

# Agenda

West Dunbartonshire  
Health & Social Care Partnership

## West Dunbartonshire Health & Social Care Partnership Board

**Date:** Wednesday, 25 March 2020

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**Time:** 14:00

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**Venue:** Council Chamber, Clydebank Town Hall, Clydebank

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**Contact:** Craig Stewart, Committee Officer  
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Dear Member

Please attend a meeting of the **West Dunbartonshire Health & Social Care Partnership Board** as detailed above.

The business is shown on the attached agenda.

Yours faithfully

**BETH CULSHAW**

Chief Officer of the Health  
& Social Care Partnership

**Distribution:-**

**Voting Members**

Allan Macleod (Chair)  
Denis Agnew  
Marie McNair  
John Mooney  
Rona Sweeney  
Audrey Thompson

**Non-Voting Members**

Barbara Barnes  
Beth Culshaw  
Jonathan Hinds  
Chris Jones  
John Kerr  
Helen Little  
Diana McCrone  
Anne MacDougall  
Kim McNab  
Peter O'Neill  
Selina Ross  
Julie Slavin  
Val Tierney

Senior Management Team – Health & Social Care Partnership

Date of issue: 12 March 2020

**WEST DUNBARTONSHIRE HEALTH & SOCIAL CARE PARTNERSHIP BOARD**

**WEDNESDAY, 25 MARCH 2020**

**AGENDA**

**1 APOLOGIES**

**2 DECLARATIONS OF INTEREST**

Members are invited to declare if they have an interest in any of the undernoted items of business on this agenda and, if so, state the reasons for such declarations.

**3 MINUTES OF PREVIOUS MEETING 5 – 12**

Submit, for approval as a correct record the Minutes of Meeting of the Health & Social Care Partnership Board held on 19 February 2020.

**4 VERBAL UPDATE FROM CHIEF OFFICER**

The Chief Officer will provide a verbal update on recent business of the Health & Social Care Partnership.

**5 INSPECTION OF JUSTICE SOCIAL WORK SERVICES:  
UPDATE ON THE MANAGEMENT OF HIGH RISK OFFENDERS 13 – 20**

Submit report by the Head of Children's Health, Care & Criminal Justice/Chief Social Work Officer providing an update on the activity surrounding the risk assessment and risk management of High Risk Offenders subject to statutory supervision currently residing in West Dunbartonshire.

**6 2019/20 FINANCIAL PERFORMANCE UPDATE,  
2020/21 BUDGET SETTING AND MEDIUM TERM  
FINANCIAL PLAN To Follow**

Submit report by the Chief Financial Officer on the above.



## WEST DUNBARTONSHIRE HEALTH & SOCIAL CARE PARTNERSHIP BOARD

At a Meeting of the West Dunbartonshire Health & Social Care Partnership Board held in the Council Chamber, Clydebank Town Hall, Clydebank on Wednesday, 19 February 2020 at 2.01 p.m.

**Present:** Bailie Denis Agnew and Councillors Marie McNair and John Mooney, West Dunbartonshire Council; Allan MacLeod, Rona Sweeney and Audrey Thompson, NHS Greater Glasgow and Clyde Health Board.

**Non-Voting Members:** Beth Culshaw, Chief Officer; Barbara Barnes, Co-Chair of the WD HSCP Public Engagement Network for the Alexandria & Dumbarton area; Jamie Dockery, Senior Housing Development Officer; Jonathan Hinds, Head of Children's Health, Care & Criminal Justice/Chief Social Work Officer; Helen Little, MSK Physiotherapy Service Manager; Diana McCrone, NHS Staff Side Co-Chair of Joint Staff Forum; Anne MacDougall, Co-Chair of WD HSCP Public Engagement Network for the Clydebank area; Peter O'Neill, WDC Staff Side Co-Chair of Joint Staff Forum; Selina Ross, Chief Officer – WD CVS; Julie Slavin, Chief Financial Officer and Val Tierney, Chief Nurse.

**Attending:** Sylvia Chatfield, Head of Mental Health, Learning Disability & Addictions; Fraser Downie, Integrated Operations Manager Mental Health (Lomond & Helensburgh); Jo Gibson, Head of Health & Community Care; Jacqui McGinn, Health Improvement & Inequalities Manager; Nigel Ettles, Principal Solicitor and Gabriella Gonda, Committee Officer.

**Also Attending:** Rhoda Macleod, Head of Adult Services (Sexual Health, Prison & Police Custody Health Care); Dr Pauline McGough, Clinical Director (Sandyford); Jennifer Schofield, Operations Manager (Sandyford) and Marie Rooney, SDS Lead Officer.

**Apologies:** Apologies for absence were intimated on behalf of John Kerr, Housing Development and Homelessness Manager and Kim McNab, Service Manager, Carers of West Dunbartonshire.

**Mr Allan MacLeod in the Chair**

## **DECLARATIONS OF INTEREST**

It was noted that there were no declarations of interest in any of the items of business on the agenda.

## **MINUTES OF PREVIOUS MEETING**

The Minutes of Meeting of the Health & Social Care Partnership Board held on 13 November 2019 were submitted and approved as a correct record subject to reports being brought back to the next meeting of the HSCP Board on Dementia Strategy and an update on how management is dealing with possible industrial action by employees in the Children and Families service, recruitment of additional staff, monitoring activity, future meetings planned with staff and the concern expressed by WDC staff side Co-Chair of Joint Staff Forum over lack of progress.

## **VERBAL UPDATE FROM CHIEF OFFICER**

The Chief Officer provided a verbal update on recent business of the Health & Social Care Partnership and the position was noted in relation to: -

- Update on the Corona virus and how services are delivered to make sure they are prepared for any local cases and the intention to keep this issue on the agenda as a standing item;
- Update on the new Health Centre in Queens Quay, Clydebank and the lunch time informal session held at the site of the new Care Home;
- Update on changes in the management team;
- Update on how management is dealing with possible industrial action by employees in the Children and Families service, recruitment of additional staff and the significant progress in filling of vacancies, monitoring activity and future meetings planned with staff and the concern expressed by WDC staff side Co-Chair of Joint Staff Forum over lack of progress and that a report would be presented at the next meeting of the HSCP Board on this.
- How best the Partnership can support the development of a Dementia, Alzheimer and Autism Strategy and that a report would be presented at the next meeting of the HSCP Board on this.

## **FINANCIAL PERFORMANCE REPORT AS AT PERIOD 9 (31 DECEMBER 2019)**

A report was submitted by the Chief Financial Officer providing an update on the financial performance as at period 9 to 31 December 2019, and a projected outturn position to 31 March 2020.

After discussion and having heard the Chief Financial Officer in further explanation of the report and in answer to Members' questions, the Board agreed:-

- (1) to note the updated position in relation to budget movements on the 2019/20 allocation by WDC and NHSGGC and direction back to our partners to deliver services to meet the strategic priorities of the HSCP Board;
- (2) to approve budget virements in excess of £0.050m;
- (3) to note that the revenue position currently shows a projected year to date and annual favourable (under spend) position of £0.403m (0.25%) and £0.520m (0.32%) respectively;
- (4) to note the updated recovery plan as required by the integration scheme to address the projected overspend;
- (5) to note the update on monitoring of savings agreed for 2019/20;
- (6) to note the analysis of the reserve balances;
- (7) to note the update on the capital position and the projected timelines for completion;
- (8) to note the update on procurement activity;
- (9) to note that the progress on the 2020/21 budget setting process is the subject of separate report being considered later on the agenda for today's meeting; and
- (10) to note that a report would be brought back to the next meeting of the HSCP Board on fostering and a planned fostering campaign.

### **2020/21 ANNUAL BUDGET SETTING UPDATE**

A report was submitted by the Chief Financial Officer providing the latest position on the 2020/21 budget setting exercise.

After discussion and having heard the Chief Financial Officer in further explanation of the report and in answer to Members' questions, the Committee agreed to note the 2020/21 budget update in relation to our partner bodies' indicative budget offers.

### **COMMISSIONING AND MARKET FACILITATION PLAN 2019 – 2022**

A report was submitted by the Interim Head of Strategy, Planning and Health Improvement providing an update on HSCP Partnership Board Commissioning and Market Facilitation Plan.

After discussion and having heard the Head of Children's Health, Care & Criminal Justice/Chief Social Work Officer in further explanation of the report and in answer to Members' questions, the Board agreed to note the progress made against the HSCP

Commissioning and Market Facilitation Plan 2019 – 2022 and recommended an update report be presented to the Board in May 2020.

### **VARIATION IN ORDER OF BUSINESS**

After hearing the Chair, Allan MacLeod, the Committee agreed to vary the order of business as hereinafter minuted.

### **TRANSFORMATIONAL CHANGE PROGRAMME SEXUAL HEALTH SERVICES IMPLEMENTATION PLAN**

A report was submitted by the Head of Adult Services (Sexual Health, Prison and Police Custody Health Care) reporting on the service changes and implications for West Dunbartonshire of the above Transformational Change Programme.

A further explanation of the report was then given by the Head of Adult Services (Sexual Health, Prison and Police Custody Health Care) and the Board agreed:-

- (1) to note the proposed timescale for implementation of the service changes as part of the new service model;
- (2) to note the new service model that is being proposed which would provide services in a tiered way; and
- (3) to note how the service would improve access to routine sexual and reproductive health care and would provide clear pathways to specialist and consultant support as required.

Following questions from Members, the Chair thanked Ms MacLeod, Ms Schofield and Ms McGough for their informative explanation of the report and information provided to Members.

### **ADJOURNMENT**

Having heard the Chair, Mr MacLeod, it was agreed to adjourn for a short period. The Committee reconvened at 4.04 p.m. with all Members listed in the sederunt in attendance.

### **THEMATIC REVIEW OF SELF-DIRECTED SUPPORT IN SCOTLAND; WEST DUNBARTONSHIRE LOCAL PARTNERSHIP REPORT**

A report was submitted by the SDS Lead Officer updating on progress relating to the Improvement Plan which was agreed following a Care Inspectorate Thematic Review of self-directed support in West Dunbartonshire.

After discussion and having heard the SDS Lead Officer in further explanation of the report and in answer to Members' questions, the Board agreed:-

- (1) to note the content of the report;
- (2) to note the Improvement Plan which had been presented to the Care Inspectorate;
- (3) to have regular reporting on the local response to the recommendations within the report; and
- (4) to note that a report would be brought back to the next meeting of the HSCP Audit and Performance Committee on the progress relating to the Improvement Plan, its impact and how can progress be measured.

### **STRATEGIC RISK REGISTER**

A report was submitted by the Chief Financial Officer presenting the updated Strategic Risk Register.

After discussion and having heard the Chief Financial Officer in further explanation of the report and in answer to Members' questions, the Committee agreed:-

- (1) to approve the updated mid-year review of the Strategic Risk Register as attached to the report;
- (2) to consider the proposed changes to the format of the risk register;
- (3) that two of the strategic risks – Workforce Sustainability and Waiting Times – would be presented in greater detail to the next Audit and Performance Committee; and
- (4) to note that a future meeting would be presented with a review on the HSCP Board's current Risk Management Strategy and Policy as required when the initial document was approved in August 2015.

Note: Marie Rooney, SDS Lead Officer left the meeting during discussion on the above item.

### **'OUR TURN' INITIATIVE**

A report was submitted by the Head of Children's Health, Care & Criminal Justice/Chief Social Work Officer presenting information pertaining to a motion at West Dunbartonshire Council at its meeting on 30 October 2019.

Having heard the Head of Children's Health, Care & Criminal Justice/Chief Social Work Officer in further explanation of the report and in answer to Members' questions, the Board agreed:-

- (1) to note the motion which was agreed by West Dunbartonshire Council; and
- (2) to note the potential implications for HSCP services in the context of ongoing work to support refugee children, young people and families in West Dunbartonshire.

Note: Councillor Marie McNair left the meeting during discussion on the above item.

### **PUBLIC PERFORMANCE REPORT JULY TO SEPTEMBER 2019**

A report was submitted by the Interim Head of Strategy, Planning and Health Improvement presenting the Health & Social Care Partnership's Public Performance Report for the second quarter of 2019/20 (July to September 2019).

After discussion and having heard the Chief Officer, the Head of Children's Health, Care & Criminal Justice/Chief Social Work Officer, the Head of Health & Community Care, the MSK Physiotherapy Service Manager and the Integrated Operations Manager Mental Health (Lomond & Helensburgh) in further explanation of the report and in answer to Members' questions, the Board approved the Partnership Public Performance Report for July to September 2019 for publication.

Note: Selina Ross, Chief Officer – WD CVS and Bailie Denis Agnew left the meeting during discussion on the above item.

### **PARTICIPATION AND ENGAGEMENT STRATEGY 2020 – 2023**

A report was submitted by the Interim Head of Strategy, Planning and Health Improvement presenting the draft Health & Social Care Partnership Participation and Engagement Strategy 2020 – 2023.

After discussion and having heard the Chief Nurse in further explanation of the report, the Board agreed to endorse the Participation and Engagement Strategy 2020 – 2023.

### **INSPECTION OF JUSTICE SOCIAL WORK SERVICES: UPDATE ON ACTIONS**

A report was submitted by the Head of Children's Health, Care & Criminal Justice/Chief Social Work Officer presenting a further update on improvement activity arising from the Care Inspectorate report 'Inspection of Justice Social Work Services in West Dunbartonshire Council', published on 6 August 2019.

After discussion and having heard the Head of Children's Health, Care & Criminal Justice/Chief Social Work Officer in further explanation of the report and in answer to Members' questions, the Board agreed:-

- (1) to note the latest update on improvement activity in the context of further work being taken forward which seeks to address areas for improvement as reflected in the key findings of the inspection report; and
- (2) to note that a report would be brought back to the next meeting of the HSCP Board on the actions for improvement on high risk offender cases and that a further update report would be brought back to the May meeting of the HSCP Board on this.

Note: Helen Little, MSK Physiotherapy Service Manager left the meeting during discussion on the above item.

### **REVIEW OF INTEGRATION SCHEME**

A report was submitted by the Interim Head of Strategy, Planning and Health Improvement providing an update on the work ongoing in West Dunbartonshire to review and update the Integration Schemes between West Dunbartonshire Council and the Health Board.

After discussion and having heard the Chief Officer in further explanation of the report and in answer to Members' questions, the Board agreed to note the activity to progress a review of the Integration Schemes for HSCPs and consider when revised Schemes should be presented to the West Dunbartonshire Council and NHS Greater Glasgow and Clyde Health Board.

### **MEETING DATES OF THE HEALTH AND SOCIAL CARE PARTNERSHIP BOARD**

A report was submitted by the Chief Financial Officer presenting a request to add two further meeting dates to the 2020/21 schedule.

After discussion and having heard the Chair in further explanation of the report, the Board agreed:-

- (1) to approve the request for an additional meeting date of the HSCP Board on 25 March 2020 to comply with the previous decision to increase frequency to six per year; and
- (2) to approve the request for an additional special meeting of the HSCP Board on 23 September 2020, immediately after a meeting of the Audit and Performance Committee to recommend the "sign off" of the 2019/20 audited annual accounts.

### **MINUTES OF MEETINGS FOR NOTING**

The undernoted Minutes of Meetings were submitted and noted as follows:-

- (1) Minutes of Meeting of the Joint Staff Forum held on 16 October 2019;

- (2) Minutes of Meeting of the Clinical and Care Governance Forum held on 15 January 2020; and
- (3) Minutes of Meeting of the HSCP Health & Safety Committee held on 22 October 2019;

The meeting closed at 5.40 p.m.

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**WEST DUNBARTONSHIRE HEALTH AND SOCIAL CARE PARTNERSHIP  
BOARD**

**25 March 2020**

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**Subject: Inspection of Justice Social Work Services: Update on the Management of High Risk Offenders**

**1. Purpose**

1.1 To present the HSCP Board with:

- An update on the activity surrounding the risk assessment and risk management of High Risk Offenders subject to statutory supervision currently residing in West Dunbartonshire.

**2. Recommendations**

2.1 The HSCP Board is asked to:

- Note the latest update on the improvement activity currently being taken forward, which seeks to address, underpin and promote best practice in the supervision of those deemed to be a Risk of Serious Harm to others.

**3. Background**

3.1 As previously reported to the HSCP Board, the Care Inspectorate published their report on the inspection of West Dunbartonshire Justice social work services on 6 August 2019.

3.2 An action plan was developed reported to the HSCP Board originally in August 2019. Since then, the plan has been updated regularly and is a standing item for the HSCP Board. This paper, however, provides a more detailed update on specific activity related to the management of High Risk Offenders.

**4 Background**

4.1 Justice Social Work operates within the National Guidance issued by the Risk Management Authority: The Framework for Risk Assessment, Management and Evaluation (FRAME) outlines the policy approach to risk practice in Scotland. It articulates the agreed values, guiding principles, and standards that should underpin the work of criminal justice agencies who are involved in the assessment and management of risk posed by those who are involved in offending behaviour.

4.2 FRAME proposes a consistent and evidence based approach to risk practice which applies across all agencies and individuals who offend. The framework

proposes a tiered and proportionate approach which supports practice at minimal, comprehensive and intensive levels.

- 4.3 The following definition from National Guidance provides the criteria against which to evaluate the risk of serious harm: *“Risk of serious harm is defined as the likelihood of harmful behaviour of a violent or sexual nature, which is life threatening and/or traumatic, and from which recovery, whether physical or psychological, may reasonably be expected to be difficult or impossible”*.

## 5. Internal Audit of High Risk Offenders

- 5.1 An sample audit of high risk offenders was undertaken by an independent assessor in July 2019; the new Service Manager reviewed these cases once in post and reviewed all other high risk offenders subject to multi-agency public protection arrangements and those high risk violent offenders assessed at being at significant risk of harm. The purpose of this review was to ensure that:

- the analysis of risk has identified the appropriate risks;
- identified risk have relevant and proportionate risk management strategies;
- the identified risk management strategies and activities are implemented and monitored/reviewed appropriately;
- managers have strategic oversight and scrutiny of risk assessment and risk management practice of allocated social workers.

- 5.2 Cases selected were assessed as high/very high risk with electronic records including case notes, risk assessments and case management plans being scrutinises.

## 6 Findings from Audit

- 6.1 Use of Risk Assessment Tools: From the sample audited, there were marked differences around the analysis of risk. Risk analysis ranged from generic comments with non specific case management planning to others which included 'SMART' plans tailored to the individuals risk and needs.
- 6.2 Varying professional confidence from social workers has been identified, specifically in the use of risk of serious harm and case management planning tools, with this being rejected in the audit samples. **(Action Point 1)**
- 6.3 In more recent 'live' cases, an improvement in Risk Management Plans has been evidenced, to identify specific criminogenic needs and place an action against it, which is relevant and appropriate, fitting the purpose of managing the identified risk. This shows a marked improvement from earlier audit findings.

- 6.4 The plans in these cases are specific to the case, risk of harm and need. They also provide an intervention in terms of changing behaviour as well as a significant monitoring function.
- 6.5 Communication: Findings indicated limited evidence of contact with partners in some cases and varying levels of communication and understanding between partner agencies, including Addiction Services, Police Scotland and Adult Services colleagues in managing risk. These have been addressed in a several ways:
- Integrated Risk Management Meetings were introduced in September 2019, and all relevant agencies attend these on a weekly basis. All partners are made aware of 'early warning triggers' and contribute to the risk management plan for the individual. Terms of Reference have been completed to ensure a shared understanding of the purpose of these meetings.
  - Specific Point of Contact (SPOC) email distribution lists are created and each partner provides an analysis of risk after each meeting with the High Risk Offender. This is distributed to each partner via the email list. Contact is often on a daily basis with different agencies and this ensures that the risk assessment is dynamic the service is in a position to respond to any increase in risk immediately.
  - Case Recording processes have been updated and streamlined to ensure that the main recording system (Care First) contains evidence of the identified risk and how this is being managed.
  - Risk Awareness sessions are being developed to assist colleagues understand the nature of risk posed by those subject to High Risk Offender protocols. **(Action Point 2)**
- 6.6 Joint Working: It was evident that while joint working is best practice, there was some uncertainty around roles and responsibilities of co-workers within the team, where cases were allocated to two staff. This had previously led to tasks not being completed and drift ensuing. Guidance is being developed and will be issued to staff and partners imminently to ensure clarity about multi agency and multi disciplinary roles and responsibilities and agreed shared tasks. **(Action Point 3)**
- 6.7 Staff Development: A Training Needs Analysis is underway with a Training programme to commence in March 2020. Staff and managers are undertaking risk assessment training in the new SARA V3 Risk Assessment Tool, which will further assist in the assessment of risk of those convicted of Domestic Abuse Offences. While awaiting the next round of national training in the Risk of Serious Harm (Violence), a programme of peer support and mentoring is underway to provide additional learning in the management of High Risk Offenders. **(Action Point 4)**
- 6.8 Quality Assurance: In cases where shortcomings were identified, these are generally attributed to individual's understanding and knowledge base as well

as the system in which they function. As such, it is important that individual practice and wider organisational performance issues are addressed. Senior Social Workers undertake a significant role here, ensuring paperwork is completed; they also provide a quality assurance role in terms of the standard of assessment and plans produced.

- 6.9** Processes have been developed and agreed by managers which will embed the quality assurance of all aspects of statutory Justice Social Work into their one to one supervision with their respective teams. **(Action Point 5)**
- 6.10** The recent review of high risk offender cases suggested a positive shift in practice and an improvement in the standard of risk assessment, risk management and contingency planning. This may relate to ongoing in-house training activity. Risk scenarios have been appropriately assessed and compliance with statutory supervision addressed proportionately, providing assurance around improving, evidence-based, consistent practice.
- 6.11** Accredited Interventions: Research has identified that the provision of services that are humane, ethical and clinically relevant and which conform to the principles of risk, need and responsivity can reduce rates of re offending, while punitive approaches have little effect. Therefore it is imperative that appropriate accredited interventions are brought in and delivered within West Dunbartonshire Justice Services.
- 6.12** Effective interventions identified include the Caledonian Domestic Abuse programme and the Moving Forward Making Changes programmes for men convicted of sexual offences are required to manage the risk posed by those deemed high risk of violent and sexual offending. **(Action Point 6)**

## **7. Action Plan**

The current action plan for updated activity on provision of services to High Risk Offenders is included at Appendix 1. The plan has been further informed by continued discussion with local managers and professional colleagues from the Risk Management Authority and Community Justice Scotland.

## **8. People Implications**

- 8.1** Staff engagement and participation continues to be at the heart of developing a sustainable model of service delivery and the improvement action plan, incorporating Community Justice Scotland support, will reflect this.

## **9. Financial Implications**

Access to some accredited training or other resources to deliver on the improvement plan may incur some costs, however these will be highlighted within regular management and budget meetings.

## **10. Professional Implications**

- 10.1** None.

## **11. Risk Analysis**

**11.1** The management of High Risk Offenders requires appropriately qualified and skilled staff – the improvement actions referred to above are intended to inform future service design and planning to continue to meet statutory duties in this area of work.

## **12. Impact Assessments**

**12.1** There are no issues identified.

## **13. Consultation**

**13.1** Improvement activity and development of a comprehensive training and development programme includes consultation with staff, operational managers and external professional colleagues.

## **14. Strategic Assessment**

**14.1** Provision of statutory social work services is a core function of the HSCP and support the Partnership Board and officers to pursue the priorities of the Strategic Plan.

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**Appendices:** Appendix 1: High Risk Offender Action Plan (March 2020)

**Background Papers:** None

**Wards Affected:** All



<b>Identified Areas of Improvement</b>	<b>Actions for Improvement</b>	<b>Lead Officer</b>	<b>Evidence of Improvement</b>	<b>Timescales</b>
Risk Assessment of High Risk Offenders	Training Dates to be arranged LSCMI/SARA  Peer support arranged	Service Manager  Senior Social Workers	Risk Assessments sampled display greater detail of the Pattern, Nature, Seriousness and Likelihood of Offending	LSCMi Dates arranged for:  13 <sup>th</sup> March 20 20 <sup>th</sup> March 20 27 <sup>th</sup> April 20  SARA: 4-5 <sup>th</sup> March 2020 May 2020
Risk Management Planning and Supervision of High Risk Offenders	Risk Management Authority contacted  Peer support and Mentoring in place via co-working	Service Manager Risk Manager Authority Link	Case Management Plans are comprehensive and targeted to individual risk and need, They include monitoring activities and Victim Safety planning	National Training scheduled for October 2020  Peer support and mentoring ongoing
MAPPA and Risk Practice procedures communicated to partners	PowerPoint presentation developed  Dates for roll out to be identified  Integrated Risk Management Meetings in use	MAPPA Co-ordinator  Service Manager/ Partner Manager  Service Manager	Colleagues/Partners display greater awareness and understanding of risk within a Justice context  IRMM arranged for each High Risk Offender which partner agencies are attending.	June 2020  Completed
Staff Development	Training Needs Analysis underway facilitated by	Community Justice Co-ordinator	Staff displays a greater understanding of their	Awaiting Dates from Community Justice

	Community Justice Scotland	Community Justice Scotland Head	roles and responsibilities in the management of High Risk Offenders.	Scotland
Greater Management Scrutiny of High Risk Offender Cases	Managers to attend all risk assessment and case management training.  Quality Assurance sampling to be incorporated into individual supervision sessions with staff.	Senior Social Workers  Senior Social Workers/ Service Manager	Managers display greater understanding of risk assessment tools to offer greater support to staff.  Managers scrutiny of cases recorded on information database.	As noted above  Ongoing
Accredited Interventions	Contact Caledonian colleagues within Community Justice Scotland  Scope MFMC support with neighbouring authorities	Community Justice Co-ordinator Service Manager	Staff will be trained in Caledonian work  Staff already trained can facilitate programmed work	Date set for 30 <sup>th</sup> March with CJS  April 2020