NICE PUBLIC HEALTH GUIDANCE

Preventing and Reducing Domestic Violence

4th Meeting of the Programme Development Group

Thursday 25th October 2012

NICE Offices

Final Minutes

Attendees:	PDG Members Gene Feder (Chair), Rahila Ameen, Adrian Boyle, Lori Busch, Linda Davies, Chris Green, Rita Hirani, Louise Howard, Davina James-Hanman, Marianne Hester, Jane Lewis, Gillian Mezey, Amanda Robinson, David Sloan, Nicky Stanley NICE Team Antony Morgan, Una Canning, Chris Carmona, Andrew Hoy, Kim Jeong, Victoria Axe, Charlotte Haynes (via VC) SCIE Team Jen Francis Review Team Lorraine Greaves, (BCCEWH), Nancy Poole, (BCCEWH), Jacque Mallender (Matrix), Meena Venkatachalam (Matrix) Independent Co-optee for Health Economics Sarah Byford (Kings College) Observers Manoharan Manonmani, King College London, Dr. Germán Fajardo Dolci, Undersecretary of Health Sector Integration and Development, MOH
Apologies:	PDG Members Zlakha Ahmed, Diana Barran, Bushara Bostan, Maureen Noble, Pamela Richardson, Karen Williams

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Version	Final
Audience	PDG members, NICE team, the public (via web publication)

Item		Action
1. Welcome and objectives for the meeting	The Chair welcomed the PDG to the fourth meeting on preventing and reducing domestic violence. The group introduced themselves to Rita Hirani who recently joined the PDG. It was noted that Jackie Fernandez is no longer a member of the programme development group.	
	The Chair introduced the observer, Manoharan Manomani to the PDG.	
	The Chair informed the PDG that apologies had been received from Zlakha Ahmed, Diana Barran, Bushara Bostan, Karen Williams, Maureen Noble and Pamela Richardson.	
	The Chair informed the group of the objectives of the day. These included forming small groups and revisiting the tentative recommendations that were drafted at the last meeting. Davina James Hanman (DJH) to give a presentation on current health and social care interventions. The group would also look at the draft review from BCCEWH, and following this would spend time drafting recommendations. The group would receive an update from the health economics team.	
2. Declarations of Interests	The Chair asked the PDG to declare their conflicts of interest and to continue to keep these updated throughout the guidance development.	
	Nicky Stanley declared that she has been awarded a new contract by the public health research programme to undertake a review of preventative interventions of domestic violence for children and the general population. It was noted that this might have overlap with some aspects of the review.	
	Chris Green declared that he is a part of a prevention sub group run by EVAW, entitled Making the Grade Light which will run for six months.	
3. Notes of the last meeting	The minutes of the last meeting were reviewed, the actions were discussed and the minutes were agreed to be an accurate record.	
	The Chair reminded the group that they would be able to attend any future economic sub group discussions should they be arranged.	
	DJH suggested that an example of literature on identification in sexual health clinics would be a paper by Moasic (Maternity at Guys).	

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	Adrian Boyle arrived at 10.10am.	
	Action: NICE team to add the conceptual framework to the agenda for the next PDG meeting. It was noted that this will be useful when mapping recommendations.	NICE Team
	In regards to the DH task force recommendations it was agreed that this will be used as a comparable draft and when the group have drafted recommendations they will see how well these map on to the list.	
4. Overview of meetings and process – where are	Antony Morgan (AM) reminded the group where they currently are in the programme development process.	
we heading + running issues	AM stressed the importance of prioritising experts.	
Tulling 155055	AM asked if there were any gaps in the evidence. It was noted that the focus of the review was very broad and therefore it is difficult to keep the full range of organisations in focus. The group should also be focusing on social care and the independent sector. It was requested that the reviews are scrutinised further in future.	
	The question of probation was raised. It was noted that the group should look at what they are doing in terms of interventions for perpetrators.	
	Action: BCCEWH review team to complete another search on the literature to ensure that important papers have not been missed.	вссеwн
	Action: Members of the PDG to email articles / reports that they feel should not be missed in the reviews, indicating which scope question the information is relevant to.	PDG
	It was asked if Respect had been approached in terms of experts.	
	It was suggested that there is a gap in the LGBT evidence and that Rita Hirani will hopefully help with this.	
	It was noted that at the next meeting in December the review team will present a paper on perpetrators.	
	The PDG were reminded to keep the scope of this project in mind.	
	It was suggested that the NICE Team could put out a call for evidence on interventions on perpetrators to	

	capture the important UK based grey literature.	
	The separation between perpetrators and victims was discussed as quite often offenders can also be victims.	
	AM mentioned that the narrative can bring	
	recommendations to life and if anyone would like to	
	volunteer to be a lead narrator this work would be included in the consideration section.	
	included in the consideration section.	
	Action: A small number of PDG members to volunteer to work with the NICE team on the broader narrative (considerations section of the guidance).	PDG
5. Drafting	Chris Carmona (CC) gave a presentation on drafting	
recommendations – introduction	recommendations. The PDG were given a list of draft recommendations and a table of considerations.	
6. Revising recommendations (child exposure and	The PDG split into three groups to begin to refine these recommendations.	
identification) – small group work	CC asked that the groups think about the following: • Whose Health will benefit?	
	Who should take action? What action about the delega?	
	What action should be taken?	
7. Plenary feedback	The PDG returned to the table and gave feedback from their three groups. These involved recommendations around services, identification and training.	
	Action: NICE Team to invite a member of CAMBS to attend a future meeting.	NICE Team
	Action: CC to revise and draft a new version of the recommendations and considerations. CC to send this out to the PDG.	NICE Team
	It was noted that the NICE Team will ensure there is group consensus on each final recommendation.	
	Action: NICE Team to start building up a glossary of terms.	NICE Team
	The following observers joined the meeting at 11.50am and left the meeting at 12.20pm.	
	Dr. Germán Fajardo Dolci, Undersecretary of Health Sector Integration and Development, MOH Mexico	
	 Dr. Francisco Hernández Torres, General Director of Health Quality and Education, MOH Mexico 	

	 Fernando Alvarez del Rio, General Director of Health Planning and Development, MOH Mexico Louise Batchelder, External Adviser 	
8. Current Health and Social Care Interventions on Domestic Violence	DJH gave a presentation on Health and Social care responses to Domestic Violence. The PDG were invited to comment on the findings from DJH's presentation and a number of issues were discussed.	
	Action: NICE Team to forward the presentations to the PDG.	NICE Team
	David Sloan left the meeting at 12.55pm.	
9. Update on Health economics	Sarah Byford (SB), Jacque Mallender (JM) and Meena Venkatachalam (MV) arrived at 1pm.	
	Kim Jeong (KJ) gave an introduction to the group updating them on the discussions from the economics subgroup. SB introduced herself to the group.	
	Matrix gave a presentation on an Economic analysis of domestic violence prevention and reduction.	
	Action: Members of the PDG to volunteer to work with the Matrix team on cases for case study approach and sub group to meet to discuss options following PDG feedback	PDG
10. Presentation of Evidence – Responding to DV - Victims	Due to time restrictions with BCCEWH's availability the Matrix presentation was interrupted and BCCEWH gave a presentation on the Effectiveness Review of Interventions for Victims of Domestic Violence, focusing on Question 3.	
11. Discussion	The PDG were invited to discuss the presentation and to ask BCCEWH questions.	
	Jen Francis left the meeting at 2pm and Nancy Poole left the meeting at 2.15pm.	
	Action: BCCEWH to organise dates for a virtual enquiry to generate discussion with volunteers from the PDG.	вссеwн
	Matrix returned to their presentation on an Economic analysis of domestic violence prevention and reduction. The PDG were invited to discuss the presentation and to ask Matrix questions.	

	The PDG discussed the difficulties that arise from the economic modelling of this topic. Action: Matrix to reframe their current models and to bring these back to the PDG. Matrix to show the PDG the interventions they could work with and ask the PDG to choose which would be best. Matrix noted that any interventions not in the studies will be narrated. It was suggested that the guidance refer to the NICE Guideline of treatments for depression in adults. Lorraine Greaves left at 2.45pm. SB, JM, MV, and DJH left at 3.15pm.	Matrix
12. Draft recommendations – responding to interventions	The PDG drafted recommendations in plenary. The definitions of advocacy and skill building were discussed. Action: The NICE Team to add "advocacy" into the glossary terms	NICE Team
13. Prioritising experts	The Chair noted that due to time restraints the NICE Team would prioritise the list of experts and would email this around to the PDG for them to comment on. Action: NICE Team and Gene Feder to prioritise list of experts.	NICE Team
14. Next steps	Action: The NICE Team to draft recommendations that will be emailed to the PDG on the 9 th November. The PDG to review and comment on these. AM informed the group that the next meeting will take place in the Royal College of General Practitioners at Euston Square.	NICE Team and PDG
15. Any other business	The title of the guidance was considered and it was noted that the PDG should also focus on prevention not only reduction.	
16. Close	The meeting closed at 4pm.	