

PUBLIC PROTECTION



SCOTTISH BORDERS

PUBLIC PROTECTION COMMITTEE

ANNUAL REPORT

01 AUGUST 2021 - 31 JULY 2022



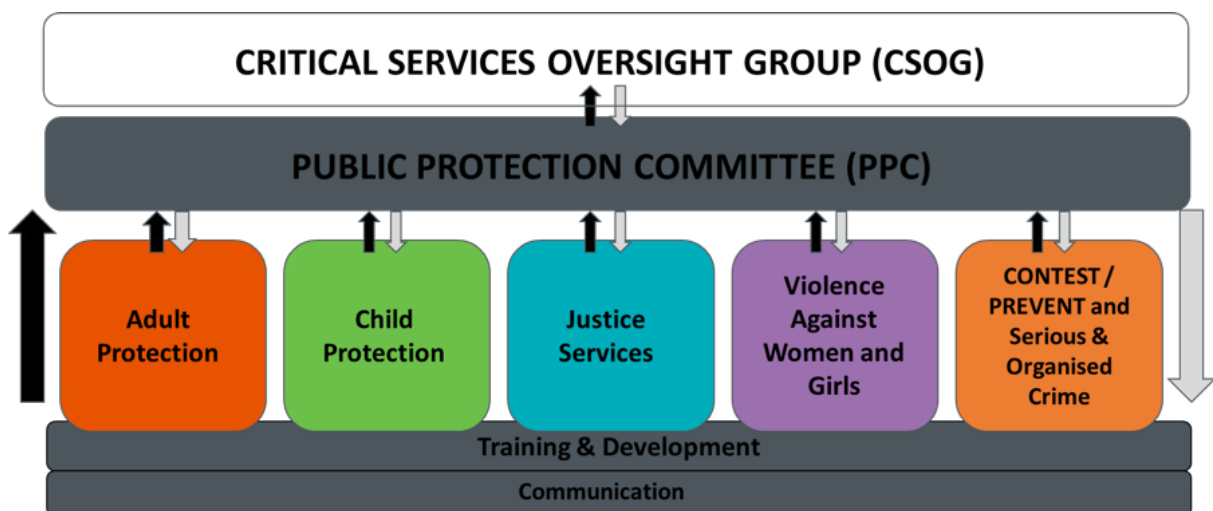
CONTENTS

FORWARD	3
KEY FACTS AND FIGURES	5
SIGNIFICANT CHALLENGES	7
CONTINUOUS IMPROVEMENT	9
STRATEGIC PLANNING AND CONNECTIONS	11
PUBLIC AND PROFESSIONAL INFORMATION, ENGAGEMENT AND PARTICIPATION	17
APPENDICES	
1. Acronyms and Abbreviations	24
2. Public Protection Committee Business Plan 2021-2022	25
3. Public Protection Performance Indicators	27
4. Domestic Abuse Advisory Service Exit Interview Analysis	31
5. Training Provision	32
6. 7 minute briefing: Revised National Guidance for Child Protection	35
7. Public Participation and Engagement Materials	36

FORWARD

I am pleased to present the Annual Report for the Public Protection Committee (PPC) for the Scottish Borders for 2021/2022. The Committee draws together the work of key areas of public protection which cut across the work of many statutory, voluntary and independent sector agencies across the Borders. The Committee works to protect the public from harm and abuse, and ensure that victims of abuse receive the help they need to recover, where harm has occurred.

The PPC was established at the start of 2020 and brought together the work of the former statutory Committees of Child Protection and Adult Protection which now operate as Delivery Groups reporting into the Public Protection Committee along with a Training and Development Delivery Group, Violence Against Women and Girls and the Justice Delivery Group. The PPC is an inter-agency group of senior staff, led by an Independent Chair. I have been the Interim Independent Chair of the PPC since August 2022, taking over from Dr Sue Ross the previous incumbent. The Independent Chair role is to provide leadership promoting the safety of children and young people and vulnerable adults, and ensure that services provided are effectively supported and managed. It reports to the Critical Services Oversight Group (CSOG) which is led by the Chief Executives of Scottish Borders Council and NHS Borders, and the Divisional Commander for Police Scotland.



Two major issues have been a backdrop and a challenge for the work of the PPC this reporting year: the continuing impact of the Coronavirus pandemic, and the Inquiry by Andrew G Webster KC into handling allegations of assault against a former teacher. These are explored in more detail on page 6 of this Annual Report. The achievements of those working in public protection services in Scottish Borders through the year should be considered with these in mind.

Despite these challenges and the worsening resource constraints across the public sector that this last year has brought to all agencies across the Borders, the PPC and Delivery Groups have continued to undertake their vital role, finding ways of working, often more “remotely” than in previous years, but continuing to deliver core services to some of the most vulnerable people and those at risk in communities in the Borders and reporting on that work to CSOG, to their respective agencies and to Scottish Government.

There have been some significant achievements which should be celebrated despite the backdrop across public protection agencies described above. The main body of this Report highlights just some of these, themed against the core functions of the PPC. As public protection agencies emerge from the impact of the pandemic, many people in the Borders are starting to experience a worsening economic environment. This brings even more challenges and risks particularly to the most vulnerable in our society, and it is in that context that the work of the PPC, particularly in child protection and adult support and protection, must be viewed going forward into 2022/2023. Its work remains a key part of ensuring the processes and procedures designed to keep people safe are being used effectively and that the complex multi-agency partnership working that is at the heart of public protection, must be supported and understood.

I look forward to working with the services and staff of the Scottish Borders partnership over the coming year, building on the work highlighted in this report. We will continue to strive to achieve our vision that all children and adults at risk in Scottish Borders are supported and protected from harm, and are enabled to live their lives as safely and independently as possible.



Alan Small, Interim Independent Chair, Scottish Borders Public Protection Committee
Chair Child Protection Committees Scotland

A handwritten signature in black ink that reads "Alan Small".

KEY FACTS AND FIGURES

73 Initial and Pre-birth Child Protection Case Conferences were held, with **61 new Child Protection Registrations**.

Parental attendance at Initial Child Protection Case Conferences and Initial Core Group Meetings continues to be **above our target of 75%**.

287 Adult Support and Protection referrals were received in the year which was **an increase of 68 referrals** from the previous year.

There has been consistency throughout the year with **100 %** of ASP Referrals **having a chronology**.

23 children have accessed our **CEDAR group** (children experiencing domestic abuse recovery) providing them and their mothers the opportunity to explore the impact of domestic abuse on their relationship and recover together with peers.

There were **117** referrals to the **Multi-agency Risk Assessment Conference**, a monthly meeting to share information and plan to protect victims of domestic abuse and their children.

98% of Criminal Justice Social Work Reports requested by the court were **submitted within the required timescale**.

14,615 hours of **unpaid work** were imposed as part of Community Payback Orders.

Further information on our Performance Indicators can be found at Appendix 3





SIGNIFICANT CHALLENGES

Two significant challenges have impacted the work of the PPC and services across the public protection landscape.

Firstly there is the impact of the Coronavirus pandemic. The maintenance of critical services through the pandemic and managing the resource constraints Covid infections of staff and service users has been, and continues to be, a challenge. It has placed limitations on some areas of work and required some compromises in the methods of delivery, a key example of this being in the delivery of child and adult protection training. Moving to online delivery of courses continues to reduce travel time and offer flexibility of access to training, however interactive learning needs to be balanced with the technical demands of available tools on participants and trainers. Continuing operational demands have placed limitations on work to engage with the public, develop the PPC website and progress planned improvements to some aspects of data management.

The second major issue influencing the work of the PPC this year has been the Inquiry by Andrew G Webster QC commissioned by Scottish Borders Council into the handling by SBC of assault allegations against a former teacher in one of the Council's primary schools. The report was published in February 2022 and the plan of actions for improvements required by that report has been reported on to the PPC as an interested party. The Council accepted the recommendations of the Independent Report in full and apologised for the failings it identified and the impact on the children and families involved. For the PPC the key recommendations from it are primarily those relating to ensuring the quality of training and learning of staff across all agencies in child protection, and clarity in our policy and procedures with regard to allegations of harm perpetrated by adults working in care and education settings. That work, alongside the work across Edinburgh and the Lothians to develop shared Child Protection Procedures in response to the revision of National Guidelines published in September 2021.

These challenges form a backdrop to the activity and achievements described in the following pages.





CONTINUOUS IMPROVEMENT

A primary function of the PPC is to engage in continuous improvement activity. This includes ensuring that local policies, procedures and guidance are effective in protecting adults and children; and that systematic approaches to self-evaluation are in place, which focus on the lived experience and outcomes for children, families and vulnerable adults, learn from case audits and take learning from local and national inspections and research into account.

2021-22 has seen some work progressing to ensure that our local policies and procedures are fit for purpose and effective in keeping children and adults safe.

A consultation across Police, Social Work, NHS and 3rd sector led to the creation of our first multi-agency Adult Support and Protection Procedures. These include improvements to the process, recording and data collection ensuring that the service user and carers are central to the process, and will be implemented from August 2022. A joint project with Edinburgh, Midlothian and East Lothian is progressing a revision of our Child Protection Procedures in line with the revised National Guidance for Child Protection in Scotland 2021.

Scottish Government and COSLA have provided support for a pilot of the National Referral Mechanism (NRM) Toolkit for First Responders in Scotland in Scottish Borders. The NRM Toolkit was commissioned to improve the formal identification of victims of trafficking and ensure that frontline staff and potential victims are clear on the process and possible outcomes of this national pathway to identification and protection. The Scottish Borders NRM Toolkit implementation pilot aims to evaluate the impact of a structured implementation of the toolkit for First Responder agencies in Scottish Borders by providing a framework linking strategic leadership to frontline practice and protocol development. Training and awareness sessions for first responders and the wider workforce will ensure that all staff are aware of this important initiative.

Information gained through our suite of Performance Indicators, regular programme of case file audits, learning from practice reviews, Initial Case Reviews and staff engagements has highlighted both areas of good practice and improvement opportunities. Detailed information of our performance against key Performance Indicators is contained in Appendix 3. Examples of initiatives arising from self-evaluation activities can be found on the next page.

Social Work, Police, Health and Housing staff attended a series of Multi-agency Public Protection Arrangements MAPPA workshops exploring learning from Case File Audits, Initial Case Review and Significant Incident Review findings. Areas of positive practice identified included consistent multi-agency work and information sharing; clear, proportionate Risk Management Plans with responsive action taken to address changing areas of risk; and appropriate MAPPA oversight. Learning included improvements in practice focussing on embedding the “Think Family” approach.

“...it was useful to hear about the findings as there can be a lot of anxiety surrounding reviews for workers. Hearing about the process is a reminder that the reviews are a positive way to reflect on mistakes and learn from them moving forward.” Workshop delegate

A range of new initiatives support shared understanding and consistent practice across agencies.	
<p>The Child Protection Delivery Group noted a need for a renewed clarity and focus on the use of the Chronology of Significant Events throughout the CP process. This tool provides an overview of the life experiences of a child, leading to more effective and appropriate decision making and planning. A multi-agency working group agreed expectations for the provision of single-agency Chronologies, and awareness raising materials were disseminated to all relevant staff groups.</p>	<p>A practice review focussed on multi-agency roles and responsibilities for identifying and responding to parental vulnerabilities that present risk for unborn babies. Practitioner briefings highlighted the need for exercising professional curiosity, and taking a Think Family approach. A new protocol for midwives and Health Visitors managing non-access visits has been established, and the escalation policy in our Child Protection Procedures has been revised.</p>
<p>A frequently asked question by Care at Home and Care Home managers is how to appropriately respond to allegations of harm made against staff members. A video and fact sheet have been produced, and will be made available to all relevant service providers.</p>	<p>Case file audits and practitioner demand led to the creation of briefing materials to promote collaborative working with parents through use of the Neglect Toolkit to identify and address issues of neglect. A refreshed training session was delivered to 41 practitioners and will be added to our ongoing multi-agency training programme</p>
<p>A successful appeal against the decision of a Child Protection Case Conference led to a renewed focus on ensuring each child in a sibling group has their strengths and needs assessed as a unique individual. All relevant staff were provided with practice guidance on assessment and contributions to CP Case Conferences to support this.</p>	<p>An Initial Case Review led to Sex Offender Policing Unit Risk Management Plans being further enhanced, where there are concerns in relation to Domestic Abuse or if violence has featured in an individual's history. Improvements include the case manager having sight of the Domestic Abuse Risk Assessment and regularly speaking with partners when the managed person is not present.</p>
<p>The success of the Disclosure Scheme Domestic Abuse Scotland (DSDAS) awareness raising sessions for multi-agency practitioners delivered by Police Scotland has increased the number of applications under Power To Tell and resulted in a Scottish Borders specific Decision Making Forum held every four weeks.</p>	<p>A series of short summary flowcharts for key stages of the Child Protection process have been added to our online CP Procedures. These provide multi-agency staff with an overview of the purpose of, and practitioner expectations at Referral, Interagency Referral Discussion and Joint Investigative Interviews stages.</p>



STRATEGIC PLANNING AND CONNECTIONS

PPC has a key role in ensuring its plans reflect robust connections with wider service planning and delivery locally and nationally, and to develop and promote effective interagency working.

Members of PPC and the associated Delivery Groups and Partnerships sit on a number of national groups and committees and bring learning from them to Scottish Borders. Key ongoing links are with Child Protection Committee Scotland, the Adult Support and Protection Conveners' Group and Adult Support and Protection Lead Officers' Group. In this reporting year, a series of 5 Nations ASP Conferences provided additional opportunities for learning from across Scotland and the UK.

“Several hundred people attend these conferences and share the really difficult practice challenges across the 5 nations with some of the leading experts in Adult Protection work in the UK. Despite the legal systems being different, the demands of the work with very vulnerable people are so common, and there is so much common learning we are able to share”.
Independent Chair, PPC

A number of specific areas of practice have been reviewed in collaboration with other local authority areas to progress joint initiatives, or incorporate successes into our local practices. PPC submitted a response to the national Mental Health Law Review, focussed on embedding people's rights further into our ASP services.

Co-location of ASP and CP practitioners from Health, Social Work and Police Scotland in the multi-agency Public Protection Unit (PPU) at Langlee in Galashiels facilitates information sharing and joint assessment and decision making. Strengthening the remit of Adult Protection Officers (APOs) in relation to providing advice and guidance to frontline practitioners and support to Team Leaders has been well received.

“the communication, advice and support underpin our work within Adult protection. I know the team and colleagues view the linked APO as a supportive, constructively critical analyst. Our APO is trusted by myself and others and they represent our conduit into the wider PPU team which is essential for all aspects of the work we encounter” staff member

Bringing together the different perspectives and experience of practitioners from the different agencies at the PPU allows for more robust and comprehensive strategic planning and quality assurance work.

"The development of the PPU led directly to the multi-agency file audits, an area identified as important in monitoring whether our tri-partite approach is being replicated in practice." Staff member

The Care Inspectorate and national Adult Support and Protection Lead Officers' Group highlighted Dundee's model for training Council Officers as an example of good practice. Mid Lothian and East Lothian developed a new training course based on this model. Prospective Council Officers in Scottish Borders will join their colleagues from the Lothians for this training, supplemented by specific procedural training offered by our local Training and Development Officers. By linking resources we are now able to train Council Officers to be more reflective in their practice, whilst increasing their knowledge and experience of working with our most at risk service users. The arrangement will also strengthen working relationships and increase expertise across Local Authorities.

Various national programmes are delivered locally by statutory or third sector services.

Through the National Advocacy Project, Scottish Borders Rape Crisis Centre (SBRCC) provide dedicated specialist advocacy for survivors of sexual violence who have, or are considering reporting, offences to the Police. SBRCC also deliver the National Sexual Violence Prevention programme in partnership with our schools and youth groups. The programme comprises workshops on seven different topics, adapted for four age groups, and places an emphasis on young people's participation and leadership. Since 2014, SBRCC have delivered 982 workshops and reached 10,620 young people.

"I feel that the most important thing I learnt is that you don't have to do anything sexually even if your partner wants to - S3 pupil

In March 2022, Scottish Borders Justice Services moved away from an established partnership with Edinburgh and Lothians, taking on sole responsibility for the local delivery of the Caledonian System, an integrated approach to addressing domestic abuse, combining a court ordered programme for men, and support services for women and children. Both male and female service users have seen benefits from this change. Barriers to programme attendance due to travel have been removed, and there has been a widening of the service's ability to offer support to women, and provide advice to colleagues and services. Scottish Borders has initiated a National Group-worker Peer Group to discuss best practice amongst group-work facilitators across the country.

"The group being in Galashiels enables me to attend. I would not be able to travel to Edinburgh due to my work." Male Service User

"The support given to me by the women's worker has made me feel more confident in my decisions around child contact and telling my children's social worker/children's hearing how I feel and what I need." Service User- Female survivor/victim

In the latter half of 2021, Justice Services carried out a review of Drug Treatment and Testing Order (DTTO) provision in Scottish Borders. Taking learning from Edinburgh, the Ayrshires and Dumfries and Galloway together with focus groups with NHS Borders addiction service providers, an improved and holistic model for DTTO delivery was developed. The service has removed previous constraints that limited treatment pathways to those who were opiate dependent only, widening the ability to address other problematic drug use and related offending. DTTO social work staff have been trained to undertake drug testing and to use the Outcomes Star needs identification tool, and a counselling / support service introduced to offer bridging support to those awaiting allocation to NHS Psychological Services. Early indicators suggest the new service model is enhancing attendance and compliance, and increasing Court confidence for delivery outcomes.

The Scottish Child Interview Model (SCIM) is a new national approach to Joint Investigative Interviews of children. Practitioners from Police and Social Work have been trained in undertaking these interviews, and managing and evaluating the SCIM model. Work to embed this into our practice began in March 2022, with the aim of all Joint Investigative Interviews taking place in line with this model by the end of 2024. Further information on SCIM can be found on the next page.

7. Want to read more?

Visit the National Joint Investigative Interviewing Project for updates on:

- Learning from the test sites
- Insights from interviewers
- Presentations on the model
- Evaluations
- Newsletters

<https://www.cosla.gov.uk/about-cosla/our-teams/children-and-young-people/joint-investigative-interviews-of-child-victims-and-witnesses>

1. What is the Scottish Child Interview Model for joint Investigative interviewing?

- This is a new approach to joint investigative interviewing which is trauma informed and maintains the focus of the needs of the child in the interview to minimise re-traumatisation.
- It also aims to improve the quality of evidence gathered to avoid children having to give evidence in person as part of court or children's hearing processes.

2. Why was there a need for change?

- The National JII Project forms part of the response to recommendations within the Evidence and Procedure Review (2015) which set out the aspiration to remove the need for children to give evidence in court by achieving a position in which the joint investigative interview could be led as 'evidence in Chief'.
- The new model was piloted by four test sites in Scotland to gather learning to inform the national rollout.

6. What does it mean for other professionals around the child?

- It is important that all agencies have an awareness of the model in order to support children and families involved within this process.
- You may also have an important role in the planning of interviews. For example: in relation to sharing information around the child's communication needs, health needs, strengths and coping skills and/or general information about the child's interests (to aid rapport building)

3. Why is adopting this approach so important for our children and young people?

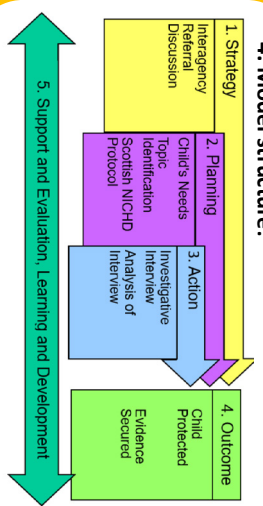
- Interview plans are bespoke and informed by the individual needs of each child.
- Planning is comprehensive and focuses on maximising the child's participation.
- Support for the child before, during and after interview is considered within the comprehensive planning.
- The key outcome is to ensure children are protected from abuse, harm and exploitation.

5. Who will carry out the JII?

- The new model recognises that forensic interviewing of children is a specialist skill.
- Across East Lothian/Midlothian & the Scottish Borders, there are 8 trained staff (4 Social Workers and 4 Police Officers) who have completed an accredited programme consisting of 5 modules.
- The LA where the child resides will retain responsibility for the wider child protection, safe care and support planning around the child.



4. Model structure:



All five components must be implemented for children to experience the intended benefits of the approach.

The Herbert Protocol is a nationally adopted tool to support the location of missing adults. A joint initiative between Police Scotland, NHS Borders and Scottish Borders Council Social Work delivered presentations across forums in statutory and 3rd sector forums to ensure that people working with anyone who has a dementia diagnosis and may be at risk of going missing are aware of and completing the tool. This work was highlighted in a national press release for the national launch of the Herbert Protocol in September 2021.

“The Herbert Protocol form can be completed by a family member/carer and placed within the person’s home or care setting. It ensures all relevant information can be passed quickly to police and will help officers implement a more focused search. It’s a very simple process, but the benefits of doing so could mean a lot – not only to the police but also the family and loved ones of the person reported missing.” DCI, Scottish Borders Public Protection Unit

The complex multi-agency nature of PPC means that some areas of PPC activity are measured and reported against national standards (for example the Child Protection Minimum Dataset, The Equally Safe Quality Standards, and the Adult Protection Annual Return) or through statutory reporting direct to Scottish Government for use in nationally aggregated reports. A significant local report made publically available is the Edinburgh, Lothians and Scottish Borders Multi-Agency Public Protection Arrangements Annual Report. This provides a statistical overview of MAPPa activity, in addition to activity and partner contribution toward the Management of Risk for offenders assessed as posing a high or very high risk of serious harm to the public. The latest local MAPPa report can be found at [MAPPa annual report 2020/21 | Scottish Borders Council \(scotborders.gov.uk\)](https://www.scotborders.gov.uk/mappa-annual-report-2020/21)





PUBLIC AND PROFESSIONAL INFORMATION, ENGAGEMENT AND PARTICIPATION

PPC has a significant role in raising awareness and providing information and advice to the wider community and professionals; ensuring that appropriate, high quality learning and development activities are available to staff and volunteers; and that the views of people who use our services and our practitioners are reflected in our service delivery and plans.

PPC has a number of tools at its disposal to gain the views of practitioners and the adults and children who use our services. These include online surveys, 1-1 interviews and focus groups. Improvements to the way adult's views are captured and recorded through the ASP process and easier access to surveys for parents and children through the use of a strapline in all correspondence including QR codes and a short hyperlink have been introduced over the year. Our Domestic Abuse Advisory Service conducts an exit survey with all service users, details of which can be found in Appendix 4.

To encourage children and young people to express their views and participate in the Child Protection process, SBC have funded a three year trial of the Mind of My Own (MOMO) app. Two versions of the app help children and young people of all age and stage to communicate their views as and when they wish. All social workers were offered training, practice standards were produced and circulated to all staff. Worker booklet and parent/carer booklets were also provided. Newsletters issued in September 21 and January 22 continued the promotion of MOMO. In January 2022 Scottish Borders Council won the Mind of My Own Christmas Campaign as a steady increase in use of the app and statements being submitted by young people.

Pressures on resources have meant that we have not engaged with the public as much, or in as many ways, as we would like. Progress with the PPC website – our planned primary portal for information and awareness raising – has been limited, and it has only been towards the end of the year that we have been able to develop online awareness raising sessions for public groups. PPC has supported local and national campaigns over the year, through SBC and NHS social media and local events. Over the course of the year, we have developed and disseminated a number of information and awareness raising materials for service users and public groups. Some examples can be found at Appendix 7.

#16DaysofAction is a world-wide movement to raise awareness of violence against women and girls. People in the Scottish Borders were asked to play their part through a range of events between 25 November and 10 December 2021. Scottish Borders Rape Crisis Centre coordinated a Reclaim the Night Candlelit Vigil at Heart of Hawick, launched a new support service for women aged 18 and over who have experienced sexual violence and ran a social media campaign throughout the #16DaysofAction. SBC Headquarters was floodlit orange as a demonstration of the commitment to highlight and raise awareness of this issue.

We have made changes directly in response to feedback from service users and front line staff.	
You said...	We did...
You wanted more information about Child Protection investigations.	Created new leaflets for parents, explaining what to expect, including what happens at a Joint Investigative Interview.
You wanted increased engagement in the Annual CP Update session for Education, Early Years and Community Learning and Development staff.	Incorporated opportunities for staff to reflect on how the learning applies to their role and setting, throughout this online session.
Staff and service users wanted leaflets in accessible formats, to promote understanding of our Adult Support and Protection interventions.	Developed New Easy Read leaflets: "Adult Support and Protection, what is harm"; "A guide to Adult Support and Protection Case Conferences" and "Adult at Risk of Harm".
Third sector partners asked for an online method of providing feedback after involvement in Adult Support and Protection processes.	Created an online survey for Adults has been created which has been sent out throughout 3rd sector and statutory services to encourage and support with completion of the survey.
You told us that attending ASP Case conferences was difficult.	Provided guidance for Council Officers to support more effective engagement with Service Users, and updated our guidance for Chairs to include direct contact with Service Users before and after Case Conference to ensure that they were supported to attend.
Staff in gender based violence services requested service support leaflets in Ukrainian and Russian.	Sourced and circulated information leaflets in both languages.

PPC uses a variety of methods to communicate with staff groups across the multi-agency workforce, including newsletters, emails and notices on agency intranets. Each Delivery Group and associated Partnership has a comprehensive Dissemination Strategy, which ensures that information is passed to front line staff.

As part of the Adult Protection Delivery Group improvement plan, a monthly newsletter for Council Officers has been launched. "The Gazette" provides information on developments within Adult Support and Protection in one place, providing an easy way for Council Officers at the centre of the ASP process to keep up to date. The Gazette has included updates on the procedures, books to read and highlights specific documents to support their practice, such as: Keeping Adults Safe & Well Tool, the new Council Officer Re-accreditation process and the multi-agency agreed Second Worker Guidance. Feedback from Council Officers is positive, indicating that most of their questions are answered through The Gazette.

The Joint Learning and Development Strategy and Framework agreed by PPC in 2021 have been disseminated, and will support the identification of appropriate training for staff and volunteers across all organisations. In line with these, staff and volunteers are supported by a range of learning and development opportunities, including training sessions, workshops, 7 minute briefings and self-learning materials.

"Great piece of work by the way – including definitions is really helpful, especially when it feels like people more often than not look blankly when 'competencies' are mentioned" Lead Clinician, NHS Borders re Strategy/Framework

From January 2022, the PPC Training and Quality Assurance team have developed and delivered a suite of new Child Protection and Adult Support and Protection courses. A proportion of this training is delivered as joint "Public Protection" courses, which provide staff with an understanding of common themes and shared responsibilities, promoting the "Think Family" approach and more effective working between children's and adult services. A diagram showing how these new courses align with previous training equivalents can be found on the next page.

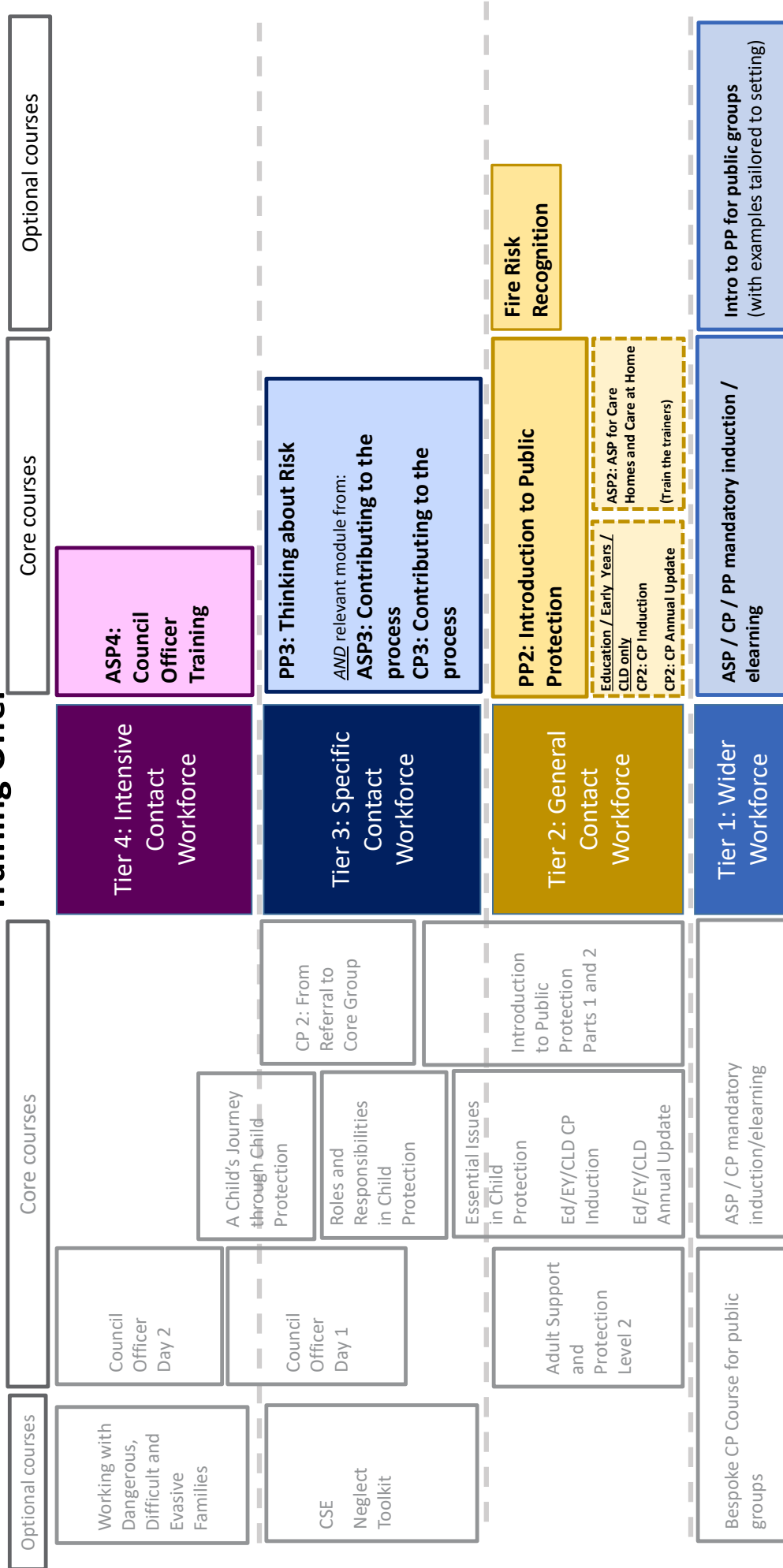
The PPC Training and Quality Assurance Team facilitated additional courses delivered by partner agencies or national trainers, including Working with Self-Neglect and Hoarding delivered by the Adult Support and Protection National Lead Officer and Fire Risk Recognition delivered by Scottish Fire and Rescue.

We have increased our training capacity by developing a Train the Trainers model for some Adult Support and Protection training. This equips managers and senior practitioners in Care Homes and Care at Home to deliver Tier 2 Adult Support and Protection training to their staff. A partnership with Borders Care Learning Network to deliver this course to Personal Assistants and staff in smaller social care organisations further increases the reach of this training opportunity.

"Really useful course that allows providers to deliver training and not have to wait months to have staff appropriately trained to recognise potential harm." Train the Trainers delegate

ASP / CP Multi-agency Training Offer

New Courses from January 2022



Training programmes for the multi-agency workforce were delivered by the Violence Against Women and Girls Partnership This included sessions on domestic abuse risk assessment, basic domestic abuse awareness, responding to sexual violence, trauma informed practice. Over 100 staff from a range of agencies have attended sessions on the Disclosure Scheme Domestic Abuse Scotland (DSDAS). National training events and workshops were also available to staff on Authentic Voices (working with survivors to improve services), Working with Women affected by disability, Commercial Sexual Exploitation and a range of sessions on the impact of COVID on gender based violence.

Scottish Borders Rape Crisis Centre workforce received training to ensure they have the skills and knowledge to increase participation and engagement within diverse intersectional communities. This included training on supporting Black and Minority Ethnic survivors and survivors with learning difficulties.

“We were absolutely blown away by the steps you have clearly taken in the last few months, as described by people on the workshop. We said to them (and meant it!) that it was the best response to access issues we have seen from anyone in the last three years.” Training Provider – Us Too

The Scottish Borders Alcohol and Drugs Partnership continued to deliver its workforce development programme. This included courses delivered by local trainers and partner agencies and facilitation of courses delivered by national groups such as Scottish Drugs Forum, Scottish Families Affected by Drugs and Alcohol and CREW. In 2021-22, developments included extending the Drug Trend Monitoring Group Continuing Professional Development (a relevant update from Police Scotland Drug Expert Witness Unit) events to any interested parties, introducing regular short information sessions to allow staff to familiarise themselves with available services, and work on embedding family inclusive and trauma informed practice approaches across all training provision.

Further information on the range of courses provided, statistical and evaluation information can be found in Appendix 5.





APPENDICES

ABBREVIATIONS AND ACRONYMS	24
PPC BUSINESS PLAN 2021-2022	25
PUBLIC PROTECTION PERFORMANCE INDICATORS	27
DOMESTIC ABUSE ADVISORY SERVICE EXIT INTERVIEW ANALYSIS APRIL 2022	31
TRAINING PROVISION	32
7 MINUTE BRIEFING: REVISED NATIONAL GUIDANCE FOR CHILD PROTECTION	35
PUBLIC PARTICIPATION AND ENGAGEMENT MATERIALS	36

APPENDIX 1: ABBREVIATIONS AND ACRONYMS

ADP	Alcohol and Drugs Partnership	MOMO	Mind of My Own
APDG	Adult Protection Delivery Group	MS TEAMS	Microsoft Teams
AP	Adult Protection	NHS	National Health Service
ASP	Adult Support & Protection	NRM	National Referral Mechanism
CEDAR	Children Experiencing Domestic Abuse Recovery	PPC	Public Protection Committee
CLD	Community Learning And Development	PPI	Public Protection Indicators
CP	Child Protection	PPU	Public Protection Unit
CPCC	Child Protection Case Conference	SB	Scottish Borders
CPDG	Child Protection Delivery Group	SBC	Scottish Borders Council
CP/LAC	Child Protection / Looked After Child	SBRCC	Scottish Borders Rape Crisis Centre
CPRO	Child Protection Reviewing Officer	SCIM	Scottish Child Interview Model
CSE	Child Sexual Exploitation	SCR	Significant Case Review
CSOG	Critical Services Oversight Group	SOPU	Sex Offender Prevention Unit
DA	Domestic Abuse	SW	Social Work
DAAS	Domestic Abuse Advisory Service	T&DDG	Training and Development Delivery Group
DG	Delivery Group	VAWG	Violence Against Women and Girls
DTTO	Drug Treatment and Testing Order	VAWP	Violence Against Women Partnership
IRD	Initial Referral Discussion	VYP	Vulnerable Young Person
JSNA	Joint Strategic Needs Assessment		
MAPPA	Multiagency Public Protection Arrangements		

APPENDIX 2:

BUSINESS PLAN 2021-2022

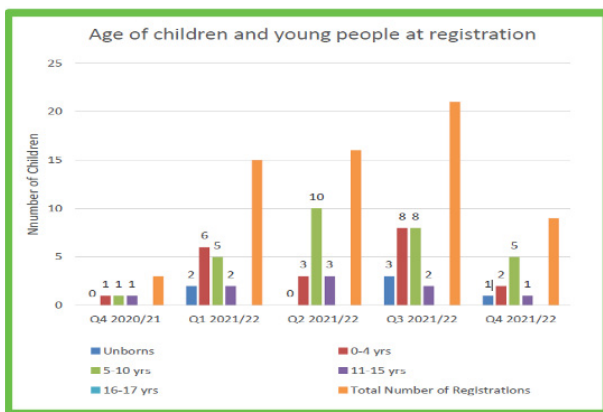
The following is an abridged version of the PPC Business Plan. All actions were continued from 2020-2021.

What needs to be achieved and why?	Measure
<p>1. Vulnerable Young Person's (VYP) protocol We will fully review the VYP protocol in line with local and national developments. As a result of Covid-19 this work was not progressed as planned last year. Although being fit for purpose, in the meantime, there are changes that will improve the process and outcomes</p>	<p>1.4 Findings from the practitioner survey considered and taken into account by CPDG</p> <p>1.1/1.2 Protocol updated and disseminated – evidenced by the dissemination strategy</p>
<p>2 Co-production /establishment of feedback mechanisms for users of the Adult Protection services and their carers. Rationale: We will listen to user and carer voices has been highlighted as a gap by the work on the JSNA for Vulnerable Adults</p>	<p>More views being gathered</p>
<p>3 Review of Domestic Abuse Refuge provision and implementation of recommendations. Rationale: highlighted by VAWP (alongside re-establishment of specialist Courts, but the response from the Procurator Fiscal on the latter indicated no prospect of restoration until the pandemic is over)</p>	<p>3.1 There is an agreed model of safe housing options for families experiencing domestic abuse.</p>
<p>4. Implement new national CP Guidance. We will timeously bring local procedures and practice into line with the final version of the proposed new National CP Guidance</p>	<p>4.9 Findings from the practitioner survey considered and taken into account by CPDG</p> <p>4.5 Communications /Newsletters to be circulated monthly to staff and recorded as per dissemination strategy</p> <p>4.1 – 4.9 Progress made in changing SB CP procedures that is clearly communicated to staff</p> <p>4.8 Links made with adult services to address the support to young people as indicated in the new Guidance</p>
<p>5. The Promise We will remain in contact with the Corporate Parenting Board around the progress of incorporating the Promise in the work of agencies.</p>	<p>5.2 Survey responses considered by CPDG</p> <p>5.4 Development of the new SB CP Procedures</p>
<p>6 Consider Care Inspectorate final Triennial Report on SCRs We will consider and respond to the Care Inspectorate final Triennial Report on SCRs as part of Looking Out/Looking in. The report is expected to be published in May 2021 and we will respond as necessary</p>	<p>6.1 Issues/areas for improvement identified and allocated to delivery groups for action.</p> <p>6.2 Relevant information referred to staff – evidence as per the dissemination strategy</p> <p>6.3 Identified actions being progressed by delivery-group</p>

What needs to be achieved and why?	Measure
<p>7. Involving the voices of those with Lived Experience - children, parents - in the improvement work Children: We will follow up on Always Be Wary co-production with young people work to adapt for primary aged children and the roll out to all to primary schools Parents: We will increase ways to gain the views of parents NB For the duration of the Covid-19 pandemic actively involving young people, parents and those with lived experience in child protection improvement has been put on hold.</p>	<p>7.1 Any actions from the report to be considered with the context of what is realistic being progressed to ensure that all primary school aged children have had the opportunity to use the materials and that it is fit for purpose 7.2/.3 Parents survey numbers to be monitored to evidence whether new approaches have resulted in an increased number of survey completed. Any recommendations from the parent survey report to be actioned by CPDG to optimise gaining the views of parents.</p>
<p>8 Safe & Together programme We will begin to implement the 3 core principles and critical components of the S&T model. We will require Senior commitment to Safe and Together practice implementation.</p>	<p>8.3 Core principles and language of Safe and Together are embedded in policy and practice across all agencies. 8.4 Multi-agency workforce is able to access training 8.5 Evidence of promotion of Safe and Together principles</p>
<p>9 Put in place a programme of Adult Protection audit activity (NB dependent on appointment to the relevant post).</p>	<p>9.1 Audit completed and learning disseminated from all audit activity</p>
<p>10. Review of Public Protection Indicators We will undertake a review of the PPIs with a focus on the most salient indicators and any subsequent new proposals will be considered. This review will follow a period bedding in for the existing indicators to provide a period of data reporting stability, without major changes to measurements, to establish trends.</p>	<p>10.1 Q1 2021-22 (Aug – Oct 2021) PPI reporting amended to reflect the agreed changes based on the review of PPI following the Q4 2020-21 reporting. 10.1 CSOG, PPC, CPDG and APDG minutes acknowledging the agreed changes.</p>
<p>11. To increase the workforce learning and development opportunities available digitally We will increase the workforce learning and development opportunities available digitally in response to continuing COVID-19 restrictions and changing learning and development preferences of our workforce</p>	<p>12.1 Number of people receiving training 3 month post-course evaluation evidences positive impact on practice 12.2 Number of people receiving training 3 month post-course evaluation survey evidences positive impact on practice 12.3 Staff supported in their practice through being able to access relevant information quickly and flexibly</p>
<p>12. Joint Investigative Interview Training (JIIT) Project We will ensure a partnership awareness and commitment in relation to the changes to the JIIT approach and process</p>	<p>13.1 SW/Police identified and JIIT trained 13.2 CPDG are satisfied that partners are JIIT aware with a commitment to participation as needed.</p>
<p>13 We will maintain an oversight of MAPPA</p>	<p>National Guidance</p>
<p>14. We will increase the number of men who undertake and successfully complete the Caledonian Systems Programme. And in doing so will reduce risk of harm to others.</p>	<p>Caledonian Systems programme delivery guidance and national data collection</p>

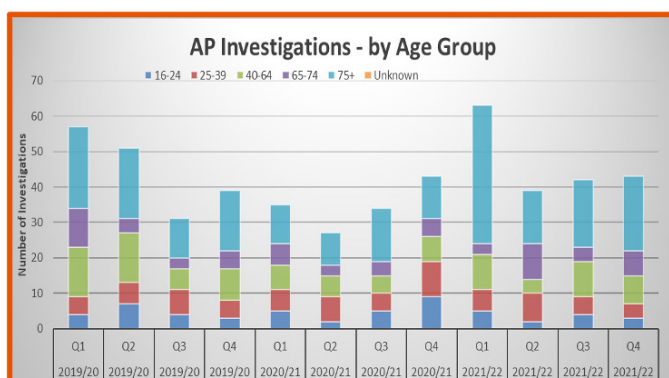
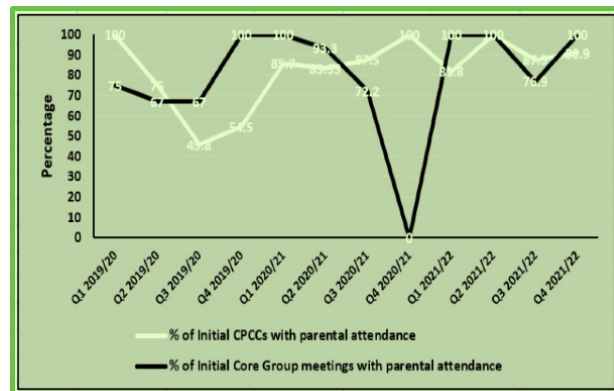
APPENDIX 3: PUBLIC PROTECTION PERFORMANCE INDICATORS

The PPC considers information gathered across a range of agreed Performance Indicators (PPIs), reviewed quarterly by Delivery Groups and the PPC and reported to the Critical Services Oversight Group. PPIs provide insight into how our processes help the people we work with, and inform improvement work. This appendix contains some representative information.



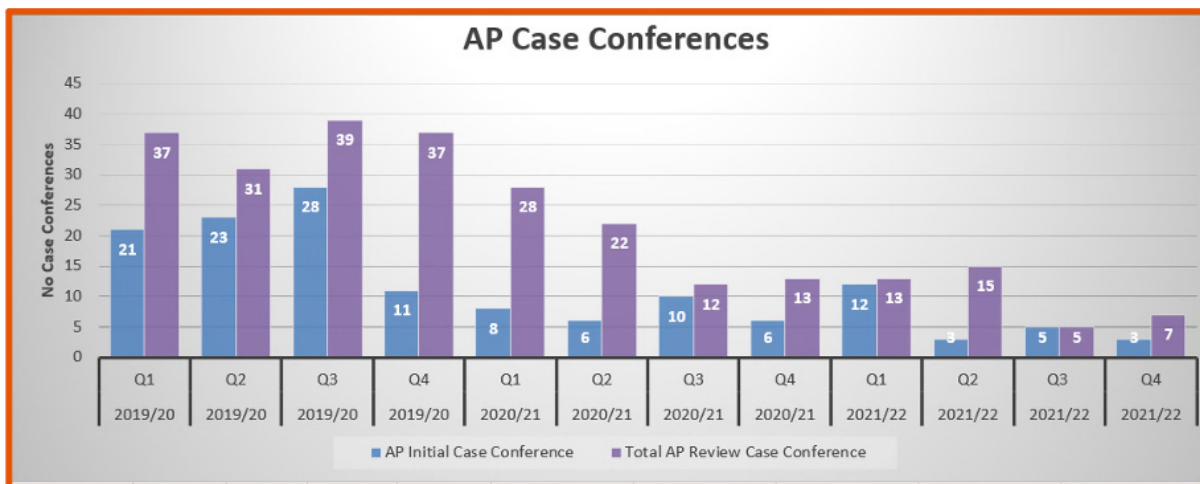
At the beginning of the pandemic there was a reduction in IRD's and consequently a drop in **Child Protection Case Conferences** – which is reflected in Q4 2020/2021. Throughout the pandemic conferences were held remotely with a good level of participation from parents/ carers. The spike in Q3 is due to large sibling groups. At this stage we have never taken any young person over the age of 16yrs to Child Protection Case Conference - in line with local Child Protection Procedures currently in place.

Generally, parental attendance at the initial **Child Protection Core Group** is high. Q4 2020/21, where the graph indicates 0% of initial Core Groups with parental attendance is inaccurate. During that period there was 100% attendance from parents at initial core groups. Holding the initial Core Group remotely (as required throughout the pandemic) is a practice that we will continue with as parents are in favour of this approach. We will hold in person initial core groups if this is the preference of the family.

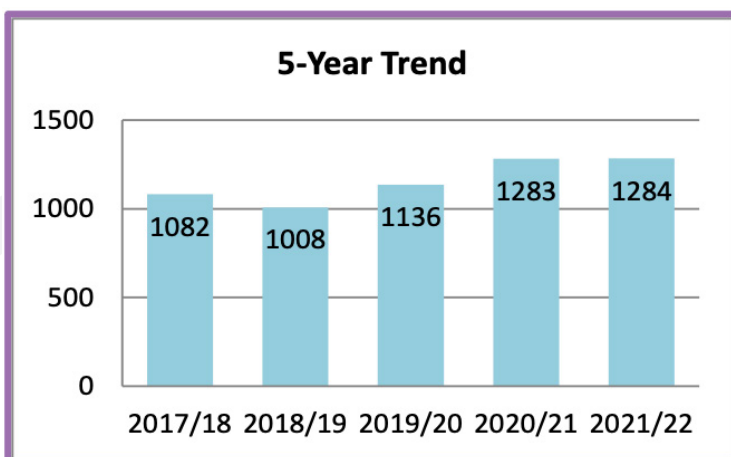
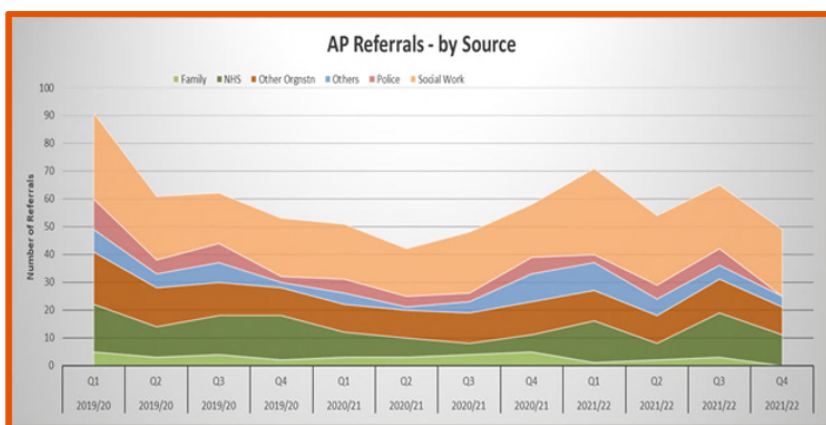


The largest number of **Adult Support and Protection Investigations** are still in relation to Adults over the age of 75. The notable increase in Q1 could be attributed to the country coming out of Covid restrictions and seeing an overall increase in Investigations.

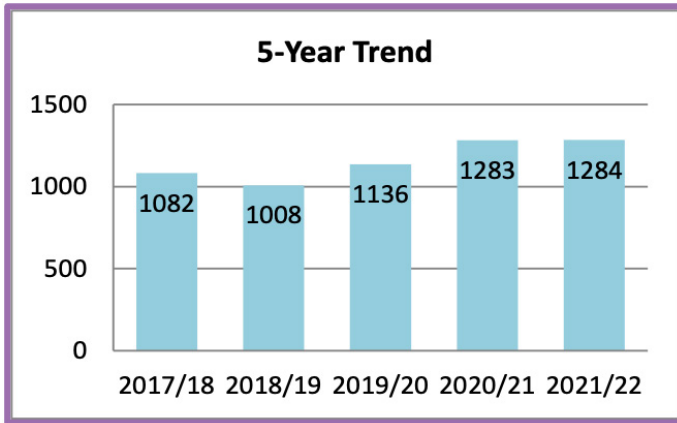
There has been a steady fall in **Adult Support and Protection (ASP) Initial Case Conferences**. This is due to the fluid ASP process and robust Inter-agency Referral Discussions (IRD) that enable an adult support and protection plan to be identified and implemented at an earlier stage. This upholds a key provision of the Adult Support and Protection (Scotland) Act 2007, which requires that any involvement under ASP should be the least restrictive and of benefit to the Adult.



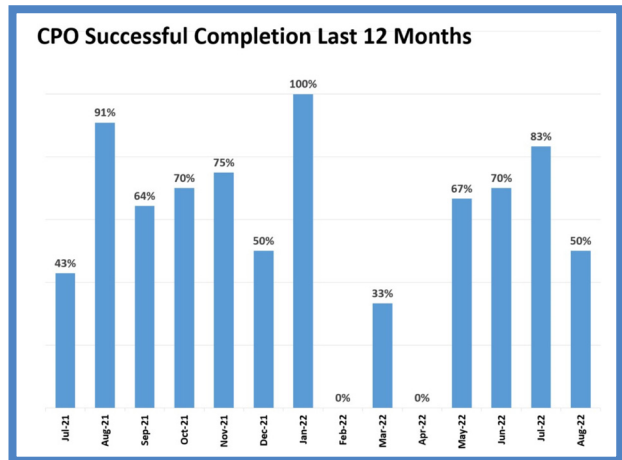
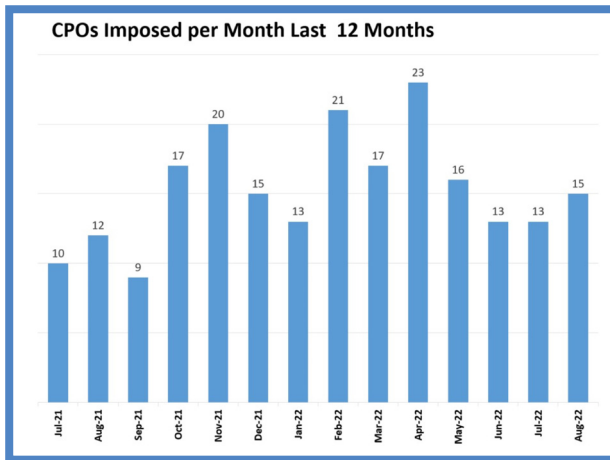
The majority of **Adult Support and Protection referrals** are from Social Work, followed by the NHS. The source of referral has remained reasonably stable throughout the year.



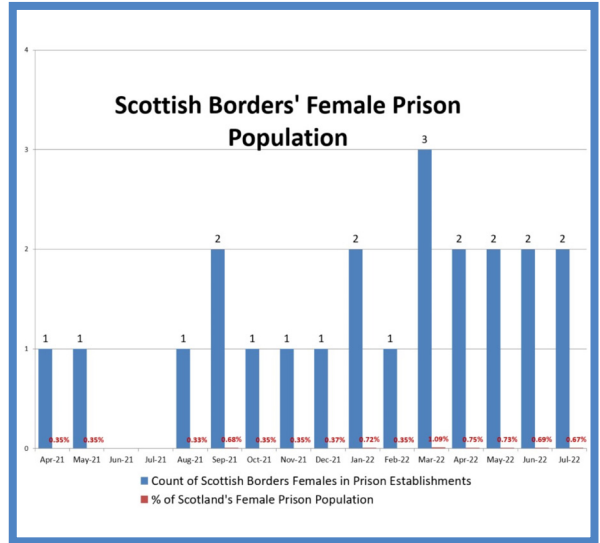
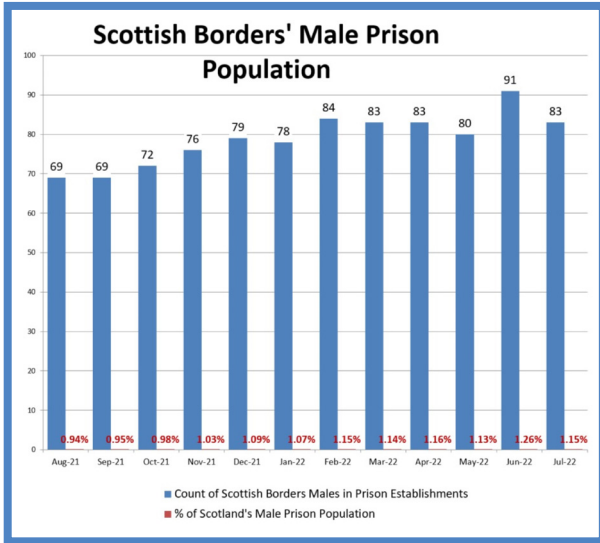
Whilst the 5-year trend shows increasing **numbers of reported incidents of domestic abuse**, there remain concerns that domestic abuse is underreported. Police Scotland and Scottish Borders Council Management Team are provided with regular information about the number of incidents and related referrals to the Domestic Abuse Advisory Service for continued scrutiny.



The number of **high risk domestic abuse cases discussed at Multi-Agency Risk Assessment Conference (MARAC)** has at times exceeded the capacity of the meeting to manage. This has led to consultation and a new model for MARAC meetings that maintains the integrity of the process and ensures that MARAC remains safe and effective.



Community Payback Orders, including those with Supervision and or Unpaid Work and Other Activity, reduced in number due to the court not being in a position to undertake business within usual parameters due to Covid restrictions. As we move forward on our Covid recovery path and as the court resumes business as “usual”, the service has not experienced an anticipated increase in CPO numbers.



While the graphs would appear to indicate an increase in the number of men and women normally residing within Scottish Borders, who are **subject to custody** during the reporting period, the actual number of sentenced individuals has remained relatively steady to previous reporting years. The dominant area of increase is in the remand population, who are awaiting initial presentation at court or a sentencing diet. Going forward, the recent introduction of Bail Supervision and Electronic Monitoring may go some way to reduce the numbers of those placed on remand, while providing offence focused interventions and social integration from a dedicated team of Justice staff.

APPENDIX 4: DOMESTIC ABUSE ADVISORY SERVICE EXIT INTERVIEW ANALYSIS APRIL 2022

Domestic Abuse Advocacy Support Service – How Did We Do?

The DAAS service seek consent from every client to contact them up to three months after they exit the service to learn:

1. Did the service meet their needs?
2. Did the service help them feel safer through reduced risk and safety planning
3. Did the service need to do anything else that might have helped
4. How has their life improved as a result of working with DAAS
5. How did other agencies respond to their situation

Exit interviews are conducted by telephone and take approximately 10 mins to complete

Three attempts are made to conduct the Exit Interview before classing it as Unable to Contact.

Interview data is analysed by the Safer Communities Partnership Analyst.

These results are from the period 1/4/21 to 31/3/22



- **29** clients consented to Exit Interviews 1st April 2021 to 31st March 2022.
- **13** exit interviews were not conducted due to being unable to safely contact the clients or where clients had re-engaged with the service.
- **16** exit interviews in total conducted from 1st April 2021 to 31st March 2022.

Impact on resources?

Prior to working with DAAS **69%** of clients made **1** or more calls to the Police this reduced to **50%** after working with DAAS (a 19 percentage point reduction).

Of the clients surveyed the total number of calls made to the Police was **34** before working with DAAS and this reduced to **11** after working with DAAS.

Quality of life – how has this changed?

After working with DAAS **75%** of clients reported being much happier and **100%** reported being slightly or much happier.

Improvement: Overall?

When reviewing all criteria used to assess the effectiveness of the service **9** clients' situation improved, **4** clients' situation stayed the same and **3** clients' situation slightly worsened.

9 respondents had children

After working with DAAS **89%** of clients reported that their childrens' **wellbeing** was slightly or much improved.

After working with DAAS **89%** of clients reported that their childrens' **safety** was slightly or much improved.

Safety: how much safer did you feel?

After working with DAAS **50%** of clients reported much improved feelings of safety and **90%** reported slight or much improved feelings of safety. This figure is higher than 2020/21.

“*kids are so much happier and my family are so much more aware of what I was going through.*”

Client Exit Interview Quote November 2021

APPENDIX 5: TRAINING PROVISION

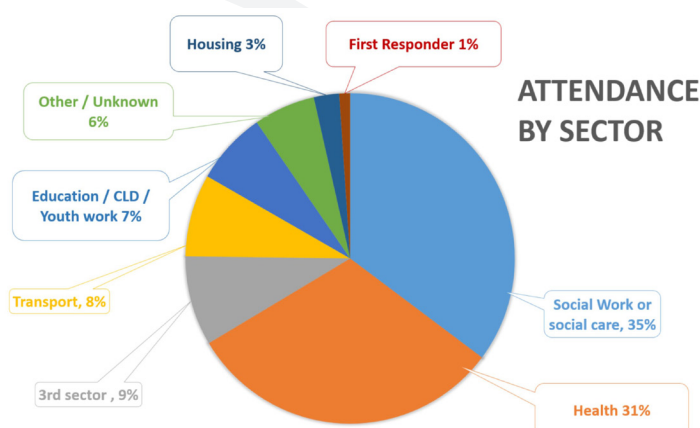
During the reporting year, a new suite of courses was developed in line with our Joint Learning and Development Strategy and Framework. These courses are developed and delivered by the CP and ASP Training and Quality Assurance Team with support from CP/LAC and ASP Nurses. All courses are multi-agency and open to staff and volunteers across all statutory and 3rd sector organisations, unless otherwise indicated.

The information below relates to courses delivered from January 2022, or previous equivalents where noted (see diagram page 17). A copy of the Joint Learning and Development Strategy and Framework can be obtained by contacting committee.publicprotection@scotborders.gov.uk

Tier	Course Name	No of sessions	Total Attendance	% of places filled
1	PP1: Fire Risk Recognition (delivered by Scottish Fire and Rescue) <i>*incomplete information</i>	4	200	54 (27%)
	PP1: Public Protection for Professional Drivers	2	60	18 (30%)
2	PP2: Introduction to Public Protection (or previous equivalent)	16	665	389 (58%)
	ASP2: Adult Support and Protection for Care Home and Care at Home (TRAIN THE TRAINERS)	3	36	23 (64%)
3	PP3: Thinking About Risk	5	150	75 (50%)
	ASP3: Contributing to the process	3	60	22 (36%)
	CP3: Contributing to the process (or previous equivalent)	5	147	83 (56%)
	CP3: Neglect Toolkit	2	50	41 (82%)
4	ASP3: Hoarding and Self-Neglect (delivered by Scottish National ASP Lead Officer)	1	80	74 (82%)
	ASP4: Council Officer Training	2	30	19 (63%)
	ASP4: Council Officer Refresher	2	30	21 (63%)
	total	47	1458	874 (56%)
Single Agency courses for Education, Early Years and CLD staff (including Passenger Transport)				
2	CP2: Child Protection Inductions	8	400	230 (57%)
	CP2: Child Protection Annual Update	9	unlimited	2390

Attendees across our multi-agency training courses come from a range of sectors. Predominantly delegates work in social work or social care roles, but increasing numbers of attendees are from other sectors, as shown on the diagram opposite.

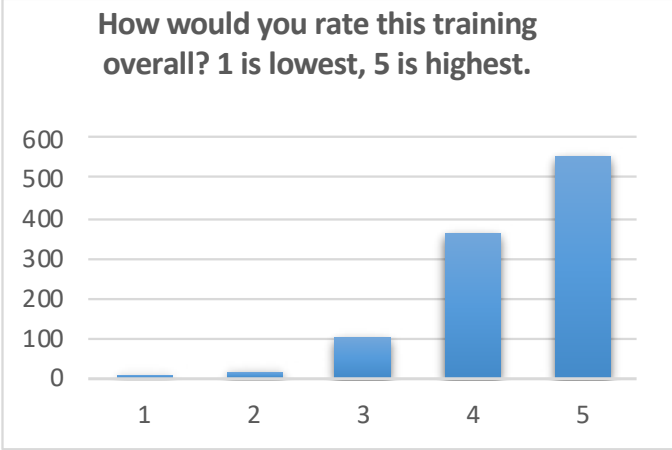
(NB these figures exclude Fire Risk Recognition, as demographic information for this course is incomplete.)



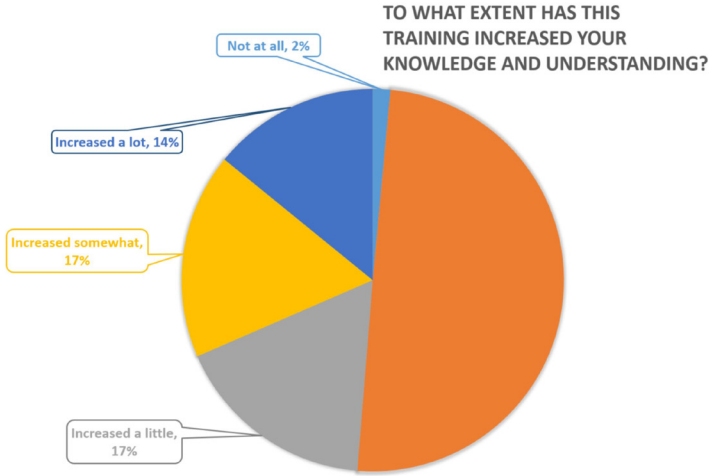
Public Protection, Child Protection and Adult Support and Protection training evaluations

The following information reflects evaluations completed for our courses delivered January to July 2022. Across all multi-agency courses evaluations were returned at a rate of 33%.

Overall, delegates rated our training **4.4** out of **5**.



The majority indicated that the training had refreshed existing knowledge and understanding (potentially reflecting the number of delegates undertaking mandatory repetition of basic training). A substantial proportion indicated that training had increased their knowledge and understanding to some extent.



Evaluation comments

"I am clearer regarding the process and how I may be involved in my job role"

"Having a deeper understanding of what constitutes risk, understanding how personal values could actually influence perceptions of risk."

"Will help me recognise situations that I may not have deemed as significant previously"

"I will think more about where the information has come from and also think more about the evidence I have that positive changes have occurred rather than just being optimistic."

"It was really useful as it refreshed all the different bits of training that I have done over the years and pulled it all together."

Borders Alcohol and Drug Partnership Training courses

Borders Alcohol and Drug Partnership deliver and facilitate a range of training and information sessions, open to all multi-agency partners. The table below indicates the courses offered during the reporting year, and attendance by statutory and voluntary sector staff, and others.

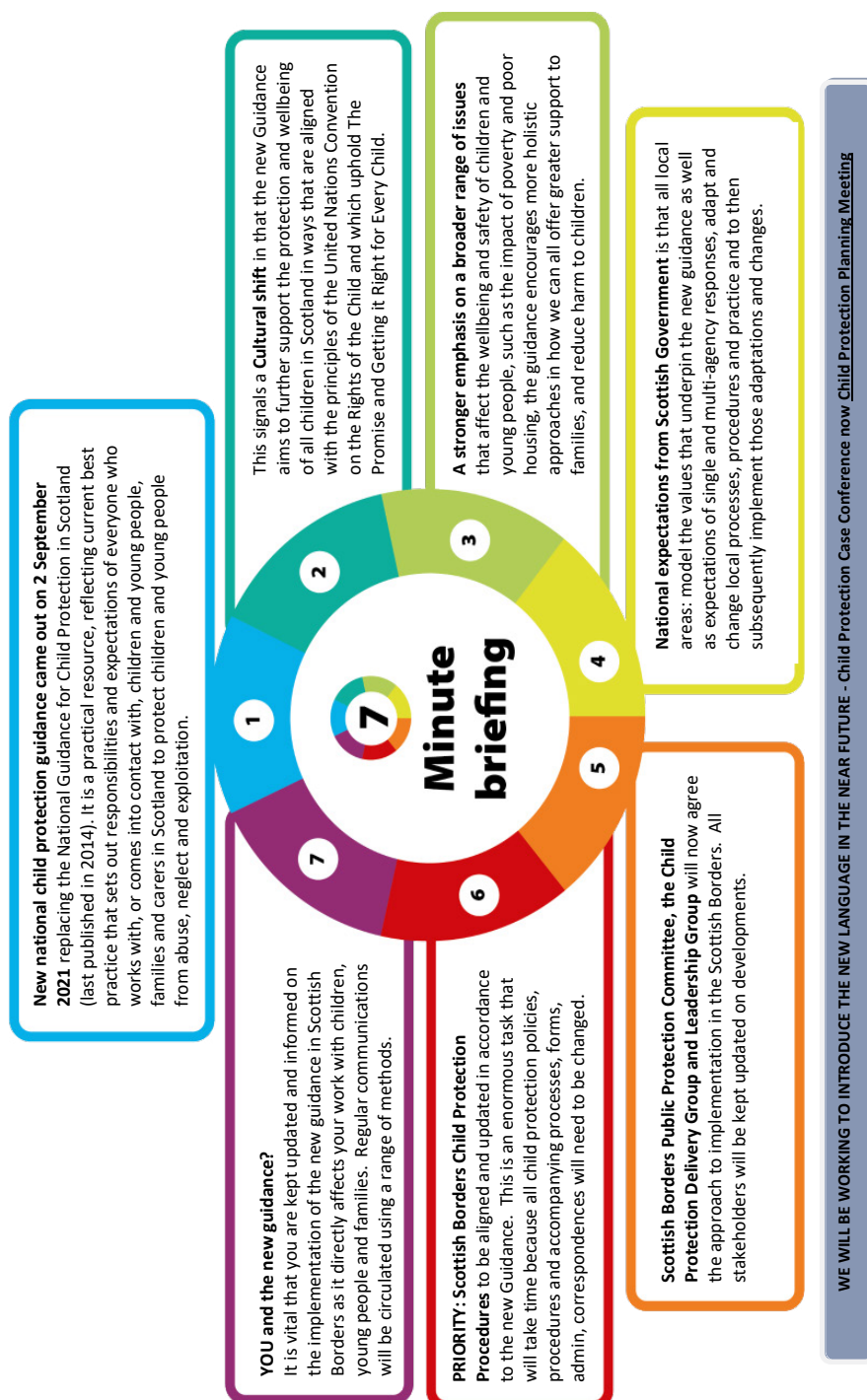
Course name	Statutory services	Voluntary sector	Other
Alcohol Brief Intervention	6	0	
Benzodiazepines and managing emotions	12	11	
Bereaved through Substance Use	1	7	
Drugs and Mental Health	12	0	
Drug Trend Monitoring Group: Cannabis Edibles CPD	20	10	
Drug Trend Monitoring Group: Drugs in Prison CPD	20	4	1
Emerging Drug Trends	21	2	2
Enhanced Core Communication Skills	6	2	
Family Inclusive Practice	7	1	
Introduction to Drug and Alcohol Services	12	0	1
Introduction to Motivational Interviewing	13	8	
Introduction to Trauma	5	0	
Introduction to SUE and Drug Awareness		10	
Total	135	55	4

APPENDIX 6:

7 MINUTE BRIEFING: REVISED NATIONAL GUIDANCE FOR CHILD PROTECTION

NEW National Child Protection Guidance and the Scottish Borders- Sept 2021

New national Child Protection Guidance (Scotland) 2021: Ambition and aspiration is that all children and young people grow up loved, safe and respected. This requires a consistent approach to care and protection. This Guidance is not an end point but an important step in realising this goal. See [Scottish Government Child Protection Website](#)



APPENDIX 7: PUBLIC PARTICIPATION AND ENGAGEMENT MATERIALS

a) Information leaflet for parents/carers whose children are involved in Child Protection investigations



SCOTTISH BORDERS PUBLIC PROTECTION SERVICES

INFORMATION FOR **PARENTS/CARERS** WHOSE CHILDREN ARE INVOLVED IN **CHILD PROTECTION** INVESTIGATIONS

This leaflet is to provide you with information to help understand why social workers, health staff, the police or others are working with you and your family to help keep your child safe. It explains what to expect and what may happen next, as well as who you can contact if you would like to discuss this further, or have any questions.

If you have any questions please contact:

Name & role:

Agency & team:

Contact details including work mobile:

If this person is not available please ask to speak to the following manager:

Out of office hours: If you need to speak to someone urgently, please call 01896 752111.

This leaflet has been put together by Scottish Borders Public Protection Committee / Child Protection Delivery Group – which is made up of representatives from the main statutory and voluntary organisations working in Scottish Borders with the purpose of ensuring that local agencies work well together and with the community to help protect children. Members include: Scottish Borders Council, NHS Borders, Police, Scottish Children’s Reporters Administration and the Voluntary Sector.



Why have social work and others such as the police and health become involved with you and your family?

- If social work, together with the Police, are told by someone that your child may be suffering harm or may be at risk of suffering harm, within or out with the home, the law says that they must look into the matter to make sure that your child is safe. Anyone can contact social work if they are worried and have a concern about a child.
- Everyone has a responsibility to make sure children are safe and well cared for; that they have everything they need to grow and develop, and are protected from harm.

What sort of harm?

- Harm to a child can be physical, emotional, sexual, neglect, child sexual exploitation or any combination of these. Harms happens when a person causes harm or does not act to stop harm.

Who will talk to me about the concern for my child?

- The person who gave you this leaflet will talk to you about the concerns.

What is likely to happen?

- **We will always make sure that the safety and welfare of your child comes first.**
- **Everyone will share relevant information** to get a full picture of what is happening.
- **We will speak to you and your child.** It is important that you and your child are listened to and your views taken into consideration when decisions are made. This can be done informally or formally. For your child a joint interview may take place. A joint interview is where your child is spoken to by a trained social worker and Police officer to get your child's account of events. A joint interview is recorded and often takes place at Eildon View in Galashiels (although can take place anywhere). In most cases you will be asked to give permission before your child is interviewed. It is also important to know that sometimes this does not happen. If your child is interviewed, or any other action taken without your knowledge or consent, this will be fully explained to you.
- **We will speak to anyone else who is relevant** for example other family members, teacher or health visitor/school nurse, and any other person who is significant in your child's life.
- **A doctor may see your child– this will only happen if needed.** A doctor will ask you and your child (age dependant) for consent before a medical examination; although there are certain circumstances when this may not happen.
- **You will be kept up to date about what is happening** - we know this could be a stressful time for you.

What happens next?

- This will depend on the investigation and the assessment that looks at all of the information, including your and your child's views, to highlight any risks, concerns and needs for your child.



Possible options can include:

- If you are doing everything needed to keep your child safe, and there are no other concerns, then there will be no need for any more involvement or action.
- If you could benefit from some help you will be offered some support. This might be from a social work assistant, a social worker or from health, education or the voluntary sector.
- If we believe that to keep your child safe they need to stay with a family member or a friend we will arrange this in partnership with you.
- If we believe a crime may have been committed Police and Social Work will work together to look into the concerns. Any report about crime will be referred to the Procurator Fiscal who would then decide what action to take in the public interest, including whether to prosecute someone. For more information www.copfs.gov.uk or 0300 020 3000.
- If we believe a plan is needed to protect your child a Child Protection Case Conference/ Planning Meeting will be arranged. This will include you and professionals involved. This meeting is to decide whether a plan is needed to protect your child. This meeting is about everyone working together to support you to ensure your child is safe and has everything they need to grow and develop. Before this meeting you will get more information and you can choose to bring someone to the meeting to support you.
- If we believe there is a need for compulsory measures of supervision a referral will be sent to the Children's Reporter who decides if the child/young person needs to be referred onto a Children's Hearing. This is a legal process for children and young people in Scotland who are either at risk of harm or who have been caught offending. For more information www.scra.gov.uk or 0131 244 4111.
- If we believe that other legal measures are needed to protect your child you will be told about any legal action. For information on solicitors and legal aid contact the Scottish Legal Aid Board (0131 226 7061 or www.slab.org.uk) or the Law Society of Scotland (0131 226 7411 or www.lawscot.org.uk). Both websites have a 'find a solicitor page' where you put in your postcode to list local solicitors.

Where families can get help?

- If you are unclear or have any questions during this time you should discuss this with the social worker or any other professional who knows you or your child.
- If you would like further help or support to care for your child, please speak to someone such as:
 - Health staff (Community or school nurse, General Practitioner)
 - Nursery staff
 - A Teacher
 - A Social Worker



- If you need legal advice on what you and your children rights are in relation to this investigation you can contact the Scottish Child Law Centre on 0131 667 6333.
- If you feel that you or your child have not been treated fairly during this child protection investigation you have the right to make a complaint. The social worker or another professional can advise you on how to do this or who to contact for further advice.

Your views matter

- At any time please provide feedback to any professional involved.
- You and your child will be encouraged to complete online surveys to give us your feedback. Please speak to the social worker or another professional if you would like to complete the surveys with the support of an independent worker. Online surveys include:
 - Following a joint interview (see QR and URL below)
 - If you have further involvement in the Child Protection process

Survey for Parents/Carers
After a Joint Interview
– your views matter

www.scotborders.gov.uk/parentsjii22-23



Survey for Children
After a Joint Interview
– your views matter

www.scotborders.gov.uk/childrensjii22-23



b) Awareness raising leaflet for professional drivers

Child and Adult Exploitation



Children and adults can be exploited. All children and young people – boys and girls – can be exploited. Adults who have a physical or learning disability, dementia, addiction or are elderly are particularly vulnerable to exploitation.

Child Sexual Exploitation: anyone under the age of 18 is encouraged, forced or manipulated into sexual acts in exchange for something eg *alcohol, Drugs, Cigarettes, Money, Food, Mobile Phones, other gifts or affection*

Trafficking: children or adults are brought to (or moved around) a country and made to work or do things that they don't want to do. This could be sexual acts, begging, theft, forced labour.

Criminal exploitation: children or adults are coerced, manipulated or deceived into criminal activity, often through threats of violence, intimidation or financial control. This often involves moving, storing or dealing drugs or weapons, but can include theft or other criminal activity. **"County Lines"** is the Police term for urban gangs exploiting young people into moving drugs from a central location into suburban, rural or coastal towns.

Cuckooing: someone (or a group of people) takes over the home of an adult to use for purposes such as storing or dealing drugs, weapons or stolen goods.

Financial exploitation: taking money or other financial assets from someone without their knowledge or consent. This can include deception, manipulation, coercion or scams and fraud.

Spot the Signs

Drivers are in a unique position to spot activity and changes at a property or neighbourhood. These are some of the things you may notice. There may be other reasons for these, but they indicate possible exploitation.

- Increased activity at a property, particularly late at night or early morning:
 - Increased number of vehicles and/or people at an address
 - Taxis taking multiple people to and from the same address, repeatedly.
- Decline in how cared for a property appears – eg garden becoming neglected
- New or increased signs of drug and alcohol use nearby – eg syringes, empty bottles
- Occupant of a property not being seen for a while
- Older or particularly vulnerable adults being taken to bank/cash machines (particularly if they appear to be being given instructions about money to withdraw)






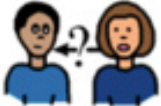
Some signs of potential Child Sexual Exploitation:

- Young people being taken to hotels, B&Bs, "party houses" or other properties by adults who do not appear to be family members, or visited in hotel rooms by multiple people
- Young people being bought food or drink (or appearing under the influence of alcohol or drugs) by company of older adults
- Young people suddenly having expensive clothes, phones or other items, or multiple phones
- Young people talking about older "boy-friends"
- Young passengers who appear worried, frightened or distressed in the company of older adults
- Young people being taken to A&E or clinics accompanied by an adult who is not a parent

Trust your instinct, if something doesn't seem right to you we want to hear from you. Your information, no matter how small can help build a bigger picture of what is happening for someone.

Information to share: Names, Locations and addresses, Descriptions of people, Car registration plates, make and models of vehicles, Description on suspicious activity

I'm an adult at risk of harm...What happens next?

	<p>A Council Officer is a Social Worker, Nurse, or Occupational Therapist who has had special training.</p>
	<p>The Council Officer will visit you.</p> <p>The Council Officer will show you their council badge.</p> <p>The badge is their identification.</p>
	<p>The Council Officer will tell you why they have come to see you.</p> <p>They will give you a letter to explain this too.</p>
	<p>The Council Officer will want to hear what you think.</p> <p>The Council Officer will ask questions about what has happened.</p>
	<p>The Council Officer might need to see where you live.</p>
	<p>The Council Officer might ask other people in the house questions.</p>
	<p>This is called an investigation.</p>

	<p>The Council Officer might:</p>
	<ul style="list-style-type: none"> • Tell someone to stay away from you
	<ul style="list-style-type: none"> • Tell people close to you how to help you better
	<ul style="list-style-type: none"> • Give you ideas about how to keep yourself safe

WHAT TO DO IF YOU ARE WORRIED ABOUT A CHILD, YOUNG PERSON, OR ADULT AT RISK OF HARM

If you are concerned that a child, young person, or adult may be at risk of harm, has been harmed, or is a risk to others, you must tell someone immediately.

CHILDREN & YOUNG PEOPLE

THE DUTY CHILDREN AND FAMILIES SOCIAL WORK TEAM

01896 662787

ADULTS

SBC CUSTOMER SERVICES

0300 100 1800

FOR ALL CONCERNS OUT OF NORMAL OFFICE HOURS, DO NOT WAIT

SOCIAL WORK EMERGENCY DUTY TEAM

01896 752111

OR IF YOU THINK THE PERSON IS AT RISK OF IMMEDIATE HARM

999

You can get this document on audio CD, in large print, and various other formats by contacting us at the address below. In addition, contact the address below for information on language translations, additional copies, or to arrange for an officer to meet with you to explain any areas of the publication that you would like clarified.

PUBLIC PROTECTION COMMITTEE
Scottish Borders Council | Headquarters | Newtown St Boswells
MELROSE | TD6 0SA
email: askHR@scotborders.gov.uk

