Minutes of CPG meeting held by Zoom on 1st December 2021 to reconstitute the CPG for Prevention and Healing of Adverse Childhood Experiences

MSPs attending:

Rona Mackay – SNP Sue Webber – Conservative Karen Adams – SNP

Speakers

Melissa Rutherford, Solicitor, Rutherford Sheridan Solicitors Kevin Miller, St. Mary's Kenmure Jim Shields, St. Mary's Kenmure Ross Gibson, Children and Young People's Centre for Justice

Third Sector attendees:

George Hosking, WAVE Trust Anthoulla Koutsoudi, WAVE Trust Jay Haston, 70/30 Ambassador Alex Williamson, 70/30 Ambassador Sarah Nelson, Children's Health Scotland Rachel Love, NSPCC Scotland Anne Wilson, Ryan McShane Patricia Rodger Janine Rennie, Wellbeing Scotland

Apologies

Maggie Chapman MSP

Minutes of last meeting in September 2021 George proposed we accept the Minutes and Rona seconded them.

Matters arising

AGM concluded. Discussed topics about meetings and tonight we are doing a couple of those tonight -TI prisons and TI lawyers.

First speaker was Karen Adams who will be speaking about a prison in her constituency but will do so later

Rona welcomed Kevin Miller – of St. Mary's secure care facility in Bishopbriggs with colleague Jim Shields, service manager Third member of team Ross Gibson also here and he will begin the presentation.

Ross Gibson

Research I carried out in 2018- 2019 and St. Marys participated in it. Will share data about ACEs and lives of kids in secure care.

Current plan for Scotland is that by 2024 Scotland will avoid criminalisation of care experienced children. 16–17-year-olds will no longer be placed in Young Offenders Institutes for sentence or remand, but where detention is used as a last resort, children will be looked after in small safe, secure trauma-informed environments that uphold their rights. (page 91 The Promise)

He talked about The Promise and how it highlights that secure units are not appropriate places for children, and that all other options must have been fully explored first. The Promise makes it clear that the underlying principle is that secure care, when used, must be focused on the provision of therapeutic trauma-informed support (page 80)

Kevin and Jim have the job of supporting the children ensuring they are in the secure unit for a little as possible but sometime there is the challenge of how to deliver trauma-informed care in a very short period of time.

Amongst the children in secure units in Scotland, 80% of them were from a home where there is relative poverty, using the UNESCO definition of 'relative poverty.

I was a social worker and what I saw from my practice was that there were none from Bearsden, Milngavie and other affluent areas. Before I talk about ACEs I wanted to mention the huge level of bereavement. A study by Nina Paswani (Developing, Supporting and Understanding Youth Justice) in Polmont. When we spoke to young people under age 21, 67% of them had experienced 4 substantial bereavements (e.g. parent, brother, granny, best friend dying), and 77% suffered a traumatic bereavement such as suicide, murder accidental overdose or something of that nature.

Data – of all children in care 64% in 2018 and 74% in 2019 of all children ins secure care had 4 or more ACEs. He showed the different types of ACEs and levels of those. And said that the main point is that the levels of each and every ACEs are huge. Sometimes we don't have long enough to do what is needed to help children. Staff are required to solve 12 years' worth of trauma in 12 weeks. There is also the issue of violence. In the year before being admitted 55% of the children had committed assault, 8% attempted murder, 2% committed murder, and 8% rape. Rates are probably higher as these figures are for the children who actually been charged.

Jim Shields, Service Manager at St. Mary's Secure Unit.

Not all of the behaviours we see are borne of trauma. Within the secure estate we have the responsibility of caring for young people and to deal with the symptoms that

go far beyond trauma - the symptoms of criminality and offending behaviour, selfharm such as suicide

We create a safe environment at St. Mary's. Children need to feel safe before we can address the trauma. Any kind of securer accommodation is in itself traumatic. However, we lean more towards routine rather than regime. Certainty helps. We soften the edges of our care and it does become a safe place where children develop trust and relationships. There's an atmosphere more aligned with residential care.

We use a formulation approach developed by Dr. Louis (???) Johnston, a clinical psychologist. This approach allows us to Capture the ACEs and capture the trauma within the initial assessment. We try to do this within 10 days, and we try to get all the professionals involved including the social worker, and the school so we can cover the early ACEs.

So we are looking at the child's life and not just the instances of criminality or selfharm. The formulation is then reviewed by the clinical psychologist and recommendations are developed from there. We have managed to shorten the process so we can turn it around more quickly. It's a dynamic assessment- always changing. 3 levels.

Low intensity - key worker guided by a therapist or social worker- who take the key worker through the best approaches to use

Intervention practice by the therapist-

High intensity therapies for the really critical few who need more support, and this is when Dr Johnston will intervene.

He then spoke about the ABC Framework they use and stated that the one item missing from this is what it was that brought the child to the secure unit.

It's long established that recovery happens within positive relationships, and he quoted Bruce Perry.

What the secure unit at St. Mary's provides which is not generally available is the intensity of support. In the house unit we have 6 young people and there are 2 shifts. Over a 24 hour period there are 10 dedicated carers. That is a lot because secure care is at the end of the child protection continuum.

Kevin Miller

In my years of work as a social worker, I have come across lots of young people who have been subjects of ACEs. And I am conscious that every day that a child comes into secure care they are further experiencing trauma. Some young people leave our establishment crying because they tell you that it's the first time they felt safe. It's the first time they felt loved. That in itself tells me that we are starting to do things better, that we are starting to get relationships developed and young people feel safe and secure. For us to go forward from this CPG, we need to think ahead. One of the

things I was exposed to before I left Glasgow Health and Social Care Partnership just 2 years ago, and that was lifelong links. How many of us when we were a child at school had a teacher who influenced us in some way? That's what we need to hang on to- those lifelong links. One of the things we are trying to promote, and we DO promote at St. Mary's is when a young person leaves, we maintain a link with that young person. That young person can phone in and can speak to one of those 10 key members of staff just to have a chat with them, or we will go out and do a transition visit to see how they are doing in the community. We not saying we are going to be part of their life like going out to dinner with them, but we will send them a birthday card or Christmas card or make a telephone call. Each one of us here today has that responsibility to make lifelong links with those young people who come into our care

Q & A

Rona visited St. Mary's and really feels the caring atmosphere there. It's a fantastic service.

What time when you have the young people? They come from different areas. Ideally, we should have them for as long as we need to help them. If they come for a 22 day order, this could be extended to, say, a 3 month order. They will then be able to leave with a solid assessment. A lot depends also on what is available for them outside. We get a mixed bag with the local authorities, and this determines when the child leaves. It shouldn't but it does.

We use different therapies and sometimes it includes getting them into a rhythm.

I don't think we should have a child on a welfare order for over 6 months. (Jim Shields)

Because traumatised children are afraid, you don't want to create a core belief that you can only be made safe by brocks and mortar.

Karen Adams MSP

Talked about a Trauma informed prison in her constituency – HMYOU Grampion Peterhead. How they treat people. I spoke to the governor and the deputy in depth conversation. Being aware of work of previous CPG and conversations first thing I asked the prison was whether they were trauma informed. They absolutely are. They did say that this is a journey which is not complete, and they say they have a long way to go but their staff are always being trained as new information comes forward.

It was fascinating to hear what they say regards their duty of care and the way they feel about the prisoners. I was able to tour the women's wing, which was more like a hospital or care facility. You can see the difference in how they approach people coming into the system.

The Deputy Governor said the majority of women had trauma from early in their lives and saw the prison as a place to keep them safe help them rehabilitate and move on in their lives. As we heard about the secure unit, here too it's the first place these women felt safe. They have been in situations where they were taken advantage of because they did not feel strong enough. They saw that some of the women were very pliable and agreeable, and this highlighted how some of these women managed to get into the circumstances which let to them becoming imprisoned. Often there is no fight left in them. To hear this from staff and governors is fascinating but also encouraging to see this work being carried out. They put prisoners into bubbles during Covid and they found that this reduced crime within the prison. Family groups for instance there were zero instances of fights. That sense of belonging helped.

Q & A

Rona – How old is this prison – it's massive and relatively new-less than 5 years old.

Anne Wilson comment – foster and kinship carers. Anne spoke about this. Works on health-related matters. Wide meaning of 'health'. We don't work directly with children and young people – it's indirect because we support the carers. I was moved by what Kevin said about bereavement. It's something I was aware of before Covid. It affects kinship carers. She gave an example of a grandfather looking after his two small grandchildren both of whose parents and grandmother had died. If we don't provide adequate support these issues will create problems throughout their lives.

Melissa Rutherford

TI Practice, Sheridans.

Alex Williamson mentioned a new law to be brought into force in France for imprisoning bullies where they have led people to self-harm.

First became involved with ACEs when daughter entered nursery and this made her aware of trauma and she watched the Resilience film. In her practice she deals with criminal matters, as well as immigration and family work. All these areas involved vulnerable clients. She sees people who are in crisis on regular basis.

Melissa carried out research and watched documentaries to increase her understanding and is now in a place where she has begun to understand where her clients are coming from. She knows how we people to conform and deal with life as if they are not traumatised and this is not possible. We know that 8 out of 10 of the prison population have suffered 4 or more ACEs. Anyone working with people, we need to work together – health education law criminal justice. Not just use a buzz word. That is why I am other lawyers have got together to take the legal world by storm and we are gradually getting there.

We created a small group called

We have lobbied that the Young People Guidelines have been amended to reflect that a young person's brain is still developing to age 25, and that trauma is recognised in these Guidelines. We are now planning to train the judiciary, so that

the Guidelines are not just read but properly used and implemented. We have been speaking to the Scottish Children's Reporters (???) System and providing training to their members. Doing this as small group without funding. Driven by passion. Currently in the middle of a 4-week certification course. We have persuaded the Law Society to promote this to members. We are making progress, but the Judiciary are not yet on board, but we are persuasive. We don't want the revolving door; we don't want the prisons and care systems to be full. We want all these problems to be solved. This could put people out of a job. I would rather be out of a job and have the nation of Scotland happy safe and secure. If people are persuaded b the safety of the community, then they have to be persuaded by finance. Trauma costs something like £64 billion per year in England and Wales. If you diverted those funds into rehabilitation and treatment of trauma and ensure support for children growing up, health - then the nation will go forward. Prisons are full of hurt people, and rehabilitation must involve the healing of a person and at the moment it doesn't. We have a war on people. We can't punish people out of addiction. Everyone knows that addiction is medicating trauma.

My clients have lost hope. They are shunned. Nobody wants to know them and call them 'junkies' and 'scum. They have no respect for themselves.

Legal profession is slow to adapt. How many other firms will follow your model?

Wil it be a growing trend? Melissa said yes. When she began people thought she was out of her mind. |Things are now changing. 20 different firms have signed up for the course and there is a waiting list.

Kevin – how will we change the system when Sherriffs are the one imposing sentences. They need to look at the trauma that these young people have been subjected to.

Melissa - first step is sentencing guidelines. We have been speaking to the Judicial Institute for 2 years including about training. New cohorts of Sherriffs coming on board are former colleagues who know about all of this. They can't ignore trauma guidelines because if they do, the lawyers will appeal them.

Ross

We are using sticking plaster. We can reduce the number of people going before the courts.

Ryan

Been in criminal justice system throughout my life and studying law. How can we make role of Sherriffs more attractive to younger people who are also trauma-informed?

Rona - Maybe older generation of Sherriffs may not engage but we can now train younger people to have this knowledge and training.

Plans for future

George preventing trauma from happening – and this is a key goal of this CPG and as is the 70/30 campaign.

The goal may sound like pie in the sky aspiration but this goal formed after lots of research and experts were consulted about what is possible. They agreed 70% is possible by 2030 and Harry Burns said this is the least we should aim for. We had 127 of 129 MSPs signed up to this 70/30 campaign. Every political party supports this, and we are likely to get similar support in the current parliament. In England 500 out of 650 MPs signed up to this (majority of each party). Given this apparent support for what we want to do how can we ensure the policies are put in place to achieve this?

What is missing is a cross party, cross society plan of action widely backed and supported by people who believe in this. WAVE has a plan for how to achieve this but it is WAVE's plan and thus is not owned by other organisations.

The idea is that we set up an inquiry on how to achieve 70/30 in Scotland and draw as widely as possible from eminent people in Scottish public life to contribute to a national plan to deliver 70/30. We will draw on academic, practical, third sector and political expertise to formulate a plan and take it to parliament, inviting it to give the plan its support.

It's not about party politics and will involve a lot of work over the next 12 months including finding the right people to bring into the inquiry group.

I have been involved in a similar group for England so I know it can happen and I suggest this for our group.

Rona can't see a downside to this and it's a positive proposal and we should put our heads together to get this up and running.

Ryan suggested getting a member's motion about the campaign. Rona said she would be up for instigating that. Sue said they could meet to agree how that would work and which committee would be involved.

Sue Webber wondered if there was a why that sport could be part of this????

Any other business

George – next meeting. Beginning of the year - maybe March.

Rona will get a members debate for 2022.