this? Needs careful thought how we want this initiative to work in Highland. Mhairi advised that although standards have been written for this nothing is concrete however, it is being discussed and movement is expected soon. It is no less important than SCIM and will become part of our day to day working. Geography cannot be used as a barrier. Calum noted that SCIM has highlighted the benefit of agencies working together so bringing them together under one roof is only a good thing but do we have capacity?</p>		
10.	Harmful Sexual Behaviour Action Plan (paper attached)	<p>The attached plan is the draft. The process undertaken with the NSPCC has resulted in this plan and highlights the need for agency co-operation. Any comments, please submit to Donna in the next few weeks. Already started to look at training for this. Highland's challenges are not unique and, although we are the first authority in Scotland to undertake this process, replicate the rest of the UK.</p>	A steering group will be set up.	Donna Munro & Carrie McLaughlan
11.	Learning & Development Office Update (attached)	<p>An on-line training survey to glean workforce feedback will be sent out this month to identify specific training requirements. Appreciated the challenges due to staffing shortages but please distribute as widely as possible to staff, we do need a multi-agency response. The Education backlog has been addressed.</p> <p>Fiona thanked all those speakers and contributors to the CPC conference who helped to make it such a success. Mhairi extended many thanks to Fiona who organised it and pulled the very successful event together and noted that a similar event is planned around the six key themes around the Integrated Children's Service Plan. More details at the next CPC meeting.</p> <p>Margaret asked what the L & D communication plans are and that Fiona is most welcome to attend team meetings but would like to hear how the survey is being promoted. This one will be sent out via Microsoft Forms. Also, an alert will be put in place by the HV training department for all CP workers to complete it.</p>		Fiona Mackintosh

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		Although last years survey had 700 responses, the majority came from education which skews the results.		
12.	Safe & Together (verbal update, paper issued separately)	<p>Mike brought committee up to date. Confirmation of funding to March 2025 has been received and negotiations for the remainder of this year's training are ongoing (proposed dates attached with papers for committee approval). Plans to concentrate on the CORE programmes which should ensure that by the end of 2023 Highland will have at least 120 S & T trained frontline practitioners. There will be one more Supervisor course this year. If there is agreement the next Supervisor course may be opened up to the rest of Scotland, because we pay a fixed fee it will not cost anymore but it means the course may be full. The attendance at OVERVIEW sessions has been disappointing, the best one being the last one run for the NHS – Nancy confirmed it exceeded her expectations and beneficial to hear from other agencies, particularly adult services. The next OVERVIEW session is in June and specifically for Police Scotland. One in September for Panel members and the final one for the year in November are planning to hold in in on day (not split over two afternoons). Later in the year the Training The Trainers (TTT) programme starts which will give Highland much more flexibility on delivery of training and the ability to respond to specific issues around time and resources. Please support the need to release staff for the TTT programme. Margaret asked if there is an Implementation group? Donna noted that Mike has developed a Community of Practice but leadership support is needed. Domestic Abuse is one of the big 5 for the new minimum dataset so this is very relevant. Evaluation of the Programme – Mike would welcome a proper evaluation of the roll out, this can be done in the next few months. Ian agreed and perhaps a small working group (off the QA group) to deal with this.</p>	<p>Margaret and Mike to discuss off table</p> <p>Mhairs confirmed committee support for the proposals</p>	<p>Mike Mawby</p> <p>Margaret McIntyre and Mike Mawby</p> <p>Ian Kyle and Mike Mawby</p>

	AGENDA ITEM	SUMMARY OF DISCUSSION	ACTION/DECISIONS	RESPONSIBLE
		Chair – Mhairi.grant@highland.gov.uk Lead Officer – donna.munro@highland.gov.uk		

Highland Council/NHS Highland Joint Monitoring Committee

Minutes of the Meeting of the Highland Council/NHS Highland Joint Monitoring Committee held in the Council Chamber, Glenurquhart Road, Inverness, on Wednesday, 27 September 2023 at 10.30am.

Present:

Highland Council

Mr David Fraser (Chair)
Mr Derek Brown
Mrs Muriel Cockburn (for Mr R Bremner)
Mr Ron Gunn (for Mr A Christie) (remote)
Ms Fiona Duncan
Mr Ian Kyle
Mr Derek Loudon (remote)
Ms Fiona Malcolm
Mr Brian Porter

NHS Highland

Ms Sarah Compton-Bishop (Vice Chair)
Dr Tim Allison
Ms Louise Bussell
Ms Ann Clark
Ms Heledd Cooper
Ms Pamela Cremin
Ms Pamela Dudek
Mr Gerry O'Brien (remote)

Staff Representatives

Mr John Gibson (Highland Council) (remote)
Ms Elspeth Caithness (NHS Highland) (remote)

Third Sector, Carer and Service User Representatives

Mr Christopher Allan (Scottish Care Highland Branch Chair – Care Homes) (remote)
Mr Campbell Mair (Scottish Care - Care at Home) (remote)
Mr Ian McNamara (Highland Senior Citizen's Network) (remote)
Ms Roisin Connolly, (Connecting Carers) (remote)

Also Present

Mr Calum Munro, Highland Council (remote)

Officers Present

Ms K Lackie, Executive Chief Officer, Performance and Governance
Ms G Grant, Interim Head of Commissioning, NHS Highland
Ms D Mackenzie, Deputy Director of Adult Social Care
Ms F MacBain, Senior Committee Officer, Highland Council

Mr David Fraser in the Chair

1. Calling of the Roll and Apologies for Absence Gairm a' Chlàir agus Leisgeulan

Apologies were submitted on behalf of Mr A Christie (substituted by Mr R Gunn), and Mr R Bremner (substituted by Mrs M Cockburn), and from Ms Sandra Brown (Inspiring Young Voices).

2. Declarations of Interest/Transparency Statement Foillseachaidhean Com-pàirt/ Aithris Fhollaiseachd

There were none.

3. Minutes Geàrr-chunntas

There had been circulated and were **approved** minutes of the meetings of the Joint Monitoring Committee held on 21 June 2023.

4. Chief Officer & Chief Social Work Officer Presentation – Update Summary Aithisg Àrd-Oifigeir & Àrd-Oifigeir Obrach-sòisealta – Geàrr-chunntas às Ùr

A presentation was given by the Chief Officer, NHS Highland and the Executive Chief Officer Health and Social Care, Highland Council, covering the Mental Health and Learning Disabilities Strategy², which was almost complete, and the Whole Family Wellbeing Programme, for which a more detailed report would be provided to the next meeting of the Committee.

The Committee **noted** the presentation.

5. Annual Performance Report – Adult Social Care Aithisg Choileanaidh Bhliadhnaile – Cùram Sòisealta Inbheach

There had been circulated Report No JMC/15/23 by the Chief Officer, NHS Highland.

Following a summary of the report, the following issues were raised:

- concern was expressed that there was insufficient activity data alongside the reported financial information, making it difficult to scrutinise the finances, with examples provided where activity appeared to have declined, but costs increased. Some reasons for increased costs were touched on, for example the use of agency staff to cover workforce gaps. Current financial reporting procedures did not facilitate the capture of actual and planned service delivery activity alongside financial reporting, but this would be given further consideration; and
- assurance was sought and provided that a commissioning plan would underpin the Strategic Plan, along with workforce and financial plans.

The Committee **approved** the report and **agreed** to consider the presentation of data for future reports.

6. Integrated Children’s Services Plan Report Plana Sheirbheisean Chloinne Amalaichte

There had been circulated Report No JMC/16/23 by the Chair of the Integrated Children’s Services Planning Board.

Following a summary of the report, the following issues were raised:

- further information was sought on the community scaffolding approach, and how equitable services were being assured. Information was provided on the community-based, whole family wellbeing programme, the role of the family co-ordinators, and the recognition that each community had different needs;
- with reference to the performance information in several reports, concern was expressed about the support being offered to children and families in some

areas, with particular reference to AHP services, the Neurodevelopmental Assessment Service, and Childrens and Adolescent Mental Health Services, and whether the totality of the implications of the challenges should be considered further. It was suggested that in addition to the report due to be submitted to the Highland Health and Social Care Committee (HHSCC), an additional paper could be considered looking at the cumulative impacts and the extent to which improvement actions were coordinated. This report could also be presented to the JMC. It was also suggested this could be a theme for a possible future development session;

- information was sought on whether data on school non-attenders was being captured, and attention was drawn to work being undertaken to include Education representation in the Joint Officers Group;
- reference was made to the role of the Community Planning Partnership, and the importance of having a clear picture of all inputs into the system; and
- the importance of monitoring and reviewing outcomes was highlighted, with further attention to where these were reported, to ensure nothing was missed.

The Committee:

- i. **noted** the work undertaken by the Integrated Children's Service Plan Board in producing the Highland Integrated Children's Services Plan 2023 – 2026;
- ii. **noted** the plan which has been approved by the Community Planning Partnership Board; and
- iii. **agreed** to consider the need for a development session on support being offered to children and families, following the submission to the next Committee of a report on the Whole Family Approach.

7. 11.30am Highland Health & Social Care Partnership Finance Reports Aithisgean Ionmhais Com-pàirteachas Slàinte & Cùraim Shòisealta na Gàidhealtachd

a. Highland Health & Social Care Partnership Finance Report Aithisg Ionmhais Com-pàirteachas Slàinte & Cùraim Shòisealta na Gàidhealtachd

There had been circulated Report No JMC/17/23 by the Director of Finance, NHS Highland.

Following a summary of the report, the following issues were raised:

- the pressures across the partnership were challenging, with one of the biggest risks being failure to delivery savings measures;
- the triangular of financial data with activity data was being looked at but due to the complexities of achieving this, the benefits had to be weighed against the resources required. The level of detail required for this committee was also considered; and
- appendices 1 and 2 of the report should have been appended to the report for Item 7b.

The Committee **noted** the financial position at the end of Month 3 2023/2024 and **agreed** to give further consideration to the presentation of financial data alongside activity data.

b. Highland Council Finance Report
Aithisg Ionmhais Chomhairle na Gàidhealtachd

There had been circulated Report No JMC/18/23 by the Head of Corporate Finance, Highland Council.

Following a summary of the report and the financial situation facing the Council, the Committee **noted**:

- i. the report and financial forecast for 2023/24;
- ii. the update provided regarding savings delivery for Integrated Children's Services; and
- iii. the update provided regarding outlook for 2024/25 and beyond.

8. Quality and Performance Challenges and Risks in the Delivery of Care in Highland Report
Aithisg mu Dhùbhlain Càileachd is Coileanadh

There had been circulated Report No JMC/19/23 by the Executive Chief Officer Health and Social Care, Highland Council and the Chief Officer, NHS Highland.

Following a summary of the report, the following issues were raised:

- the importance of timelines and working at pace were emphasised;
- it was important all involved with the Neurodevelopmental Assessment Service, and the Education Service, were fully engaged given the level of risk;
- the refocus on quality and performance, and the use of appropriate language, was welcomed;
- GIRFEC should underpin all actions, and all practitioners should receive appropriate advice and guidance. How to navigate increased costs and reducing budgets were key challenges for the Committee;
- it was important that priorities were based on need, and properly evidenced, and attention was drawn to the Strategic Plan which would be a live document, giving vision and direction based on the needs of communities; and
- assurance was sought and provided that the risk register would be revisited once the Adult Strategic Plan was completed.

The Committee **noted**:

- i. the update and confirm that the risks identified should be included in a Partnership risk register; and
- ii. the recommendations as detailed in the report; and
- iii. agreed to bring back the risk register once the Adult Strategic Plan had been completed.

9. Performance Management Assurance and Audit Update Report
Aithisg Ùrachaidh mu Bharantas is Sgrùdadh Stiùireadh Coileanadh

There had been circulated Report No JMC/20/23 by the Executive Chief Officer Health and Social Care, Highland Council and the Interim Chief Officer, NHS Highland.

Following a summary of the report, the following issues were raised:

- the report presented a promising start, although more work, including with external partners, and a stronger shared understanding, was required;
- the move toward quality indicators, the focus on outcomes, and the principles of self-evaluation, were welcomed, noting the approach was not the classic type of audit. It would be interesting to understand how other partnerships had approached this type of work, and the importance of involving service users in the evaluation process was highlighted;
- the risks should also be considered as part of the scrutiny process; and
- the value of independent consideration of actions was referenced, as was the importance of timelines.

The Committee **noted**:

- i. the update; and
- ii. the recommendations as noted within the report.

10. Strategic Plan and Strategic Planning Group Update Report Cunntas às Ùr mu Phlana Ro-innleachdail agus Buidheann Planaidh Ro-innleachdail

There had been circulated Report No JMC/21/23 by the Executive Chief Officer Health and Social Care, Highland Council, and the Chief Officer, NHS Highland

Following a summary of the report, the following issues were considered:

- community engagement was critical;
- the plan would facilitate the articulation of the shared vision, but concern was expressed about how to tackle possible disconnect in relation to detail on the risks and financial challenges. The importance of a commissioning plan was highlighted, as was the need for timelines to illustrate the milestones to the committee, and to front line staff, and help to move at pace;
- reference was made to engagement and expectations in relation to strategic redesign projects;
- as this was uncharted territory, some elements of experimental change were anticipated;
- it was important there was no disconnect with external partners, and attention was drawn to the importance of language being inclusive, and not only referring to the Council and the NHS. This would be taken back to the Strategic Planning Group;
- the scale of the financial and geographic challenges were significant and there was a risk of a disconnect between the strategic vision and the frontline reality, and this should be taken into consideration in the final iteration of the plan. It was important to incorporate people's voices into all plans, at local and at system level, and to build trust to empower communities; and
- the loss of a human voice for chronic but relatively insignificant medical issues was a concern, and something that leaders should take into consideration, as it could impact positively on health, especially of older people. The need for a community based, 'whole health and social care' system was emphasised.

The Committee:

- i. **noted** the current status of the Strategic Plan and the forward intention and timescales for completion and approval of this plan;
- ii. **agreed** to establish clear timescales for the delivery of the plan; and
- iii. **agreed** to further consider, outwith the meeting, the use of language to ensure inclusivity of all involved.

The meeting ended at 12.25pm



Highland VAW Partnership Meeting

10 August 2023

10am to 12 Noon (MS TEAMS)

MINUTES

PRESENT: Peter MacKenzie - **Chair**
Cathy Steer, Health Improvement, NHSH - **Depute Chair**
Catherine Russell, VAWP Team
Lisa Buchanan, Inverness Women's Aid
Maria Cano, CJSW, The Highland Council
Hollie Drever, UHI
Lorraine Revitt, Lochaber Womens Aid
Mike Mawby, Safe & Together, The Highland Council
Myra Ross, HVAWP Team
Isla Barton, Midwifery, NHSH
Mhairi MacDonald, Shores Forensic Facilities, NHSH
James Martin, Highlife Highland
Iain Logan, COPFS
Iver Forsyth, Housing, Highland Council
Mhairi MacDonald, SARC, NHSH

APOLOGIES:

Andrew Garroway, Highland Drug and Alcohol Partnership
Claire Marcello, Ross-shire Women's Aid
Debbie Stewart, Highland Drug and Alcohol Partnership
Donna Munro, CPC, Highland Council
DI Peter Dingwall, Police Scotland
Elaine Lyall, VAWP Team
Emma Fraser, CASWA
Karen Peteranna, VAWP Team
Molly Gilbert, Adult Protection
Romy Rehfeld, RASASH

		ACTION
1	Welcome and Apologies	
2	<p>Minutes of previous meeting</p> <p>a) Agreed with no changes b) Review of Action Tracker – Noted with the following additional updates: 8/22 – NHO’s to be discussed between PM and IL outside of the quarterly meetings to progress. Move to completed actions as being progressed. 8/23 – MR to set up the working group to report into the Service Provision subgroup via CR to progress research into the Women’s Wellbeing Centre possibility in Highlands. To move to completed actions as now being progressed.</p> <p>It was also agreed that the agenda and papers coming out with the New MS Teams meeting invitation worked well so this method of circulating papers would continue.</p> <p>CS requested that the HVAWP Priority Action Plan is discussed, at the November Development Day, to inform priorities and action going forward. This would also incorporate new policies and guidance that have been produced since it was first put together. CS confirmed she would approach the NHS Health Intelligence Team to ask them if they could provide support to explore and analyse relevant data to inform planning. CR to speak to IS who are facilitating the event.</p>	<p>CS</p> <p>CR</p>
3	<p>Highland VAWP Priority Action Plan 21-24</p> <p>Updates were noted and no changes were made.</p>	
4	<p>Financial</p> <p>a) Financial Expenditure against Income – Noted with no questions raised b) Final confirmed budget for 23/24 - Noted</p>	

5 Communications & Media

a) HVAWP Communications Strategy

This is an agreed priority action and we are waiting for COG to provide their Communications Strategy to ensure ours aligns with this. Other items are being progressed through subgroups and working groups which will feed into this Communications Strategy.

b) HVAWP Social Media/Website Proposal

The Chair confirmed that several companies were approached but only one, Premier Digital, replied. The VAWP support team had met with them. A proposed service plan was circulated from Premier Digital along with a background report from the HVAWP chair.

MC suggested that there were some additional points we needed to clarify with Premier Digital and it was agreed that she would email CR to pass to Premier Digital.

It was agreed that we would, in principle, enter into a contract with Premier Digital once MC and the chair were happy with the response to these questions.

The agreed service provision from Premier Digital, as per the report, would be to provide:

Website design and development (page 4)	£2850
Social media platforms (page 4)	£150 each
Basic monthly maintenance (page 5)	£600 pa
Advance monthly social media support (page 5)	£2,400 pa

Total ring fenced budget from the investment plan:

Social Media/PT Communications Expert	£17,500
VAWP Website Set up	£6,000

Generally it was felt that VAWP must have a well-run and active website that was fit for purpose along with appropriate social media presence. The available ring fenced monies would more than adequately cover the set up costs and first years advanced support package.

It was agreed a review would take place at 6 months and at 1 year with a report being presented to the HVAWP.

MC & PM

	<p>This 1 year project would be supported by an agreed increase in the training officer's hours from 15 to 17 per week for 1 year to provide Premier Digital with materials for the website and social media. It was requested that this should be with HR involvement to ensure required NHS processes were put in place.</p> <p>The £23,500 ring fenced monies will remain ring fenced to allow for continuance of the project, pending review input, further than the envisaged 1 year commitment.</p> <p>CR to email the partnership with the outcome of the questions check and start date of contact etc.</p> <p><i>Post Minute Note:–</i></p> <ul style="list-style-type: none"> • <i>Financial approval has been agreed via the NHS accountant.</i> • <i>Advice has been sought by HR and this is being followed to allow for the 1 year increased hours of the training officer</i> • <i>The start date for the increase in the training officer's hours will start in line with the Premier Digital service for VAWP.</i> • <i>An email has been sent to Premier Digital confirming agreed progress to date and asking for responses to the questions sent through from MC.</i> 	CR
6	<p>HVAWP Financial Governance Document</p> <p>The progress made so far was noted.</p> <p>CR was asked to carry on pulling together the background information as best as possible. Can everyone please email CR any additional information, items to be included? This is already an ongoing priority within the HVAWP Priority Action Plan.</p>	ALL
7	<p>Sub Group Updates</p> <p>To note full subgroup reports circulated with the agenda, which should have been read before the meeting. Chair/chairs to raise any matters requiring HVAWP input and answer any matters arising. (5 mins per report):</p> <p>a) S&T Joint project with CPC</p> <ul style="list-style-type: none"> • The HVAWP chair requested could one summary document be presented in future for VAWP. MM confirmed that as the steering group (the operational side of the project) is up and running this will be actioned. • The 3 last S&T Overview events have been cancelled due to 	

lack of bookings.

- The UK Independent Commission for Domestic Violence is meeting with people in connection with the Highland S&T project. They are here in September for a 2 day visit speaking to key personnel.

b) Addressing Perpetrators Subgroup

- The meeting agreed VAWP should support the setting up of a Highland White Ribbon steering group on the basis that White Ribbon would be running these and we would provide local input.
- It was agreed PD, the Addressing Perpetrator subgroup chair, would be the VAWP representative on this group although it is envisaged other members may also be active in the group.
- PD to contact IL to progress one of the group's priorities which was "to work with the PF, Sheriff and Criminal Justice staff to support their knowledge of VAWG".

c) Learning, Development & Training Subgroup

- No further questions or matters arising.

d) MARAC Subgroup

- Noted the requirement for all MARAC's to respond to the National MARAC survey within 6 weeks although an extension to 28 August had been secured due to school holidays staffing cover.
- A report on the Oasis database "Live Referral" process to be submitted to HVAWP with no further comments at this stage.
- It was noted that the subgroup would prepare a report to HVAWP for the previously requested review of the current MARAC chairs rota system. It was agreed the report could take any format the subgroup felt would be suitable and information from the Chairs Development Day on 22 September would form the basis of this report.
- The following further comments on the rota were also raised:
 - i. CS requested that KP seek information on who had left the organisations rota from the previous one, who was trained, processes for running the lead's role. It was confirmed that KP provided agency leads/chairs on the rota with:
 - Support meetings with any chairs who asked.
 - Information provided prior to and during each MARAC meeting for the chairs.
 - Monthly emails to all MARAC reps, chairs, MARAC leads and VAWP members detailing access to training.
 - This year additional local training had been put in place

	<p>for Chairs by the MARAC subgroup. This was further to the HVAWP funded original training for all chairs and leads in February 2022 prior to the new rota arrangement.</p> <ul style="list-style-type: none"> • The NHSH requested support emails to leads reminding them 2 months in advance of pending rotas, had also now been put in place, to sit alongside agency leads' own diary reminders. <p>ii. MC as THC MARAC lead for the chairs rota, confirmed that their next rota would be January 2024. She confirmed the current level of admin support was very good and she wouldn't expect any more. She acknowledged she felt her role as Lead for her agency was to manage her agencies responsibilities for the rota, organising the rota, dealing with absences, emerging issues and training bookings. This was what was originally agreed.</p> <p>iii. CR confirmed there was no capacity in the VAWP team to increase the level of support to the agency leads. Also information on training isn't available from Safelives as this is GDPR protected.</p> <p>e) Service Provision Subgroup</p> <ul style="list-style-type: none"> • The subgroup chair provided an additional update on the WA funding from the LA. The LA had confirmed that the current review of WA funding processes would not be completed by the end September 2023 deadline that they had set. The WA groups are waiting for a Highland Council letter confirming the next 6 months of payment processes from October 23 to April 24. Review meetings have been set up to run until Christmas and the Highland Council have invited into the meetings Aberdeen City Council Procurement to help with all the SLA review processes. The HVAWP asked to be kept updated on progress. • The partners and representatives of agencies are asked to submit to the VAWP support team by email any information they hold on routine enquiry processes within their organisations to help this subgroup to look at where gaps may be and provide training/support to agencies. LR asked to draft an email for CR to send around the partnership. 	<p>WA Managers</p> <p>ALL</p> <p>LR</p>
<p>8</p>	<p>HPP COG Report</p> <p>It was agreed the report should be submitted if no other changes were received to CR by the end of Monday. The deadline for submission was Tuesday 15th August.</p>	

	<p>CS asked if the future reports could become more outcome focused with statistics of what HVAWP had achieved. PM reported that the current report provided narrative outcomes and some statistical information against all HVAWP priority aims on a quarterly basis. It also highlighted other emerging issues. All the public protection committee reports presented to COG were different and COG had yet to decide what new format they wished the reports to take. It was confirmed HVAWP were using the correct format previously given. It had also been recognised by COG that they did need summary details of issues to ensure they had the information required to enable decision making, input and support to the public protection committees.</p> <p>PM to ask again for feedback on the contents of the report to ensure it meets current COG expectations.</p>	PM
9	<p>Risk Register</p> <p>Agreed and will be submitted to COG with the August report.</p>	
10	<p>Any other Competent Business</p> <p>a. Upcoming Events: HVAWP Highland & Island MARAC Chairs Development Day – 22 September 2023 HVAWP Development Day – 17 November 2023</p> <p>b. New HVAWP Training Plan - to be published via TURAS and circulated via network</p> <p>c. Public Health Scotland Paper PH Scotland was asking for comments on their report circulated to the meeting. VAWP members are asked to send to the VAWP mailbox any comments which would be passed to CS to draft a response for VAWP approval. This will be sent round and agreed outside of VAWP meetings. EL to collate responses received and sent to CS. Deadline for input end August.</p> <p>d. Scottish Government Multi Agency Model on Domestic Homicide Anyone interested in being on this working group to let CR know who will complete the online survey and arrange the required meeting. Details to be circulated in due course.</p>	ALL CS EL CR

11	Dates of 2023 Meetings: Wednesday 8 November, 10am MS Teams Invitations/details of venue, agenda and papers will be sent out prior to each meeting. Diary dates of meetings will be sent out for acceptance as soon as possible. <i>NOTE – Dates for 2024 will be published once HPPCOG dates have been set</i>	
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