
Please find attached the report and appendices in respect of Item 13 on the agenda for the above meeting

13.	Independent Inquiry Action Plan Update (Pages 3 - 40) Consider report by Chief Executive. (Copy attached.)	15 mins
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REVIEW GROUP UPDATE IN CONNECTION WITH INDEPENDENT INQUIRY ACTION PLAN

Report by Chief Executive

SCOTTISH BORDERS COUNCIL

30 March 2023

1 PURPOSE AND SUMMARY

- 1.1 This report provides the fourth formal update from the Inquiry Review Group which was established to progress the work identified following the independent investigation into the Council's handling of concerns raised about a former Scottish Borders Council employee.
- 1.2 The report brings forward 6 remaining reporting templates relating to a number of actions and seeks Council approval to consider these actions as complete.
- 1.3 The report also seeks approval that the action plan be considered complete, with any ongoing actions being required to progress as continuous improvement with delegated authority for the monitoring and approval of such actions being granted to the Chief Executive.
- 1.4 A communications plan which outlines how the conclusion of actions and next steps will be communicated to stakeholders is presented at appendix 2 for approval.
- 1.5 Given the progress that has been made it is proposed that this is the final formal update that is provided to Council and that consequently the action group which has overseen delivery of the action plan to date will cease to meet.

2 RECOMMENDATIONS

- 2.1 **It is recommended that the Committee:-**
 - (a) **Approves the action templates contained in Appendix 1 as being complete.**
 - (b) **Approves the proposed plan in appendix 2 for communication with stakeholders (Action 3c).**
 - (c) **Agrees that the Inquiry Action Plan Group ceases to meet and that any ongoing actions contained in the plan progress as continuous improvement.**

- (d) Agrees that the Chief Executive assumes delegated authority to monitor and approve any actions deemed to be ongoing.**

3 BACKGROUND

- 3.1 An Inquiry Review Group was established to progress the work identified following the independent investigation into the Council's handling of concerns raised about a former Scottish Borders Council employee.
- 3.2 On 25 February 2022, Council accepted the recommendations contained within the Inquiry Report produced by Andrew Webster KC and tasked the former Chief Executive with preparing an action plan to address the matters contained within those recommendations.
- 3.3 On 10 March 2022 Council approved that Action Plan, and the establishment of a Review Group to steer the progress of work required. It was agreed that reports regarding progress of the Action Plan would be brought to Council for consideration and, as appropriate, to seek Council approval of any actions considered by the Review Group to be complete.
- 3.4 Following significant progress with actions, Scottish Borders Council agreed that the review group would move from meeting on a fortnightly basis to meeting monthly to receive progress updates on each action from the responsible directors.
- 3.5 On 23 June, 27 October and 15 December 2022, Council approved reports from the Chief Executive outlining completed actions from the overarching Action Plan. Progress has now been made on a further tranche of actions from the Action Plan and the Review Group has deemed these as complete and ready to be submitted for approval today as highlighted in this paper and contained in Appendix 1.
- 3.6 There are 54 individual actions contained in the action plan; to date Council has approved 36 of these as complete and 4 are considered to be ongoing. This report now brings forward a further 6 actions for approval as complete leaving 8 actions still to be completed. The status of each action as at 30.3.2023 is shown in Appendix 3.
- 3.7 Given the significant progress that has been made it is proposed that this be the last formal update submitted to Council by the Chief Executive and the remaining actions be delivered under delegated Authority. Consequently it is recommended that the group established to oversee the Action Plan will also cease to meet.

4 RECOMMENDATIONS NOW SUBMITTED FOR APPROVAL

4.1 Outcome 11a

Develop clear information sharing protocols for staff regarding any communications with parents concerning allegations involving their children.

- 4.1.1 The protocol sets out expectations for communication with parents and requires that where allegations of potential harm against a child is made in school or relating to a staff member. The importance of parents being made aware in good time with clear messaging that any allegation will be thoroughly investigated is

highlighted as is the importance of protecting the confidentiality of any staff member subject to such allegation.

- 4.1.2 The protocol ensures that the importance of recording the information shared in a follow up letter to parents and of maintaining regular contact with parents to reassure them of progress and the eventual outcome.

4.2 **Outcome 11b**

Obtain legal advice/advice from insurers regarding the interplay between the proposed protocol and the Council's obligations as employer in respect of maintaining confidentiality, ensuring fair and impartial investigations and data protection implications.

- 4.2.1 This action requires the Chief Legal Officer to obtain independent advice on the content of the protocol described above. Now that the protocol at 11.a is complete this action can be implemented. The Chief Legal Officer is therefore contacting an external solicitor who is an expert in Data Protection and who will have access to employment law expertise within their firm. Advice will be sought to confirm that the protocol will enable the Council to comply with its obligations as an employer.

4.3 **Outcomes 11c**

Create an implementation plan for the new protocol, to include, training, briefing sessions and communication strategy.

- 4.3.1 The plan makes provision for School Child Protection Co-ordinators to have familiarisation and implementation of the protocol to be covered in regular training activity and for headteachers to be briefed directly on expectations and responsibilities.
- 4.3.2 Key groups who will be directly affected by the implementation of the protocol, for example HR colleagues and Trade Union Representatives will be briefed on the implementation and the communications plan which will update parents and wider stakeholders on this and other relevant protocols.

4.4 **Outcome 12c**

Undertake a review of data retention protocols in relation to HR records whilst ensuring alignment to other policies and protocols, including ACAS guidance.

- 4.4.1 The Chief Legal Officer, as Senior Information Risk Owner (SIRO), has examined the retention policies operated by the Council's HR department as detailed in the Information Asset Register. She has focused her consideration on retention policies in relation to disciplinary and grievance matters. It is noteworthy that SBC Policies do cross refer to the ACAS Code of Practice when necessary.

- 4.4.2 Importantly, She has compared these with the relevant suggested retention policies contained within the Scottish Council on Archives Record Retention Schedules (SCARRS). SBC's retention policies are identical to those in this key national guidance for local authorities. Of significance, SCARRS confirms that where a disciplinary investigation has resulted in no action being taken, then the record must be destroyed immediately.

4.5 Outcome 12d

Consider an approach to record, store and retain professional advice given between areas of the Council when relating to children or HR matters, being clear of the status of the advice.

- 4.5.1 A procedure has been introduced in response to action 12b, whereby a Commissioning Manager must record in writing the reasons for their decisions. It is considered that action 12d will be best met by ensuring that any professional advice given during the process is recorded by the Manager in that written note. The officer who provided that professional advice must be given the opportunity to review the statement to ensure that the advice is accurately recorded.
- 4.5.2 It has to be noted that, where the result of an investigation is that no action is taken, in accordance with the retention policy above, there will be no record retained. This is considered to be entirely appropriate and consistent with the GDPR and the employer's duty of trust and confidence to its employees.

5 COMMUNICATIONS PLAN

- 5.1 Action 3c) requires the creation of a Communications Plan that aligns to the Review Group and the work it delivers. Engagement with all stakeholders including parents and young people must be central to this.
- 5.2 The communication plan is included at appendix 2. This identifies key stakeholders, including particularly:- parent and young people bodies, staff groups, partners and governing bodies with whom communication of actions taken and learning implemented be shared.
- 5.3 The plan provides a timeline for communications to be distributed and indicates key documentation, policies or processes to be shared and disseminated for information or action by determined groups.

6 ACTIONS TO BE CONSIDERED AS ONGOING, UNDER CONTINUOUS IMPROVEMENT OR FOR REVIEW

- 6.1 A number of actions (2c, 3d, 3e and 14b) have already been approved as being ongoing. There are a further 8 actions as outlined below which are now recommended to be considered in the same manner.
- 6.2 Recommendation 2 (5b, 5c, 5d) which requires that Scottish Borders Child Protection Procedures be reviewed to include the learning from the Inquiry.

In addition to this it is noteworthy that there have also been changes to the National Child Protection Guidance, but unfortunately the Inquiry Report did not recognise this at the time. It is now proposed that the learning from the Inquiry and the update to local procedures predicated on the changes to National Child Protection Guidance take place at the same time to minimise any confusion to staff. It is further proposed that as per the Inquiry action plan, these changes will be put to the Critical Services Oversight Group (CSOG) for ratification and sign off as soon as practicable.

- 6.3 The timeline for implementation of this action was extended with Council approval to March 2023, however the implementation date for the new National Guidance deadline is now understood to be September 2023 and it is important that our timeline is consequently aligned to this later date to prevent any confusion.
- 6.4 The Public Protection Committee (PPC) has overall governance responsibilities for the Child Protection procedures. The Child Protection Delivery Group, which reports to the PPC, has multi agency representation with responsibility for the planned roll-out, associated training, communication and ongoing monitoring of these procedures.

6.5 **Outcome 4c**

This outcomes require the development of assessment tools to demonstrate learning in child protection training. As outlined in paragraphs 6.2 to 6.4, the implementation of the new child protection procedures is scheduled for later this calendar year and while assessment processes have been mapped out to respond to different levels of training complexity, it has been agreed by the inquiry group that the current arrangements are sufficient to assess learning until any changes to content reflecting the new procedures are made. The Public Protection Committee has responsibility for oversight of training and through the Training and Delivery sub group, all monitoring of this training will be delivered.

6.6 **Outcome 4e**

Outcome 4e relates to the requirement for ongoing monitoring of staff compliance with the requirement to complete mandatory training appropriate to their role and as set out in the training matrix. This is the responsibility of CMT and regular reporting of completions data is discussed under performance monitoring arrangements with appropriate follow up action instructed where required by Directors.

6.7 **Outcome 4f**

This outcome sets out the action to explore options for independent inspection. While some opportunities exist to assess this using feedback from external scrutiny such as the safeguarding measure in HMIe Inspections of schools and the Inspection of Children at Risk of Harm Inspection which is ongoing, the requirement to undertake an external inspection of training assessment will be assessed once training has been updated to reflect the new child protection procedures.

6.8 **Outcome 14c**

Requires an assurance that Elected Members are sufficiently trained in matters of Child protection. Members have a dedicated section in SB Learn which includes the Child Protection training module. It should be noted that completion is not mandatory but is strongly encouraged.

6.9 **Outcome 14d**

The findings and recommendations arising from the Internal Audit review of the sufficiency of Council's Whistleblowing Policy will be considered by Council Management Team in advance of their presentation to the Audit Committee in May 2023.

6.10 **Recommendation 2**

It has been observed that through interpretation of this recommendation, an important stage of reporting concerns through normal channels such as to the child protection co-ordinator in a school where that professional can make an informed judgement about an appropriate and proportionate next course of action, is now being missed. As a result there has been a significant increase in the number of referrals being made to the Child Protection Unit that are subsequently deemed not to meet the threshold for a child protection concern. This has resulted in excessive workload within the IRD process since the inquiry report was first approved and as a result there is a risk that urgent or significant concerns of harm may not be addressed with the priority required. It is therefore proposed that clarification on the expectation of this is shared with staff through normal training, updates and documentation, to ensure that all staff are aware of what constitutes reporting a concern and that everyone understands the difference between this and a formal child protection referral being made.

6.11 **Recommendation 3**

This recommendation infers a significant move from the purpose of the disciplinary procedures which should ensure a focus on improvement in performance and support to staff; to an often disproportionate amount of focus on sanctions for even minor concerns about practice. This approach needs to be reviewed to ensure a more appropriate balance of support and trust is achieved and it is therefore intended that in line with delegated authority, the Director of People, Performance and Change, will revisit the wording and amendments to the procedures and make any minor amendments as appropriate.

6.12 It is recommended that as well as being reviewed where appropriate through existing governance structures such as the Public Protection Committee, delegated authority to ensure appropriate progress, amendment, implementation or monitoring of these actions, ensuring appropriate reporting to relevant committees where appropriate, be passed to the Chief Executive.

6.13 As all actions contained within the action plan have now been presented to Council, it is recommended that this is now an appropriate juncture to cease the Inquiry Action Plan and end the periodic formal reporting to Council.

6.14 A public record of all actions taken, including any necessary amendments to implementation or timescales will be published. This will comprise a record of implemented action plan, all reports and evidence being published.

7 IMPLICATIONS

7.1 Financial

There are no costs attached to any of the recommendations contained in this report.

7.2 Risk and Mitigations

The Council has both statutory duties and common law duties of care to pupils in its schools, young people in our care and to its own staff. The best way to mitigate the risk of breaching these duties, is to implement the recommendations resulting from the inquiry, through the Review Group, so that the Council can determine how best to learn from any errors or omissions in the way the Council operates.

7.3 Integrated Impact Assessment

No adverse equality implications are anticipated as a result of this report.

7.4 Sustainable Development Goals

This report does not impact specifically on any of the UN Sustainable Development Goals.

7.5 Climate Change

There is no direct impact on the Climate Change agenda as a result of the recommendations in this report.

7.6 Rural Proofing

A rural proofing check is not required for this report.

7.7 Data Protection Impact Statement

There are no personal data implications arising from the proposals contained in this report.

7.8 Changes to Scheme of Administration or Scheme of Delegation

There are no changes required to either the Scheme of Administration or the Scheme of Delegation as a result of the proposals in this report.

8 CONSULTATION

- 8.1 The Acting Chief Financial Officer, Monitoring Officer/Chief Legal Officer, Chief Officer Audit and Risk, Director (People Performance & Change), Clerk to the Council and Corporate Communications have been consulted and any comments received have been incorporated into the final report.

Approved by

David Robertson
Chief Executive, Scottish Borders Council

Author(s)

Name	Designation and Contact Number
Lesley Munro	Director – Education & Lifelong Learning

Background Papers: [insert list of background papers used in compiling report]

Previous Minute Reference: [insert last Minute reference (if any)]

Note – You can get this document on tape, in Braille, large print and various computer formats by contacting the address below. The Chief Executive’s Office can also give information on other language translations as well as providing additional copies.

Contact us at Scottish Borders Council, Chief Executive’s Office, Council Headquarters, Newtown St Boswells, Melrose, TD6 0SA.

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INQUIRY ACTION PLAN
NOTIFICATION OF COMPLETED ACTION

Strategic Lead Officer	Lesley Munro
Recommendation	8 - The Council reviews its corporate position on the disclosure of information raised in disciplinary proceedings that relates to inappropriate conduct involving children in the light of the principle that the welfare of children is a paramount consideration; and provides appropriate guidance to staff in the light of that review.
Outcome number and summary	11, The Council fulfils its duty of care, by ensuring any allegations or concerns regarding children are shared timeously with parents, or those who care for children.
Action	a) Develop clear information sharing protocols for staff regarding any communications with parents concerning allegations involving their children.
Deadline within Plan	March 2023

1. MEASURES TAKEN

Detail here the specific actions taken to meet the identified outcome.

A protocol has been established which sets out clear expectations of when and how parents will be informed both through direct contact and through written correspondence.

There is a clear requirement that the identity of any staff member involved in an alleged incident will not be disclosed when informing parents of the allegations.

1B. ASSOCIATED DOCUMENTS

Note here any documents attached as being relevant to this action

Written protocol and implementation plan

2. BENCHMARKING

Explain what steps have been taken to measure the actions taken against best practice.

3. EXTERNAL AGENCY INVOLVEMENT

Where the Action Plan identifies a third party dependency, explain here the involvement and approval of any such party.

N/A

4. ONGOING MONITORING ARRANGEMENTS

Where relevant, what steps have been put in place to ensure ongoing review of this action?

Application of the procedure will form part of any decision making rationale and will be discussed throughout the process of investigating any allegations.

Monitoring of any risk to the protection of staff anonymity will be ensured.

5. HOW DOES THE ACTION MEET THE OUTCOME?

Explain briefly how the steps taken will achieve the desired objective?

Implementation of the protocol will meet the requirement to provide parents with appropriate levels of information to reassure them that incidents are addressed. The requirement to record information shared formalises the need to maintain confidentiality.

Approval by Review Group:

Date:	
Comments/amendments:	
Was the action completed within the Action plan timeframe?	
Signature of Chair:	

Approval by Council:

Date:	
Comments/amendments:	
Signature of Chair:	

INQUIRY ACTION PLAN
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Outcome number and summary	11, The Council fulfils its duty of care, by ensuring any allegations or concerns regarding children are shared timeously with parents, or those who care for children.
Action	c) Develop clear information sharing protocols for staff regarding any communications with parents concerning allegations involving their children.
Deadline within Plan	March 2023

1. MEASURES TAKEN

Detail here the specific actions taken to meet the identified outcome.

A protocol has been established which sets out clear expectations of when and how parents will be informed both through direct contact and through written correspondence.

The implementation plan sets out the training, briefing and communications activity that will be undertaken to ensure that the protocol is understood and effectively implemented.

- Training – School Child Protection Co-ordinators will be familiarised with the protocol during regular training sessions and the protocol will be copied to all establishments.
- Briefing – the protocol will be shared at headteacher business briefings and included in the subsequent weekly bulletin. Copies of the briefing will be shared with HR case management team. LNCT and JTU unions will be briefed by Director of Education at their meetings.
- Communications – the overall communications plan will include reference to this and any other protocols to ensure that parents, staff and other relevant stakeholder groups are made aware of the procedure.

1B. ASSOCIATED DOCUMENTS

Note here any documents attached as being relevant to this action

Written protocol and implementation plan

2. BENCHMARKING

Explain what steps have been taken to measure the actions taken against best practice.

3. EXTERNAL AGENCY INVOLVEMENT

Where the Action Plan identifies a third party dependency, explain here the involvement and approval of any such party.

N/A

4. ONGOING MONITORING ARRANGEMENTS

Where relevant, what steps have been put in place to ensure ongoing review of this action?

Application of the procedure will form part of any decision making rationale and will be discussed throughout the process of investigating any allegations.

Monitoring of any risk to the protection of staff anonymity will be ensured.

5. HOW DOES THE ACTION MEET THE OUTCOME?

Explain briefly how the steps taken will achieve the desired objective?

Implementation of the protocol will meet the requirement to provide parents with appropriate levels of information to reassure them that incidents are addressed. The implementation plan makes provision for all key groups affected to be informed of the protocol to develop shared understanding of procedure, rationale and responsibilities.

Approval by Review Group:

Date:	
Comments/amendments:	
Was the action completed within the Action plan timeframe?	
Signature of Chair:	

Approval by Council:

Date:	
Comments/amendments:	
Signature of Chair:	

INQUIRY ACTION PLAN
NOTIFICATION OF COMPLETED ACTION

Strategic Lead Officer	Nuala McKinlay SIRO
Recommendation	9. That the Council reviews and improves the process of management decision making.
Outcome number and summary	12. The Council can appropriately recall and evidence documents and rationale for its decision-making in relation to HR matters and matters involving children, in order to: <ul style="list-style-type: none"> • assure an appropriate audit trail • provide opportunities for reflection • provide confidence in those decisions • assist with the reasoning process. • protect Council staff and service users • increase effectiveness of service delivery
Action	c) Undertake a review of data retention protocols in relation to HR records whilst ensuring alignment to other policies and protocols, including ACAS guidance.
Deadline within Plan	July 2022

1. MEASURES TAKEN

Detail here the specific actions taken to meet the identified outcome.

HR retention policies, as contained in the Council's Information Asset Register have been studied. Focus was placed on those retention policies applying to Disciplinary and Grievance Processes. ACAS have produce a Code of Practice on Disciplinary and Grievance Procedures and this has been appropriately cross referred to in the SBC Retention Policy.

The Scottish Council on Archives and Records Retention Schedules provides local and other public authorities with up-to-date guidance for the compilation of retention schedules to help manage the records they create and use day-to-day. SCARRS helps to identify statutory and regulatory retention periods for those records where these exist and suggests typical retention periods based on common practice.

As with other areas relevant to Local Authorities, SCARRS have produced a Schedule for best practice for HR records. This best practice Schedule was compared with SBC's retention periods for Disciplinary and Grievance records. SBC's Retention Schedule mirrors exactly the SCARRS Schedule and is therefore best Practice.

This review of the policies therefore finds the retention Schedules to adopt best practice and no change is suggested to them.

1B. ASSOCIATED DOCUMENTS

Note here any documents attached as being relevant to this action

SCARRS HR Retention Schedule

SBC's Information Asset Register – relevant part.

2. BENCHMARKING**Explain what steps have been taken to measure the actions taken against best practice.**

See above

3. EXTERNAL AGENCY INVOLVEMENT**Where the Action Plan identifies a third party dependency, explain here the involvement and approval of any such party.**

NA

4. ONGOING MONITORING ARRANGEMENTS**Where relevant, what steps have been put in place to ensure ongoing review of this action?**

The Council's IAR requires regular review by all Asset Owners as part of our Information Management Policy.

5. HOW DOES THE ACTION MEET THE OUTCOME?**Explain briefly how the steps taken will achieve the desired objective?**

The action taken has confirmed that SBC retention policy in this area conforms with best practice.s

Approval by Review Group:

Date:	
Comments/amendments:	
Was the action completed within the Action plan timeframe?	
Signature of Chair:	

Approval by Council:

Date:	
Comments/amendments:	
Signature of Chair:	

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INQUIRY ACTION PLAN
NOTIFICATION OF COMPLETED ACTION

Strategic Lead Officer	Nuala McKinlay
Recommendation	<p>Recommendation 9 – (6.78, Page 63)</p> <p>That the Council reviews and improves the process of management decision making. In particular, it should:</p> <ul style="list-style-type: none"> • review or establish protocols as regards the recording of internal meetings, and <p>review or establish protocols as regard the recording of reasons for advice tendered, or decisions taken.</p>
Outcome number and summary	<p>12. The Council can appropriately recall and evidence documents and rationale for its decision-making in relation to HR matters and matters involving children, in order to:</p> <ul style="list-style-type: none"> • assure an appropriate audit trail • provide opportunities for reflection • provide confidence in those decisions • assist with the reasoning process. • protect Council staff and service users • increase effectiveness of service delivery
Action	<p>d) Consider an approach to record, store and retain professional advice given between areas of the Council when relating to children or HR matters, being clear of the status of the advice</p>
Deadline within Plan	October 2022

1. MEASURES TAKEN

Detail here the specific actions taken to meet the identified outcome.

This action has been drafted with the potential to be enormously widely drawn – given that any contact with any officer of the Council could be seen as professional advice being given.

Looking at the recommendation and the Outcome summary, it is considered that the action is intended to be aimed at finding a way of recording professional advice which has been given in respect of HR matters where potential issues around child protection has arisen.

It is noted that under a separate action, the reasons for any decision taken in respect of disciplinary reasons needs to now be recorded in writing.

It is therefore proposed the most appropriate place to record that professional advice should be in that written statement of reasons.

It is further suggested that, the person who has given such professional advice should see that statement before it is finalised to ensure that the they agree with how the professional advice has been described.

No separate record will be kept – and where there is no disciplinary action taken, (no finding of fault) there will be no record retained as best practice confirms these records should be destroyed as soon as the decision to take no further proceedings is taken.

1B. ASSOCIATED DOCUMENTS

Note here any documents attached as being relevant to this action

NA

2. BENCHMARKING

Explain what steps have been taken to measure the actions taken against best practice.

NA

3. EXTERNAL AGENCY INVOLVEMENT

Where the Action Plan identifies a third party dependency, explain here the involvement and approval of any such party.

na

4. ONGOING MONITORING ARRANGEMENTS

Where relevant, what steps have been put in place to ensure ongoing review of this action?

na

5. HOW DOES THE ACTION MEET THE OUTCOME?

Explain briefly how the steps taken will achieve the desired objective?

See above

Approval by Review Group:

Date:	
Comments/amendments:	
Was the action completed within the Action plan timeframe?	
Signature of Chair:	

Approval by Council:

Date:	
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Comments/amendments:	
Signature of Chair:	

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Implementation of Protocol for communication to parents when an allegations is made in school

In order to ensure that there is shared understanding of the requirement to communicated effectively with parents if there is an allegation of harm to a child concerning a staff member or where an incident is reported in school, the following implementation steps will be actioned.

- Training – School Child Protection Co-ordinators will be familiarised with the protocol during regular training sessions and the protocol will be copied to all establishments.
- Briefing – the protocol will be shared at headteacher business briefings and included in the subsequent weekly bulletin. Copies of the briefing will be shared with HR case management team. LNCT and JTU unions will be briefed by Director of Education at their meetings.
- Communications – the overall communications plan will include reference to this and any other protocols to ensure that parents, staff and other relevant stakeholder groups are made aware of the procedure.

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Communications objectives

- To support the work and outcomes of the Review Group and what it delivers
- Highlight Activity of the Review Group
- Communicate actions taken and learning implemented
- Identify stakeholders for communication of completion of actions
- Keep stakeholders informed
- Identifies key documentation, policies or/and processes to be shared

Stakeholders

Elected Members
Parents and Pupils
Scottish Borders Council Departmental Staff
Council Management Team
HMle
Local MSPs / MPs
Partners – Police / NHS
General Public

Stakeholders

Public Protection Committee
Child Protection Unit (CPU).
School Child Protection Co-ordinators
Trade Union Representatives
Critical Services Oversight Group
Public Protection Committee
Child Protection Delivery Group
Education Scotland

Potential issues and risks

- Controlling the narrative once information has been shared

Outline communications messaging from page 2

Date	Actions	Key Messages	Ongoing monitoring	Ownership	Supporting Documents
Completed June 2022	<p>Overarching Governance Actions</p> <p>To create a Review Group to: lead agreed improvements and ensure delivery; agree terms of reference; create clear reporting mechanisms demonstration progression of required actions.</p> <p>Involvement and engagement with Scottish Government agencies to ensure high quality and best practice.</p> <p>Open and ongoing communications with local partners and key stakeholders ensures collective responsibility (e.g Police, Health).</p> <p>Internal review processes, including inspection activity has been undertaken in schools and settings to observe learning and teaching, consultations with stakeholders to assess capacity for improvement, support monitoring have been undertaken on a rolling programme.</p> <p>Reporting on quality improvements across all educational establishments is remitted to the Education Sub-Committee and will be a regular agenda item of this committee. Appropriate levels of assessment and scrutiny of provision are in place and providing assurance.</p>	<p>Scottish Borders Council can demonstrate robustness and momentum in the delivery of all actions associated with the Inquiry.</p> <p>SBC undertake self-assessment to identify and plan improvement for all Specialist Provisions across the Scottish Borders and work with the Care Inspectorate and Education Scotland to ensure robust inspection and learning.</p> <p>All SBC Schools provisions undertake annual self-evaluation and complete standards and quality reporting.</p> <p>SBC use National Quality Indicators taken from How Good Is Our School HGIOS (4) to benchmark areas of strength and development needs across a range of standards and to provide an evaluation grade against each.</p> <p>Quality Improvement Officers monitor progress against the action plans.</p>	<p>Improvement plans setting out how the identified priorities for improvement have been created for session 2022/23</p> <p>Actions are part of an ongoing cycle of review and improvement with reporting being undertaken on an annual basis.</p>	<p>Chief Executive</p> <p>Director – Education & Lifelong</p> <p>Critical Services Oversight Group (CSOG)</p>	<p>Standards and Quality reports and Improvement Plans for all schools (settings) are available through individual schools.</p> <p>Letters issued to parents following HMle follow through inspection visits.</p>



Date	Actions	Key Messages	Ongoing monitoring	Ownership	Supporting Documents
July 2022 extended to December 2022	<p>Review and Improvements to Child Protection training for staff</p> <p>SBC has reviewed all delivery mechanisms for Child Protection training to ensure effectiveness. Training delivery will be moderated against best practice.</p> <p>SBC has develop a full training matrix for Child Protection. This should also include an assessment of the long term capacity required to deliver training.</p> <p>The Adult Support and Protection and CP Training and Quality Assurance Team have considered feedback from course participants regarding method of course delivery and interactive tools used within online training sessions.</p> <p>Criteria for delivering courses online or in the classroom have been agreed with the Training and Development Delivery Group:</p> <p>The majority of courses will continue to be delivered online through MS Teams</p> <p>Courses will be delivered as face to face classroom courses where:</p> <p>They are Tier 3 or above on the training matrix</p>	<p>SBC reviews and where required improves its child protection training for staff.</p> <p>Embedded in SBC training is the understanding that the safety and wellbeing of children is of paramount importance and that children have the right to be protected from harm and abuse.</p> <p>SBC staff are able to identify Child Protection matters.</p> <p>SBC demonstrate strong understanding of how and when to report Child Protection matters.</p> <p>SBC training matrix identifies the appropriate level, content, delivery mechanism and frequency, reflecting the needs of differing staff groups.</p> <p>SBC Critical Services Oversight Group (CSOG) supports SBC to have confidence that all staff across the organisation fully understand their individual responsibilities regarding Child Protection.</p> <p>The quality assurance function of the SBC training team ensures that all actions in relation to child protection training are benchmarked against best practice nationally and across all agencies.</p>	The Training and Delivery Group will deliver training and review and update to ensure it is relevant and responsive to need.	<p>Director – Education & Lifelong Learning as Chair of the Public Protection Committee</p> <p>Sub Group (Training & Delivery Development)</p> <p>Director – People, Performance & Change</p> <p>Review Group</p> <p>Director – Education & Lifelong Learning</p>	

Date	Actions	Key Messages	Ongoing monitoring	Ownership	Supporting Documents
	<p>The content requires engaging with a range of written source materials (eg case studies or assessment tools)</p> <p>Trainers are specifically required to confirm engagement as part of an accreditation process (this is currently not applicable to Child Protection training).</p> <p>The Public Protection Committee (PPC) has agreed a Joint Learning and Development Framework, which identifies learning outcomes and knowledge and understanding indicators for four workforce groups, dependent on the nature and frequency of contact with children and families. This tool enables services/managers to identify the appropriate training for their staff across all roles.</p> <p>The Child Protection Training and Development Officers are promoting this tool to Team Managers across Education, Health, Social Work and Social Care, and are available for consultation and advice.</p>	<p>The training Development and delivery group have responsibility for all aspects of training in respect of Child Protection and will ensure that all training continues to reflect best practice and is responsive to national and local key priorities and messages.</p> <p>SBC training is planned to provide appropriate levels of learning relevant to role and function in each organisation and is undertaken as appropriate stages proportionately.</p> <p>SBC ensure all relevant Council staff undertake training and monitor compliance.</p> <p>Independent external inspection will be put in place to review the effectiveness of SBC Child Protection training</p>			



Date	Actions	Key Messages	Ongoing monitoring	Ownership	Supporting Documents
January 2022	<p>Child Protection Procedures SBC reviews and seeks to improve the Scottish Borders Child Protection Procedures</p> <p>SBC is involved with joint review with City of Edinburgh, East Lothian, Midlothian and West Lothian councils, and has establish regular updates on the progress of this work with CSOG.</p> <p>The key outcomes of the recommendation have been incorporated into the ongoing joint review into the council's Child Protection guidance and procedures. This reflects the recent changes to National guidance.</p> <p>SBC will Conduct a review of all training content to ensure it reflects the changes to the new Procedures.</p> <p>Audit existing tools and processes for communicating with parents.</p> <p>Implement process to record information into HR Case Management System of staff referred to the CPU. Guidance and access rights to a shared site between SBC and PPS. It is intended that the guidance and site will be used for Child Protection and Adult Support and</p>	<p>Scottish Borders Child Protection Procedures embed understanding that the safety and wellbeing of children is of paramount importance and that children have the right to be protected from harm and abuse.</p> <p>SBC Child Protection procedures expressly emphasise, or make clear, the wider significance of child protection beyond the risk of immediate harm.</p> <p>SBC Child Protection procedures emphasise the core principles of individual responsibility; the responsibility to report any child protect matters; are clear on the appropriateness of reporting in situations of any concern; make clear that harm can arise in any setting, including in the workplace.</p> <p>SBC Child Protection procedures and guidance are accessible, reviewed regularly and communicated effectively.</p>		<p>Director – Education & Lifelong Learning as Chair of the Public Protection Committee Sub Group (Training & Delivery Development)</p> <p>Director – Education & Lifelong Learning</p> <p>Director – People, Performance & Change</p> <p>Review Group</p>	<p>Scottish Borders Child Protection Procedures</p> <p>National Child Protection Guidance</p>



Date	Actions	Key Messages	Ongoing monitoring	Ownership	Supporting Documents
	Protection concerns, not just Child Protection concerns.				
	<p>Disciplinary Procedures and Guidelines on Conducting Investigations</p> <p>The Council has and will continue to review and improve its Disciplinary Procedures to provide guidance as to the seriousness of inappropriate conduct involving children when considering of what amounts to misconduct and gross misconduct.</p> <p>The Disciplinary Procedure has been revised to highlight that inappropriate conduct towards a child may constitute gross misconduct or misconduct.</p> <p>It is specifically highlighted that consideration should be given to whether inappropriate conduct involving a child constitutes gross misconduct.</p> <p>This has also been extended to cover inappropriate conduct towards an adult at risk.</p>	<p>SBC has robust disciplinary Procedures and Guidelines which are fit for purpose and applied proportionately and appropriately.</p> <p>SBC guidelines ensure that all disciplinary procedures are carried out in a fair, open and transparent way and are effective in fulfilling their purpose.</p> <p>SBC ensure all disciplinary matters are dealt with appropriately and are suitably focussed on the child as an individual, taking due consideration of this when considering the severity of the allegations.</p> <p>SBC disciplinary investigations are conducted by suitably trained officers.</p>	<p>SBC will continue to benchmark against other organisations and best practice.</p> <p>The policy will be reviewed at least every two years in accordance with the rolling HR policy review schedule. Next review: March 2024, or sooner if circumstances require.</p>	Director – People, Performance & Change	Revised Disciplinary Procedures for Misconduct.



Date	Actions	Key Messages	Ongoing monitoring	Ownership	Supporting Documents
	<p>SBC have reviewed and improved the processes for communication with parents of children with communication challenges</p> <p>Created a template for Commissioning Managers to complete and issue to the appointed investigator.</p> <p>Update the Disciplinary Procedures and Guidelines to require Commissioning Managers to provide Investigating officers with a copy of those Procedures and Guidelines, along with a copy of the completed template, prior to the commencement of any investigation.</p>	<p>SBC staff are engaged in meaningful dialogue with parents of children with communication challenges, including their welfare and learning in order to allow children to reach their full potential and ensure safeguarding.</p> <p>SBC will ensure that all disciplinary proceedings are carried out in a fair, open and transparent way and are effective in fulfilling their purpose:</p> <p>SBC investigating officers are fully aware of the remit of their role and the responsibilities that that holds.</p>		Director – Education & Lifelong Learning	<p>Disciplinary Procedures and the Guidelines</p> <p>Commissioning Managers Template</p>



Date	Actions	Key Messages	Ongoing monitoring	Ownership	Supporting Documents
	<p>SBC reviews its corporate position on the disclosure of information raised in disciplinary proceedings that relates to inappropriate conduct involving children</p> <p>The Disciplinary Procedures and Guidelines have been updated to include the option of commissioning an external investigator if required.</p> <p>Guidance for the appointment of investigators has been created to ensure the appropriate skills and background are considered depending on the nature of the allegations.</p>	<p>SBC fulfils its duty of care, by ensuring any allegations or concerns regarding children are shared timeously with parents, or those who care for children.</p> <p>SBC ensures that disciplinary investigations are conducted by suitably trained officers.</p>		<p>Director – Education & Lifelong Learning</p> <p>Chief Legal Officer</p>	



Date	Actions	Key Messages	Ongoing monitoring	Ownership	Supporting Documents
	<p>Review and improves the process of management decision making</p> <p>The Council reviewed or established protocols as regards the recording:</p> <p>of internal meetings and reasons for advice tendered, or decisions taken.</p> <p>Created protocol that establishes all HR disciplinary related information must be held in the HR Case Management System. Implement and train managers regarding this.</p> <p>Created a process for ensuring that the rationale for Disciplinary investigation decisions is appropriately recorded in the HR Case Management system. Implement and train managers regarding this.</p> <p>Undertaken a review of data retention protocols in relation to HR records whilst ensuring alignment to other policies and protocols, including ACAS guidance.</p> <p>Considered an approach to record, store and retain professional advice given between areas of the Council when relating to children or HR matters, being</p>	<p>SBC have established suitable protocols to ensure it can appropriately recall and evidence documents and rationale for its decision-making in relation to HR matters and matters involving children.</p>		<p>Director – People, Performance & Change</p> <p>Senior Information responsible Officer (SIRO)</p> <p>Director – Social Work & Practice</p>	



Date	Actions	Key Messages	Ongoing monitoring	Ownership	Supporting Documents
	<p>clear of the status of the advice</p> <p>Ensured there is a clear process where any referrals concerning a staff member to the CPU is by default copied to the HR Case Management System (failsafe measure)</p>				
	<p>SBC Council is compliant with its statutory responsibilities In terms of the Protection of Vulnerable Groups (Scotland) Act 2007.</p>			<p>Director – People, Performance & Change Senior Information responsible Officer (SIRO)</p> <p>Director – Social Work & Practice</p>	
<p>From May 2022 - Ongoing</p>	<p>SBC ensure all additional learning and opportunities from the Inquiry Report are identified and implemented.</p>			<p>Director – Education & Lifelong Learning</p> <p>Director – People, Performance & Change</p> <p>Chief Executive</p>	



Protocol for communication when allegations made in school

1. Where an allegation or concern is raised about a child it is critically important that the parent/carer is advised immediately.
2. The headteacher or manager of setting will contact parent or carer of child and arrange to meet, wherever possible by then end of the school day.
3. At the meeting, the head or manager will inform the parent that there has been an allegation or concern raised about their child and will give brief details of what has allegedly happened.
4. If the incident concerns a member of staff, this should be shared however it must be made clear that the name of the staff member involved will not be disclosed.
5. The parent should be assured that the allegation will be thoroughly investigated and that they will be informed of the outcome. Wherever possible, an indicative timescale for the investigation should be given.
6. The headteacher or manager should give the parent/carer the opportunity to ask any questions, being mindful that the identity of any staff member should not be disclosed.
7. A letter containing the information shared should be prepared in advance of the meeting and given to the parent at the conclusion of the meeting to provide a written confirmation of the position.
8. Parents should be updated on a regular basis to reassure progress.
9. Once the matter is concluded, the headteacher or manager should again contact the parent/carer to share the outcome with written confirmation of the outcome being provided at the end of the meeting.
10. Correspondence should be recorded in the pupil file and where a staff member is involved, copied to HR case management for appropriate recording.

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