



Bairns' Hoose

Final Standards

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Ministerial Foreword

We are delighted to have reached the stage of publication of these Bairns' Hoose Standards.

Bairns' Hoose is Scotland's approach to the Icelandic 'Barnahus' model, which means 'children's house'. Bairns' Hoose offers holistic, child-centred support to those who have been victims or witness of abuse and to children under the age of criminal responsibility whose behaviour has caused harm.

Bairns' Hoose is all about connecting services around the needs of the child by collaborating across agencies and disciplines. The four rooms approach does this by bringing together child protection, health, justice and recovery services in one setting. It's important to reduce the number of times children are asked to retell their stories as this can be difficult and retraumatising. Instead, trauma-informed practice is prioritised to support the child's recovery in a safe, respectful, friendly and welcoming environment.

These Standards marks a significant milestone in our journey towards implementing the model in Scotland and towards realising our vision that:

All children in Scotland who have been victims or witnesses of abuse or violence, as well as children under the age of criminal responsibility whose behaviour has caused significant harm or abuse, will have access to trauma informed recovery, support and justice.

The types of experiences that children who will access the Bairns' Hoose have gone through are appalling and ones which nobody, let alone any child, should have to go through. We therefore must make sure that when this does happen our support systems wrap around the child in ways which best respond to their needs for protection, support, justice and recovery. That is what Bairns' Hoose – and these Standards – are all about.

These Standards set out what Bairns' Hoose will mean in reality for the children and young people and their families, as well as for the professionals who will work to support with them, throughout this journey.

The Standards are underpinned by the United Nations Convention on the Rights of the Child (UNCRC), whilst also aligning with the our key policy programmes of Keeping The Promise and Getting it right for every child (GIRFEC), which recognise that all children must receive the right help at the right time. The importance of these Standards is demonstrated by the number of detailed responses to the consultation received and the effort that has been taken to ensure feedback has been taken on board when adapting the European PROMISE Quality Standards to meet the Scottish context.

We would like to pay tribute to determination of the children and families with lived experience and the many individuals and organisations who have contributed their expertise and time to making these Standards the best they can be for Scotland's children.

Reaching this point of consensus has been at times challenging and we appreciate the effort it takes to arrive at agreed positions. The nature of the Barnahus model requires professionals to come together in the child's best interests, and in many ways that common aim has been fundamental in overcoming these challenges through this process.

We will now begin the Pathfinder phase, where these Standards will be tested by Pathfinder Partnerships. In these Pathfinders, learning from the implementation of the Standards, alongside the rollout of the Scottish Child Interview Model, will help provide a blueprint for a pilot of a national Bairns' Hoose model in Scotland.

We look forward to continuing to work closely with partners to develop and deliver the wraparound support that children, young people and their families deserve; and that through the implementation of these Standards, Bairns' Hoose will provide.



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Minister for Children and Young People and Keeping the Promise



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Minister for Victims and Community Safety



1/10/100/10

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Minister for Social Care, Mental Wellbeing and Sport We would like to thank everyone who helped develop these standards. We are grateful to the children and young people who worked with us. They shared what is important to them and held us to account. Their voices and ideas are reflected throughout.

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Introduction

The Barnahus model

The first Barnahus or 'Child's House' was established in Iceland in 1998 to improve the multiagency response to child sexual abuse. Inspired by the Child Advocacy Center model from the United States, the Barnahus model is underpinned by the <u>United Nations</u> <u>Convention on the Rights of the Child (UNCRC)</u>. It is recognised across the world as an evidence-based, fully integrated model for children and families who are victims and witnesses of abuse and violence.^{1, 2} It is promoted across Europe by the <u>European Barnahus</u> <u>Network</u> (known as the PROMISE network).

Barnahus is described as a 'house with four rooms.' The 'rooms' represent health services, child protection services, investigative and legal proceedings, and therapeutic recovery.³ The 'roof' of a Barnahus provides expertise through collaboration, consultation, training and awareness-raising. Barnahus demonstrates the best ways to uphold the child's rights to care, protection, recovery and justice. The views and experiences of children and families highlight the importance of feeling heard, respected and supported by professionals 'under one roof.'^{4 5}

Bringing Barnahus to Scotland has been a long standing and crosscutting government ambition. In 2015, the <u>Evidence and Procedure Review Team's first report</u> highlighted research into existing procedures used at the time for taking evidence in court from a vulnerable witness. The research showed that the procedures:

- risked causing further harm and trauma, and
- did not support people to give their most accurate, reliable and comprehensive evidence.⁶

The Review identified the potential benefits of pre-recording the evidence of vulnerable witnesses in an appropriate non-courtroom setting.⁷ This led to the development of the Scottish Child Interview Model (SCIM), an evidence-based protocol for interviewing child witnesses based on international best practice. The SCIM rollout began in 2021.⁸

Having visited the Barnahus in Oslo, Norway, the Evidence and Procedure Review Team concluded that 'there is a compelling case that the approach taken in Norway [Barnahus] provides the most appropriate environment and procedures for taking the evidence of a young or vulnerable witness' and recommended the development of such facilities in Scotland.⁶

The Bairns' Hoose

In Scotland, the application of Barnahus to our specific legal, health, social care and child protection context is called **Bairns' Hoose**.

Bairns' Hoose is transformational. It is a whole system approach to care, protection and child-friendly justice. The Bairns' Hoose is based on four key foundations:

The **principles** of Bairns' Hoose are based on children's rights and recovery. The best interests of the child are paramount in all system design, actions and decisions. The child's right to be informed and to be heard are met and the journey they go through after disclosure does not cause further trauma.

The **processes** and procedures that take place within the Bairns' Hoose system are supportive and integrated. They are designed around the needs, views and the pace preferred by the child. Children and families experience as few delays as possible.

Places are designed by children for children. Children can experience interviews, examinations, recovery support and remote access to legal proceedings under one roof.

The Bairns' Hoose has strong leadership and promotes effective cooperation between agencies. It is jointly governed through a **platform** that operates in the best interests of the child.

Children's rights and recovery, as in the European model, are at the core of the design. A key aim of the Bairns' Hoose is to help produce evidence of the best standards for legal proceedings in a way that reduces the need for children to appear in court, should the case be prosecuted. The use of a link into legal proceedings from a place that is safe and childfriendly can further support this aim.

The Bairns' Hoose provides a child-friendly environment for assessments and investigative interviews which can help to reduce the child's anxiety and enable effective coordination of follow-up support. This reduces the risk of the child experiencing further trauma and enables them to start recovering from their experiences from the point of disclosure.

In its <u>2021-22 Programme for Government</u>, the Scottish Government committed to establishing a national Bairns' Hoose model. The development of these standards is the culmination of pledges to consider how lessons from the experience of Barnahus internationally could apply in Scotland. As initially highlighted in 'Equally Safe – A Delivery Plan',⁹ development of a national Bairns' Hoose model will embed the core principles of Getting it Right For Every Child (GIRFEC) and improve health pathways for access to care and to forensic and comprehensive medical examinations. It will support the delivery of reforms made to the vulnerable witnesses legislation and the Scottish Government's transformational priorities on delivering person-centred and trauma-informed practices across the justice sector to improve the experiences of children.¹⁰

Bairns' Hoose is part of a wide programme of redesign and public sector reform in Scotland to put prevention, rights and people at the centre of the design of services. ^{6,11}

Published in March 2020, 'The Promise' outlines the findings of the Independent Care Review into children's experiences of the care system.¹² Crucial to the design of Bairns' Hoose, it states:

Families and children's needs are best met through an effective multiagency, holistic response to [...] abuse that incorporates a child-friendly, non-victim blaming and trauma-informed approach. That must be accompanied by coherent, joined up thinking from police, the broader criminal justice system, health, children's sector and education.

It is a key national priority of the Scottish Government that services and the workforce across Scotland are trauma-informed and responsive.¹³ Trauma-informed services are those that recognise the prevalence of trauma and know how to respond when individuals have been affected by trauma. Their design takes account of the knowledge and understanding of trauma and its impact, and ensures this is embedded across systems, policies and environments.¹⁴ Trauma responsive practice recognises the central importance of relationships in supporting recovery, in responding safely and in ways that reduce retraumatisation.

GIRFEC is the national policy developed to support the wellbeing of all children and young people in Scotland. It is central to all policies which support children, young people and their families and underpins the Bairns' Hoose Standards. All work should enable children's wellbeing, protect children and prevent long-term harms by intervening early.

A national Bairns' Hoose model requires development in the context of other significant Scottish Government key priorities and systems transformation.

Purpose and scope of the Standards

Each country implements Barnahus within the context of its own legal, child protection and healthcare systems. <u>European Barnahus Quality Standards</u> (also known as the PROMISE standards) were developed by the PROMISE network. They are the international framework for best practice across Europe. The PROMISE standards need to be adapted to fully reflect the model in each individual country.

These Bairns' Hoose Standards apply the European standards to Scotland. The key purpose of the Bairns' Hoose Standards is to provide a common operational and organisational framework for a new, high quality model which is designed around the needs and rights of children. The Standards provide a shared ambition for all partnerships. They should be used by each partnership to support the measurement of their progress towards Bairns' Hoose.

<u>Bairns' Hoose – Scottish Barnahus visions, values and approach</u> sets out the Scottish Ministers' agreed scope for who will access Bairns' Hoose. In line with the scope outlined in the Scottish Government's visions, values and approach, this is:

- all children under the age of 18 in Scotland who may have been victims of, or witnesses to, abuse or violence which has caused or is likely to cause significant harm,¹⁵ and
- all children under the age of criminal responsibility (ACR) whose behaviour may have caused significant physical or sexual harm.

Who is eligible for referral to Bairns' Hoose will be determined within the statutory child protection framework. Where information is received by police, health or social work that a child may have been abused or neglected, or is suffering, or is likely to suffer, significant harm, an interagency referral discussion (IRD) must be convened as soon as reasonably practicable. IRDs will be a critical factor in ensuring that every eligible child has access to Bairns' Hoose.¹⁵

Age of criminal responsibility

The ACR is the age at which a person is considered capable in law of committing an offence. In Scotland that age is currently 12. The scope of the Scottish Government's vision for Bairns' Hoose specifically includes children under the ACR whose behaviour may have caused serious physical or sexual harm. The Bairns' Hoose will be an environment in which the context of the behaviour can be understood and investigated. This supports victims' rights to an investigation whilst ensuring that positive interventions can be made to minimise the risk of further harmful behaviour. For some children, this means that a formal investigative interview will be necessary in line with the <u>Age of Criminal Responsibility (Scotland) Act</u> <u>2019</u>. Decisions about whether the child should attend the Bairns' Hoose and for what purpose will be made through the IRD process.

Delivery of the Standards

The National Bairns' Hoose Governance Group's agreed approach is to place the responsibility for Bairns' Hoose with the thirty public protection Chief Officers' Groups. Partnerships will develop implementation plans using these Standards as a blueprint for delivery.

From September 2023, these Standards will be implemented across Scotland by several Pathfinder partnerships. The Pathfinders will act as proof of concept and form part of a quality improvement and service design process. The Pathfinders will identify how the Standards may be applied to different contexts, including remote or islands areas.

Learning from the Pathfinders, along with learning from the rollout of the SCIM, will inform the development of a pilot national Bairns' Hoose model.

The Scottish Government Bairns' Hoose Unit was established in November 2021 to deliver the Ministers' vision, values and approach. It will continue to work collaboratively with key stakeholders to design and refine the Bairns' Hoose model over the coming years.

Review of the Standards and continuous quality improvement

The development of the Standards is part of a learning process. Over time, Bairns' Hoose Partnerships will demonstrate continuous improvement through self-evaluation and independent external scrutiny. With implementation being rolled out on a phased basis, this will be introduced gradually. Bairns' Hoose Partnerships will be fully involved in developing any framework to be used for self-evaluation and inspection.

Healthcare Improvement Scotland and the Care Inspectorate were jointly commissioned to develop the Bairns' Hoose Standards in collaboration with key partners and agencies. Together we have taken an intelligence-led approach to the development of these Standards. Further information about the development of these Standards is available in the appendices.

As Partnerships embed change and evaluate learning, these Standards may be revised to ensure they continue to reflect evidence and policy. The Standards should be reviewed to ensure that they remain fit for purpose, effective, person centred and reflect Scottish Government policy and legislation. Any review should consider evidence, learning and intelligence, including the experiences of children and young people.

Format of the Standards

Each standard includes:

- an overarching standard statement
- feedback from children and young people who shared their views during development of the Standards
- a rationale explaining why the standard is important
- a list of criteria describing what is needed to meet the standard
- what the Standards mean if you are a child or a family member accessing Bairns' Hoose
- what the Standards mean if you are a member of staff
- what the Standards mean for organisations, and
- examples of what meeting the standard looks like in practice.

Glossary

Bairns' Hoose coordinator is a dedicated manager responsible for overseeing and coordinating the child and family's journey through the process. This includes coordinating the process with other relevant agencies including education. If the Bairns' Hoose coordinator is an appropriately qualified social worker, they may also fulfil the role of the lead professional.

Child protection medical examination is the examination or assessment of a child for whom there are child protection concerns. This includes Joint Paediatric Forensic Medical Examinations, single doctor examinations with corroboration by a forensically trained nurse, and specialist child protection paediatric examinations (also known as a comprehensive medical assessment).

Child refers to any person below the age of 18, as outlined in <u>UNCRC Article 1</u>, including babies and infants, who may be referred to a Bairns' Hoose.

Child under the age of criminal responsibility refers to any person below the age of 12 whose behaviour may have caused significant physical or sexual harm.

Child interview rights practitioners (ChIRPs) are specially-appointed solicitors who provide advice, support and assistance to children being interviewed under the Age of Criminal Responsibility (Scotland) Act 2019.¹⁶

Evidence by Commissioner is a process in which the evidence of a vulnerable witness is taken and visually recorded in advance of a trial or hearing under judicial supervision. The judicial supervisor is called a 'commissioner' and is usually a judge or sheriff. The commission process is designed to help capture the vulnerable witness's evidence as soon as possible. Its use is subject to an applicable application being made to, and granted by the court. The accused will not usually be present in the room or location where the commission proceedings are being held but is entitled to watch and hear the proceedings. In the criminal court process, a ground rules hearing should take place before the commission. At a ground rules hearing, the approach towards taking the evidence of the person, including the length and nature of questioning, can be discussed in detail between the parties and the court.

Evidence-in-chief is when a witness is questioned by the party (such as a prosecutor) who called them to give evidence. The object is to elicit from the witness the key facts relevant to the case or proceedings that are within the knowledge of that witness. Questions asked of a witness by the other party or parties in proceedings are referred to as cross-examination.

Family refers to the child's non-abusing family members and includes parents, siblings, foster carers, kinship carers and siblings, adoptive families and extended family.

Interagency Referral Discussion is the start of the formal process of information sharing, assessment, analysis and decision-making following reported concern about abuse or neglect of a child or young person under the age of 18 years, in relation to familial and non-familial concerns. This may include discussion of concern relating to siblings or other children within the same context, and can refer to an unborn baby that may be exposed to current or future risk. The IRD process includes planning for children who may be interviewed under the Age of Criminal Responsibility Act (Scotland) 2019.

Joint investigative interviews are formal child protection interviews of children. They are conducted by trained police officers and social workers. They take place when there is a concern that a child is a victim of, or witness to, criminal conduct. They also take place where there is information to suggest that the child may be at risk of significant harm including abuse or neglect.

Lead professional is the social worker who leads and coordinates the multidisciplinary child protection assessment, and oversees implementation of actions to protect the child.

Scottish Child Interview Model (SCIM) is the new approach to Joint Investigative Interviews. It is designed to minimise re-traumatisation and keep the needs and rights of child victims and witnesses at the centre of the process. The model aims to achieve pre-recorded evidence from the child that is of high quality.

Special measures can be used to support a child or vulnerable witness to give their evidence. There are two types: 'standard' and 'non-standard.' Standard special measures include the use of a live television link from another location within the court building, and the presence of a supporter and a screen. 'Non-standard' special measures include the process of evidence by commissioner, taking evidence in the form of a prior statement, and the use of a live link from another part of the court building or another suitable place outside the court building. The <u>Vulnerable Witnesses (Criminal Evidence) (Scotland) Act 2019</u> added section 271BZA to the <u>Criminal Procedure (Scotland) Act 1995</u>) which created a new presumption for child witnesses under 18. Where children are due to give evidence in solemn cases for certain offences, they will be able to have that evidence pre-recorded in advance of the trial. At the moment, section 271BZA only applies in relation to High Court cases.

In all instances, an application has to be made to the court seeking approval of the use of the applicable measure or measures.

Staff refers to any individual paid to provide support or a service directly to a child in the Bairns' Hoose, regardless of their employer.

Supporter refers to the parent or guardian of a child interviewed under the Age of Criminal Responsibility (Scotland) Act 2019 who gave consent to the interview. Where an interview is carried out under a child interview order, rather than with the consent of the child's parent or guardian, the supporter does not have to be the child's parent or guardian. The only requirement is that they are aged 18 or over. The child has a right for their supporter to be present during the interview.¹⁷

In legal proceedings the use of a supporter is one of the standard special measures that the court can grant. In this context a supporter is someone who stays with a vulnerable witnesses when they give their evidence. They cannot help the witness give evidence or influence the evidence given in any way. They can be someone the child knows, or someone from a support organisation or from a social work department.

Bairns' Hoose Partnership refers to any group responsible for planning, commissioning, delivering or operating a Bairns' Hoose. The Partnership should include, as a minimum:

- NHS services including community mental health services
- local authority social work
- Police Scotland, and
- third sector organisations with expertise in delivering therapeutic support.

Partnerships should consult with the Crown Office and Procurator Fiscal Service (COPFS), Scottish Courts and Tribunal Service and the Scottish Children's Reporter Administration (SCRA) to ensure that practices and facilities are of the required standard for any legal process.

Therapeutic support refers to formal therapeutic input or psychological intervention. It also includes other therapeutic activities which may draw on the principles of psychological intervention such as art or play therapy.^{18, 19} For children who are non-verbal, this may include relationship-focused support such as Parent-Infant Psychotherapy.

Trauma informed relates to services and staff that emphasise choice, trust, empowerment, collaboration and safety.²⁰

Trusted person refers to a professional chosen by a child victim or witness to support them through their journey at the Bairns' Hoose. This may be a nursery teacher or childminder, support worker, social worker, residential care staff member, independent advocate, nurse or health visitor. A supporter or ChIRP may fulfil this role in some cases.

Violence in the context of these Standards refers to the all forms of physical or mental violence, injury, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse and domestic abuse, as per <u>UNCRC Article 19</u>.

The Bairns' Hoose Standards

- 1. My rights are upheld and these Standards are for me. My best interests are always acted on, I am listened to and my views are taken seriously.
- 2. Everyone who is professionally responsible for protecting children across Scotland works together to ensure Bairns' Hoose helps me and other children.
- 3. Bairns' Hoose includes me and my family.
- 4. The Bairns' Hoose feels cosy, comfortable, relaxed and well-kept.
- 5. The people who help me work well as a team to make sure I have the right support when I need it and things are explained to me in a way that I can understand.
- 6. I will be supported during any interview. My interview will be recorded and used so I don't have to repeat myself as much.
- 7. If I need to give evidence in a court or legal process, someone explains what is happening and I am supported through this. There is an option to live link to court from the Bairns' Hoose.
- 8. My physical, emotional and mental health is looked after. Someone helps to plan appointments and I'm supported.
- 9. If me or my family need help we can speak with someone who understands what we are going through. I get the help and support I need to recover.
- 10. The people who help me at the Bairns' Hoose work as a team. They get the help they need to do their jobs well.
- 11. People at the Bairns' Hoose listen to what I have to say about my experience. What I tell them helps to make the Bairns' Hoose better for other children.

Standard 1: Key principles

Standard statement

My rights are upheld and these Standards are for me. My best interests are always acted on, I am listened to and my views are taken seriously.

Children told us:

- it should be about me and what works best for me, not what works best for services
- I should have the chance to make choices about what I want and need
- I should be genuinely involved and know what is happening at every step of the way
- things should happen at a speed that I am comfortable with
- I should be able to stop and start when I want to, and
- there needs to be support for my family and those who look after me.

Why this standard is included

The central aim of the Bairns' Hoose is to uphold children's rights and promote recovery.²¹ <u>UNCRC Article 3</u> outlines the general principle that the best interests of the child must be 'a primary consideration in all actions concerning children.'²² Complying with Article 3 requires the development of a rights-based approach to secure the holistic physical, psychological and spiritual integrity of the child and promote their human dignity.²³ An IRD should assess the best interests of the child from a multiagency perspective and take collective decisions based on this assessment.

Effective engagement with children should underpin the design and delivery of Bairns' Hoose. <u>UNCRC Article 12(1)</u> highlights that all children should be given the opportunity to be heard and their views given due weight on all matters affecting them, in accordance with their age and maturity.²² <u>UNCRC Article 13</u> enshrines children's right 'to seek and receive information.'²² Children who are supported to fully participate and have their rights upheld report lower levels of subsequent trauma following disclosure of abuse.²⁴ The views expressed by children through supported participation should be considered in decision making, policy and preparation of laws or measures as well as their evaluation.²⁵

<u>UNCRC Article 39</u> provides that all appropriate measures should be taken to promote the physical and psychological recovery and social reintegration of children who have experienced abuse, neglect or violence.²² Recovery and reintegration should take place in an environment which fosters the health, self-respect and dignity of the child.

What is needed to meet the standard

- **1.1** The Bairns' Hoose Partnership can demonstrate that the best interests of the child are:
 - at the core of actions and decisions made about them
 - formally documented and acted on through an IRD process, and
 - continuously reviewed before, during and after a child's time at the Bairns' Hoose.
- **1.2** All children who have experienced or witnessed any type of abuse or violence which may have caused them significant harm are referred to the Bairns' Hoose if it is in their best interests.
- **1.3** All children who are under the ACR whose behaviour may have caused significant physical or sexual harm are referred to the Bairns' Hoose if it is in their best interest and it is assessed as safe to do so.
- **1.4** Children's views are listened to and their thoughts given due weight including in any judicial and administrative proceedings relating to them.
- **1.5** Children and families are supported to participate in the planning, service design and evaluation of each Bairns' Hoose.
- **1.6** Children and families are treated with kindness, empathy and respect.
- **1.7** Bairns' Hoose processes are integrated and designed around the needs of children, including:
 - going at the child's pace, for example ensuring regular breaks
 - reducing or minimising disruption to education
 - ensuring children do not experience undue delay in having their needs assessed and met
 - explaining the processes and procedures using formats and languages that children and families can understand, including children and families with different needs or at different ages or stages
 - giving children and families space and support to ask questions, and
 - ensuring that the child is supported throughout their journey.

- **1.8** Information about what happens at the Bairns' Hoose is developed in partnership with:
 - children and families who have experience of justice or child protection proceedings
 - children of all ages
 - children from diverse cultural and socioeconomic backgrounds
 - children and families who do not have English as a first language
 - children with learning disabilities
 - children who are non-verbal or use communication tools, and
 - children with social communication disabilities or difficulties.
- **1.9** Children and families are supported to understand what is happening in the Bairns' Hoose and receive information that is:
 - specific to their circumstances as a victim, witness or child being interviewed under ACR legislation
 - inclusive
 - in their own language
 - adapted to their age and stage of development
 - in a format they understand
 - relevant
 - consistent, and
 - timely.
- **1.10** Service specifications, delivery plans and improvement plans contain specific provisions relating to each relevant article of the UNCRC and the Bairns' Hoose Partnership can demonstrate evaluation against these provisions.
- **1.11** All relevant requirements under the <u>Equality Act (2010)</u> and United Nations Convention for the Rights of <u>Persons with Disabilities</u> are met to ensure that children and families do not experience discrimination.
- **1.12** The rights of all children, including refugee children, trafficked children, asylum seeking children and care experienced children are upheld without discrimination.
- **1.13** The Bairns' Hoose Partnership:
 - collects and monitors data relating to timescales and overall performance within its oversight and,
 - acts on the learning from this data to reduce undue delay.

- **1.14** The Bairns' Hoose Partnership works with local authorities, schools and education settings to minimise the child's disruption to education and promote the child's return to school or college if this is right for them.
- **1.15** Children and families are informed and consulted about what information is shared.

What does the standard mean for children?

- Your rights will always be upheld and people will stand up for your rights.
- Decisions about you are made with your input and in your best interests.
- You will be included in what is happening and given as much choice as possible.
- The information you get will be clear, understandable and useful. You will get it when you need it.
- You will be able to ask questions and will be helped to understand the information you get.
- You will have a chance to be involved in how the Bairns' Hoose is run.
- Your family will be supported to help you recover.

What does the standard mean for staff?

Staff:

- ensure that the best interests of the child are at the centre of all actions relating to children and decisions made about them
- are supported to deliver a rights-based service which revolves around the needs of children
- work collegiately to put children's rights at the centre of their work
- take into account the impact of trauma and understand children's experiences, and
- are trained and supported to assess and determine the best interests of the child and deliver care and support that is respectful and compassionate.

What does the standard mean for the Bairns' Hoose Partnership?

The Partnership:

- upholds children's rights in all of its work
- designs systems and processes around the needs and best interests of children
- works collaboratively and effectively to reduce undue delay
- gives due weight to the thoughts, experiences and opinions of children, and
- manages and handles data legally and sensitively.

Examples of what meeting this standard might look like

- Systematic and routine collection of feedback from children and young people that is acted on.
- Information is provided in alternative formats and languages, including videos and online material developed in partnership with young people and families.
- Data collection and monitoring of timescales and overall performance against timescales.
- Implementation of peer advocacy, peer research and young people's reference groups such as Champions Boards.
- Children's involvement in panels, boards, steering groups and decision-making bodies.
- Alignment between service plans and national children's frameworks.
- Consistent use of Children's Rights and Wellbeing Impact Assessments, Islands Communities Impact Assessments, Data Protection Impact Assessments and Equality Impact Assessments.

Standard 2: Collaborative leadership and governance

Standard statement

Everyone who is professionally responsible for protecting children across Scotland works together to ensure Bairns' Hoose helps me and other children.

Children and young people told us:

- things should actually change and be different for children who go through what I did
- people in power should stick to their promises
- the Bairns' Hoose should be checked against the Standards
- the adults responsible for the Bairns' Hoose should actively seek out children's views and listen to them, and
- I should be involved in the way the Bairns' Hoose is run.

Why this standard is included

Children and families can experience anxiety and uncertainty when involved with complex, disparate systems across justice, child protection, and health and therapeutic support.^{12, 26} A consistent and coordinated approach reduces uncertainty, trauma and undue delay, by providing a holistic and integrated response.²⁷ The Bairns' Hoose model should be governed with strong, dedicated leadership with a vision to uphold children's rights to care, education, protection, justice, participation, recovery from trauma and to be protected from abuse.¹ The needs and rights of children must be the primary concern of strategic leadership, expressed through a national, regional and local coordinated effort that reflects the geographical context.¹²

Local authorities, Police Scotland and NHS Scotland have a shared responsibility to deliver a joint child protection response. Collective and collaborative leadership at all levels supported by a joint vision ensures the design and delivery of integrated services that improve the experience of children and families. The Bairns' Hoose should be formally embedded in national and local child protection services with Partnership agreements established.¹ Partnerships should reconfigure services, realign budgets and refocus strategic planning around the needs and rights of children and families. The roles and contributions of each partner agency in the Bairns' Hoose should be understood and valued in the Partnership.²⁸

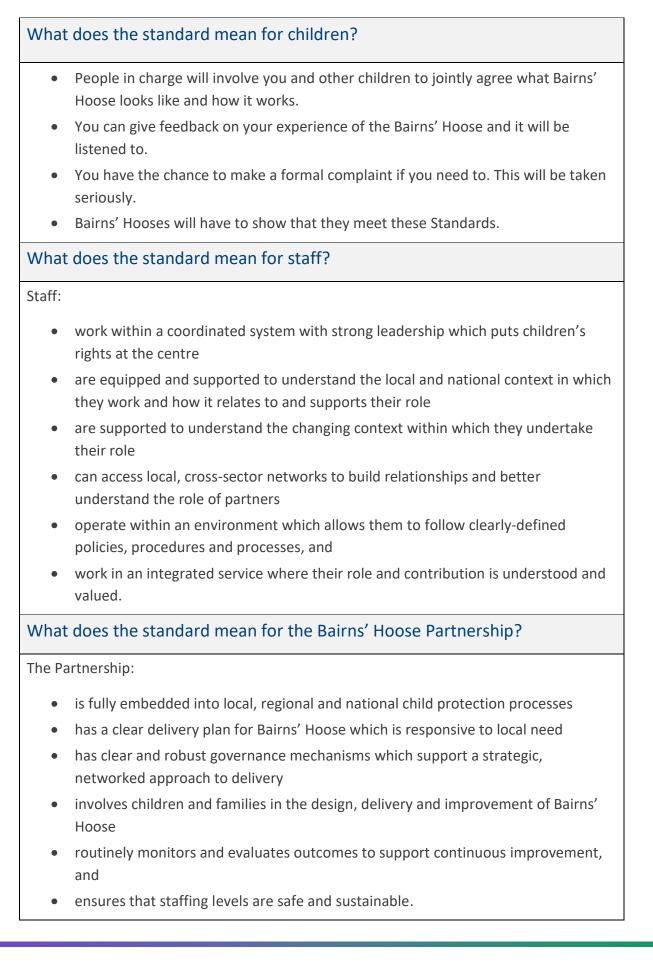
Responsibility for child protection should be collective. Chief Officers and senior managers should provide collaborative leadership including through self-evaluation, inspection, learning and development.²⁹ Children and young people should be involved in a way that is right for them at all relevant stages.

All aspects of governance, partnership and operational management of Bairns' Hoose will recognise the independent role of the judiciary and courts, the independent role of the Lord Advocate as head of the system of investigation and prosecution of crime in Scotland and the independent role of the Principal Reporter in Scotland's children's hearing system.

What is needed to meet the standard

- **2.1** There is a national agreement for the governance and oversight of Bairns' Hoose which refers to the role of:
 - National Child Protection Leadership Group
 - Public Protection Chief Officers Groups
 - NHS boards
 - third sector delivery partners
 - joint children's services planning structures such as Integration Joint Boards and children's partnerships
 - groups with responsibility for the delivery of relevant national change programmes such as The Promise³⁰, and
 - Child Protection Committees.
- **2.2** Each Partnership is embedded in local child protection systems and processes and has a formal partnership agreement which specifies the commitment, resourcing and responsibilities of all relevant agencies including, as a minimum:
 - local authority social work
 - Police Scotland
 - NHS services including community mental health services, and
 - third sector organisations with expertise in delivering therapeutic support.
- **2.3** Formal partnership agreements are regularly reviewed to support continuous improvement and ensure objectives are being met, and take into account:
 - children and families' views and experience about what matters
 - the results of ongoing evaluation, data collection and tests of change
 - views and experiences of staff
 - changes to policy or legislation, and
 - current good practice and the principles of best evidence.

- **2.4** There is a sustainable delivery plan for the establishment and operation of each Bairns' Hoose which outlines the Partnership's:
 - statutory responsibilities
 - shared aims and culture
 - governance structure
 - coordination mechanisms
 - engagement with children and families
 - workforce and staffing model
 - outcomes framework and corresponding data collection processes, and
 - performance monitoring arrangements.
- **2.5** Each Bairns' Hoose has a jointly agreed staffing model which:
 - emphasises values-based practice including compassion and understanding of trauma
 - supports the development of relationships
 - offers the correct blend of specialism to ensure timely assessment and appropriate referral where necessary
 - enables continuous safe care and support to be provided
 - is sustainable, and
 - protects staff capacity to facilitate and embed system-wide change.
- **2.6** Each Bairns' Hoose has internal and external governance processes which:
 - ensure a mechanism is in place for children and young people to provide feedback
 - include effective external quality assurance including inspection
 - include internal quality assurance mechanisms and structures, and
 - include a robust and transparent complaints procedure.
- **2.7** Each Bairns' Hoose Partnership identifies a Bairns' Hoose coordinator with responsibility for leading and managing the Bairns' Hoose.
- 2.8 National and local Bairns' Hoose Partnerships consult with the Crown Office and Procurator Fiscal Service (COPFS), Scottish Courts and Tribunal Service and the Scottish Children's Reporter Administration (SCRA) to ensure that practices and facilities are of the required standard for any legal process.



Examples of what meeting this standard might look like

- Joint delivery plans or standards implementation plans.
- Active engagement with children in joint delivery or implementation plans.
- Tests of change and use of quality improvement tools and methods.
- Involvement in strategic network-building, collaborative learning events and collective problem-solving.
- Formal multiagency steering groups terms of reference or local written agreements.
- Rights-based outcome measures, baseline measures and self-evaluation against these measures.
- Self-evaluation, annual reporting and action plans to track progress towards full implementation of the Bairns' Hoose Standards.
- Policies, procedures, codes of conduct and guidance on governance and quality assurance mechanisms.
- Protocols and agreements for interagency working including role descriptions.
- Staff skills, training and safe staffing data.
- Availability of a jointly-agreed, documented complaints process.
- Satisfaction or other data relating to complaints resolution.

Standard 3: Inclusive access

Standard statement

Bairns' Hoose includes me and my family.

Children and young people told us:

- everyone going to the Bairns' Hoose needs help
- everyone should be treated with respect and be able to get support, and
- support should be available for my family too.

Why this standard is included

Children and young people's right to non-discrimination is enshrined in both national and international law.^{22, 31} Children and young people with one or more protected characteristic, children who are care experienced, and children with additional support needs are all more likely to experience trauma, yet are also less likely to disclose abuse.³²⁻³⁴ Children under the ACR whose behaviour may have caused serious physical or sexual harm are likely to have experienced or witnessed abuse themselves.³⁵ Infants, children who are non-verbal and children with learning disabilities may need extra support to understand what is happening and share their views.

Children who have experienced neglect or any type of physical, emotional or sexual abuse may experience poor health and wellbeing outcomes well into adulthood. Exposure to domestic abuse may have profound effects on children's long-term health and wellbeing, including brain development, stress-related physical illness, mental health and resilience.^{36 37} All infants, children and young people who have experienced or witnessed any type of abuse should be considered for referral to Bairns' Hoose. Bairns' Hoose should be extended to siblings and non-abusing parents, who play a key role in supporting the recovery of children.³⁸

All components of the Bairns' Hoose (that is, health, justice, child protection and therapeutic support) should be accessible to all eligible children regardless of their age or other protected characteristics. All components should be available regardless of where children live.

What is needed to meet the standard

- **3.1** The Bairns' Hoose Partnership collaborates with other local established partnerships to undertake a population-based needs assessment which covers:
 - prevalence of abuse
 - poverty
 - social exclusion
 - underserved communities
 - population health concerns, and
 - barriers to accessing services.
- **3.2** The Bairns' Hoose has protocols in place for supporting and upholding the rights of children under the ACR whose behaviour may have caused significant physical or sexual harm.
- **3.3** Children and families travel to the closest or most accessible Bairns' Hoose to them.
- **3.4** Children in rural and island communities can access Bairns' Hoose in a way that is right for them.
- **3.5** The Bairns' Hoose Partnership provides financial or logistical support to children and families to travel to the Bairns' Hoose.
- **3.6** The Bairns' Hoose is accessible for all children who are referred and their families, no matter what specialist needs or support they or their family require.
- **3.7** Translation, interpretation and communication support is provided to children and their families when needed.
- **3.8** Family members are able to access holistic support at the Bairns' Hoose.

What does the standard mean for children?

- These Standards are for you no matter where you live or why you are going to a Bairns' Hoose.
- You will be supported to communicate in your own way and in your own language.
- There will be sensory equipment, quiet spaces, hearing loops and ramps if you or your family need it.

What does the standard mean for staff?

Staff:

- welcome all children
- keep children and families safe
- work flexibly across different locations where this is required
- have an understanding and knowledge of when services, such as interpretation services and communication support might be required, and
- have a clear understanding of how people can access the Bairns' Hoose.

What does the standard mean for the Bairns' Hoose Partnership?

The Partnership:

- has clear protocols, guidance and training in place to ensure that the Bairns' Hoose is accessible for all children and families who use its services, including those who do not have English as their first language
- plans innovative services to meet the needs of rural and island communities, and
- has arrangements to access appropriate services to support children to attend and fully engage in the Bairns' Hoose.

Examples of what meeting this standard might look like

- Place-based needs assessments to ensure equity of delivery in remote, rural and urban areas.
- Equality Impact Assessments and Island Communities Impact Assessments based on best evidence and meaningful engagement.
- Protocols for assessing additional support needs for children and young people, including accessing interpreters.
- Clear processes for referral to Bairns' Hoose.
- Evidence of processes and mechanisms to meet the specific needs of children under the ACR who are referred to Bairns' Hoose.
- Training and protocols for assessing risk including dynamic risk assessment.

Standard 4: Design and environment

Standard statement

The Bairns' Hoose feels cosy, comfortable, relaxed and well-kept.

Children and young people told us:

- the Bairns' Hoose should look and feel welcoming, inviting and safe on the outside and the inside
- it should be bright and have windows
- there should be activities, games, music I can control and things to fidget with to help me relax. I should have a space to be a kid
- the Bairns' Hoose should be cared for and invested in
- nothing should be old, broken or forgotten
- there should be things like toys and activities for older and younger kids
- every Bairns' Hoose should feel the same no matter which one you go to, and
- there should be somewhere nice outside with plants and toys where I can play and relax when I choose to.

Why this standard is included

Children and young people who have experienced or witnessed harm report that feeling safe is essential to allow them to communicate what happened, support their recovery and reduce trauma. The safety of children and families should be assessed and planned for.

The environment in which a child or young person is interviewed has an impact on the quality of the information collected.³⁹ Children report that when talking about what has happened, the size of the furniture, formal environment and adult design of the building can contribute to the child feeling unsafe or overwhelmed. Travelling to unwelcoming and adult-centred spaces for assessments and interviews leads to additional feelings of disruption, powerlessness and trauma.⁴⁰

Place-based approaches to the planning and design of services can support children and young people while building on the assets of local communities.^{41, 42} Bairns' Hoose should provide an environment which feels welcoming, safe and comfortable. It should have furnishings, fittings and décor that feel homely and access to an outdoor space which is designed to promote play and enhance wellbeing. Where possible, outside of interview rooms, children and families should have control over the environment, such as lighting levels, ability to play music or use outdoor space. Partnerships should ensure that rooms for recording interviews of the required quality are child friendly.

The Bairns' Hoose should be designed to be inclusive, physically accessible and uphold <u>UNCRC Article 2</u> which states that the rights in the UNCRC are to be upheld for all children without discrimination.²²

What is needed to meet the standard

- **4.1** Children access health, police, social work, recovery and justice services under one roof, where possible, unless it is demonstrably not in their best interests.
- **4.2** Children and families are involved in the physical design of the Bairns' Hoose through meaningful participation and at regular review points.
- **4.3** The Bairns' Hoose Partnership undertakes appropriate place-based risk assessments on agreed designs to ensure safety for all children, families and staff at the Bairns' Hoose.
- **4.4** The planning and location of the Bairns' Hoose takes into account:
 - the need for privacy and discretion
 - family safety in situations of domestic abuse and coercive control
 - community assets such as local health services, and
 - public transport, parking and accessibility.
- **4.5** The Bairns' Hoose feels cosy, safe and welcoming for all children and their families by offering:
 - a comfortable, safe child's space
 - private space for families such as a living room
 - a space for play, creative activities or games
 - refreshments
 - sensory toys and relaxation materials
 - green outdoor space which can be accessed at any time
 - clinical space for examinations or health assessments
 - dedicated rooms appropriate for visually-recorded interviews, and
 - children and families' control over lighting, temperature or ventilation where possible.

- **4.6** Toys, games, entertainment technology, reading materials and craft materials in the Bairns' Hoose are:
 - adaptable to meet the needs of all children and their families
 - relevant for different ages, disabilities and cultural backgrounds
 - chosen as a result of meaningful engagement with children and families
 - up-to-date
 - well maintained, and
 - continuously reviewed.
 - **4.7** Where technical equipment such as recording and medical equipment is required, it is shown and explained to children and families as part of the introduction process.
 - **4.8** Where timetabling appointments at different times is not feasible, the Bairns' Hoose is designed so that families have separate spaces.
 - **4.9** All facilities including reception areas, interview and examination rooms are comfortable, welcoming and adaptable to meet the needs of all children.
 - **4.10** The Bairns' Hoose is designed and planned to support staff to work effectively together including:
 - collaborative space and shared systems where appropriate
 - space for planning and administrative work, and
 - separate, private space for staff reflection and supervision.

What does the standard mean for children?

- You will be safe and the Bairns' Hoose will feel like a comfortable and welcoming place to be.
- You will get the help you need in one place as much as possible.
- It will be private and be as close to home as possible.
- Children will have a say over the design of the Bairns' Hoose.
- You won't come into contact with anyone who might have harmed you when you are in the Bairns' Hoose.

aff:	
•	ensure that the environment is child-centred, well maintained and is welcoming and safe
•	can access support that meets each child's needs
•	assess risk, and plan for the physical safety of children and families, and
•	can access quiet spaces for staff time, privacy, breaks and practice reflection and supervision.
What	does the standard mean for the Bairns' Hoose Partnership?
The Pa	artnership:
٠	locates services under one roof and innovates where this is not possible
٠	optimises local resources
٠	works across geographical and organisational boundaries
•	involves children and young people, and their families where appropriate, in the planning, including the location, and design of the Bairns' Hoose
٠	has adaptations to ensure the design is inclusive and accessible, and
•	ensures that the Bairns' Hoose is appropriately equipped and maintained for supporting all children including those who have experienced high levels of trauma.
Exam	ples of what meeting this standard might look like
•	Accessible and high quality premises with appropriate equipment and facilities including toys, games, internet access and outdoor space.
•	Co-location of police, social work, third sector, health and justice.
٠	Dynamic risk assessment and operational procedures for safety planning.
٠	Innovation in service provision in remote and rural areas.
•	Inclusive service planning processes which involve children and young people and their families.
٠	Use of community-based planning tools and data to identify local transport links, proximity to local services and communities most in need.

Standard 5: Planning for children

Standard statement

The people who help me work well as a team to make sure I have the right support when I need it and things are explained to me in a way that I can understand.

Children and young people told us:

- the Bairns' Hoose should be designed around me and my needs
- I should have the option to visit or have a virtual tour to see the place before I go
- I should be able to meet the people who work there or find out about them before I go
- all staff should be on the same page, so children and young people feel safe enough and supported
- the people who support me should be kept up to date with what's going on in my life so that I don't have to repeat myself
- I shouldn't have to risk meeting people I know or people who have caused harm to me
- I should have a person who I trust who can help me understand what is happening
- I should be asked things I actually have a choice about before I go, and
- I should have a say over who I would like to support me.

Why this standard is included

The provision of a fully coordinated multiagency team ensures that agencies have shared responsibility and knowledge of roles and responsibilities.⁴³ Where information is received by police, health or social work that a child may have been abused or neglected or is suffering or is likely to suffer significant harm, an IRD must be convened as soon as reasonably practicable. Prior to using any of the investigative power under the Age of Criminal Responsibility (Scotland) Act 2019 an IRD should be convened as soon as possible. All joint child protection processes and planning should follow the National Child Protection Guidance (2021) to focus on integration, prevention, early intervention and whole family support.¹⁵ All services for children and young people should follow the multiagency and integrated planning policy outlined in GIRFEC.

Child protection processes and planning for children, including those under the ACR who may have caused serious physical or sexual harm, should build on existing knowledge about the child and their family. Plans should include children's views, where known, and continue existing plans and support where it is working well.¹⁵ Robust information governance mechanisms, informed by the Data Protection Act 2018 and other relevant legislation, policies and guidance, should be adhered to by all agencies throughout the process.

<u>UNCRC Article 12(2)</u> states that all children should be given the opportunity to be heard in any judicial and administrative proceedings affecting them.²⁵ Participation by the child throughout the planning process should be supported, meaningful and put children's best interests at the centre.²⁴ Good relationships between workers and children are key to promoting participation in processes and engagement further down the line.

Having one person to support children and families throughout the process reduces feelings of confusion, powerlessness and alienation.

What is needed to meet the standard

- **5.1** Bairns' Hoose support and interventions are part of a single, continuous planning process that begins before referral to the Bairns' Hoose and ends when required.
- **5.2** An IRD is convened as soon as reasonably practicable and a decision is taken based on the child's best interests as to whether referral to the Bairns' Hoose should be made.
- **5.3** All aspects of the IRD are recorded, including the reasons why children have been referred or not referred to the Bairns' Hoose.
- **5.4** Multiagency planning meetings involving all relevant agencies take place at regular points throughout the child's journey.
- **5.5** Multiagency teams have formally, mutually-agreed policies, process and documentation including a child's plan.
- **5.6** Records made by the Bairns' Hoose Partnership about children and families are accurate and written sensitively.^{12, 44}

- **5.7** Each Bairns' Hoose Partnership is covered by a national data sharing agreement which sets out:
 - information sharing between agencies in line with legal duties and good practice guidance relating to the child protection process⁴⁵
 - legal duties to report to the <u>Scottish Children's Reporter Administration</u> (SCRA) or the <u>Crown Office and Procurator Fiscal Service</u> (COPFS)
 - information sharing guidance to support recovery
 - information sharing for law enforcement, prosecution or children's hearings proceedings, and
 - processes for sharing any views expressed by the child in relation to these proceedings.
- **5.8** Children and families are fully informed about their right to privacy and how this will be upheld.
- **5.9** Children are offered:
 - choice over the sex or gender of professionals or healthcare practitioners where possible
 - choice and time to reflect on who their trusted person might be, and
 - support and information in a language and format that is right for them on any processes they might experience.
- 5.10 Every child is:
 - supported to freely express their views and have their views given due weight throughout the process, and
 - able to make choices that are important to them as much as possible.
- **5.11** There are processes in place to minimise contact between families with planned appointments and other visitors to the Bairns' Hoose, for example, children who may need to attend urgently.
- **5.12** There is a dedicated Bairns' Hoose coordinator who has responsibility to ensure that there is continuous and seamless multidisciplinary support and follow up for the child and their family throughout the process.
- **5.13** There is a dedicated person who has administrative responsibility for the daily operation of the Bairns' Hoose, including scheduling visits and planning rotas.
- **5.14** Children can choose a trusted person or can access a supporter to ensure their rights are upheld and their views are heard.

- **5.15** Digital systems for collecting and sharing information are:
 - up-to-date
 - efficient and functional
 - integrated as appropriate as far as legally and practically possible, and
 - designed to support effective data sharing, performance monitoring and quality improvement.

What does the standard mean for children?

- Social workers, police, school staff, support workers and health professionals will work together to help you.
- You will be introduced to someone who will be there for you and who will help you understand what is happening.
- You will be involved as much as possible in the process. This involves being able to make choices about what's important to you as much as possible.
- Your privacy is important and will be respected. You will be helped to understand what information is being shared about you and why things are being shared.

What does the standard mean for staff?

Staff:

- work together to deliver consistent and coordinated care
- collectively plan the child's journey through the Bairns' Hoose
- ensure that they understand their roles and responsibilities within an integrated team, and
- are aware of what information can and should be shared, and how to communicate this to children and their families.

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What	does the standard mean for the Bairns' Hoose Partnership?
The Pa	artnership ensures that:
•	there is infrastructure in place to embed the Bairns' Hoose in the single planning process
٠	joint teams facilitate integrated planning
٠	there are dedicated team members to fulfil coordination and support roles
•	the child's right to privacy and confidentiality is upheld
٠	information is shared according to legislation and data sharing agreements
٠	there are clear lines of accountability for the delivery of all statutory obligations, and
٠	services are coordinated, consistent and seamless both inside and outside the Bairns' Hoose.
Exam	ples of what meeting this standard might look like
٠	Jointly-created process maps, service pathways and operating procedures.
•	Compliance with data protection and information sharing legislation, principles, policies and protocols.
٠	Integrated reflection, learning and decision making meetings for interagency staff within the Bairns' Hoose.
٠	Joint improvement work, including action plans, data collection and review of data
٠	Dedicated staff members in coordination or support roles.
٠	Multiagency team meetings with standing agendas for case coordination.
٠	Joint team building and peer support.

Standard 6: Interviews in the Bairns' Hoose

Standard statement

I will be supported during any interview. My interview will be recorded and used so I don't have to repeat myself as much.

Children and young people told us:

- I should feel safe when I'm being interviewed
- I should feel like the person listens to me and believes me
- people should remember I'm a child and not put too much pressure on me
- the interview should go at my pace
- I might forget all the details, so people should remember that's okay
- I should feel like the people working with me respect me and want to help me
- I should be shown where the cameras are in the room. Everything should be explained to me in a way I understand, and
- someone should take the time to get to know me a bit and make sure I feel okay to say what happened.

Why this standard is included

The European guidelines on child-friendly justice, underpinned by the UNCRC, highlight that justice processes should be adapted to the specific needs of children.⁴⁶ Audio or visual recording of interviews should be used where possible to avoid repeat interviewing which may affect recall and cause additional trauma.^{7, 47} All interviews should be carried out according to evidence-based practice and protocols.^{48, 49} All interviews should be planned, supportive and undertaken by trained practitioners.⁵⁰ The minimum number of interviews needed should be undertaken.

Interviews should both meet the needs of the child, allowing them to provide a free and detailed account of what has happened, and be the best possible standard for any proceedings that may ensue.^{51, 52} Joint investigative interviews (JIIs) should follow the SCIM.

There are two types of investigative interview that can take place in the Bairns' Hoose:

- A JII where the child being interviewed may be a victim or witness.
- An investigative interview under the <u>Age of Criminal Responsibility (Scotland) Act</u> (<u>ACRA</u>) where the child may have caused serious physical or sexual harm.

An IRD should take place prior to any decision to interview a child to ensure the interview is planned and tailored to the child's needs.¹⁵ Decisions are made at the IRD whether an ACRA investigative interview would take place and if the behaviour meets the criteria for an interview under the ACRA.

What is needed to meet the standard

- **6.1** JIIs and ACRA investigative interviews take place in the Bairns' Hoose, where possible, unless it is demonstrably not in the best interests of the child.
- 6.2 Each Bairns' Hoose has facilities to support:
 - high quality visual recording of interviews, and
 - remote observation of interviews where required as part of the investigative process.
- **6.3** The number of interviews is limited to the minimum necessary for the investigation, taking into consideration the best interests of the child. There may be some circumstances where more than one interview is required.
- **6.4** Investigative interviews are planned and coordinated to meet the rights and needs of the child. Interviewers are supported and informed by people who:
 - know the child well, and
 - have specialist skills to meet the child's needs.
- **6.5** Interpreters and people who support children with communication needs are appropriately skilled and involved in planning the interview.
- **6.6** Before the interview, children are informed about, and supported to understand:
 - what will happen
 - the purpose of the interview
 - the recording equipment and location of cameras
 - who is involved in the investigative interview and their roles and responsibilities
 - any likely outcomes of the interview, if known, and
 - who they can contact for support or guidance after the interview.
- 6.7 Interviews are conducted in fully soundproofed spaces.
- **6.8** Children are supported to feel fully comfortable in the interview space, are encouraged to express any worries and can have their worries addressed.

- **6.9** Interviews are child centred and trauma informed and take into account the child's situation and characteristics, including, but not limited to:
 - age and stage of development
 - cultural background
 - strengths and resources
 - complex needs
 - experience of trauma and adversity
 - speech, language and communication needs
 - the child's context and its impact on their participation in the interview, and
 - experience of relationships.
- **6.10** The SCIM is used in the Bairns' Hoose to interview children who may be victims or witnesses.
- **6.11** The ACRA investigative interview protocol is used in the Bairns' Hoose to interview children who are under the age of criminal responsibility whose behaviour may have caused significant physical or sexual harm.
- **6.12** Children being interviewed under the ACRA are provided with information including:
 - the behaviour to which the interview relates
 - the purpose of the interview
 - their rights in relation to the interview (including their right not to answer any questions), and
 - what might happen as a result of the interview.
- **6.13** Children being interviewed under the ACRA will receive advice, support and assistance from a Child Interview Rights Practitioner (ChIRP) at any point before, during or after the interview.
- **6.14** Children being interviewed under the ACRA are informed they have a right to a supporter at any time.
- 6.15 Depending on interview type, all children have access to:
 - non-suggestive support from the interviewers throughout the interview
 - a trusted person in the room or a nearby room, and
 - a supporter and a ChIRP in the room or in a nearby room.

- **6.16** Families have:
 - a comfortable, soundproofed and private waiting space
 - access to refreshments, play and entertainment equipment
 - access to support before, during and after the interview, and
 - information about who to talk to if they have any questions.
- **6.17** Interviewers receive advanced, joint, comprehensive training to deliver a nationally-approved evidence-based interview.
- **6.18** Interviewers receive support and supervision alongside opportunities for manager, self and peer evaluation.
- **6.19** The interview may be used by police, social work, Children's Reporters and prosecutors for the purpose of investigation, risk assessment, safety planning, children's hearing processes and prosecution of a crime.
- **6.20** Information from the interview is shared with other professionals where necessary to support the care and recovery of children. Children are fully informed about what is shared and what they can and cannot consent to sharing.
- **6.21** Police Scotland store and share the interview according to processes and protocols that meet legal requirements.
- **6.22** If an interview is continued or further interviews are required, children are interviewed by the same interviewers wherever possible, unless the child requests a change.

What	does the standard mean for all children?	
٠	You will be interviewed by police and social workers in a special room that is	
	designed just for this purpose.	
٠	You can meet your interviewers before the interview takes place.	
٠	You will be able to see the room and be shown the equipment beforehand.	
٠	Your interview will be planned with input from people who know you.	
 People who have the right skills to support you and help you communicate will be involved if they need to be. 		
•	The people interviewing you will be trained to a very high standard. They will let you say what happened, if you want to, and not interrupt.	
What	does the standard mean for children who are victims or witnesses?	
٠	Your interview may be recorded on camera so that the recording of the interview may be used in court. Where possible, you will be asked if you to consent to this video recording.	
٠	You can choose a trusted person or a member of your family to be with you or in a nearby room.	
٠	Your family can wait in a comfortable room where they can't hear what you're saying. They have someone to talk to if they are worried about you.	
What	does the standard mean for children who are under the ACR?	
٠	You will have the support of a children's rights interview practitioner (ChIRP) to uphold your rights including your legal rights.	
•	You have the right to have a supporter with you or in a nearby room.	
٠	Your interview will be recorded and the recording of the interview might be used in future legal proceedings.	
•	Your family can wait in a comfortable room where they can't hear what you're saying. They have someone to talk to if they are worried about you.	

What does the standard mean for staff?

Staff who undertake interviews:

- have advanced level evidence-based training
- provide information and support to children and families to ensure they are kept informed about the process
- inform children and families about who is involved and who they will share information with
- can access supervision and peer support as required
- are encouraged and supported to continue to learn and develop their practice through evaluations including manager, self and peer evaluation
- take a child centred approach, are trauma informed and respond to the particular needs of the child
- can access people that know the child well when planning the interview
- can access specialist advice from professionals such as speech and language or play therapists while planning the interview
- can access interpreters and any other specialist professionals to support the child's communication as required.

Staff in the Bairns' Hoose can, with consent from the child or family:

- securely access interviews where appropriate to their role and responsibilities, and
- view interview transcripts or recordings to support the child's recovery and reduce the need for children to repeat their account of their experiences.

What does the standard mean for the Bairns' Hoose Partnership?

The Partnership:

- ensures that staff conducting interviewers can access training, supervision and opportunities for practice evaluation appropriate to their roles and responsibilities
- ensures that practice is informed by current evidence and guidance
- has processes and protocols in place for information sharing and storage according to legislation and data sharing agreements
- provides a dedicated and suitable interview room, designed in partnership with children, which is well equipped and regularly maintained
- ensures that staff are able to engage with people that who know the child well
- ensures that staff can access interpreters and other relevant specialist staff
- ensures that audio-visual recording equipment is of high quality and maintained to a high standard to ensure recorded interviews are suitable for use within the justice process
- ensures children, young people and their families have access to support before, during and after the interview, and
- provides a dedicated, comfortable and private space for children, young people and their families, with access to refreshments and appropriate play and entertainment equipment.

Examples of what meeting this standard might look like

- Evaluation of interview practice including peer evaluation, supervisor assessment and independent assessment.
- Frequency of use of SCIM and ACRA interviews.
- Use of pre-recorded interviews as whole or part of evidence-in-chief, if gathered at service level.
- Information about the interview process is available for children in a range of formats and languages.
- Quality assurance or evaluation of interpreter and other communication and support services.
- Input from specialist agencies in addition to police and social work during interview planning.
- Interview spaces meeting the requirements for high quality visual recording.
- Staff evaluation, training needs and wellbeing assessments.

Standard 7: Support through the court and legal process

Standard statement

If I need to give evidence in a court or legal process, someone explains what is happening and I am supported through this. There is an option to live link to court from the Bairns' Hoose.

Children and young people told us:

- being involved in a court case can be difficult and upsetting so someone should be there for me to help me through it, and
- it should be easy to find out information about what happens and who can help me.

Why this standard is included

Children's right to recovery from abuse is enshrined in <u>UNCRC Article 39</u>.²² Children report that involvement with legal processes through cross-examination, giving witness statements or attending a court building causes anxiety and trauma.⁵³ Lengthy waits for trials, lack of communication on the progress of their case and contact with alleged perpetrators during the court process have caused further trauma.¹⁴

Partnerships should make use of any special measures granted by the court such as the use of recorded investigative interviews which may form the whole or part of a child's evidence-in-chief. Subject to an application to the court, the evidence-in-chief of a child witness should be captured and presented at trial in pre-recorded form. Any subsequent cross-examination and re-examination of that witness should also, on application granted by the court, be recorded in advance of trial.⁵⁴

The Bairns' Hoose should have facilities to support a child to participate remotely in legal proceedings. Information and support given should take into account whether the child may have to give evidence in criminal proceedings, children's hearing court proceedings or both.

What is needed to meet the standard

- 7.1 Each Bairns' Hoose has facilities and processes in place to enable remote attendance at court proceedings or children's hearing court proceedings. The Bairns' Hoose is the preferred location for this purpose.
- **7.2** The support provided in the Bairns' Hoose throughout any investigation and legal processes is consistent with and observes:
 - the Lord Advocate's independent role as head of the system of investigation and prosecution of crime in Scotland
 - the independent roles and responsibilities of the police, Children's Reporters, prosecutors and the judiciary, and
 - the legal framework including the restrictions on sharing information.
- **7.3** Children and families have access to skilled and tailored support, advice and guidance before, during and after a court case. Specialist therapeutic support is available if required.
- 7.4 A dedicated Bairns' Hoose coordinator:
 - manages the Bairns' Hoose support of children whilst they progress through legal proceedings
 - ensures children and their families are informed about any court or legal process, including that no further information is available where this is available and appropriate to share
 - shares relevant information with children and families when it is available, and
 - shares information about the legal case with relevant agencies, when appropriate or possible to do so, to support integrated planning.

7.5 Children and families:

- are informed about their rights and supported to uphold them
- are regularly updated on progress of the investigation, court or legal process, where possible and appropriate, including that no further information is available
- are given opportunities to ask questions, and
- receive information in a way and format that is right for them.
- **7.6** Children and their families can access independent advocacy throughout the court and other legal processes, should they wish to do so.

 you can understand. Someone will keep you and your family up to date on what's happening. You can take part in the court process remotely from the Bairns' Hoose if this is allowed by the court. You can talk to someone to help you with your feelings while you are waiting for a trial or hearing. What does the standard mean for staff? Staff: understand children's rights in relation to the justice process and are supported to uphold them understand the protective measures available for a child as a deemed vulnerable witness within any court process, and are informed about a child or family's progression through any legal processes to support effective planning. What does the standard mean for the Bairns' Hoose Partnership? The Partnership: works closely with legal and court services to share available information, as appropriate ensures that operational procedures minimise the number of different people a child needs to speak to within the child protection and justice processes 	What	does the standard mean for children?
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child needs to speak to within the child protection and justice processes	٠	
• shares relevant information with children and families when it is available, and	٠	
	•	shares relevant information with children and families when it is available, and

• ensures the Bairns' Hoose is adequately equipped and has processes in place to facilitate children participating remotely in legal proceedings.

Examples of what meeting this standard might look like

- Facilities and processes to enable remote participation in legal proceedings.
- Commissioning or partnership agreements for the provision of advocacy support.
- Information flow between legal agencies and Partnerships.
- Shared systems and record-keeping.
- Early commencement of therapeutic support in cases where there may be legal proceedings.
- Codesigned and accessible information on the court or legal process for children and families.
- Positive evaluation from children and families.

Standard 8: Health and wellbeing

Standard statement

My physical, emotional and mental health is looked after. Someone helps to plan appointments and I'm supported to attend.

Children and young people told us:

- the place I go for a medical examination should feel bright and comforting
- health staff should be well trained, calm and welcoming
- I should have the option to meet the medical staff before any examination so that I am more familiar with them
- I should be able to choose the sex of the person examining me
- if I need support for my health or wellbeing at any point of my time at the Bairns' Hoose I should get it, and
- I should get advice and support for my mental health.

Why this standard is included

Children's right to the highest attainable standard of health is outlined in <u>UNCRC Article 24</u>.²² Children who have experienced abuse are more likely to experience poor health and wellbeing into adulthood.^{55, 56} Children should have access to a comprehensive child protection medical examination to identify and meet needs relating to physical injury, emergency contraception, sexual health and blood borne viruses, neglect and any wider holistic health needs. Staff should coordinate multiple appointments on behalf of children and families.

Avoiding delay in assessing and responding to any physical, mental and emotional health needs is vitally important in supporting a child's recovery. Intervention within four to six weeks of a trauma or disclosure of abuse has been shown to decrease long-term post-traumatic disorders.⁵⁷ A comprehensive health and wellbeing assessment should be undertaken by an appropriately trained individual within the Bairns' Hoose to get an understanding of potential concerns both for the child and their family members.^{58, 59} The decision to carry out a medical examination and the decision about the type of medical examination should be made by a paediatrician as part of the IRD process.

All healthcare assessments should be part of ongoing child protection proceedings, and be conducted in line with national guidance.¹⁵ Forensic medical examinations undertaken in the Bairns' Hoose should meet national standards for person-centred and trauma-informed care, putting the health needs of the child first.

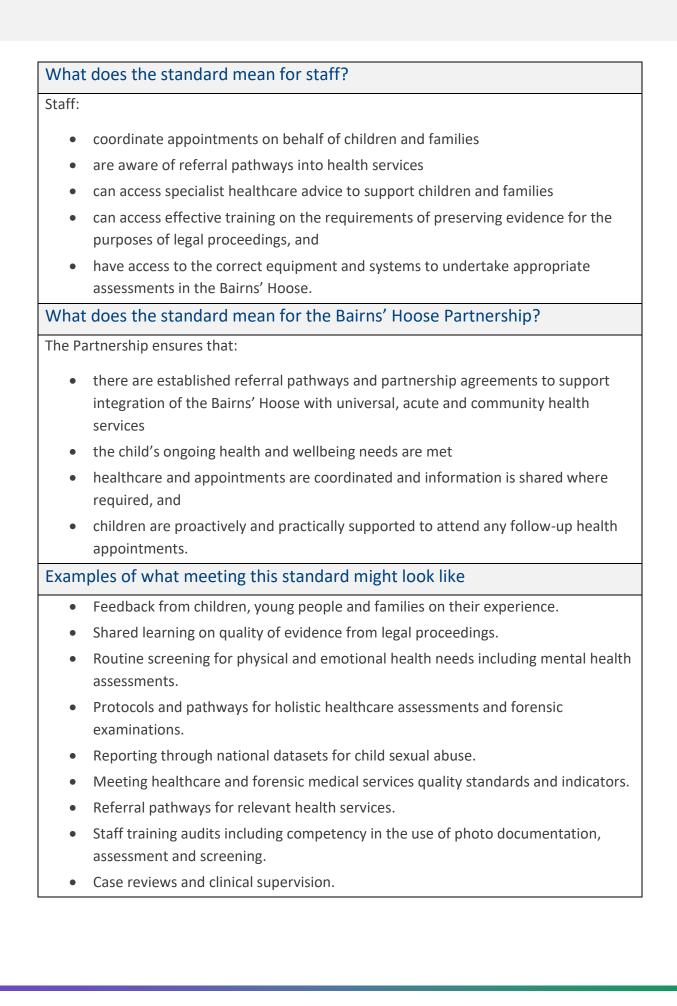
What is needed to meet the standard

- **8.1** Paediatricians review information from all relevant agencies at the IRD and decide:
 - the type of health and wellbeing assessment needed, and
 - where the assessment should take place.
- **8.2** Examinations undertaken within the child protection process take place in the Bairns' Hoose where it is in the best interests of the child.
- **8.3** Children and their families have their health and wellbeing needs assessed in the Bairns' Hoose and are referred directly to health services if required.
- **8.4** There are effective and well-communicated pathways into healthcare services which cannot routinely be provided in the Bairns' Hoose.
- **8.5** An appropriately-trained healthcare professional within the Bairns' Hoose team provides ongoing healthcare coordination and support for children and families where required.
- **8.6** The Bairns' Hoose Partnership has local arrangements in place to ensure direct and timely referral to all health services required by the child or their family, including:
 - acute medical services
 - acute forensic medical services
 - primary care and community services
 - dentistry
 - mental health services
 - sexual health services, and
 - drug and alcohol services.
- **8.7** The Bairns' Hoose has facilities to support effective gathering of evidence from child protection medical examinations to the required health and legal standard including:
 - forensic photography to document injuries or other relevant physical evidence of abuse or neglect
 - colposcopy
 - developmental assessment, and
 - environmental monitoring for DNA contamination.

- **8.8** Medical examination and treatment is carried out by a paediatrician, sexual offences examiner or advanced nurse with specialised training on child abuse and neglect, depending on the needs of the child.
- **8.9** Children receive information about their health and wellbeing in a language and format that is right for them, which covers:
 - any examination or assessment they may have
 - the purpose of the examination or assessment, and
 - who will be undertaking it.
- **8.10** Forensic medical examinations meet the requirements for decontamination, corroboration and maintaining the chain of evidence.
- 8.11 An appropriately trained healthcare professional plans for any additional support or communication needs of children including speech and language, disability, long-term health condition or psychological presentation of trauma.
- **8.12** Children are fully informed about their health and wellbeing, are supported to give their views and their views are taken into account.

What does the standard mean for children?

- Someone will check your health and wellbeing at the Bairns' Hoose, if this is what you need.
- Staff will plan any appointments you need and organise them for you.
- The staff who look after your health will take the time to consider your feelings and experiences.
- If you need support for your mental health, you will be able get it when you need it in a way that's right for you.
- Checks-ups and tests will go at your pace and you can take a break.



Standard 9: Therapeutic recovery services

Standard statement

If me or my family need help we can speak with someone who understands what we are going through. I get the help and support I need to recover.

Children and young people told us:

- my family should get the right support so they can help me
- I should be able to get support at the right time for me, even if it's after I have been to the Bairns' Hoose
- I should be given time to think about what support and help I want and need
- I should be able to get support even when someone is off ill or on annual leave, and
- there should be someone for me throughout, who I trust, who doesn't judge me, and is there for me. I should be able to choose them and change them without it being a problem.

Why this standard is included

<u>UNCRC Article 39</u> requires the promotion of physical and psychological recovery and social integration of children who have been victims of abuse. Recovery should take place in an environment which supports the health, self-respect and dignity of the child.²² The provision of holistic support to help the child's recovery from abuse and trauma should be understood by the whole team as a core aim of the Bairns' Hoose. The Bairns' Hoose should provide a safe therapeutic environment to continue the ongoing assessment of the child's needs. It should provide access to evidence-based support services including immediate and follow-up support on the day.

Children and their families are assessed for their needs, including mental health needs, using validated assessment tools.⁵⁹⁻⁶¹ Appropriate and tailored support should be offered within four weeks of disclosure and this offer should remain open. The response of the child's family is a critical mediating factor in determining a child's psychological recovery especially for very young children.⁶²

Good relationships and trust between children, families and support workers are critical.²⁶ Support should take into account the child's wider context, community assets and support needs of the family, including support already in place, to avoid duplication of services and repeated disclosures.^{12, 63, 64} Support should be provided in the context of GIRFEC and take account of local authority, health board, police and third sector responsibilities for children who may be in need of care and protection. Children with disabilities are at significantly higher risk of abuse³³ and young children may experience abuse and be unable to say what is happening. For children under the ACR, there is a strong link between harmful behaviour and other disruption or trauma occurring in a child's life.⁶⁴ Therapeutic support if undertaken prior to or parallel to legal proceedings, should be non-suggestive and providers should follow the Scottish Government codes of practice. Accurate recording of therapeutic support is essential prior to and during legal proceedings.⁶⁵

What is needed to meet the standard

- **9.1** A psychosocial assessment for whole family support needs is undertaken for each child at the Bairns' Hoose by an appropriately trained professional.
- **9.2** Unscheduled mental health support is provided in the Bairns' Hoose where possible.
- **9.3** Immediate mental health and wellbeing support is provided at the Bairns' Hoose for the child and their family.
- **9.4** The Bairns' Hoose Partnership:
 - coordinates tailored therapeutic recovery support for children and their family, and
 - offers specialist support for recovery in the Bairns' Hoose.
- **9.5** The Bairns' Hoose Partnership works collaboratively with local therapeutic support services and other agencies supporting the child and their family to ensure that they get the right support, in the right place at the right time.
- **9.6** Services that are already known to and trusted by children and families are recognised as part of the child's team in the Bairns' Hoose.
- **9.7** Where the need for therapeutic support is identified, this begins as soon as possible, paying due regard to any ongoing investigation or court case and avoiding undue delay.¹⁹
- **9.8** The Bairns' Hoose Partnership can demonstrate that therapeutic support, if undertaken prior to or parallel to legal proceedings, is non-suggestive.
- **9.9** The Bairns' Hoose Partnership has established referral pathways to support children to access longer-term therapeutic support where there is an assessed need.
- **9.10** Staff providing therapeutic recovery support receive appropriate training in the assessment and treatment of children who have experienced complex trauma.

- **9.11** Children and their families are offered tailored support and therapy which is continuously reviewed and adapted to their:
 - choices and wishes including choice of location
 - age and stage of development
 - sex and gender identity
 - development
 - cognitive ability
 - need for sensory or physical support
 - communication needs
 - family and cultural background, and
 - emotional state and impact of their experiences.
- **9.12** Children and families receive follow-up support and can re-access therapeutic recovery services if needed.
- **9.13** Families can access specialist therapeutic support where there are conflicting and different needs, for example where there are concerns that a child has harmed another in the family.

What does the standard mean for children?

- Someone will talk with you about what support you need.
- You will have someone to help you with how you're feeling.
- You will get the help and support you need when the time feels right for you.
- You will be able to go at your own pace and work with people who you trust.
- There will be a person who is there for you and you will know who they are.
- Your family will be supported.
- Your family will be helped to help you.

What o	does the standard mean for staff?
Staff:	
• 6	assess children's needs and the needs of their family
• 1	plan and coordinate therapeutic support
	follow relevant pathways to support children and families to access high quality therapeutic support which reflects their needs, wishes and choices, and
	work seamlessly together in the best interests of the child to deliver consistent and coordinated care.
What o	does the standard mean for the Bairns' Hoose Partnership?
The Par	tnership ensures that:
	children and families can access therapeutic recovery support if they need it there is continuity for children and families
	children's needs are assessed and met
• f	families are helped to best support the child
• r	resources are used effectively, and
• 9	services are coordinated, consistent and seamless.
Examp	les of what meeting this standard might look like
	Established referral pathways for different therapeutic support services to meet different needs.
• (Commissioning data to demonstrate provision of specialist support services.
• 9	Service provision within the Bairns' Hoose including therapeutic support.
• (Gap analysis of local support services and improvement plans to address gaps.
	Data on referral and take-up rates of therapeutic support and evidence of this data being used to inform future referrals.
• [Evidence of impact.

Standard 10: Multidisciplinary staff training and support

Standard statement

The people who help me at the Bairns' Hoose work as a team. They get the help they need to do their jobs well.

Children and young people told us:

- the people who help me should understand trauma and how it might affect me
- I should feel well supported by all members of staff, no matter which part of the Bairns' Hoose I am in
- staff should enjoy working with children, and
- staff should be able to talk about their feelings and get the right support for themselves so they can be the best support for children and young people.

Why this standard is included

Building strong, collaborative teams and mutual support can reduce staff distress including burnout and mental ill health.^{66,67} Joint training and supervision for relevant staff including regular team meetings and joint professional development opportunities supports integrated teams and shared goals.⁶⁸

All staff working with children and young people who are victims or witnesses of abuse or under the ACR whose behaviour may have caused serious physical or sexual harm should be trained to the appropriate trauma practice level.¹⁸ Staff undertaking JIIS within the Bairns' Hoose should be trained through the SCIM model.

All staff across the team should have routine access to appropriate reflective practice supervision or clinical supervision, depending on their role and remit, as defined within the Scottish Psychological Trauma Training Plan.²⁰

What is needed to meet the standard

- **10.1** Staff can access multiagency training in line with the Scottish Psychological Trauma Training Plan.
- **10.2** The Bairns' Hoose Partnership has a jointly-agreed workforce plan which includes:
 - shared aims, vision and culture which all staff are expected to support
 - team structure, including clearly-defined roles and responsibilities
 - mechanisms for ongoing learning and evaluation to improve joint practice
 - resourcing
 - safe staffing levels
 - risk assessment and escalation policies
 - whistle blowing, and
 - mechanisms for interagency conflict resolution.
- **10.3** Staff are trained to ensure children's rights are upheld in the Bairns' Hoose.
- **10.4** Staff are trained to the required trauma practice level (skilled, enhanced or specialist practice) and are provided with ongoing support to implement training.
- **10.5** Staff work to a shared competency framework and have access to continuing professional development.
- **10.6** The Bairns' Hoose Partnership provides joint training and supervision to all relevant staff.
- **10.7** Staff who are providing direct support to children and families are offered training in court procedure and how to provide court support.
- **10.8** Staff have routine access to appropriate reflective practice supervision or clinical supervision, depending on their role and remit.
- **10.9** Staff have a wellbeing plan which is regularly reviewed with a supervisor.
- **10.10** Staff have individual training plans which are fully implemented and reviewed regularly.

- **10.11** Staff have access to individual and group counselling, if required, to:
 - mitigate against vicarious trauma, and
 - address professional and personal emotional strain, challenges and ethical dilemmas in working with children and families who attend Bairns' Hoose.
- **10.12** Staff who mentor or supervise others receive training on:
 - effective and supportive people management
 - embedding reflective practice, and
 - how to develop their own skills.

What does the standard mean for children?

- Staff will take time to understand your experiences.
- The people working at Bairns' Hoose will support you in the best way possible.
- Staff will understand what your rights are and do everything they can to uphold them.
- You will be treated with kindness and respect.

What does the standard mean for staff?

Staff:

- work in an integrated team with shared values and behaviours
- attend relevant joint training and undertake continued professional development
- achieve required competencies and qualifications relevant to their roles and responsibilities
- receive support and guidance for their own mental health and wellbeing
- are supported by their managers and colleagues
- can access guidance, supervision, counselling and peer review, and
- can be confident that all the professionals they work with are appropriately trained and supported.

What does the standard mean for the Bairns' Hoose Partnership?

The Partnership:

- provides the environment for a shared professional culture and effective integration across agencies
- is fully committed to offering joint staff guidance, supervision, counselling and peer review where appropriate to role and responsibility
- ensures that joint training and continuing professional development opportunities are available and accessible to all relevant staff, and
- ensures that opportunities for multiagency and multidisciplinary training are developed.

Examples of what meeting this standard might look like

- Information about supervision, support, peer review, guidance and counselling.
- Appraisal data, career pathways and established programmes of mentoring.
- Training and development plans including professional competencies frameworks.
- Delivery of interagency and multidisciplinary training.
- Staff training audits.
- Shadowing opportunities including with specialist trauma support organisations.

Standard 11: Prevention, sharing knowledge and learning from good practice

Standard statement

People at the Bairns' Hoose listen to what I have to say about my experience. What I tell them helps to make the Bairns' Hoose better for other children.

Children and young people told us:

- the Bairns' Hoose should keep getting better and keep learning from others
- my thoughts and ideas should be listened to and understood, and
- I should be able to see where things have changed.

Why this standard is included

Effective service design places people at the centre.⁶⁹ Partnerships should use evidencebased quality improvement and service design methods and commit to a joint system of continuous learning and evaluation.⁷⁰⁻⁷² Improvement measurements, internal review and evaluation should be informed by children's experiences.^{5, 12} Processes to support children to give their feedback should be trauma-informed and be based on an evidence-based participation model.^{73, 74} Data to support improvement should be aligned with existing datasets including reporting through Child Protection Committees.

Prevention and awareness-raising of child abuse and neglect is a key component of the Barnahus model. The Bairns' Hoose should provide accessible information to professionals, parents and children.^{75, 76}

What is needed to meet the standard

- **11.1** The Bairns' Hoose Partnership has an integrated core data set which is aligned to and builds on existing data collation and analysis arrangements.
- **11.2** The Bairns' Hoose Partnership has a system to monitor progress towards the implementation of relevant standards and guidance, including the Bairns' Hoose Standards.

- **11.3** The Bairns' Hoose Partnership is committed to continuous improvement and regularly undertakes self-evaluation which:
 - identifies and shares best practice
 - is underpinned by a range of multiagency quantitative and qualitative evidence
 - supports evidence-led service design
 - involves children and families, and
 - places emphasis on learning from children's experience.
- **11.4** There are mechanisms in place to ensure that learning from the Bairns' Hoose contributes to the development of national policy and practice.
- **11.5** The Bairns' Hoose Partnership takes a lead role in raising awareness of children's experience of abuse or neglect and works collaboratively to undertake prevention activity.
- **11.6** The Bairns' Hoose has an ongoing programme of work to raise awareness of the service among children, families and professionals.
- **11.7** The Bairns' Hoose coordinator proactively works to build local knowledge among professionals and practitioners working with children.
- **11.8** The Bairns' Hoose Partnership:
 - protects staff time for learning and development
 - can demonstrate engagement with national and international professional networks, and
 - shares learning from elsewhere.

-	the below way get at a Bairps' Hoose will be the best it can be
•	The help you get at a Bairns' Hoose will be the best it can be.
•	You will have the chance to provide feedback and see where changes have been made.
Nhat	does the standard mean for staff?
Staff:	
•	understand how their work supports improvement and spread in all services for children
•	have the skills to effectively engage with children and families to provide feedback
٠	support improvement programmes in areas that matter to children and families
٠	are supported to undertake research and/or evaluation, and
•	participate in activities and professional networks that promote good practice and shared learning.
Nhat	does the standard mean for the Bairns' Hoose Partnership?
he Pa	artnership:
•	undertakes continuous improvement work
•	shares learning and good practice
•	measures performance and improvement using data, including data that matters to children and families
•	supports staff to participate in national and international networks, and
٠	supports capacity and sustainability within the Bairns' Hoose and with partner agencies and networks.
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•	ples of what meeting this standard might look like Identification and dissemination of good practice. Learning systems and collaborative improvement work. Effective and meaningful engagement with children and families. Identification and evaluation of quality and performance data including data on capacity, needs, delays and outcomes.
•	 ples of what meeting this standard might look like Identification and dissemination of good practice. Learning systems and collaborative improvement work. Effective and meaningful engagement with children and families. Identification and evaluation of quality and performance data including data on capacity, needs, delays and outcomes. Engagement with and contribution to the European Barnahus network. Tailored information for professional groups on referral mechanisms, eligibility,

Appendix 1: Embedding children's rights

Children's right to participation in all judicial and administrative proceedings about them is enshrined in <u>UNCRC Article 12</u>. Bairns' Hoose upholds this right through the relationships that are developed, processes and design of an effective Bairns' Hoose.²⁴ Bairns' Hoose ensures that a child is supported through the justice process as a victim or witness. Bairns' Hoose also plays an important role in enhancing awareness and knowledge of violence and abuse against children.²¹

<u>UNCRC Article 39</u> places an obligation on states to take all appropriate measures to promote physical and psychological recovery from abuse and exploitation.²² It states that all activity should take place 'in an environment which fosters the health, self-respect and dignity of the child.'²³ Bairns' Hoose has a critical role in upholding this right.⁶⁸

The European Barnahus network (known as the PROMISE network) envisions a Europe where all children are protected and their rights under the UNCRC are upheld.⁷⁷ Central to the Bairns' Hoose model are the following key articles:

Article 1 as it is intended to be incorporated in Scotland defines the age of the child as everyone being below the age of 18.

Article 2 establishes the rights in the UNCRC are to be given to all children without discrimination.

Article 3 establishes that the best interests of the child should be a primary consideration in all actions concerning children.

Article 12 establishes that children have the right to express their views on all matters affecting them, and for those views to be given due weight, in accordance with the age and maturity of the child. Part 2 of the article states that children have the right to be heard in administrative or judicial proceedings affecting them.

Article 13 includes to the right to seek and receive information of all kinds.

Article 18 relates to the involvement of both parents (or people with parental responsibility) in the upbringing of the child and the state's responsibility to provide assistance and support.

Article 19 outlines that partnerships should take all appropriate legislative, administrative, social and educational measures to protect children from violence, abuse, neglect or exploitation while in the care of parents or guardians.

Article 24 states that children have a right to the highest attainable standard of health.

Article 34 establishes that governments must protect children from all forms of sexual abuse and exploitation.

Article 39 states that all appropriate measures should be taken to promote physical and psychological recovery from abuse.

Children's involvement in the development of the Standards

<u>UNCRC Article 12</u> outlines children and young people's right to express their views in all matters that affect them. The Bairns' Hoose Standards Development Group (see Appendix 3) is committed to upholding this right and ensuring that children with lived experience of the current system help shape the Bairns' Hoose Standards for Scotland.

In December 2021 children and young people across Scotland were asked: 'what would you like to see in the Standards?' This built on the work of the Glasgow Initiative for Facilitation and Therapy who, in partnership with the Moira Anderson Foundation, made a series of recommendations to the Standards Development Group.⁵

From February 2022, participation and rights workers from six organisations joined the Standards Development Group as Standards link workers. The link workers supported children to play an active role in the development of the Standards. Through creative sessions, play, videos, group work and one-on-one sessions, children input their ideas into the Standards and fed back on their experiences to the Standards Development Group at every meeting.

The revised children's standards are available on our website. Further information about how children's rights are upheld through these Standards can be found in Appendix 1

Appendix 2: Development of the Bairns' Hoose Standards

The Bairns' Hoose Standards have been informed by current evidence, best practice recommendations and developed by group consensus.

Evidence base

In early 2021, the Bairns' Hoose Standards project team commissioned work to review the international evidence and identify good practice. In summer 2021, the University of Edinburgh, in partnership with Children 1st, undertook a comprehensive review of the literature and evidence which was used to develop this document.

In addition, the project team defined seven key research questions relating to the scope of the Bairns' Hoose Standards project, as identified at a large stakeholder workshop. A systematic search of the literature was carried out using an explicit search strategy devised by an information scientist based in the HIS Evidence Directorate. Databases searched include ERIC, Cinahl, Embase, Medline, ASSIA and Public Health and PsychArticles. Additional searching was done though citation chaining, identified websites, grey literature and stakeholder knowledge. A further literature search for qualitative and quantitative studies that addressed children, young people and family experiences of services was undertaken, including experiences of inequalities. This evidence was used to inform the Equality Impact Assessment, engagement framework and the Children's Rights and Wellbeing Impact Assessment.

Standards development

The Scottish Government jointly commissioned the Care Inspectorate and Healthcare Improvement Scotland to develop standards for a Barnahus model in Scotland. In 2019, a Standards Development Group, co-chaired by Linda de Caestecker, Director of Public Health for NHS Greater Glasgow and Clyde, and Iona Colvin, Chief Social Work Advisor to the Scottish Government was formed.

The Standards Development Group reviewed the evidence and adapted the European Barnahus Quality Standards.

Throughout the drafting process, the group undertook a number of activities including:

- a multi-sector engagement workshop on 19 June 2019
- site visits to pilot Barnahus and specialist paediatric sexual assault referral services
- learning from international advisors and specialists
- Standards Development Group workshops and meetings, and
- input and feedback from the Victims Support Organisations Collaborative Forum Scotland.

In March 2020, Healthcare Improvement Scotland and the Care Inspectorate paused the development of the Standards in order to reduce undue strain across the system and prioritise resources to support the national response to COVID-19. The Standards project team took the time to review the progress of the work and identify specific themes which could inform the next phase of the Standards development process. Between autumn 2020 and spring 2021, the project team reviewed the first phase of the Bairns' Hoose Standards development and the current policy and practice landscape. This was followed by a national symposium on the adoption of the Barnahus model in Scotland and the publication of <u>The Foundations for Bairns' Hoose (Scottish Barnahus)</u> in September 2021.

In November 2021, the Standards Development Group was reconvened, co-chaired by Iona Colvin, Chief Social Work Adviser to the Scottish Government and Edward Doyle, Senior Medical Advisor in Paediatrics to the Scottish Government. The group considered the evidence and best practice for Bairns' Hoose including:

- feedback from a three-week scoping engagement exercise
- evidence and literature
- Standards Development Group and technical subgroup meetings
- feedback from children and young people across Scotland
- a 12 week consultation across Scotland, involving children and families, and
- finalisation meeting and further technical subgroup meetings to review the feedback from the consultation.

Membership of the Standards Development Group is set out in Appendix 3.

A Steering Group with membership representing key Scottish Government policy areas provided advice on the direction and content of the Standards. Membership of the Bairns' Hoose Standards Steering Group is set out in Appendix 4.

Quality assurance

All Standards Development Group members were responsible for advising on the professional aspects of the Standards. Clinical members of the Development Group advised on clinical aspects of the work. The co-chairs had lead responsibility for formal clinical assurance and sign off on the technical and professional validity and acceptability of any reports or recommendations from the group.

An Editorial and Review panel met to agree editorial changes and to provide formal sign-off of the document. Membership of the Editorial and Review Panel is outlined in Appendix 5.

The Editorial and Review Panel reviewed the Standards document as a final quality assurance check. This ensures that:

- the Standards are developed according to agreed International Society for Quality in Healthcare (ISQua) methodology for developing standards
- the Standards document addresses the areas to be covered within the agreed scope, and
- any risk of bias in the Standards development process as a whole is minimised.

All development group members made a declaration of interest at the beginning of the project. They also reviewed and agreed to the development group's terms of reference. More details are available by emailing <u>his.barnahusstandards@nhs.scot</u>.

The Standards were developed within the Operating Framework for Healthcare Improvement Scotland and the Scottish Government (December 2018), which highlights the principles of independence, openness, transparency, and accountability.

For more information about Healthcare Improvement Scotland's role, direction and priorities, please visit: <u>www.healthcareimprovementscotland.org/</u>

Appendix 3: Membership of the Bairns' Hoose Standards Development Group

Current Development Group Members		
Name	Position	Organisation
Iona Colvin (co-chair)	Chief Social Work Adviser	Scottish Government
Edward Doyle (co-chair)	Senior Medical Adviser Paediatrics	Scottish Government
Susan Anne Baird	Consultant Clinical Psychologist	NHS Greater Glasgow and Clyde Specialist Children's Services
Gordon Bell	Practice Reporter	Scottish Children's Reporter Administration
Eileen Bray	Clinical Services Coordinator, CAMHS	NHS Ayrshire & Arran
Kathleen Carolann	Director of Nursing and Acute Services	NHS Shetland
Laura Caven	Chief Officer – Children and Young People	Convention Of Scottish Local Authorities
Bernard Colvin	Consultant Paediatrician	NHS Tayside
Marianne Forrester	Unit Clinical Director	NHS Grampian
Sharon Glasgow	Protecting Children Policy and Practice Advisor	Scottish Government
Mhairi Grant	Independent Chair	Highland Child Protection Committee
Louise Hill	Head of Policy, Evidence and Impact	Children 1st
Sarah Hill	Lead Paediatrician for Child Protection	NHS Greater Glasgow and Clyde

Current Development Group Members		
Name	Position	Organisation
Angela Latta	Child Protection Adviser	Scottish Government
Jennifer Lavoie	Chancellor's Fellow - Global Challenges	University of Edinburgh
Mhairi MacDonald	Forensic Nurse Coordinator for Highland SARCS	NHS Highland
Martin MacLean	Detective Superintendent	Police Scotland
Jennifer McKee	Procurator Fiscal Depute	Crown Office and Procurator Fiscal Service
Moira McKinnon	Chair, East Ayrshire and Argyll & Bute Child Protection Committee	Child Protection Committees Scotland
Danielle McLaughlin	Head of Implementation	Scottish Courts and Tribunals Service
Mary Mitchell	Lecturer in Social Work	University of Edinburgh
Lorrette Nicol	Service Manager	Midlothian Council
Anna O'Reilly	Assistant Director Bairns' Hoose	Children 1st
Kirsty Pate	Professional Social Work Adviser	Scottish Government
June Peebles	Detective Chief Inspector	Police Scotland
Joanne Smith	Policy and Public Affairs Manager (Scotland)	NSPCC
Charlotte Strong	Consultant Clinical Psychologist	NHS Greater Glasgow and Clyde
Jillian Taylor	Chief Nurse for Universal Children's Services	NHS Forth Valley
Leanne Tee	Clinical Lead - North of Scotland Forensic Medical Services and Custody Health Care Alliance	NHS Highland

Previous Development Group Members		
Name	Position	Organisation
Linda De Caestecker (co-chair)	Director of Public Health	NHS Greater Glasgow and Clyde
Tam Baillie	Vice Chair	Child Protection Committees Scotland
Mark Ballard	Policy Manager	Children 1st
Tim Barraclough	Executive Director, Tribunals and Office of the Public Guardian	Scottish Courts and Tribunals Service
Isla Barton	Managed Clinical Network Manager	North of Scotland Planning Group
Kim Coutts	Art Psychotherapist, Director and Co-Founder	Glasgow Initiative of Facilitation and Therapy
Laura-Ann Currie	Senior Education Officer Inclusion	Education Scotland
Daljeet Dagon	Policy Officer	Barnardo's Scotland
Sandra Ferguson	Lead for National Trauma Training Programme	NHS Education for Scotland
George Fernie	Senior Medical Reviewer	Healthcare Improvement Scotland
Mary Glasgow	Chief Executive	Children 1st
Chris Gray	Doctoral Researcher	Centre for Child Wellbeing and Protection, University of Stirling
Jillian Ingram	JII National Implementation Coordinator	Convention of Scottish Local Authorities (COSLA)
Laura James	National Cedar Coordinator	Improvement Service
George Laird	Manager	West of Scotland Child Protection Managed Clinical Network
Jamie Lipton	Principal Procurator Fiscal Depute	Crown Office and Procurator Fiscal Service

Previous Development Group Members		
Name	Position	Organisation
Yolande Love	Senior Procurator Fiscal Depute	Crown Office and Procurator Fiscal Service
Beth MacMaster	Children and Gender Based Violence Lead	Scottish Government
Tracey McFall	Chief Executive	Partners in Advocacy
Kate McKay	Lead Peadiatrician for Child Protection	NHS Greater Glasgow and Clyde
Neil McKenzie	Professional Police Advisor	Scottish Government
Helen Minnis	Professor of Child and Adolescent Psychiatry (Mental Health & Wellbeing)	ACEs Centre, University of Glasgow
Cheryl Mitchell	Service Manager Public Protection – JII Coordinator	East Renfrewshire Health and Social Care Partnership
Aileen Nicol	Head of Improving Protection and Permanence	CELCIS
Anne Neilson	Director of Public Protection	NHS Lothian
Kate Rocks	Chief Officer	Inverclyde Health and Social Care Partnership
Farah Rozali	ST5 CAHMS Learning Disability	NHS Fife
Sarah Tait	Manager	East Region Child Protection Managed Clinical Network
Wendy Wilson	Procurator Fiscal Depute	Crown Office and Procurator Fiscal Service

Name	Position	Organisation
Meg Binns	Barnahus Participation Lead	Children 1st
Paul Brockhurst	Safeguarding Lead	Kibble
Gary Cushway	Project Worker	Includem
Rachel McKechnie	Participation Officer	NHS Ayrshire & Arran
Paula Smith	Manager, Family Hub75 West	Dumfries and Galloway Council
Julia Swann	Participation Worker	Children and Young People's Centre for Justice
Meg Thomas	Head of Research, Policy and Participation	Includem

Children and young people's link workers

Appendix 4: Membership of the Bairns' Hoose Standards Steering Group

Current Steering Group Members		
Name	Position	Organisation
Rachel Hewitt (co-chair)	Programme Manager	Healthcare Improvement Scotland
Henry Mathias (co-chair)	Head of Professional Practice and Standards	Care Inspectorate
Iona Colvin	Chief Social Work Adviser	Scottish Government
Edward Doyle	Senior Medical Adviser Paediatrics	Scottish Government
Anna Johnston	Professional Police Advisor	Scottish Government
Rod Finan	Social Work Adviser, Office of the Chief Social Work Adviser	Scottish Government
Chantelle Lalli	Justice Lead, Bairns' Hoose	Scottish Government
Angela Latta	Professional Social Work Adviser	Scottish Government
Belinda McEwan	Strategic Inspector	Care Inspectorate
Jack Murray-Dickson	Senior Policy Adviser	Scottish Government
Arvind Salwan	Strategic Communications Adviser	Care Inspectorate
Lesley Swanson	Head of Bairns' Hoose Unit	Scottish Government
Fiona Wardell	Team Lead, Standards and Indicators	Healthcare Improvement Scotland
Chris Wright	Strategic Inspector	Scottish Government

Previous Steering Group Members		
Name	Position	Organisation
Jeff Gibbons	Team Lead, Criminal Justice Reform	Scottish Government
Saira Kapasi	Head of Violence against Women and Girls & Barnahus Justice Unit	Scottish Government
Beth Macmaster	Violence against Women and Girls & Barnahus Justice Unit	Scottish Government
Neil McKenzie	Professional Police Adviser, Child Protection Unit	Scottish Government
Anthony Nevin	Senior Policy Officer	Scottish Government
Lynsay Ross	Policy Officer	Scottish Government

Appendix 5: Membership of the Bairns' Hoose Standards Editorial and Review Panel

Name	Position	Organisation
Iona Colvin	Chief Social Work Adviser	Scottish Government
Edward Doyle	Senior Medical Adviser Paediatrics	Scottish Government
Jackie Irvine	Chief Executive	Care Inspectorate
Henry Mathias	Head of Professional Practice and Standards	Care Inspectorate
Jennifer McKee	Procurator Fiscal Depute	Crown Office and Procurator Fiscal Service
Safia Qureshi	Director of Evidence	Healthcare Improvement Scotland
Lesley Swanson	Head of Bairns' Hoose Unit	Scottish Government
Meg Thomas	Head of Research, Policy and Participation	Includem
Fiona Wardell	Team Lead, Standards and Indicators	Healthcare Improvement Scotland

Appendix 6: Membership of the Bairns' Hoose Standards Project Team

Current Project Team Members			
Name	Position	Organisation	
Rachel Hewitt	Programme Manager	Healthcare Improvement Scotland	
Henry Mathias	Head of Professional Practice and Standards	Care Inspectorate	
Belinda McEwan	Strategic Inspector	Care Inspectorate	
Fiona Wardell	Team Lead, Standards and Indicators	Healthcare Improvement Scotland	
Gail Young	Project Officer	Healthcare Improvement Scotland	

Previous Project Team Members			
Name	Position	Organisation	
Carol Ann Mulgrew	Project Officer	Healthcare Improvement Scotland	
Paula O'Brien	Administrative Officer	Healthcare Improvement Scotland	
Christine Stuart	Administrative Officer	Healthcare Improvement Scotland	

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