

**REPORT TO: HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD –
15 DECEMBER 2021**

REPORT ON: LEADERSHIP OF PUBLIC PROTECTION ARRANGEMENTS

REPORT BY: CHIEF OFFICER

REPORT NO: DIJB59-2021

1.0 PURPOSE OF REPORT

To update the Integration Joint Board regarding arrangements for leadership of the strategic public protection agenda by the Chief Officers (Public Protection) Strategic Group, including key developments over the last nine months and future strategic ambitions.

2.0 RECOMMENDATIONS

It is recommended that the Integration Joint Board (IJB):

- 2.1 Note the role of the Chief Officers (Public Protection) Strategic Group in providing leadership for the protection of children and adults at risk (section 4.2).
- 2.2 Note the work undertaken by the Chief Officers (Public Protection) Strategic Group over the last nine months to enhance arrangements for public protection, including supporting the joint inspection of services for children at risk of harm and the ongoing pandemic response (section 4.3, section 4.4, Appendix 1 and Appendix 2).
- 2.3 Note the priorities for the Chief Officers (Public Protection) Strategic Group for the next six months (section 4.6).
- 2.4 Direct the Chief Officer to provide further updates regarding the work of the Chief Officers (Public Protection) Strategic Group and key developments in public protection to Committee on a six-monthly basis.

3.0 FINANCIAL IMPLICATIONS

- 3.1 None.

4.0 MAIN TEXT

4.1 Public Protection Overview

- 4.1.1 The Health and Social Care Partnership, working in partnership with other Community Planning partners, has a range of responsibilities for the protection of vulnerable people which are discharged through operational and strategic arrangements for adult support and protection, alcohol and drugs, child protection, humanitarian protection, the management of high risk of harm offenders, suicide prevention and violence against women.
- 4.1.2 Dundee has a number of challenges around public protection given the socio-demographic characteristics of the city alongside high prevalence rates of domestic abuse, drug and alcohol use, drug related deaths and mental health needs. Over the last 12 months these challenges have been further compounded by the impact of the COVID-19 pandemic on some of the most vulnerable citizens in the city and related changes to the nature and complexity of risk for individuals and families in need of support and protection.

4.1.3 The Dundee City Plan identifies community safety and the protection of vulnerable people as a top priority and also recognises the importance of excellent collaborative working between the Council, NHS Tayside, Police Scotland, the third sector and local communities if services are to be effective. This necessity for strong partnership working across the public protection agenda has never been greater than during the pandemic period when a range of statutory and third sector organisations have worked together to rapidly adapt and respond to the COVID-19 pandemic.

4.2 Chief Officers (Public Protection) Strategic Group

4.2.1 Public Protection is led by the Chief Officers (Public Protection) Strategic Group (COG), supported by the multi-agency committees/partnerships which correspond to each of the areas of public protection. Following the retirement of the previous Chief Superintendent for D Division, Police Scotland the COG is now chaired by the Chief Executive, Dundee City Council and vice-chaired by the new Chief Superintendent for D Division. The COG has continued to meet more frequently over the last 9 months, with the full COG convening every second month and an Executive Group convening in the intervening months.

4.2.2 The work of the COG is supported by the appointment of Independent Chairs for each of the public protection committees (with the exception of the Suicide Prevention Partnership and Humanitarian Protection Partnership). Each Chair provides strong strategic leadership, direction and scrutiny in delivering the priorities and associated workplan of the committee they lead. Annual reports summarising the work of the Child Protection Committee, Adult Support and Protection Committee and Tayside MAPPA Strategic Oversight Group over 2020/21 are currently being progressed to Council Committee and to the Integration Joint Board (IJB). These supplement briefings provided to Elected Members and IJB members earlier in 2021 focused on child protection and on protecting people priorities. In addition, both Council Committee and the IJB have continued to receive update reports regarding the work of the ADP to oversee the implementation of the Action Plan for Change and support the work of the Dundee Drug Commission.

4.3 COVID-19 Pandemic Response

4.3.1 The impact of the COVID-19 pandemic on the welfare and protection needs of the population, how we deliver single and multi-agency protection responses, on inequalities and on the health and wellbeing of our protecting people workforce has been substantial and wide ranging. It has also necessitated rapid change to the way in which governance, leadership and strategic planning functions operate to support operational service delivery. The last update report to the Integration Joint Board (article VII of the minute of the meeting of the Dundee Integration Joint Board held on 23 June 2021 refers) provided a detailed update regarding the multi-agency public protection response to the second wave of the pandemic. This included: significant activity to enhance the focus on and response to 'hidden harm', domestic abuse and substance use; continued use of a protecting people COVID risk register to direct response activity and investment; more frequent meetings of governance groups; enhanced public communication activity; and, enhanced arrangements for data reporting and monitoring.

4.3.2 Throughout the last nine months operational services have continued to deliver a pandemic response alongside an incremental return to business as usual activity in some service areas. Statutory services have continued to provide high levels of face-to-face contact with children and adults at risk, with prioritisation of contact based on assessment of risks and needs. Many third sector services have also now recommenced or increased provision of face-to-face services. In most areas blended models of service provision, utilising digital systems, continue to be used to maintain services and support multi-agency working and information sharing.

4.3.3 Through COVID remobilisation funds both Dundee City Council and Dundee Health and Social Care Partnership have provided additional investment in third sector violence against women services in order to mitigate the impact of domestic abuse and sexual violence on women, children and young people. This investment has supported additional frontline capacity within Dundee Women's Aid (3 FTE) and the Women's Rape and Sexual Abuse Centre (1.7 FTE) targeted to reduce waiting times for access to support. As a direct consequence of this investment there has been a significant reduction in waiting times:

- At Dundee Women's Aid the average wait for:

- refuge accommodation has decreased from 49 days (1 March 2021 to 30 June 2021) to 0 days (1 July 2021 to 31 October 2021).
- outreach has decreased from 102 days (1 March 2021 to 30 June 2021) to 39 days (1 July 2021 to 31 October 2021). Since additional capacity was added in July the monthly average waiting time for outreach services has fallen consistently from 64 days in July 2021 to 8 days in October 2021.
- At WRASAC:
 - the average wait for therapeutic and counselling support has reduced from a high of an average of 162 days at the end of June 2021 to an average of 42 days at the end of October 2021. As at 25 November 2021 the average waiting time had reduced further to 28 days.
 - there has been more than a 50% reduction in the number of individual women waiting for support since the new posts commenced in August 2021.
 - the service has successfully secured matched funding for the COVID remobilisation monies to allow the increased capacity within the service to continue to 31 March 2023.

COVID remobilisation monies have also been utilised by third sector support services to respond to urgent requests for mobile phones, fuel, food and travel costs targeted to enhance safety and reduce risk. In addition, this funding is supporting the Children and Families Service to temporarily enhance operational manager capacity with a focus on leadership and professional support to social work services, including child protection, to ensure effective responses to increased prevalence of domestic abuse.

4.3.4 During the COVID-19 pandemic SOLACE has provided a national leadership role in relation to public protection matters, with Dundee actively participating in activities, including the implementation of a national public protection dataset reported on a weekly basis. An overview of key data and trends is provided in appendix 1. This overview demonstrates that:

- Following an increase in numbers of children on the Child Protection Register during wave one, mainly due to a decrease in the level of de-registrations, numbers have declined and are currently below the historical average. There has been a sustained increase in the proportion of children on the Child Protection Register where domestic abuse and parental mental health are a contributing factor;
- Since June 2021 there has been a sustained increase in adult protection concerns, the majority of which were not assessed as meeting adult support and protection thresholds/criteria and therefore investigations, initial case conferences and protection plans in 2021 were broadly similar in number to 2020. Further analysis did not identify any specific reasons for this increase and the Adult Support and Protection Committee is continuing to monitor this trend;
- Increased demand for third sector violence against women services and supports has continued during 2021 when compared with the pre-pandemic period. Services have also continued to highlight increasing complexity of need and levels of risk amongst women, children and young people accessing support; and,
- Homeless applications have stabilised during 2021 and the number of households in temporary accommodation has been slowly decreasing since March 2021.

4.4 Joint Inspection of Services for Children at Risk of Harm in Dundee City

4.4.1 In June 2021 the Dundee Partnership was notified by the Care Inspectorate of their intention to undertake a joint inspection of services for children at risk of harm in Dundee City under section 115 of part 8 of the Public Services Reform (Scotland) Act 2021. This is the first joint inspection to take place in Scotland following temporary suspension of joint inspection activity due to the pandemic in March 2020. The joint inspection has been carried out by the Care Inspectorate alongside Education Scotland, Her Majesty's Inspectorate of Constabulary in Scotland and Healthcare Improvement Scotland.

4.4.2 The joint inspection has focused on 4 main inspection statements:

- Children and young people are safer because risks have been identified early and responded to effectively.
- Children and young people's lives improve with high quality planning and support, ensuring they experience sustained loving and nurturing relationships to keep them safe from further harm.
- Children, young people and families are meaningfully and appropriately involved in decisions about their lives. They influence service planning, delivery and improvement.
- Collaborative strategic leadership, planning and operational management ensure high standards of service delivery.

The Care Inspectorate and their scrutiny partners have reviewed the inspection methodology used pre-pandemic with the aim of minimising demands on partnerships, including a move to remote case file reading, a restricted field work period and shortened pre-inspection submission. The inspection process commenced at the end of July 2021, with the evidence gathering / field work phases finishing in early November 2021. The inspection report for the Dundee Partnership will be published in early January 2021 and findings, as well as planned improvement activity, will be reported through Dundee City Council Children and Families Committee.

4.4.3 As part of the inspection process the Chief Officers Group and Child Protection Committee oversaw the production and submission of a position statement for the Dundee Partnership. The position statement is a short document setting out the partnerships self-assessed strengths and priorities for improvement in relation to: our COVID response; impact on children, young people and families; engagement with children, young people and families; quality assurance; and collaborative working and leadership. A summary of the key achievements and improvement priorities identified is provided below, with a further detail provided in appendix 2:

Key Achievements	Improvement Priorities
Providing the right support at the right time	Enhancing the voice of children and young people in strategic developments
Relationships and engagement with children, young people and families	Workforce engagement
Pandemic response	Supports to young people, including transitions
Shifting culture in relation to quality assurance	Co-ordination of quality assurance activities
Collaborative leadership	

The position statement is one of a range of processes through which the inspection team gather and evaluate evidence against the main inspection statements. Other methods utilised during the inspection process are: a workforce survey, case file reading (records for 60 children and young people), survey of children, young people, parents and carers and engagement meetings (with the workforce and with children, young people, parents and carers).

4.5 Other Public Protection Leadership Developments

4.5.1 As well as leading the public protection response to the COVID-19 pandemic and supporting the joint inspection of services for children at risk of harm the COG has undertaken a programme of work over the last nine months that has included:

- A range of activity associated with the review of specific cases under agreed multi-agency case review protocols:

- Developing a joint project with Angus Chief Officers Group to commission temporary additional capacity to revise local case review protocols and supporting processes in order to fully implement revised national guidance, which direct a move from initial and significant case reviews to learning reviews. The project will also explore opportunities for joint working between the Dundee and Angus protecting people governance groups and strategic support teams in the implementation of learning review protocols and processes. The project will be delivered by the end of 2021/22 financial year.
- Agreeing a consistent framework for reporting case review activity, findings and learning implementation and impact to the COG. Case Review Groups have been established for both the Adult Support and Protection Committee and Child Protection Committee to implement this framework and an integrated learning tracker is being developed to be the primary document through which agencies, working individually and collectively, will be accountable to the committees for the implementation of actions and evidencing their impact. Onward reporting to the COG will consist of exception reporting via the Independent Chair's Assurance Report.
- Considering the findings of a Significant Case Review for a young person and a thematic review of fire deaths involving vulnerable adults. In both instances the COG received presentations regarding the review process and findings, including the involvement of family members and the workforce, and considered plans for improvement. The implementation of improvement actions will be monitored through the Child Protection Committee and Adult Support and Protection Committee; with specific scrutiny sessions being held to assess evidence of progress and impact on practice, risks and outcomes.
- Participating in a development session in May 2021 focused on arrangements for multi-agency screening of and response to concerns about the safety and wellbeing of children and adults at risk. The session supported COG members to reflect on and develop their shared leadership vision and principles for multi-agency screening arrangements. Collectively the COG identified a number of key principles, including: rights-based and relationship focused, trauma-informed, integrated, proportionate, timeous and accessible. This work will be utilised as part of the Transforming Public Protection Programme, alongside other sources of information and evidence, to inform future improvement activities.
- Supporting the Alcohol and Drugs Partnership to undertake their self-assessment to inform the work of the Dundee Drugs Commission. The findings of the self-assessment have previously been reported to the Policy and Resources Committee and to the Integration Joint Board.
- Noting the potential direct implications of proposals contained within the 'A National Care Service for Scotland' consultation for protecting people governance, strategic and operational functions.
- Supported a seminar on Contextual Safeguarding, which is an approach to understanding and responding to young people's experiences of significant harm beyond their families (for example, child sexual exploitation, child criminal exploitation, teenage relationship abuse, gang-affiliation, and peer-on-peer sexual and serious youth violence). Further work is planned across the protecting people committees to consider how the approach can be implemented in Dundee as part of wider improvement activity to strengthen our protection responses to young people.
- Considering findings from an audit of the use of the Violent and Sex Offender Register (ViSOR) which evidenced 100% compliance with Minimum Standards for usage of ViSOR (originally agreed through Social Work Scotland). The COG has also considered common standard proposals on ViSOR access arrangements. This includes access being restricted only to staff who have achieved NPPV 2 or 3 level vetting; with assurance provided to COG that Dundee has sufficient vetted staff to continue data inputting to ViSOR.

4.5.2 Through the last nine months the COG has supported activity that has significantly enhanced investment in key protecting people priorities, specifically in relation to violence against women and drug and alcohol use. This has been achieved through a combination of enhanced internal

investment and support to partners to secure and invest significant additional funding from external funders, primarily the Scottish Government. Key elements of this investment are:

- In violence against women services, in addition to COVID remobilization monies detailed in section 4.3.3:
 - The Scottish Government Justice Department has awarded multi-agency partners in Dundee £487K over a 12-month period to develop an integrated Specialist Domestic Abuse Court Advocacy and Support Service focused on reducing risk and improving safety of victims of domestic abuse. This is a significant expansion of the existing MIA (MARAC Independent Advocacy) Service and will be delivered by Dundee Women's Aid and Barnardo's Scotland.
 - Three local projects have been successful in securing additional funds until March 2023 from the Scottish Government's Equally Safe Fund: £103K has been secured by the Women's Rape and Sexual Abuse Centre (WRASAC) and the Council's Learning and Organisational Development Service for training and capacity building activity focused on embedding the protecting people approach, trauma-informed practice and the Safe and Together model; Dundee Women's Aid and the Council's Children and Families Service have been awarded £228K to develop CEDAR, a groupwork recovery programme for women, children and young people impacted by domestic abuse; and, the Women's Aid Groups across Tayside and Deaflinks have partnered in a project to enhance support for deaf women experiencing domestic abuse.
 - A bid led by WRASAC has been submitted to the CORRA Improvement Fund to support the development of a women's hub that will provide services to women who use drugs and / or alcohol or have other complexities of need over a 5-year period. Tayside Council on Alcohol (TCA) has also applied to the same fund to develop a trauma-informed, gender-based mentoring services for women (also over a 5-year period).
 - Through funding made available by the Health and Social Care Partnership and the Scottish Government Community Mental Health and Wellbeing Fund there have been enhancements to Clinical Psychology services for women, children and young people experiencing gender-based violence. This includes mainstreaming of the Consultant Clinical Psychologist position within the ASPEN Project and additional Clinical Psychology capacity to address complex developmental trauma amongst children and young people.
 - Police Scotland have enhanced capacity within their Domestic Abuse Investigation Team by a further 3 officers in response to risks identified during the pandemic relating to the prevalence of domestic abuse and profile and complexity of risk to women, children and young people.
- In drug and alcohol services:
 - Dundee City Council allocated £900K to support the implementation of the Action Plan for Change, including integrated approaches to substance use and mental health. These funds are being utilised to: support the community hubs; extend assertive outreach services; further develop gendered approaches; develop community recovery in all LCPPs; enhance response in Children and Families teams; improve support for people released from prison; and, to contribute to the implementation of the new Mental Health Hub.
 - The Scottish Government allocated £391K to support the implementation of the National Drugs Mission at a local level under three main funding streams: supporting individuals to access residential rehabilitation; progressing whole family approaches; and, implementing the main principles from the National Mission, including implementation of Medically Assisted Treatment (MAT).

- An additional allocation of funding to support a MAT Implementation Co-ordinator post in Dundee for a 5-year period has also been received through the Scottish Government MAT Implementation Support Team.
- Eleven applications have been submitted by third and statutory sector organisations in Dundee to the CORRA Improvement Plan Fund and the CORRA Children and Families Fund. Applications were submitted with support from the ADP and cover a range of strategic priorities including residential rehabilitation, community support, independent advocacy, trauma-informed practice, gendered services, transitions support or young people, bereavement support and naloxone.
- Dundee City Council has also prioritised investment of an additional £100k to enhance capacity within the Protecting People Strategic Support Team. As well as supporting the commissioned project on learning reviews described at 4.6.1, this investment will support the establishment of a temporary additional post to focus on accelerating implementation of practice improvements across the Children and Families Service and Dundee Health and Social Care Partnership that form part of the Transforming Public Protection Programme. Remaining monies are being considered alongside other funds for trauma-informed practice and lived experience work to consider how these can be pooled and utilised to support the development of a safe, trauma-informed strategic approach to the involvement of people with lived experience (workforce and public) in policy and planning for protecting people.
- Dundee City Council has agreed to fund a one-year graduate trainee project between their own Communications Team and the Protecting People Strategic Support Team. The graduate project will have a focus on both workforce and public facing aspects of digital communication work.

4.6 Future Priorities

- 4.6.1 The start of 2022 will see the publication of the joint inspection report on services for children at risk of harm, as well as submission of the report from the Dundee Drugs Commission to the Dundee Partnership. The COG and public protection committees will have a focus on the findings contained within these reports and subsequent improvement activity required. This will build on the programmes of improvement already set out in the Transforming Public Protection Programme, Child Protection Committee Delivery Plan and Action Plan for Change. Findings will also be considered in the context of the protecting people strategic risk register, which has become an embedded feature of the strategic and governance arrangements across the whole protecting people landscape during the pandemic period.
- 4.6.2 The conclusion of the joint inspection and recent investments in key areas of protecting people activity outlined within this report will release resource across strategic and operational teams to accelerate work in a number of key areas, including: practice improvement workstreams within the Transforming Public Protection Programme; workforce communications activity; further roll-out of our approach to trauma informed practice and leadership; strengthening of our approach to undertaking learning reviews; further activity across the protecting people committees and operational services to enhance whole family approaches; and, enhancing the involvement of people with lived experience in policy and planning activity for protecting people. In addition, the COG and protecting people committees will continue their consideration of the Contextual Safeguarding approach and how this can be aligned to wider programmes of work focused on trauma.

5.0 POLICY IMPLICATIONS

- 5.1 This report has been screened for any policy implications in respect of Equality Impact Assessment. There are no major issues.

6.0 RISK ASSESSMENT

- 6.1 This report has not been subject to a risk assessment as it does not require any policy or financial decisions at this time.

7.0 CONSULTATIONS

7.1 Members of the Chief Officers (Public Protection) Strategic Group, including the Independent Chairs of the Adult Support and Protection Committee, Child Protection Committee, Tayside MAPPA Strategic Oversight Group and Violence Against Women Partnership, Dundee City Council Management Team, the Chief Finance Officer, Head of Service, Health and Community Care and the Clerk have been consulted in the preparation of this report.

8.0 DIRECTIONS

8.1 The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in sections 26 to 28 of the Public Bodies (Joint Working)(Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Dundee City Council and NHS Tayside.

Direction Required to Dundee City Council, NHS Tayside or Both	Direction to:	
	1. No Direction Required	X
	2. Dundee City Council	
	3. NHS Tayside	
	4. Dundee City Council and NHS Tayside	

9.0 BACKGROUND PAPERS

9.1 None.

Vicky Irons
Chief Officer

DATE: 8 November 2021

Gregory Colgan
Chair, Dundee Chief Officers Group

Chief Superintendent Phil Davison
Vice-Chair, Dundee Chief Officers Group

Kathryn Sharp
Service Manager, Strategy and Performance

APPENDIX 1

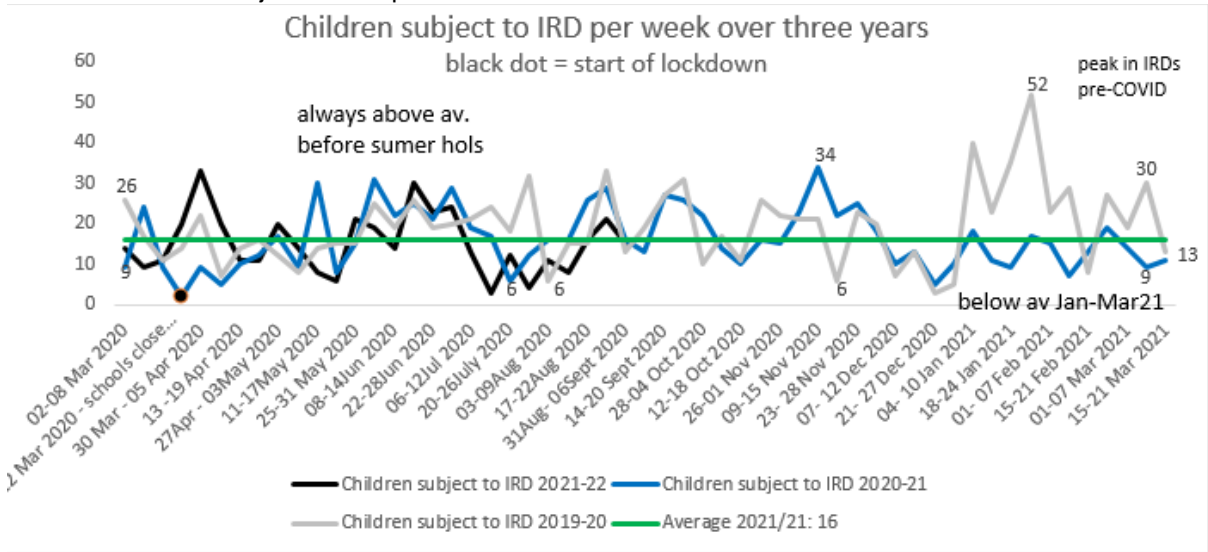
SUMMARY OF SOLACE DATASET AND OTHER KEY MEASURES

1. Child Protection

Overall child protection figures have fluctuated significantly week-by-week and over annual reporting periods. The following charts and narrative summarise key issues.

In the early stages of child protection processes figures show a normal strong variation (Chart 1). Two complete years of weekly data lead to a slightly higher average per week in 2019/20 (19 children) than in 2020/21 (16 children) but the graph clearly shows that this due to a pronounced peak in IRDs (initial referrals discussions) before lockdown in January and February 2020 compared to relatively low figures in January and February 2021.

Chart 1: Children subject to IRD per week



There is currently a lower number of children on the Child Protection Register than this time last year. Chart 2 shows that there were peaks each summer following a high number of registrations leading up to the summer holidays but that figures reduce each autumn and winter; the average number of children on the child protection register (by academic year) has reduced from 81 (2018/19) and 83 (2019/20) to 67 (2020/21).

Chart 2: Children on the Child Protection Register

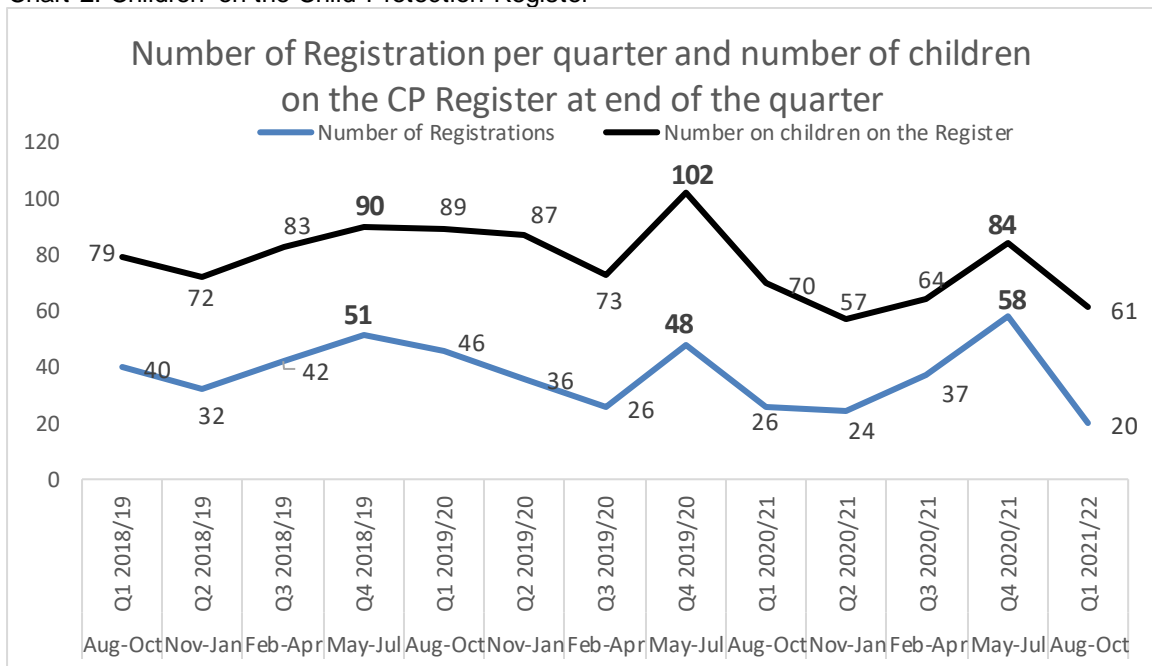
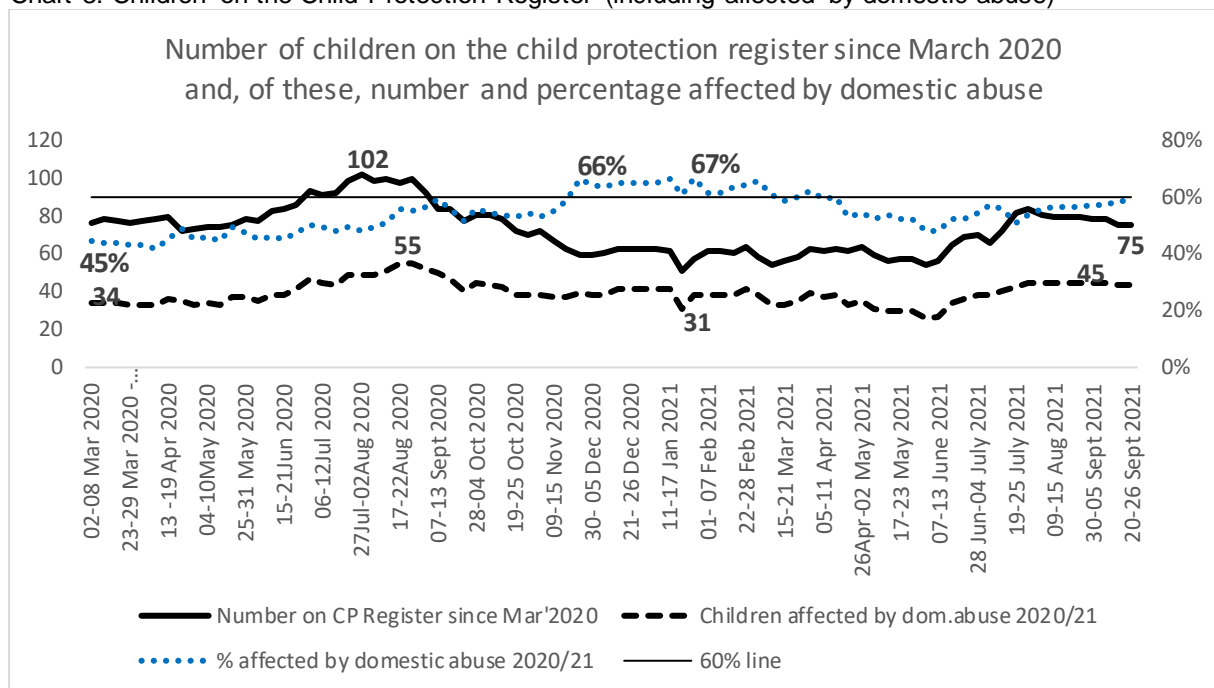


Chart 3 shows that while the overall number of children on the child protection register has fluctuated significantly, the number and percentage of these children who were / are affected by domestic abuse

has increased from around 34 (45%) to 45 (60%) and at times, during winter 2020/21 lockdown, was at 66-67%. Since figures had been overall low at that time it suggests that children affected by domestic abuse are more likely to be protected through registration while other reasons for registrations decreased.

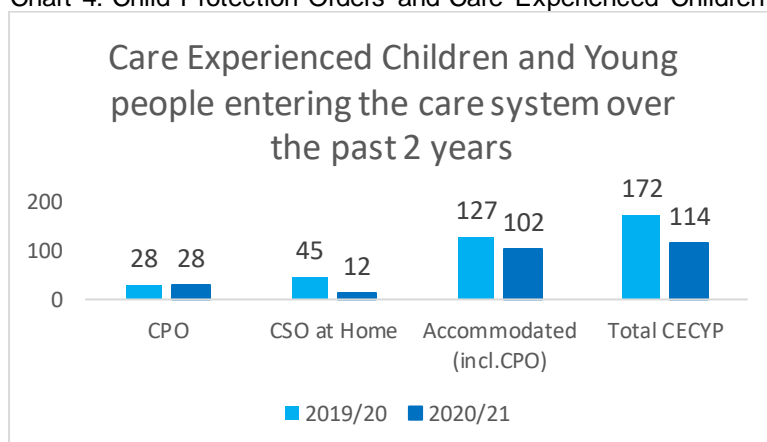
Chart 3: Children on the Child Protection Register (including affected by domestic abuse)



For over 18 months now, the Children and Families Service has been tracking contact with children. Despite lockdowns and social distancing requirements, 99% of children on the Child Protection Register were seen face to face every fortnight as well as having other contacts as required. Similarly, young people eligible for aftercare received a high level of contact, with an average of 95% of young people having had weekly contact with services (face to face, telephone, email or via social media) during the first year of the pandemic and 85% since the beginning of the summer holidays 2021, when it was agreed to further prioritise service delivery according to risk and need – still an excellent achievement compared to the national average of 65-70% per week.

The number of care experienced children and young people newly entering the care system has been gradually reducing over the past three years, largely due to a reduction of statutory orders at home. Overall, counting full academic years, numbers have reduced from 172 in 2019/20 to 114 in 2020/21, with only 12 new orders at home (previously 45).

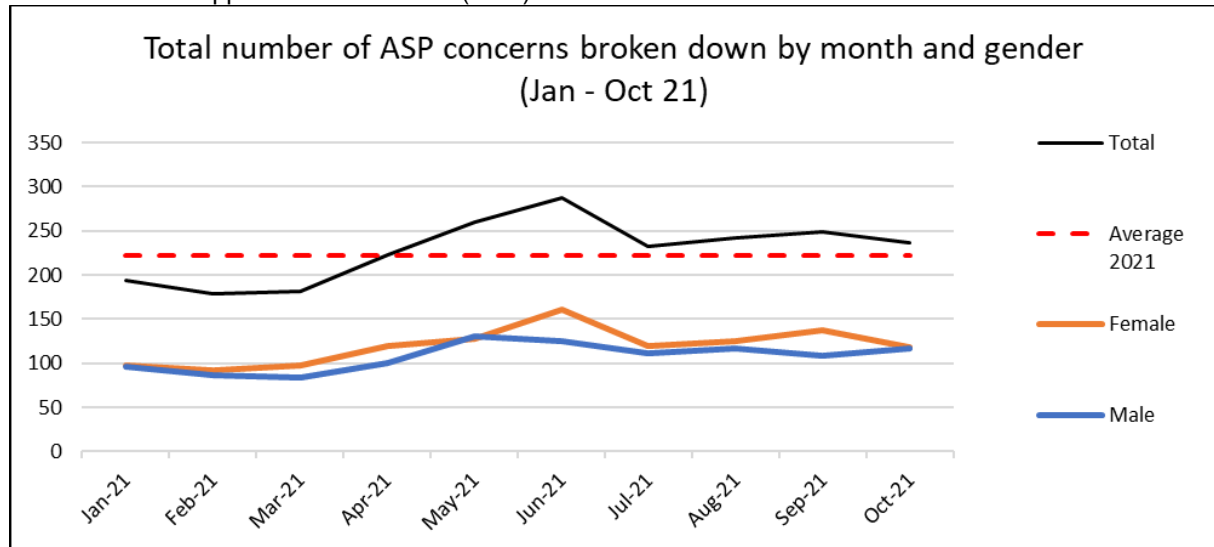
Chart 4: Child Protection Orders and Care Experienced Children and Young People



2. Adult Support and Protection

Both the number of total concerns, including those originating from Police Scotland, has remained fairly steady since September 2020 (Chart 5). There was a peak in early June 2020 which the Health and Social Care Partnership has established was due to different personnel assessing initial concerns during the lockdown period.

Chart 5: Adult Support and Protection (ASP) Concerns



At the start of 2021 numbers of adult protection concerns remained at levels broadly inline with those experienced over the last 2 years, however in June 2021 concerns increased in number and this increased level has continued throughout the latter half of the year. Further analysis did not identify any specific reasons for this increase. The majority of these additional concerns were assessed as not meeting adult support and protection thresholds/criteria and therefore investigations, initial case conferences and protection plans in 2021 were broadly similar in number to 2020 (see Charts 6 and 7).

Chart 6: Adult Support and Protection (ASP) Investigations

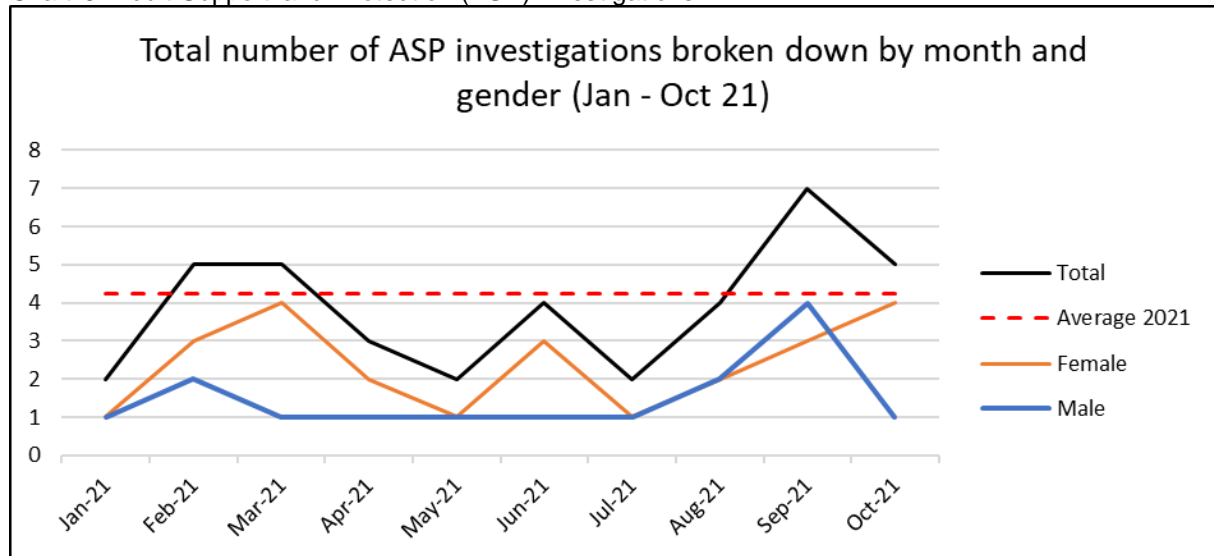
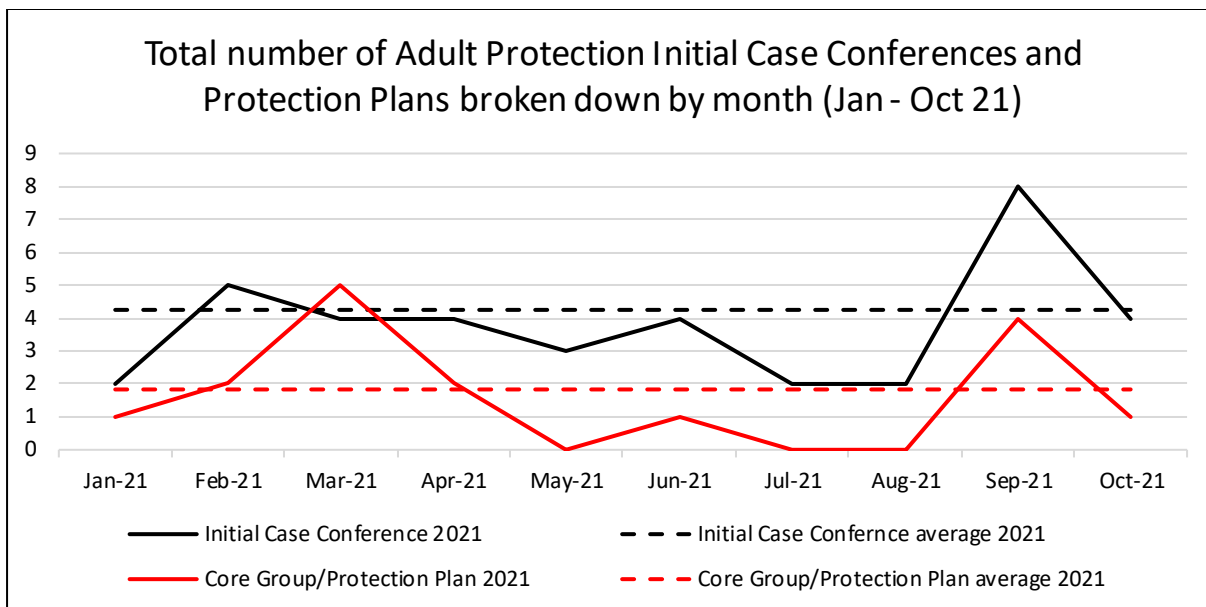


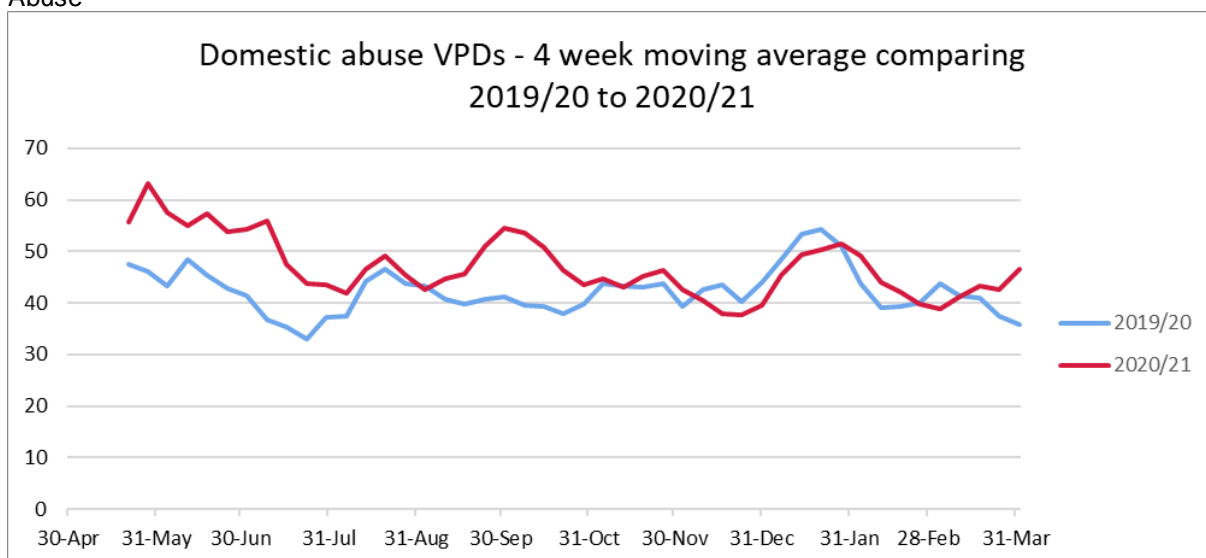
Chart 7: Adult Protection Case Conferences and Protection Plans



3. Domestic Abuse

The number of concern reports arising from domestic abuse incidents that have been recorded by Police Scotland has been higher than during the last 12 months than in 2019/20 (Chart 8), however, this appears to be mostly due to two periods in the spring/early summer of 2020 and over mid-autumn 2020.

Chart 8: Vulnerable Person Database Concerns (VPDs) recorded by Police Scotland for Domestic Abuse

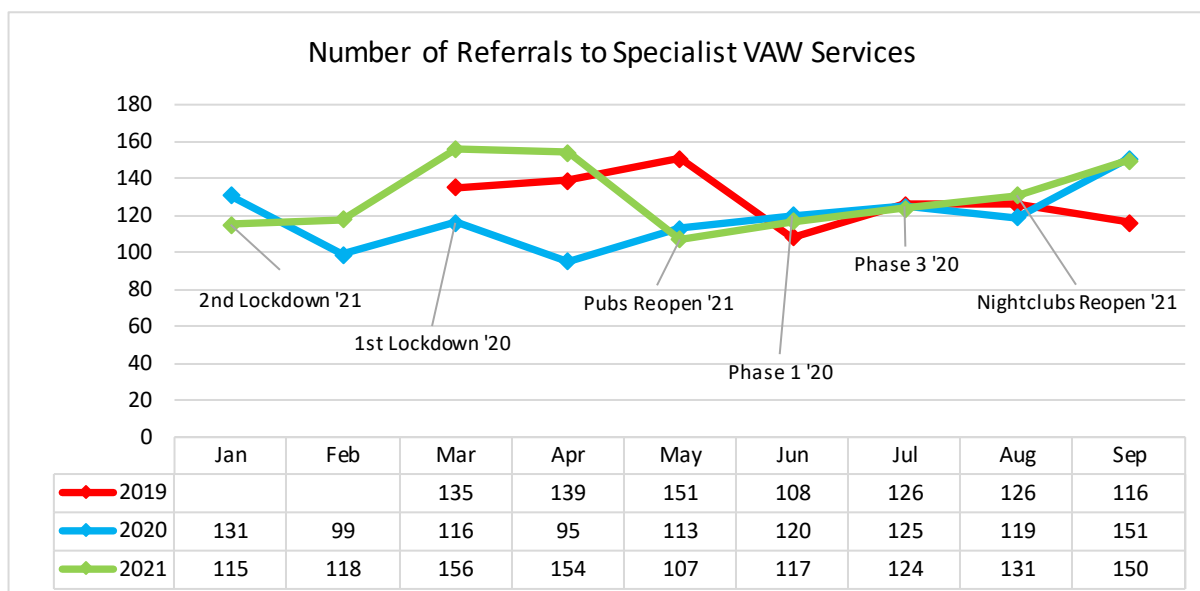


In addition to the data in Chart 7 reported through the SOLACE dataset the Violence against Women Partnership has been monitoring key data throughout the pandemic period. Key trends identified include:

- Total referrals to specialist, third sector violence against women services¹ from March to September were 4% higher during 2021 than in the comparable 2019 period and 12% higher than 2020 (Chart 9). A sharp increase in March 2021 occurred as lockdown restrictions began to ease. Following a sharp decline in May, referral numbers gradually increased for the remainder of the reporting period. From June onwards all three years followed a similar trend, with the exception of September 2019, when referrals were considerably lower than both 2020 and 2021.

¹ Dundee Women's Aid, the Women's Rape and Sexual Abuse Centre, Barnardo's Tayside Domestic Abuse Initiative, MARAC, MIA and Shakti Women's Aid.

Chart 9: Referrals to Specialist Violence Against Women Services

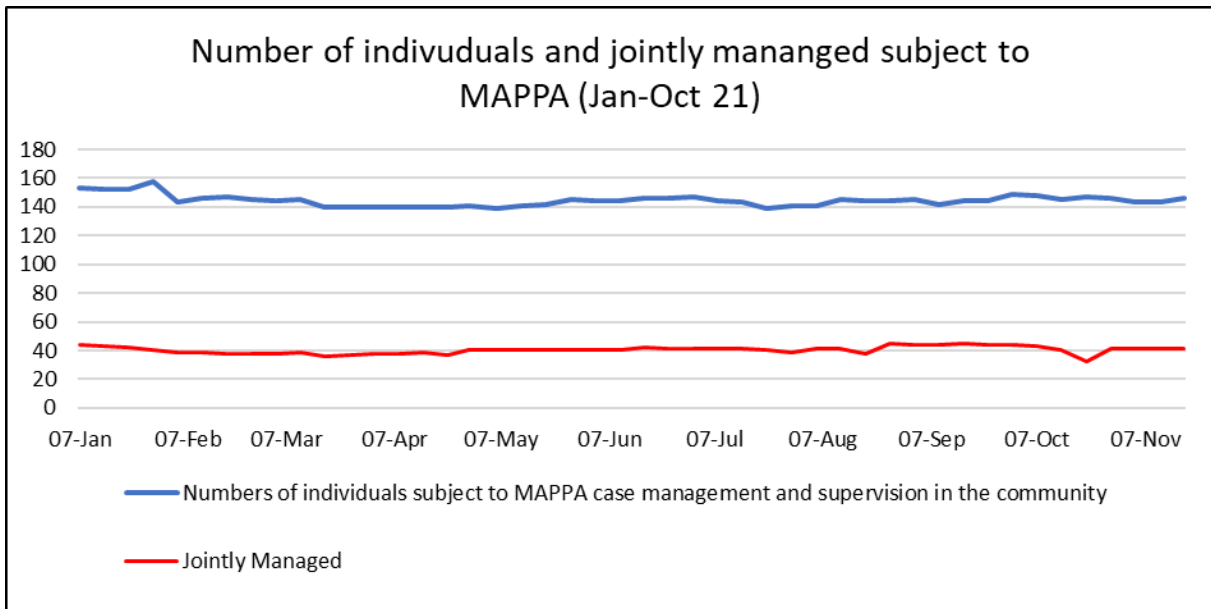


- Between March and September 2021, requests for refuge accommodation to Dundee Women’s Aid were 40% higher than 2019 for the same reporting period. However, there was a 21% reduction in requests compared to the same reporting period in 2020.
- Total MARAC (multi-agency risk assessment conferences for the highest risk victims of domestic abuse) referrals experienced a 5% increase from 2019 to 2021. When comparing 2021 referrals to 2020, the increase was considerably higher (45%).
- All services have reported a continuation of increased complex cases presenting. This has resulted in longer periods of support being required for women to support and sustain positive changes. Women presenting to VAW services from March to September of 2021 also continued to report poor mental health and wellbeing and financial impacts as a consequence of the pandemic. Other complexities women presented with were substance use and homelessness.
- Services increased face-to-face support delivery as restrictions eased and continued to offer support via telephone/video call with women expressing this allowed them flexibility when accessing services. Many services also expressed this blended model approach continues to be much more efficient in terms of maximising staff capacity and is a model some plan to continue operating after the pandemic. Some services voiced their continued concerns surrounding the negative impact of the pandemic on staff’s mental health due to increased workload, complex cases and continued client safety risk.

4. Individuals subject to MAPPA

The number of individuals subject to MAPPA case management has dropped shallowly over the year and now averages 144 compared to the average of 156 over the last financial year. The number of individuals managed jointly by Police Scotland and the Community Justice Service has also continued the shallow decreasing pattern, now averaging 40 compared to the average of 50 in the last financial year. (Chart 10). This is associated with the impact of public health restrictions on the criminal justice system, particularly reduced throughput within the courts.

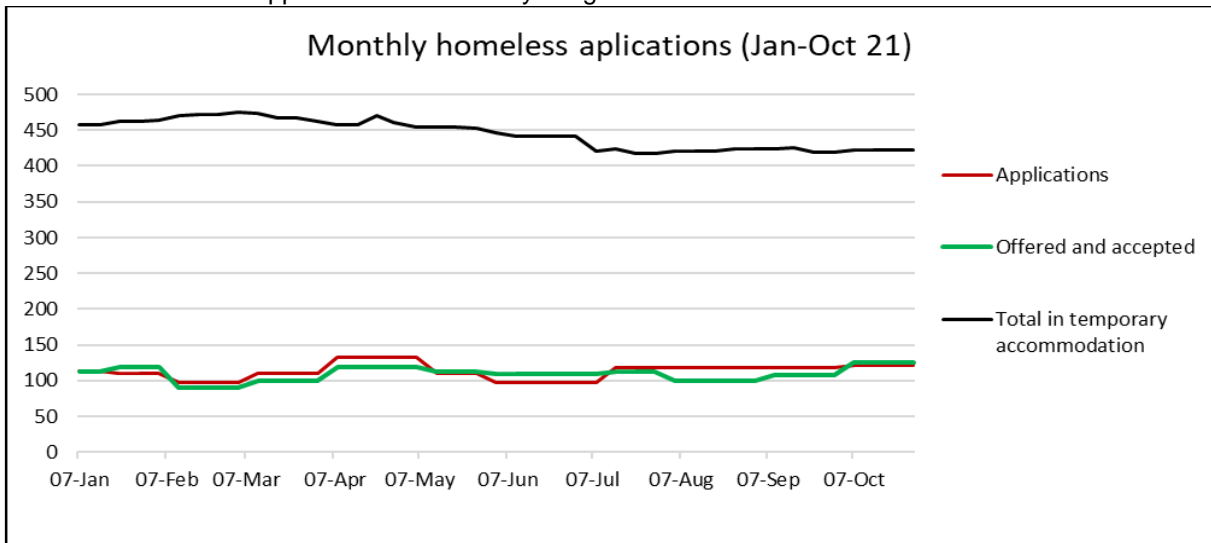
Chart 10: MAPPA Case Management and Supervision



5. Homelessness

The number of homelessness applications per month has been broadly steady this year however the total numbers in temporary accommodation is slowly dropping from the high of 476 experienced in March 2021 (Chart 11). It should be noted that there has been a continued increase in demand for temporary accommodation since March 2020. All applicants have been offered accommodation, and the number of accepted offers broadly matches the numbers of applications received.

Chart 11: Homeless Applications received by Neighbourhood Services



JOINT INSPECTION, POSITION STATEMENT – KEY ACHIEVEMENTS AND IMPROVEMENT PRIORITIES

Our self-evaluation and quality assurance activity, engagement with our workforce and collaborative approach to scrutiny and risk management within the Chief Officers Group (COG) and Child Protection Committee (CPC) has identified the following key strengths emerging from our work over the last two years:

1. **Providing the right support at the right time:** through our Team Around the Child, MASH (Multi-agency Screening Hub) and initial investigation processes we have worked effectively together to ensure a high quality, timely and effective response to initial concerns. This approach has included a focus on preventing children and young people from requiring formal child protection measures (for example, through Addressing Neglect and Enhancing Wellbeing (ANEW) and Fast On-line Referral Tracking (FORT)), as well as strengthening parental supports and engagement.
2. **Relationships and engagement with children, young people and families:** our workforce have developed the skills and competences required to form trusting and meaningful relationships with children, young people and families. At an operational level a wide range of different approaches have been developed to effectively engage children and young people in their assessment and support plans and to increasingly involve children and young people in the co-production of service developments and improvements.
3. **Pandemic response:** our pandemic response reflects the excellent collaborative working that happens across our partnership. Our strategic risk register and data have guided a response that prioritised those most at risk, including of hidden harm, and that achieved continuity in terms of the quality of service offered and level of face-to-face contact available to children, young people and families.
4. **Shifting culture in relation to quality assurance:** we have made significant progress in embedding a culture of continuous improvement with routine auditing, data scrutiny and self-evaluation taking place across single agencies. The CPC data set has been firmly embedded and is informing priorities and improvement plans. Most importantly, workforce engagement in quality assurance and improvement activity has been significantly enhanced.
5. **Collaborative leadership:** our inclusive approach to leadership has enabled us to develop a robust approach to scrutiny and challenge both within and between the CPC and the COG. A consistent focus on a shared vision and key cross-cutting priorities for protecting people has been supported by significant investment of resource to enhance services for children at risk of harm and for their parents/carers.

We are confident that we have capacity to support further improvement across our services for children at risk of harm. Both NHS Tayside and Dundee City Council Children and Families Services have enhanced their improvement support capacity through recent restructures. The Council has also made additional funds available to the Protecting People Strategic Support Team to enhance capacity to accelerate work on key improvement priorities (including implementation of the national guidance for learning reviews and ongoing work to improve the quality of chronologies).

Our collective priorities for improvement are:

1. **Enhancing the voice of children and young people in strategic developments:** building on progress made in terms of engagement at operational level and learning from experience gained through the Your Voice Our Promise Team, we are committed to working with children and young people to develop meaningful approaches to engagement in the work of the Child Protection Committee (CPC) and Chief Officers Group (COG), including influencing decision-making.

2. **Workforce engagement:** we recognise the need to develop clear two-way communications that ensure the workforce can influence the work of the CPC and COG. We want to consolidate the progress we have made in implementing a distributed leadership approach, consistently involving all sections of the workforce in leading quality assurance and improvement activity.
3. **Supports to young people, including transitions:** findings from recent initial and significant case review activity, as well as other self-evaluation activities have highlighted the need to focus on improving our responses to young people, including transitions. We are committed to working across the protecting people committees to explore the contextual safeguarding approach, further develop our trauma informed practice and to build on existing developments that have responded to the needs of young people who go missing and are at risk of child sexual exploitation.
4. **Co-ordination of quality assurance activities:** as the next step in our ongoing work to enhance our approach to continuous improvement we recognise the need to ensure that we are effectively co-ordinating single and multi-agency activities and ensuring key themes are collated, analysed and reported to the CPC. In addition, we are committed to joint work to implement the national learning review guidance and to enhance our approach to capturing outcomes and impact data in a quantifiable and reportable way.