

CEL CIS's response to Healthcare Improvement Scotland and the Care Inspectorate's consultation on the Draft Standards for Bairns' Hoose (Scottish Barnahus)

CEL CIS, the Centre for Excellence for Children's Care and Protection is a leading improvement and innovation centre in Scotland. We improve children's lives by supporting people and organisations to drive long lasting change in the services they need, and the practices used by people responsible for their care.

Section 1 – feedback on the children's version of the draft standards

1. The Bairns' Hoose standards put children first and describe how they will be listened to and supported. Do you agree?

Yes

CEL CIS agrees that the standards adequately describe how children will be listened to and supported. We note the language used in standard 3 to convey that children who might have caused harm to someone and are supported by a Bairns' Hoose can have the same expectations for these standards to be upheld as other children, "The standards are for you if you go to a Bairns' Hoose because your behaviour might have caused harm to someone." Whilst we understand that is important to make explicit mention of the inclusion of these children's access to Bairns' Hoose, it is possible that singling out children in this way may feel stigmatising. We understand that children have been involved in developing the standards, and would urge that children with experience of being supported after causing harm to someone are invited to comment on this wording, if this has not happened already.

5. Is there anything in the standards that you would change?

In the 'About this document' section it states, "Any child who has been a victim or witness of abuse may be referred to a Bairns' Hoose". Later in the same paragraph it goes on to say "Children who may have harmed others but are too young to be held responsible in law may also be referred." Not all children will understand what 'referred to a Bairns' Hoose' means, and we suggest this is changed to more child-friendly language, such as 'the people working together to support a child will ask the people at a Bairns' Hoose to help them'. We would also recommend that where there is reference to children who have been victims or witnesses of abuse and children who may have harmed others, there must be additional information to explain that all these children need help and support to heal from any harm or trauma they have experienced. Information about which children are supported by Bairns' Hoose should be put together in one sentence to offer more clarity on who the Bairns' Hoose is for. This may still be too complicated for all children to understand and require further explanation.

On page 3 of the draft standards it states, "These standards are a **blueprint** for adults in power to know what they should do to get it right for you, no matter what their Bairns' Hoose looks like". We have concerns that the term 'adults in power' could reinforce rather than challenge the power difference between adults and children. We suggest use of the term 'adults who work together to support you' instead. The term blueprint is not likely to be language that children will be familiar with and will require further explanation. We suggest removing this word and instead stating "These standards are for adults in power to know what they should do to get it right for you, no matter what their Bairns' Hoose looks like".

Each and Every Child has produced a toolkit¹ based on evidence from research,² to transform the narrative around children and young people in the care system, which may support the development and refinement of language in the Bairns' Hoose Standards and children's version of these standards.

Section 2 – feedback on the full version of the draft standards

1. Do you have any general comments on the standards?

CELCIS, the Centre for Excellence for Children's Care and Protection, is based at the University of Strathclyde and is a leading improvement and innovation centre. We improve children's lives by supporting people and organisations to drive long-lasting change in the services they need, and the practices used by people responsible for their care. We welcome the opportunity to respond to Healthcare Improvement Scotland and the Care Inspectorate's consultation on the Draft Standards for Bairns' Hoose (Scottish Barnahus). Our submission has been informed by research evidence, practice and policy experience and expertise offered through our long-standing, cross-organisational networks.

Summary of feedback on this consultation:

- There is an urgent need for clear and robust planning for implementation of the Bairns' Hoose Standards across Scotland, so that these will have the intended impact on children. This requires support from across strategic leadership to obtain buy in from across leadership, capacity and readiness building, and adequate resourcing.
- CELCIS supports a phased, test-based approach via a pathfinder model, to gather evidence about what works best to meet the needs of children experiencing different forms of harm (or harmful behaviour).
- The standards should be ambitious and give clear direction that no child should be in a court room. If children are required to attend court as a witness or defendant, this should be provided in advance through the Scottish Child Interview Model (by commission) or live video link at a Bairns' Hoose.
- The standards should be explicit that Forensic Medical Examinations should occur in a Bairns' Hoose when this is in the best interest of a child.

¹ <https://eachandeverychild.co.uk/the-toolkit/>

² <https://eachandeverychild.co.uk/research/>

- There is a need for more clear information about the processes within the Bairns' Hoose model, including how these processes will interact with existing processes within the GIRFEC model in Scotland.
- Where support from external services is required, such as mental health support or specialist recovery services, there must be clear and accessible pathways for referral, as well as adequate national provision of services so that children are able to access these when they need them.

Standard 1: Key principles and the rights of the child

Do you agree with the content of this standard, including the statement, rationale and criteria?

- Completely agree
- **Kind of agree**
- Neither agree or disagree
- Kind of disagree
- Completely disagree
- Don't know

Children's Views

We welcome the inclusion of a standard stipulating children's views must be listened to and given due weight. This will uphold Article 12 of the United Nations Convention on the Rights of the Child (UNCRC).³ Evidence about children's experiences of participating in decision-making reflects that some children felt it was valuable to give their views on decisions made about them,⁴ but other children felt that when they were heard in proceedings it did not make a difference, and so did not feel it was worthwhile contributing if their view was not listened to⁵. In the European Barnahus Standards, examples are given of what children and their families can influence, including the "timing, location and set up of interventions"⁶. Furthermore, including a more precise definition of what 'due weight' stipulates, as well as further details and examples of how this can be enacted, would improve the consistency in how the Bairns' Hoose standards are understood and implemented.

All individual child's experiences and needs are unique. For some children who are harmed, especially when they have experienced certain types of harm, there may be an additional level of complexity in listening to and acting on their views

³ United Nations General Assembly (1989) [Convention on the Right of the Child](#). Geneva: United Nations Commission on Human Rights

⁴ V. Weisz, T. Wingrove, S.J. Beal, A. Faith-Slaker (2011) *Children's participation in fostercare hearings*, Child Abuse & Neglect, 35 (4), pp. 267-272

⁵ Douglas, G., Murch, M., Miles, C., Scanlan, L. (2006) *Research into the Preparation of Rule 9-5 of the Family Proceedings Rules, 1991 – Operation*, Department for Constitutional Affairs, London; McLeod, A. (2006) *Respect or empowerment? Alternative understandings of "listening" in childcare social work*, Adoption and Fostering, 30 (4), pp. 43-52; Fernandez, E., Bolitho, J., Hansen, P., Hudson, M. (2013) *The children's court in New South Wales*, R. Sheehan, A. Borowski (Eds.) Australia's children's courts today and tomorrow, Springer; Kilkelly, U (2010) *Listening to Children about Justice: Report of the Council of Europe's Consultation with Children on Child-Friendly Justice*, Council of Europe, Strasbourg (2010); McKay, K. (2013) *Hearing children in court: Disputes between parents*, Centre for Research on Families and Relationships, Edinburgh

⁶ Haldorsson OL (2020) *Child Circle. Barnahus Quality Standards: Guidance for Multidisciplinary and Interagency Response to Child Victims and Witnesses of Violence 2017* (page 34)

and keeping them safe in some circumstances. For instance, some children who have experienced grooming when they have been harmed by child sexual exploitation or child criminal exploitation may need additional support during their recovery in making decisions that keep them safe (whilst also being supported to understand that responsibility for this abuse lies with the adult that has harmed them, not themselves).⁷ The need for an evidence-based approach to meeting their needs and upholding their rights, including how due weight will be given to their views, must be considered for all children who will be supported at a Bairns' Hoose.⁸

Information for children and families supported in Bairns Hoose

CELCIS welcomes the inclusion of standards stipulating children's rights to have information about Bairns' Hoose processes and procedures, and for this information to be supplied in formats and languages that all children (including at different ages and with different communication needs), as well as their families, can access and understand.⁹ We also welcome a standard stipulating that children and families are supported to understand what is happening throughout their experience of Bairns' Hoose.¹⁰ Relationship-based practice is needed to develop an understanding of children's and families' communication needs, so that complex procedures, changes or updates about the process can be explained in ways that work for them. This is especially important for those supported by Bairns Hoose who have experienced adversity and/or trauma, as these experiences may result in specific communication needs, this could include, for example, around the presentation of sensitive information, or in building trust and mitigating challenges that can arise in the organisations and institutions that interact with Bairns Hoose, such as the justice system. For this relationship-based support to be provided for all children and families involved with Bairns Hoose, it is likely that the support will need to be provided by a single practitioner. We welcome the inclusion of standard 5.10, that a child can "choose a trusted person to support them throughout and ensure their rights are upheld and their views are heard". As is stated in our response to standard 5, enacting this for every child will require clarity in the processes within a Bairns' Hoose, how the other processes, as well as resourcing for Bairns' Hooses. There may be relevant learning from the development of proposals for a single point of support for children and adults involved in the children's hearings system, as proposed by the Scottish Government consultation on a Children's Care and Justice Bill.¹¹

Rights to information and to privacy

We welcome the inclusion of standards that stipulate children's rights to information about the Bairns Hoose process (Standards 5.5 and 1.6), and standards stipulating that children's right to privacy and confidentiality will be

⁷ Scottish Government (2021) [National Guidance for Child Protection in Scotland 2021](#) (page 163)

⁸ For example, Harris, J., Roker, D., Shuker, L., Brodie, I., D'Arcy, K., Dhaliwal, S., Pearce, J (2017) [Evaluation of the Alexi Project 'Hub and Spoke' programme of CSE service development: Final Report November 2017](#) (page 39)

⁹ Healthcare Improvement Scotland, Care Inspectorate (2022) Bairns' Hoose (Scottish Barnahus) Draft Standards (page 17)

¹⁰ Ibid.

¹¹ [Scottish Government \(2022\) Children's Care and Justice Bill - policy proposals: consultation analysis](#). See also CELCIS's response to this consultation for more information CELCIS (2022) [CELCIS Response to the Scottish Government's Consultation on a Children's Care & Justice Bill \(page 10\)](#)

upheld (standard 1.11 and 5.4). In some circumstances, children supported by Bairns' Hoose may want information about a child who has harmed them. When a child that has harmed another child is supported by the Children's Hearings System, information about that child is private, unlike when a child is routed through the criminal justice system. We welcome clarification in standard 1.11 that a child's right to information and privacy are balanced by the rights to safety or justice of other children or adults. Upholding the rights of all children in a Bairns' Hoose (as well as any child who has harmed a child supported by a Bairns' Hoose) may be complex, and will require high quality support from professionals around these children, so that the reason why information about another child cannot be shared, when this is the case, can be explained. It is likely that any decisions around changes to the provision of information about children supported by the children's hearings system, as consulted on by the Scottish Government for 'A Children's Care and Justice Bill' will have relevance to Bairns Hoose processes and standards.¹²

Delay

Assessing and meeting the needs of children as soon as is required is vitally important to the wellbeing and protection of children as a child-centred, rights-based Bairns' Hoose approach. We welcome reference to standard 1.4 that children should not experience undue delays in assessment of their needs, as well as standards 1.10 and 8.3 stipulating that there should not be delays in decision making and assessment or treatment from health services. These standards rightly state that early intervention when a child has made a disclosure of abuse is critical to supporting their recovery and long-term wellbeing.¹³ To improve the clarity of the standards and messaging about the reduction of delay, we would strongly suggest that all references to reduction in delay across the standards are linked together in a distinct section. We note there is no reference to reduction of delay for children who are involved in court or the children's hearings system. Our response to standard 7 outlines the importance of the inclusion of standards relating to delays to court processes.

Participation of children and young people

We welcome the inclusion of standards throughout the guidance that affirm children's rights under Article 12 of the UNCRC to express their views freely in all matters that affect them, and for these views to be given due weight. In addition to participation in the decisions and processes that a child experiences in a Bairns' Hoose, this should also extend to a child's ability to influence the overall planning, design and evaluation of a Bairns' Hoose, as is set out in standard 1.3. The section within standard 1 "Practical examples of evidence of meeting standard" gives further information about how children's participation could be ensured;

"Implementation of peer advocacy, Champions Boards and young people's reference groups." and

¹² Scottish Government (2022) [Children's Care and Justice Bill Consultation Analysis Independent report commissioned by Scottish Government](#)

¹³ Healthcare Improvement Scotland, Care Inspectorate (2022) Bairns' Hoose (Scottish Barnahus) Draft Standards (page 45)

“Children’s involvement in panels, boards, steering groups and decision-making bodies.”¹⁴

We recommend that evidence-based resources are referenced within this section of the standards to support participation practice that enables children who have experienced harm and/or trauma to have their views heard.¹⁵

Standard 2: Collaborative leadership and governance

Do you agree with the content of this standard, including the statement, rationale and criteria?

- **Completely agree**
- Kind of agree
- Neither agree or disagree
- Kind of disagree
- Completely disagree
- Don't know

We completely agree that collaborative leadership and governance, as set out in standard 2, is an essential component of the Bairns’ Hoose approach. However, there is considerable work required to ensure that this collaborative leadership and governance is obtained in practice. Sustained support, buy-in, capacity building and collaboration, balanced across all relevant branches of strategic and local leadership is critical to the successful implementation of Bairns’ Hoose in Scotland. This is clear in evidence from implementation science, CELCIS’s learning from our work implementing complex change, and from networks of practitioners and leadership in children’s care and support across Scotland that we facilitate or participate in.

There is learning from the implementation of the Scottish Child Interview Model on the importance of external help with implementation from strategic leadership at national, regional and local levels.¹⁶ Scotland has a complex landscape of local governance and leadership, including 32 local authorities, 32 community planning partnerships, seven health board and one national police service, as well as and the areas over which these agencies have remit overlaps. The support of all of these key agencies would be required to implement a Bairns’ Hoose service. This means that there will need to be clarity about which responsibilities and governance obligations each agency would have for a Bairns’ Hoose service. This should anticipate the likelihood of complexity in regional governance of Bairns’ Hooses. For example, if a Bairns’ Hoose supported children across several local authority areas and two health boards areas, there would need to be clear agreements over the equitable resourcing, implementation support and governance across these agencies (as well as how

¹⁴ Healthcare Improvement Scotland, Care Inspectorate (2022) Bairns’ Hoose (Scottish Barnahus) Draft Standards (page 19)

¹³ For example, Houghton, C. (2018) *Voice Agency, Power: A Framework for young survivors’ participation in national domestic abuse policy-making* in Holt, S., Overlien, C. and Devaney, J. (Eds) *Responding to Domestic Violence: Emerging Challenges for Policy, Practise and Research in Europe*. London: Jessica Kingsley Publishers; See the ‘Our Voices’ project for more information on participation of children and young people who have been harmed by sexual violence <https://www.our-voices.org.uk/>

¹⁶ COSLA and Police Scotland (2021) [National Joint Investigative Interviewing \(JII\) Project Emerging Learning - Briefing Paper One November 2020](#).

this would work with other national partners). This should include agreement over which area social workers, police or health practitioners located at a Bairns' Hoose would be drawn from, and agreement over information sharing between these areas and agencies.

International models of Barnahus have significant variation in the involvement of agencies, with differing degrees of integration between agencies, as well as composition and governance responsibilities of key agencies. For instance, some models do not include child welfare services formally, while in others child welfare services are the lead agency.¹⁷ A gap in research on the impact of these variations has been identified, including the impact of these differences on the outcomes and experiences of children and their families.¹⁸ This underscores the need for precise guidance within the Bairns' Hoose Standards, drawn from evidence collected from the testing of pathfinder models in Scotland.

The Bairns' Hoose approach is an important aspect of upholding children's rights in Scotland. Full implementation of Bairns' Hoose means that children access timely, appropriate and high-quality protection, recovery and health support that has been developed to meet their needs, in a space that feels and is safe for them. This space should predominantly be created at the same location when this is in a child's best interests (specialist medical care, for example would most likely need to be accessed in a hospital setting). Full implementation of Bairns' Hoose also requires that no child has to go through a distressing experience with criminal justice processes that have not been designed to meet children's specific developmental needs, and which can be subject to long delays, and often involve retelling traumatic experiences. These are significant changes, and as Bairns' Hoose will interact with other complex systems, such as health and criminal justice systems, these changes will require focussed effort on implementation. Evidence¹⁹ and our experience offers key learning about what is required to promote and support complex change, and is detailed in our response to question 2 of standard 2. What we know from our significant experience in implementing complex and/or transformational change, through, for example, through the Permanence and Care Excellence programme (PACE) and using Active Implementation Frameworks²⁰ in our Addressing Neglect and Enhancing Wellbeing (ANEW) and Glasgow HSCP's Transforming Pathways programmes within children's services, is that the role of strategic leadership, establishing buy-in, agreement of a shared vision, capacity building and ensuring adequate resources are in place, are all vital to enact the changes intended and required.

Whilst we welcome the explicit reference to the role of collaborative leadership in implementing Bairns' Hoose in standard 2, and understand that the Bairns' Hoose Standards are only one aspect of Bairns' Hoose development, we would

¹⁷ Stefansen, K., Johansson, S., Kaldal, A., Bakketeig, E. (2017). Epilogue: The Barnahus Model: Potentials and Challenges in the Nordic Context and Beyond. In: Johansson, S., Stefansen, K., Bakketeig, E., Kaldal, A. (eds) Collaborating Against Child Abuse. Palgrave Macmillan, Cham

¹⁸ Ibid.

¹⁹ Fixsen, D. L., Naoom, S.E., Blasé, K.A., Friedman, R.M., & Wallace, F (2005) Implementation Research: A synthesis of the literature. Tampa, FL: University of South Florida, The National Implementation Research Network.

²⁰ Fixsen, D.L, K.A. Blasé, and M.K. Van Dyke (2019) Implementation Practice and Science

ask that the challenges to the full implementation of the standards are not underestimated; these need to be considered and addressed so that the standards are meaningful and achievable.

Standard 3: Inclusive access

Do you agree with the content of this standard, including the statement, rationale and criteria?

- Completely agree
- **Kind of agree**
- Neither agree or disagree
- Kind of disagree
- Completely disagree
- Don't know

Approaches to Bairns' Hoose across Scotland

All children across Scotland (including those in rural and island communities) who have experienced harm, including when they have witnessed violence or abuse, should be able to access high quality support through Bairns' Hoose if they need to. We welcome the inclusion of standards 3.1 and 3.4 stipulating this, including that children in Bairns' Hooses should be able to access services close to home. A model of Bairns' Hoose that situates all necessary services in one, child-friendly space poses some challenges for rural and island communities. It is likely that in smaller and/or urban local authorities in more densely populated areas of Scotland, Bairns' Hoose services can meet children's needs closer to where they live. This will mean there is flexibility for children to travel short distances across local authority boundaries to a service that meets their needs, giving these areas flexibility to respond to variable or unknown levels of need. Other local authorities and health boards representing much larger areas than others, with less dense populations, may require children and their families to have travel significant distances if, for example, only one Bairns' Hoose served that area. Island communities may also require a different approach, as it may be more likely that forensic medical services are located off the island, for example. There is evidence from international implementation of Barnahus models developed for rural areas with widely spread populations, such as in Greenland and Iceland, including satellite approaches where staff travel to the child or young person where this is in their best interests.²¹

Ensuring fidelity to Bairns' Hoose standards

It is possible that some flexibility in the models for Bairns Hoose to accommodate differing local needs and geographies across Scotland will be required; however, any flexibility *must* ensure that any model of Bairn's Hoose has fidelity to upholding the Bairns' Hoose standards. This will be important in upholding children's rights, and ensuring that all children can expect and receive the same high-quality services. Even recognising evidence from international

²¹ Johansson, S. and Stefansen, K. (2020) *Policy-making for the diffusion of social innovations: the case of the Barnahus model in the Nordic region and the broader European context* in 'Innovation: The European Journal of Social Science Research' Vol 33 (1)

models in rural areas, Scotland has a complex geography; a unique approach to children's care and protection (through the children's hearings system); and ambitious plans to support children who have experienced a wide range of different forms of harm or been involved in harmful behaviour. Testing models in rural/island areas through a pathfinder approach would support an evidence-based approach to understanding what how models can meet local needs in rural areas, while retaining fidelity to Bairns' Hoose standards.

Standards governing non-discrimination

We welcome the inclusion of standards that stipulate that children's rights should be upheld without discrimination, including standard 1.9 and within standard 3, which recognises the needs of disabled children, children in rural or island communities, and children who require translation services. We suggest that wider reference is made within standard 3 to the bespoke support that some children may require to enable their needs to be met by Bairns' Hoose. In addition to translation services, and support for disabled children to have their access requirements met, this may include support from a trusted person who has expert knowledge around their needs, whether these are cultural or religious needs, health and access needs, immigration support needs, or needs around their LGBTI identity, for example. In practice, this will require a continued commitment to learning, development and support for Bairns' Hoose staff, ring-fenced resources to facilitate access, as well as capacity for Bairns' Hoose staff to make strong links with local and national organisations that can provide external expertise when this is required.

Meeting the needs of children who might have caused harm to someone

All children need support and love, and for children who have experienced harm or trauma, a need for high quality and sometimes specialist support to uphold their right to recovery is even more important. Children in conflict with the law have too often had experiences including neglect, abuse and bereavement.²² In the rare circumstances where a child is involved in behaviour that causes serious harm to another person, it must be recognised that significant trauma is a near universal experience for these children. It is important that these children access welfare-based, non-punitive support to meet their care and protection needs, so that any needs manifested in behaviour can be addressed.²³ Though some forms of harm may require specific support and interventions, it is likely that some of the support needs of children who have been harmed, or been involved in harmful behaviour, will be similar, as their own needs stem from experiences of harm, abuse and trauma. The children's hearings system in Scotland is unique across the world in supporting the needs of children in conflict with the law.²⁴ However, the current provision of this support for these children is lacking, because:

²² Scottish Children's Reporter Administration (2022) [Children aged 12 to 15 years involved in offending and referred to the Children's Reporter and Procurator Fiscal in Scotland, A research report by the Scottish Children's Reporter Administration for the Scottish Government](#)

²³ CYCJ (2016) [Key messages from the Centre for Youth and Criminal Justice](#). Glasgow: CYCJ

²⁴ HMSO (1964) The Kilbrandon Report, Edinburgh: HMSO

- Some children in conflict with the law are routed through the criminal justice system rather than the children’s hearings system;
- The need for improvement of children’s experiences of the children’s hearings system has been highlighted recently,²⁵ with the Hearings System Working Group currently working to assess and make these improvements;²⁶
- There are gaps in providing consistent access to services across Scotland that provide support for children in conflict with the law, including specialist recovery services for children, including those in conflict with the law, who have experienced harm.²⁷

The Bairns’ Hoose standards recognise that children under the age of criminal responsibility (under age 12) are never subject to criminal justice approaches, and their needs should be met through a child protection approach to support them and address any behaviour which is causing harm. However, the current minimum age of criminal responsibility in Scotland (12 years of age) breaches international standards, and as such fails to uphold children’s rights. Both the Council of Europe’s Commissioner for Human Rights and the United Nations Committee on the Rights of the Child are clear that the recommended minimum age of criminal responsibility should be set to *at least* age 14.²⁸ The evidence demonstrating the need to raise the age of criminal responsibility has been clearly articulated both during and since the passage of the Age of Criminal Responsibility (Scotland) Act 2019 (the 2019 Act), and includes increased knowledge about child and adolescent development, the impact of trauma and adversity, and better understanding of effective practices where children’s behaviour causes harm or is in conflict with the law.²⁹

In light of Scotland’s the age of criminal responsibility bar; the shortcomings in meeting the needs of children above the age of criminal responsibility who have harmed people; and evidence that a very high proportion of these children have experienced significant harm themselves, we understand a rationale for including children, whether under or over the age of criminal responsibility who have harmed children in the remit of Bairns’ Hoose.

However, we have significant concerns about what impact this will have on the full and effective implementation of Bairns’ Hoose. Even for children who have

²⁵ Independent Care Review (2020) *The Promise* (page 39)

²⁶ <https://thepromise.scot/the-promise-scotland/what-the-promise-scotland-does/change-projects/hearings-system-working-group/>

²⁷ For more information see CELCIS (2022) [CELCIS Response to the Scottish Government’s Consultation on a Children’s Care & Justice Bill](#) (page 8); Galloway, S (2020) *Challenges from the Frontline – Revisited*, Supporting families with multiple adversities in Scotland during a time of austerity, NSPCC; Galloway, S., Love, R., & Wales, A. (2017) *The Right to Recover: Therapeutic services for children & young people following sexual abuse*, An overview of provision in the West of Scotland, NSPCC; National Youth Agency (2021) *Initial Summary of Findings from the National Youth Sector Census 19* Independent Care Review (2020) *The Promise* (page 45). Independent Care Review (2020) *Evidence Framework*. (page 45)

²⁸ Council of Europe Commissioner for Human Rights (2019) [Letter to Scottish Parliament Equalities and Human Rights Committee](#); UNCRC (2019) [General Comment 24 on children’s rights in the child justice system](#).

²⁹ Lightowler, C. (2020) *Rights Respecting? Scotland’s approach to children in conflict with the law*. Glasgow: CYCJ; McEwan, D. (2017) *Understanding the relationship between brain development and offending behaviour. Info Sheet*. Glasgow: CYCJ; Hollingsworth (2013) ‘Theorising Children’s Rights in Youth Justice: The Significance of Autonomy and Foundational Rights’. *Modern Law Review* 76: 1046-1069; McAra L. and McVie S, ‘Youth Crime and Justice: Key messages from the Edinburgh Study of Youth Transitions and Crime’, (2010) *Criminology and Criminal Justice* 211-230

experienced harm, there are significant challenges in extending the Bairns' Hoose model to meet their needs. Children harmed by sexual abuse, sexual exploitation, or criminal exploitation, for example, are likely to have differing needs for recovery and support with peripheral systems, such as justice. Support for children around their harmful behaviours brings about further challenges around meeting these specialist support needs. These challenges include how the rights of any child they have harmed can be upheld if they are also being supported within that same Bairns' Hoose service, as per standard 4.11 "You won't come into contact with anyone who might have harmed you or other people you know.", as well as the core principle of Bairns Hoose, that all children should feel safe and *be* safe. Learning from international models of Bairns' Hoose which also support children that have been involved in harmful behaviour can support this.³⁰ However, Scotland's adversarial criminal justice system³¹ and unique Children's Hearings System differs significantly from geographic contexts where this evidence is drawn from, thus limiting how this learning can be applied in Scotland.

It is possible that these challenges could be met through the testing of 'pathway' services in Scotland. This would enable evidence to be collected about the support needs of children who have experienced and/or caused harm, and if these needs can be met across different local contexts, and from one single Bairns' Hoose location. Meeting the needs of all children can build on existing practices to assess and support risk, but will require these be adapted and developed in the context of Bairns' Hoose. For instance, how existing planning and procedures to assess and address the risk of further harmful behaviour such as via the Framework for Risk Assessment, Management and Evaluation (FRAME), and Care and Risk Management (CARM), as well as risk assessment and support for children experiencing harm, abuse or exploitation, will be adapted and integrated into Bairns' Hoose procedures. Testing and evaluation of 'pathway' services should include reflection on if, and how, the needs of children who have been involved in harmful behaviour are best met through a Bairns' Hoose, or if continuous improvement work for existing support through the Children's Hearings System, such as through the Hearings System Working Group, would better meet these needs. We recognise that the development of Bairns' Hoose standards are separate from testing and piloting of Bairns' Hoose, however these are inextricably linked, as evidence from testing of Bairn's Hoose 'pathfinders' is likely to influence standards relating to the remit of Bairns' Hoose.

Standard 4: Design and environment

Do you agree with the content of this standard, including the statement, rationale and criteria?

- **Completely agree**

^{30 30} Stefansen, K., Johansson, S., Kaldal, A., Bakketeig, E. (2017). Epilogue: The Barnahus Model: Potentials and Challenges in the Nordic Context and Beyond. In: Johansson, S., Stefansen, K., Bakketeig, E., Kaldal, A. (eds) Collaborating Against Child Abuse. Palgrave Macmillan, Cham

³¹ Audit Scotland (2011) [*An overview of Scotland's criminal justice system*](#)

- Kind of agree
- Neither agree or disagree
- Kind of disagree
- Completely disagree
- Don't know

Standard 4.1 states that “Health, police, social work, recovery and justice services are co-located under one roof unless it is demonstrably not in the best interests of children.” We welcome the co-location of staff where possible and where the data informs us that this will necessary in order to best support the needs of children. As outlined in our response to standard 3, it is likely that some flexibility will be required in models of Bairns’ Hoose (including whether all services can be located in the same location). However, if there is local variation in the model, there will need to be safeguards in place in planning, delivery and monitoring of services to ensure that there is fidelity to the Bairns’ Hoose standards and that the quality of the service is not diminished for any children needing the support of the Bairn’s Hoose approach.

It will also be important to consider the interface with Education who are a key partner in Interagency Referral Discussion multi-agency assessment and planning. Education staff play a unique role in supporting children and families and it would be helpful to highlight how this relationship would be supported in the Bairn’s Hoose.

It will also be important that the Bairn’s Hoose approach can also meet the needs of older children in terms of the design and space, so this is fully inclusive. Standard 4.11 states that “The Bairns’ Hoose is designed and planned to support staff to work effectively together including... collaborative space and shared systems where appropriate.” It might be useful to consider learning from the Scottish Child Interview Model on any shared information systems or challenges regarding this.³²

This standard further states: “You won’t come into contact with anyone who might have harmed you or other people you know.” As per our response to standard 3, rigorous consideration and planning will need to take place to ensure how to support the needs of that children from the same local area who could potentially have caused harm to another child and need to access the same Bairn’s Hoose. It is imperative that rights are afforded to all and approaches do does not negatively impact on the rights of any child, including the right to safety and recovery.

Standard 5: Planning for children

Do you agree with the content of this standard, including the statement, rationale and criteria?

³² COSLA and Police Scotland (2021) [National Joint Investigative Interviewing \(JII\) Project Emerging Learning - Briefing Paper One November 2020](#).

- **Completely agree**
- Kind of agree
- Neither agree or disagree
- Kind of disagree
- Completely disagree
- Don't know

We welcome the suggestion of a single point of contact for children to ensure a relational approach with strong communication at all times. We are interested in what the interface will be with adult services offering support to parents and carers. Many parents and carers will require support to assist them with their own difficulties, for example, domestic abuse, mental health difficulties, substance misuse. In promoting a 'whole family' approach, the Bairns' Hoose Standards will need further information about how the Bairn's Hoose model will interact with these other services, with consideration of how this approach will be aligned with the GIRFEC model, and how current challenges around siloed-working creating disjointed services for adults and children can be addressed.

Standard 5.8 notes "There is a lead professional 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." This is potentially confusing language as "lead professional" is a specific role with specific duties in the context of the GIRFEC model and in children's planning. The Bairns' Hoose standards must clearly articulate whether this reflects the same role as in the GIRFEC model, or whether this refers to a more administrative role in the Bairn's Hoose. If it's the latter, then this role should be called something else i.e., 'key professional' to avoid any confusion. If this role is the same as the trusted person /single point of contact mentioned in other parts of the Bairns' Hoose standards, consistent language should be used throughout.

Standard 6: Interviews in the Bairns' Hoose

Do you agree with the content of this standard, including the statement, rationale and criteria?

- Completely agree
- **Kind of agree**
- Neither agree or disagree
- Kind of disagree
- Completely disagree
- Don't know

We welcome the focus on planning and preparation for the joint investigative interview in standard 6. It is imperative that the interview is consistently high quality. Evidence from pilots of the Scottish Child Interview Model shows supports clear improvements in the experience of interviews for children and young people. We would suggest that standard 6 would be strengthened by offering children a pre-interview visit to the Bairn's Hoose to see the venue and room where the interview will take place and to ask any questions. We

recognise that this may be more difficult in remote/rural settings so a video recording could be made explaining the process and showing the venue, if preferred by a child. It will be important that police and social workers undertaking the joint interview are able to meet the child before the interview to explore the process and prepare the child and family. We are aware of learning emerging pilots of the Scottish Child Interview Model about where this has worked well for children and families, putting them at ease and ensuring a relational and trauma informed approach is taken from the outset.

We strongly support using special measures for children to give evidence-in-chief by prior statement and suggest that this should be pursued as a default position unless this is not deemed to be in the best interest of the child. Similarly, this should also be the position regarding pre-recording the cross examination of the child. Whilst this relates to procedures within and on the periphery of Bairns' Hoose, the standards are well placed to lay out the expectations for practice.

We note that age and stage of development and complex needs are taken into account for this standard, which is very important as often previous practice would often exclude very young children and those with profound needs from the interview process. We anticipate that this practice will improve with the roll out of the SCIM model and the learning which is shared nationally.

Current operational practice guidance for police and social work dictates that there is a different Interagency Referral Discussion and investigative interview process for children under the Age of Criminal Responsibility Act (Scotland) Act 2019 (ACRA). Further detail is needed regarding the police and social work trained interviewers for ACRA investigative interviews as they presently receive different and/or further training to that of the Scottish Child Interview Model. Do we envisage that for interview under ACRA that other specialised trained police and social work interviewers attend Bairns' Hoose for this purpose or that the co-located Scottish Child Interview Model interviewers eventually undertake a dual role? We also note that forensic samples may be required to be obtained at different stages of an ACRA investigation and we strongly suggest that if this is required that this be undertaken in the Bairns' Hoose premises.

We note the statement "The Bairns' Hoose partnership works collaboratively with local therapeutic support services and other agencies supporting the child and their family to ensure that children and families get the right support, in the right place at the right time." The standards should clarify what this will mean in practice, such as whether services come into the Bairn's Hoose to provide specialist support or whether a central recovery service would operate from the Bairns' Hoose. The standards further state "The Bairns' Hoose partnership has established referral pathways to support children to access longer-term therapeutic support where there is an assessed Need." This is unclear as to whether this support takes place within the Bairn's Hoose or elsewhere. Clear directions as to how recovery services and referral pathways are structured should be included.

Standard 7: Support through the court and legal process

Do you agree with the content of this standard, including the statement, rationale and criteria?

- Completely agree
- Kind of agree
- Neither agree or disagree
- **Kind of disagree**
- Completely disagree
- Don't know

International evidence³³ and evidence from Scotland³⁴ shows that children often find giving evidence in court distressing and retraumatising. This evidence is included in the 'rationale' for standard 7.³⁵ Though there is variation across international Barnahus models, the evidential validity of the child's statement, and avoidance of the need to appear in court is one of five key criteria for Barnahus models set out in the Barnahus Quality Standards.³⁶ Furthermore, all Nordic models of Barnahus are linked by the principle that children do not testify or appear in court.³⁷ As such, we strongly call for the Scottish implementation of Bairns' Hoose to ensure that *all* child witnesses and those children under the age of criminal responsibility whose behaviour has caused significant harm or abuse can give evidence at a Bairns' Hoose site, via live television link or by commissioner, rather than in court settings.

The implementation of Nordic models of Barnahus were supported by commonalities in 'inquisitorial'³⁸ legal systems. Child-friendly justice procedures were already in place in these countries, namely the child forensic interview, which takes place outside the main court hearing.³⁹ The Scottish context significantly differs from this inquisitorial legal system, it can be understood as 'adversarial' rather than inquisitorial,⁴⁰ where the two sides involved in a criminal case oppose each other in court. This results in a greater emphasis is on the accused's right to challenge the evidence through cross examination, than in Nordic countries, and poses challenges for the full implementation of a Scottish Barnahus model.

³³ Olsson A, Kläfverud M. To Be Summoned to Barnahus: Children's Perspectives. In: Johansson S, editor. Collaborating Against Child Abuse. Switzerland: Palgrave Macmillan; 2017. p. 57-74.

³⁴ Children 1st (2018) Trauma-Free Justice, Care and Protection for Scotland's Children: Learning from the Barnahus approach. <https://www.children1st.org.uk/media/6701/trauma-free-justice-care-and-protection-for-scotlands-children.pdf>

³⁵ Healthcare Improvement Scotland, Care Inspectorate (2022) Bairns' Hoose (Scottish Barnahus) Draft Standards

³⁶ Haldorsson OL (2020) Child Circle. Barnahus Quality Standards: Guidance for Multidisciplinary and Interagency Response to Child Victims and Witnesses of Violence 2017 (page 12)

³⁷ Johansson, S. and Stefansen, K. (2020) *Policy-making for the diffusion of social innovations: the case of the Barnahus model in the Nordic region and the broader European context* in 'Innovation: The European Journal of Social Science Research' Vol 33 (1)

³⁸ Nylund, A. (2021). Institutional Aspects of the Nordic Justice Systems: Striving for Consolidation and Settlements. In: Ervo, L., Letto-Vanamo, P., Nylund, A. (eds) Rethinking Nordic Courts. Ius Gentium: Comparative Perspectives on Law and Justice, vol 90. Springer, Cham.

³⁹ Johansson, S. and Stefansen, K. (2020) *Policy-making for the diffusion of social innovations: the case of the Barnahus model in the Nordic region and the broader European context* in 'Innovation: The European Journal of Social Science Research' Vol 33 (1); Kalda, A (2020) *Comparative Review of Legislation Related to Barnahus in Nordic Countries*, Council of Europe

⁴⁰ Audit Scotland (2011) An overview of Scotland's criminal justice system

The Vulnerable Witnesses (Scotland) Act 2004 enabled children (and other 'vulnerable witnesses') to apply for 'Special Measures' when providing evidence in court to mitigate any detrimental impact of this court system on them. This includes,

- the use of a live television link from outwith the court building;
- the use of prior statements of vulnerable witnesses as evidence (in some cases);
- taking evidence by a commissioner;
- the use of a screen and a supporter.

However, there have been challenges to the full implementation of this legislative change, and too often children witnesses are not able to access the full suite of support and can experience distress and retraumatisation as a witness.⁴¹

The Evidence and Procedure review set out a rationale for further improvement, recommending changes to the rules of evidence and procedure to improve children's experiences when giving evidence. These changes should aim to ensure that procedures are designed to operate in their interests, protect them from further trauma, as well as improve the accuracy, reliability, and completeness quality of evidence that is provided.⁴² However, the review noted concerns from some in the legal sector that a single interview approach as an alternative to the cross examination of children would not adequately meet the accused's right to challenge the evidence, with 'considerable resistance' to constraining cross-examination further.⁴³

We note that no directions are included in the Bairns' Hoose standards for standard 7 about how a child provides evidence when they are required to do so. The standards instead state that "You can take part in the court process remotely from the Bairns' Hoose if this is allowed by the court" in the section "What does the standard mean for children?". Whilst we acknowledge the limitations of Bairns' Hoose in relation to the independence of prosecutors and judiciary, we are extremely concerned that no standard is included about how we should *aim* for children to provide evidence, as there is significant scope for variation in interpretation in the statement given in the section "What does the standard mean for children?".

Children who are cited as a witness or as a complainer are often caught up in the justice process, which once enacted, means that they have little choice or agency in giving evidence. We know from anecdotal reports from children and young people that they find cross examination extremely traumatic and while the Bairn's Hoose aims to reduce this, we suggest that if this is not in the child best interests, that the standards should support wider changes in justice system to uphold the best interests of children, including a right to not give evidence.

⁴¹ Together (2020) *Children's Rights in Scotland: Civil society report to inform the UN Committee on the Rights of the Child's List of Issues prior to reporting by Together (Scottish Alliance of Children's Rights)* pg.39

⁴² Scottish Court Service (2015) Evidence and Procedure Review Report

⁴³ Scottish Court Service (2015) Evidence and Procedure Review Report (page 25)

There will be significant challenges to the implementation of this standard, which will require collaborative complex changes to be made, working alongside partners in the judiciary and legal sector. However, evidence shows that doing so is integral to upholding the rights of children. The information provided in relation to the implementation of Bairns' Hoose Standards in this response outlines evidence around what is needed to support such complex change, such as buy-in from leadership and creating readiness, for example. This evidence and learning will support the complex change work that is required to implement a more ambitious standard 7, that can better uphold children's rights. The Evidence and Procedure review report will also be relevant to propelling these changes, as would information on the impact of the implementation of the Practice Note of the High Court of Judiciary 'Taking of Evidence of a Vulnerable Witness by a Commissioner'.

The Scottish Child Interview Model for Joint Investigative Interviews will be embedded into Bairns' Hoose, with scope for this interview to be used as the whole or part of the evidence in chief of a child if an application for special measure is made and granted. However, there is insufficient information in the Bairns' Hoose Standards about how SCIM and JII procedures will interact with wider justice procedures in Bairns' Hooses, including how children's rights are to be upheld in practice.

Delay

The impact of delay in waiting for trials on children is acknowledged in the 'rationale' for standard 7. We draw attention to comments made in relation to standard 1, about explicit mention of reduction of delay in justice proceedings within the Bairns Hoose Standards, and corresponding work to implement this standard through collaborative change and improvement work.

We note that though information is given about the impact of lengthy waits for court proceedings on children, and the potential for retraumatisation,⁴⁴ there is no reference to reduction of delay for children who are involved in court or the children's hearings system. We understand that the Bairns' Hoose standards and support provided must be consistent and observe the independence and the independent role of the Lord Advocate, police, SCRA, prosecutors and the judiciary. However, for Bairns' Hoose to uphold children's rights, the standards must be ambitious and include explicit direction about collaboration to support required to propel the systems change that is required to reduce delays in court or other justice proceedings. This should include reference to the implementation of recommendations in the cross-justice review group of the management of sexual offences (known as the Dorrian Review),⁴⁵ and the Hearings System Working Group,⁴⁶ especially in regard to drift and delay to justice processes. Doing so will require that adequate and sustained capacity and resource is allocated within local and national Bairns' Hoose development. Until these wider

⁴⁴ Bairns' Hoose (Scottish Barnahus) Draft Standards (page 42)

⁴⁵ Lord Justice Clerk's Review Group (2021) *Improving the Management of Sexual Offence Cases*, Edinburgh; Scottish Courts and Tribunals Service, (pages 7, 30)

⁴⁶ Hearings System Working Group (2022) [Hearings System Working Group Issues List](#)

systemic changes have been realised, Bairns' Hoose practice may be out of step with the court processes and need to be adapted to the needs of the child or young person accordingly.

Children in conflict with the law

If children over the age of criminal responsibility who are in conflict with the law are supported through Bairns Hoose, they should also be able to access child-friendly justice. For many children in conflict with the law, the support they need to understand and participate in justice procedures will be similar to the support child witnesses need, as both are likely to have experienced harm and trauma in their lives.⁴⁷ Too often, children in conflict with the law can find justice procedures including court settings, distressing, retraumatising, difficult to understand and therefore hard to participate in and engage with.⁴⁸ CELCIS's response to the recent Scottish Government consultation on a Children's Care and Justice Bill outlines our commitment and guidance on implementing the necessary changes to the criminal justice system, and decision making around where children in conflict with the are routed.⁴⁹ The vast majority of children in conflict with the law should be routed through children's hearings system rather than the court system. This requires the implementation of current Scottish Government proposals to raise the age of referral to the Principal Reporter, as well as other changes to procedure and guidance. For these changes to make a difference to children in conflict with the law, existing improvement work within the children's hearings system must be implemented. For children in conflict with the law who are likely to still be routed through court system, CELCIS supports the criteria listed in the Scottish Government's consultation paper on the Bill, listing what must change to ensure courts are child friendly. We urge attention to the implementation of any changes to ensure that these are enacted without delay consistently across Scotland.

The complexity of both the challenges listed here, as well as the interaction of processes within Bairns' Hoose and with wider justice procedures, underscores the importance of testing 'pathfinder' models in order to gather evidence about what works in practice to implement Bairns' Hoose and uphold the standards. Learning from this testing is likely to inform the final development of standards that are ambitious but implementable.

Standard 8: Health and wellbeing

Do you agree with the content of this standard, including the statement, rationale and criteria?

- Completely agree
- **Kind of agree**

⁴⁷ McEwan, D. (2017) Understanding the relationship between brain development and offending behaviour. Info Sheet. Glasgow: CYCJ; Scottish Children's Reporter Administration (2022) [Children aged 12 to 15 years involved in offending and referred to the Children's Reporter and Procurator Fiscal in Scotland, A research report by the Scottish Children's Reporter Administration for the Scottish Government](#)

⁴⁸ Lightowler, C. (2020) Rights Respecting? Scotland's approach to children in conflict with the law. Glasgow: CYCJ;

⁴⁹ CELCIS (2022) [CELCIS Response to the Scottish Government's Consultation on a Children's Care & Justice Bill](#)

- Neither agree or disagree
- Kind of disagree
- Completely disagree
- Don't know

We broadly welcome the standards within standard 8 of the Bairns' Hoose Standards, where prompt, high-quality, child-friendly and comprehensive care for health and wellbeing is stipulated. However, we are concerned that there is no standard stipulating that forensic medical examination (FME) should always be carried out at a Bairns' Hoose in all cases when in a child's best interest, and we would strongly suggest that this is clearly included within the standards. Forensic medical examinations can be distressing to children.⁵⁰ Ensuring FMEs are carried out in a Bairns' Hoose rather than a clinical setting is essential to upholding the rights and wellbeing of children. Carrying these examinations out in a Bairns' Hoose ensures that they occur in a child-friendly setting, with people around a child that they trust (as is stipulated in the standards), by staff with expertise in children's specific developmental and medical needs, when they have experienced harm and abuse. The recent development of adult specific services, Sexual Assault Referral Centres,⁵¹ should not affect decision-making about the inclusion of standards around forensic medical examinations within Bairns Hoose. It would be important within this standard to reflect that children have the right to say that they do not want a medical examination.

Ensuring that this standard, if included, can be met in practice, is likely to require significant attention to implementation. This will require buy-in and the development of readiness and capacity from strategic and local health board leadership, as well as the health workforce (as outlined in our response to "what support is needed to implement the Bairns' Hoose").

Further detail around the healthcare that is provided at a Bairns' Hoose should be considered for the Bairns' Hoose standards, including the need for specific equipment and skills for the workforce, as is provided in standard 7 of the Barnabus Quality Standards.⁵² This includes information about what collaboration will be required to ensure staff are "aware of referral pathways and service level agreements with relevant health services" as stipulated in the standard, and guidance, including practice examples about what will be involved in collaborative practices, and what is expected of practitioners within a Bairns' Hoose, as well as of wider health services. For example, to implement standards 8.3 and 8.4 (relating to access to internal or external mental health support), there must be local capacity to meet the mental health needs of children. Development of a Bairns' Hoose must ensure that specialist services to support mental health are available, and that where external support for mental health is required, such as through Child and Adolescent Mental Health Services, referral pathways are accessible to children who require this support as a result of

⁵⁰ O' Keffe, N., McElvaney, R. (2022) 'Forensic medical examinations: The body as gateway to healing after child sexual abuse', *Child Abuse Review*. 31, 2750

⁵¹ <https://www.gov.scot/publications/chief-medical-officers-rape-and-sexual-assault-taskforce---package-of-resources-further-information/>

⁵² Haldorsson OL (2020) [Child Circle. Barnabus Quality Standards: Guidance for Multidisciplinary and Interagency Response to Child Victims and Witnesses of Violence 2017](#)

trauma (not dependent on diagnostic criteria), and that waiting time for services is not excessive.

Standard 9: Access to therapeutic recovery services

Do you agree with the content of this standard, including the statement, rationale and criteria?

- Completely agree
- **Kind of agree**
- Neither agree or disagree
- Kind of disagree
- Completely disagree
- Don't know

We note the statement "I have one person who I trust who is there for me throughout my time at Bairns' Hoose." Our responses to standard 1 and 5 outline the necessary considerations that must be made in references to roles of professionals involved in the Bairns' Hoose approach and services and the need for consistent language regarding these roles throughout the standards.

The Bairns' Hoose standards state "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". We welcome this standard, but more detail will be required to ensure that this can be implemented and guaranteed consistently across Scotland. Data about the level of need for these services is required to ensure that there can be adequate service provision, in both rural/island communities, as well as larger cities where demand may be high. Scotland already faces high demand for CAMHS for example. Data collection and evidence-informed implementation is essential, otherwise resource constraints may result in the establishment of waiting lists for access to recovery services, which is likely to have a detrimental impact on children and mean that the Bairns' Hoose Standards can not be upheld for children.

It will be important to integrate evidence from scoping activities (including testing of pathfinder models) to understand which elements are essential to improvement of practice. It will be particularly useful to include learning around which approach to recovery leads to the best experiences of recovery for children, which should be included within the Bairns' Hoose Standards. It may be preferable to offer a suite of different evidence-based support and interventions which follow testing and high-quality assessment and planning. Changes to the support needs of children in Scotland, whilst upholding their rights, should be considered, such as the support needs for any children and families arriving in Scotland from Ukraine. For example, some of these children may experience harm here in Scotland but may have also suffered complex trauma in Ukraine and require a nuanced understanding and approach to support.

We are concerned with the inclusion of the following within the standards:

“any therapeutic support or services offered to a child victim or witness where there is a pending prosecution should follow appropriate measures to balance the needs of the child with legal requirements.”

The child’s best interests should be the central consideration of all Bairns’ Hoose processes, regardless of the legal requirements, and should not be driven by the needs of the justice system.

For some children seeking justice through the criminal justice system will be central to their recovery. For others this may not be a primary concern particularly in situations where the alleged harm had been caused by a family member. Our primary concern should focus on meeting the best interests of child and an individual response based on their individual context is necessary.

It is unclear at this stage whether third sector recovery services will be partners in the Bairns’ Hoose services (as with health, child protection, justice), or if these services will be contracted to external providers. If these services are contracted, we would underline the potential for such an arrangement to have a detrimental impact on children. We consider that it fundamental that these service require long term funding to sustain improvements in practice and maintain quality, including relationships between the service and a child/family being supported. Competitive tendering processes that are required to be undertaken every few years can undermine the stability of the service and the investment in the overall standard of support could suffer as a result.⁵³ NSPCC research has mapped children and young people’s access to therapeutic help following sexual abuse, finding that provision for this support lies mainly in third sector organisations and with adult services of sexual offences, and that provision across Scotland is inconsistent.⁵⁴ There is a need for consistent access to specialist services across Scotland, and to address any resource, capacity or other issues that drive inconsistent service provision. Children for whom there is no child protection concern but who may, for example, have been subject to rape or sexual assault often experience significant barriers to access to recovery support. It will be important that these children still receive support in line with the GIRFEC model, and that referral pathways for specialist support are developed within Bairns’ Hoose.

Standard 10: Multidisciplinary staff training and support

Do you agree with the content of this standard, including the statement, rationale and criteria?

- **Completely agree**
- Kind of agree
- Neither agree or disagree
- Kind of disagree
- Completely disagree

⁵³ CELCIS (2021) [Response to the Competitions and Market Authority Study of Children’s Social Care Provision](#)

⁵⁴ Galloway, S., Love, R. and Wales, A. (2017) The right to recover: therapeutic services for children and young people following sexual abuse: an overview of provision in the West of Scotland. London: NSPCC”

- Don't know

We welcome the standards as set out in standard 10 which detail the training and support requirements of staff in Bairns' Hoose.

Whilst we welcome standard 10.9 that stipulates that "Staff have individual training plans which are fully implemented and reviewed regularly", we recommend that explicit and distinct direction around the development and coaching of staff is included within this. Evidence demonstrates that while training is essential, it is not on its own sufficient to bring about the changes intended by that training.⁵⁵ This is especially true when training comprises the passive dissemination of knowledge, but it is also the case where this includes more interactive methods. A comprehensive series of adequately resourced actions is required, such as ongoing workplace coaching and support.⁵⁶

The inclusion of standards, as well as further information about the expectations for Bairns' Hoose staff to access reflective practice and clinical supervision are greatly welcomed. It would further strengthen the standards to include specific mention of the need to mitigate vicarious trauma for staff working in Bairns' Hoose, and what supports can be put in place to do so. This support includes, among other things: the creation of safe spaces for caregivers to process the child's and their own trauma without the threat of judgement or sanction; a range of individual and group support, such as peer support; professional support and supervision; professional environments that also provide realistic expectations of caseloads; mentoring for newly qualified workers; safe working schedules and annual leave; and availability of counselling/therapy services.⁵⁷

Support from both strategic and local leadership will be required to ensure that Bairns' Hoose services have the capacity to implement the measures outlined here. For example, some flexibility will need to be enabled at planning stages of the staffing and structure of Bairns' Hooses to enable staff to have the time needed for reflection, coaching and recovery if they experience vicarious trauma.

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

Do you agree with the content of this standard, including the statement, rationale and criteria?

- **Completely agree**
- Kind of agree
- Neither agree or disagree
- Kind of disagree

⁵⁵ Fixsen, D., Naoom, S., Blase, K., Friedman, R., and Wallace, F. (2005) *Implementation Research: A synthesis of the literature*. Tampa: University of South Florida

⁵⁶ Joyce, B and Showers, B (2002), *Designing Training and Peer Coaching: Our needs for learning*, ASCD

⁵⁷ Ottaway, H., & Selwyn, J. (2016). "No-one told us it was going to be like this": Compassion fatigue and foster carers summary report. Fostering Attachments Ltd; Centre of Excellence for Children's Care and Protection (CELCIS). 2021. "Safe Places, Thriving Children. Embedding Trauma Informed Practices into Alternative Care Settings. Practice Guidance.

- Completely disagree
- Don't know

Standard 11.2 states “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.” We welcome the focus on prevention and a learning culture in the Bairns’ Hoose and suggest strengthening this standard with a reference to the wider societal context for example welfare inequalities and the links to neglect.⁵⁸ Bairns’ Hoose is also well placed to develop expertise in evidence and learning in specific areas for example, violence against women and children and child sexual abuse. This could support wider workforce and sector development in line with The Promise of the Independent Care Review and increase understanding and knowledge of the importance of early family support to prevent difficulties escalating. The voice of the child and young person is critical in this work.

This standard further states “There is a designated lead within the Bairns’ Hoose who has responsibility to build competence and knowledge among professionals and practitioners working with children.” Using the term ‘designated lead’ for this area of work could be problematic as it could be confused with other roles named in the standards. Perhaps a glossary of roles, with clear definitions, would be helpful in the standards and help to avoid confusion.

There must be co-ordination and a culture of shared learning between Bairns’ Hoose and other relevant bodies in Scotland. Guidance about these bodies and collaborative working should be included in the Bairns’ Hoose Standards. For instance, Child Protection Committees Scotland is a key network that is well placed to share emerging learning, particularly learning drawn from those with lived experience, as well as offering input on challenges faced by the workforce. The standards are well placed to also include, or link to an up-to-date resource with information about the role of Child Protection Committees Scotland.

2. What support is needed to implement the standards?

Implementation of the Bairns’ Hoose Standards will require significant and sustained attention.. Planning for implementation should be cognisant of existing gaps between how the intention of legislation or policy is experienced by children and adults in Scotland. It is likely that learning about challenges and facilitators to the implementation of other areas of policy or statute will have relevance for the implementation of Bairns’ Hoose.

CELCIS has extensive experience in implementing complex change through, for example, the Permanence and Care Excellence programme (PACE) and using Active Implementation Frameworks⁵⁹ in our Addressing Neglect and Enhancing

⁵⁸ Featherstone B., Morris K., Daniel B., Bywaters P., Brady G., Bunting L., Mason W. & Mirza N. (2019) *Poverty, inequality, child abuse and neglect: Changing the conversation across the UK in child protection*

⁵⁹ Fixsen, D.L, K.A. Blasé, and M.K. Van Dyke (2019) *Implementation Practice and Science*

Wellbeing (ANEW) and Glasgow HSCP's Transforming Pathways programmes within children's services. Evidence⁶⁰ and our experience shows that any effort to promote and support complex change requires close attention to:

- Stakeholder involvement and buy-in throughout all stages of design, implementation, and improvement. These stakeholders include children, young people and their parents and/or carers, practitioners, managers and leaders at all levels across all relevant agencies/organisations, as well as colleagues delivering support functions (HR, finance, housing, quality assurance, etc.) amongst others.
- Agreement of a shared vision of what is needed to support a child, young person and their family, the need for leadership to 'own' this shared vision and agree effective methods for change, and ensure there is sufficient multi-agency resource and capacity to enable this vision to be realised.
- Applying evidence of what works well in children's experience and perspectives is part of the design, development and testing of services/practice. Reaching an agreement between key stakeholders about the nature of services and practices and how best to implement them will be an important step. For example, what is expected of roles and practices of health, social work, police, COPFS, judiciary, and third sector partners in Bairns Hoose' to uphold consistent standards in varying local contexts and geographies?
- Readiness to create an enabling context for change. Leadership across local areas has a key role assessing readiness and providing ongoing opportunities for stakeholder participation so that change is experienced as a collaborative process, rather than a 'top-down' initiative.
- Attending to collaboration in practice. True collaboration moves beyond information sharing to a sharing of resources and fully integrated programme and service planning. Whilst this brings great opportunity, it is vital that people are supported to come together in constructive ways to develop the trust needed for true-interagency working. Multi-agency teams require ongoing support for multi-agency leadership and coherent, collaborative ways of work should be modelled throughout all leadership activity.
- There are a number of structural components and activities that are the core components needed to initiate, support, and sustain change at practitioner, service, and local area levels. Capacity to access and interpret programme fidelity (adherence to the components that made the original practice effective) and outcomes data for improvement purposes is one such component. To be useful, data needs to be collected, analysed, and reported over time, with capacity-building across local areas to do so.
- Support for the relevant workforces, including increased capacity, resources and support to respond to clearer practice guidance, access to training and coaching and greater clarity on professional roles and functions to reduce siloed-working that can be a barrier to this support. Trauma-informed training, coaching and support, including high quality

⁶⁰ Fixsen, D. L., Naoom, S.E., Blasé, K.A., Friedman, R.M., & Wallace, F (2005) Implementation Research: A synthesis of the literature. Tampa, FL: University of South Florida, The National Implementation Research Network.

clinical supervision, will be especially important for practitioners within Bairns' Hoose.

- Promoting leadership practices that value and nurture a learning culture within and across organisations as this is also key to supporting significant change.

While the evidence and our learning strongly suggests that these are the key issues to be addressed and attended to in the pursuit of large scale complex change, this understanding has not yet been fully harnessed across Scotland to a large enough scale. While the draft Bairns' Hoose standards go some way to meeting these criteria, consideration of learning around what is needed to support implementation is not always adequately integrated into the standards. There is a risk that existing arrangements and approaches are currently insufficient to support the complex changes involved in full implementation of Bairns' Hoose.

Funding

The resourcing of the Bairns' Hoose approach, has been identified as an area of grave concern by those across the children's care, protection and rights sector in Scotland. There is a perceived risk that without the resources required, meaningful and full implementation of the Bairns' Hoose approach can not and will not happen. Clarity over what funding will be provided by local authorities and health boards (as well as other partners such as Police Scotland), and what will be provided by Scottish Government is required.

Such clarity over funding will also require adequate planning so that partners can be assured that the total funding available is sufficient for the effective delivery of the Bairns' Hoose approach. The testing of 'pathfinder' Bairns' Hooses will enable evidence about what works to be ascertained, including what capacity and resourcing, including funding, is required. Ascertaining this evidence across differing local contexts will be integral to developing buy-in, readiness and planning for Bairns' Hoose.

Policy alignment

It will also be necessary for planning and implementation of the Bairns' Hoose approach to be aligned and co-ordinate with other policy change and improvement programmes. There have been a number of significant policy and legislative changes to the landscape of children's care and protection, such as The Promise, Scotland's new Child Protection Guidance, and the work of the Hearings System Working Group. The changes these bring about are necessary, but each change requires capacity and resource so that the workforce can clearly understand what action is required to implement these changes in practice, to make the intended differences to the lives of children, young people and their families. For example, consideration will need to take place regarding what the criteria will be in local areas for children to access the Bairn's Hoose, and how this criteria fits in with procedures within child protection approaches, such as Interagency Referral Discussion. Whilst local Interagency Referral Discussion procedures are in place, revised IRD procedures are currently being implemented via the national child protection guidance, learning about the

consistency of approaches to these across Scotland will also be relevant to Bairns' Hoose procedures.

Pathfinder Approach

Our understanding is that a pathfinder approach will follow publication of the standards in 2023. We support an evidence-based approach to understanding the distinct needs of children and young people. This is key to underpinning the decisions made about the criteria for children accessing Bairns' Hoose, how the model will adapt to local needs (but retain fidelity to the Bairns' Hoose Standards, and how the model will interact with external agencies to uphold the standards.

The implications of the wide scope of children to be supported in Bairns' Hoose should be considered. Evidence about the expansion of evidence-based programmes to support a wider scope of participants than originally intended has shown that this change in context requires changes and adaptations to the programme. This ranges from changes to materials to eliminating some components of the programme⁶¹. For example, the origin of the Barnahus in Iceland centred on improving responses to taking evidence from children in the context of child sexual abuse with strong evidence that this is effective in promoting better outcomes for children. Since then, other international models have expanded the scope of Barnahus and support children with a range of experiences.⁶² The plans laid out in the Bairns' Hoose Standards are ambitious in comparison to other international models, and it will be imperative that we understand and learn more about what elements of the practice change work and what needs to be adapted or disregarded to support improvement. Adequate testing and learning from the development Bairns' Hoose through a pathfinder approach is needed in order to ensure that the quality of the service is retained when the scope is expanded.

We would support a pathfinder model that focuses on testing different elements that the approach seeks to support and the needs of children that could vary depending on their experiences. For example, one local authority/health board testing an approach to support children affected by child sexual abuse, and another model testing approaches to supporting children affected by domestic abuse. It will be equally important to consider geographical location in consideration for pathfinders for example, urban and remote/rural.

This type of approach can harness the Plan, Do, Study Act Framework which enables testing of changes on a small scale, structured learning from tests before the implementation of models at scale.⁶³ It will be equally important to understand what works as well, and which elements that do not work in practice.

⁶¹ Carvalho, M.L., Honeycutt, S., Escoffery, S., Glanz, K. Sabbs, D., Kegler, M.C (2013) 'Balancing fidelity and adaptation: implementing evidence-based chronic disease prevention programs' in *Journal of Public Health Management Practices*, 19(4):348-56.

⁶² Haldorsson OL (2020) [Child Circle. Barnahus Quality Standards: Guidance for Multidisciplinary and Interagency Response to Child Victims and Witnesses of Violence 2017](#); Johansson, S. and Stefansen, K. (2020) *Policy-making for the diffusion of social innovations: the case of the Barnahus model in the Nordic region and the broader European context* in 'Innovation: The European Journal of Social Science Research' Vol 33 (1); Kalda, A (2020) *Comparative Review of Legislation Related to Barnahus in Nordic Countries*, Council of Europe

⁶³ NHS England & NHS Improvement (2022) [Online Library of Quality Service Improvement and Redesign Tools - Plan, Do, Study, Act cycles and the model for improvement](#)

This will aid understanding of the needs of children and young people and whether these are being met. For example, in relation to recovery support, the elements of operational practice that support the best long-term outcomes for recovery will be identified, as well as any potential challenges to these practices. The Plan, Do, Study Act Framework also emphasises the importance of explicitly identifying what is to be achieved, how it will be measured, and the idea to be tested when planning any improvement or change to work processes. Testing models on a small scale enables flexibility in approaches when evidence from testing is different to expectations.⁶⁴ A phased approach reduces risk and consolidates learning about implementing change in an intentional manner.

Preparation for a phased approach must include evidence gleaned from the participation of children who have had the type of experiences that will be supported by the Bairns' Hoose model. This evidence must inform the Bairns' Hoose standards, as well as the development of services. Support to capture data will also be a requirement to collect and study data during testing, as is further outlined in our response to Section 3, question 2.

Section 3

1. Is there anything that has been missed from the standards?

We have highlighted throughout our response to the individual standards, as well as in our answers to questions two and three from section 3, what we think may have been missed from the standards as currently drafted.

2. How can people running a Bairns' Hoose show us they are meeting the standards?

Format of the standards

The existing format of the Bairns' Hoose Standards clearly conveys the information relevant to each standard, expectations and delivery of the standard. We suggest that an additional section is included for each standard, outlining the minimal considerations for data collection and analysis that are required to support the monitoring, evaluation and accountability of each standard. This could help to produce some baseline data from which to build evidence of sustained change over time as we move to a pathfinder approach.

There are a number of considerations around the data to be collected and analysed that will be necessary to support the delivery of Bairns' Hoose. It is imperative that data specialists are involved at planning stages of Bairns' Hoose, so that the right data is collected and there are plans in place to use this data. This is an essential component of upholding the Bairns' Hoose Standards and ensuring that we listen to what children and their families say about their

⁶⁴ Ibid.

experiences. There will be relevant learning from data collection and analysis from the roll out of the Scottish Child Interview model that support Bairns' Hoose development. Some data that is already collected may be able to support our understanding of the number of children who might access Bairns' Hoose. However, many of the details around what data will be recorded in the Bairns Hoose models will depend on the details of procedures within and adjacent to Bairns Hoose, such as whether Interagency Referral Discussions are carried out within a Bairns' Hoose.

It will be necessary to ensure that data is collected that reflects a child's experiences in Bairns' Hoose, as well the processes that have occurred. For example, this might include:

- When child is referred and how much time has elapsed between referral and their first visit to a Bairns' Hoose;
- What services and professionals they engaged with at Bairns' Hoose;
- What services were not able to be accessed at the Bairn's Hoose; and
- Seeking meaningful participation and views from a child and their family about their experiences.

Establishing this data from pathfinder models of Bairns' Hoose will also play a key role in facilitating buy-in of leadership, as it will evidence how and where children's outcomes are improved by the Bairns' Hoose approach.

It is likely that there will need to be some flexibility in Bairns' Hoose models across Scotland so that these services can meet different local needs. This means that it is likely that there is some variability in the data collected across these models. This can pose challenges for learning and monitoring. The involvement of data experts at planning stages of Bairns' Hoose is essential to supporting consistent data collection. For instance, through defining key concepts and terms for data collection that are shared across different models, more accurate and comparable data can be collected and used.

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