

**AGENDA**

		<b>Paper</b>	<b>Action</b>
<b>1.</b>	<b>Apologies</b>		
<b>2.</b>	<b>AOB</b>		
<b>3.</b>	<b>Minute of Previous Meeting 11 March, 2020</b>	Attached	
<b>4.</b>	<b>Matters Arising</b>		
	a) VER	Verbal	SD
	b) Staff Pay	Verbal	SD
	c) Business Continuity	Verbal	PM
<b>5.</b>	<b>Budget 2020/21 – impact of COVID-19</b>	Verbal	EM
<b>6.</b>	<b>Glasgow project - Update</b>	Attached	EM
<b>7.</b>	<b>BDO recommendations - Update</b>	To Follow	EM/PA
<b>8.</b>	<b>Data Migration - For approval</b>	Attached	LB
<b>9.</b>	<b>Participation in hearings - Update</b>	Attached	LB
<b>10.</b>	<b>Case sampling programme - Update</b>	Attached	KMacD
<b>11.</b>	<b>Business Plan – for approval</b>	Attached	LB
<b>12.</b>	<b>Management Development - Update</b>	Verbal	LB
<b>13.</b>	<b>Non-Disclosure Lists - Update</b>	Verbal	LB
<b>14.</b>	<b>Strategic Risk Registers – Review required in light of BCP approach to service delivery</b>	Attached	All
	<b>Standing Items</b>		
<b>15.</b>	<b>Digital Programme</b>	Verbal	NH
<b>16.</b>	<b>Information Governance</b>		
	• General Update	Verbal	AH
<b>17.</b>	<b>Practice and Policy</b>		
	• General Update	Verbal	AH
<b>18.</b>	<b>New Risks</b>	Discussion	All
<b>19.</b>	<b>Forward Look</b>	Verbal	
	a) Board Development Day – 01 May		
<b>20.</b>	<b>Items for next meeting and afternoon workshop session</b>	Discussion	All
	<b>Date of Next meeting;</b> Wednesday 06 May at Ochil House (Venue TBC)		

## Participation during COVID-19 response

### Introduction:

During these unprecedented times, we are unable to offer a broad variety of participation options. However, the views and participation of children, young people and families is both a basic human right and an essential component of decision making in Children's Hearings. This paper briefly sets out to explore some interim measures for consideration to provide engagement opportunities for children, young people and families during this initial critical phase when movement is restricted and social distancing is required.

There are three approaches proposed for consideration; embedded within these are a variety of options for consideration. They are:

- Communications
- Technology
- Hub provision

### Communications:

- a) Increasing the notification timescales by an additional margin of a minimum of two weeks (therefore providing around four weeks' notice) to allow families additional time to seek an advocate and/or legal representation;
- b) An covering note, leaflet, pro-forma or additional text to the existing letter providing children, young people and families with information about the current status of Children's Hearings, encouraging the use advocacy services and legal representation, and instructions for the use of Vscene;
- c) A pro-forma for obtaining the views of children, young people and families which may be submitted by post or electronically (in terms of postal provisions this can only be offered where offices are sufficiently staffed and post is being processed);
- d) The provision of an on-call dial-in and e-mail service for children, young people and families which can provide additional support and information regarding participation options for upcoming Hearings. This could be a rota coverage which is clearly displayed on the aforementioned pro-formas, the SCRA website, and on Twitter;
- e) Reporters being accessible by email where possible, alternatively the contact details of the LSM and LRM could be made available;

### Technology:

Vscene is temporarily being used for Children's Hearings. The technology required for using this platform may not be available to all children, young people and families.

- a) Encouraging the use of smartphones, tablets, laptops, and PCs if available to attendees, complemented by clear instructions for access
- b) It may be the case that, despite owning technology, not all children, young people and families will have wifi or available data to enable them to take up attendance in this manner. The use of telephony (call to family/Young Person) to be considered.
- c) The purchase of tablets and provision of a technology delivery service, where possible and is safe for staff to attend; for example, to children and young people in foster care placements, Children's Units, or Local Authority approved kinship care placements. The relevant kit could be delivered for use, adherence to social distancing complied with, and collection could take place immediately after the Hearing. Given the volume of Hearings this can only be applied on occasion but may be extremely helpful, even if it is possible for only a few. An invitation for volunteers to assist with this service could be published on Connect.
- d) Promoting the use of advocacy services and legal representation who will have access to the relevant technology

### Hub:

Depending on government guidance and measures, the provision of a staffed hub for dialling in to Hearings may be something to explore for the future. For example, this might involve one staff member allowing access to a Hearing room for a family to dial in to the Hearing via technology we already have available.







SCOTTISH  
**CHILDREN'S REPORTER**  
ADMINISTRATION

**CASE SAMPLING ACTION PLAN TRACKER**

**Accountable Director:** PRINCIPAL  
REPORTER/CHIEF  
EXECUTIVE

**Date:** 08 April 2020

**Report Author:** QUALITY ASSURANCE MANAGER

**Recommendation:**

- 1. To approve the case sampling plan tracker**

**Reason for Report:** *EMT Approval*

**Resource Implications:** *Not applicable*

**Strategy:** *Within approved plans*

**Consultation:** *Head of Practice and Policy, Senior Operational Managers*

**Equalities Duties:** *None. Not required.*

**Document Classification:** *Not protectively marked*

## **1. Introduction**

1.1 The purpose of this report is to provide EMT with the case sampling action plan tracker for their review and approval, in advance of the May Audit and Risk Committee.

## **2. Background**

2.1 Each May the Audit and Risk Committee receives a report on the progress of actions arising from case sampling exercises.

## **3. Update**

3.1 The attached action plan tracker details 16 actions which were reviewed on 10th February 2020 by the Head of Practice, Senior Operational Managers along with the Quality Assurance Manager. The February Audit and Risk Committee also reviewed the progress of actions arising from the case sampling exercise on Non-disclosure, and was satisfied at the update provided.

3.2 It should be noted that:

- There are 16 actions on this tracker for review
- 13 of these have been marked as complete – for closure; 1 of these is subject to publishing of a document on Connect (Supervision Framework) and 1 as the action is superseded by CSAS development
- 1 action remains incomplete (ref A4) – although this has been outstanding for some time now, this remains a valid action as there is a recognition that managers need to adopt a consistent approach to the non-opposition of appeals, and this will also feature in the upcoming case sampling programme for 2020-22
- 2 actions are not yet due, but in light of our current operational situation the due dates should be extended. Suggested dates have been included for approval, or alternative dates to be determined by EMT.

## **6. Conclusion & Recommendation**

6.1 To approve and review the attached update.

**APPENDIX 1**

<b>Report</b>	<b>Ref</b>	<b>Action</b>	<b>Due Date</b>	<b>Owner/Lead</b>	<b>Status</b>	<b>Revised date</b>	<b>Update at 30.03.20</b>
Established Grounds (Feb-19)	E5	Contents of this report to be shared with all Reporters at team meetings with reference to Practice Direction 7	30/04/19	LRMs	Complete - for closure	31/05/19	Senior Operational Managers confirmed on 12.02.20 that this has been completed in all localities and can now be closed
Established Grounds (Feb-19)	E4	Managers will ask all Reporters to apply case analysis to one case at least and will review result and ongoing use with them in supervision	31/05/19	LRMs	Complete - for closure		This was reviewed by the Head of Practice and Senior Operational Managers on 12.02.20, who confirmed that this has been completed and should now be closed. NOTE: the case analysis template is included as an electronic form in the child's file in the new case management system. Discretion will remain as to when and in what circumstances it is to be used, but its integration into the child's record will promote its use. We will need to test if we can monitor how often it is used in the new system.
Established Grounds (Feb-19)	E3	Effectiveness of current training in decision making will be assessed through further case sampling	29/09/19	Quality Assurance Manager	Complete - for closure	21/11/19	There is the opportunity through the implementation of CSAS to promote and encourage fuller recording and we will case sample once the system is rolled out. This is an action which will require ongoing activity and closure of this is proposed by the Head of Practice and Policy
Hearing observations (May-19)	O1	Head of Practice and Policy will write to Sheriffs Principal to thank them for their co-operation and give assurance as to the value of the exercise and	31/05/19	Head of Practice and Policy	Complete - for closure		

		potential for more.					
Hearing observations (May-19)	O2	Subject to Board Review of the Quality Assurance programme for 2020/21, scheduled for November 19, further observation exercises in relation to court business may be incorporated	Nov-19	Quality Assurance Manager	Complete - for closure		The February 2020 Audit and Risk Committee approved the 2020-22 case sampling programme which includes observation of the reporter at court. NOTE: The timing of this exercise will require to be revised due to impact of coronavirus on work programme.
Non-disclosure (Aug-19)	N1	LRM's to be provided with a list of issues to address in relation to the findings of this case sampling exercise. Each Locality will provide a response to each of these issues, indicating what action (if any) they will be taking to address this within their Locality. These issues are as follows: a) Practice errors – for Localities with more than 1 of these, some assessment will be required to determine if a full audit needs to take place b) Use of Form 1 – this needs to be more consistent	30/09/19	LRMs	Complete - for closure		All localities provided a response to the Head of Practice and Policy with their plans to progress improvements to the practice and process of handling cases with a Non-disclosure measure, and the monitoring of such. The Information Governance Officer has prepared materials to deliver learning sessions in at least one locality on Non-disclosure, using lessons learned from breaches (and following involvement of the ICO). This was due to be delivered in April, but has been postponed due to the current business continuity measures. The key messages and learning from the case sampling have been fed into the training materials. a. No audits were considered necessary in any area – Locality Reporter Managers report that discussions took place with individual members of staff in relation to their errors, and to ensure appropriate levels of understanding of the practice relating to the use of non-disclosure



		<p>c) Rule 16 – proper application of the test, and consistent removal when no longer appropriate</p> <p>d) Siblings link – this needs to happen in all relevant cases</p> <p>e) Process inconsistency – while we wait for a new system that will simplify processes, there needs to be improvement in compliance with the current processes.</p> <p>f) Data reports – these reports need to be more consistently used to correct any errors/anomalies</p>				<p>measures.</p> <p>b, c, d, e. Locality Reporter Managers fed back that practice sessions have taken place across their localities, with key messages reiterated about the requirement to comply with processes laid down in Practice Direction 4.</p> <p>c, f. Data reports are provided fortnightly with details of all children who have a non-disclosure provision, and any anomalies in the child record. All localities report that they have a process in place to address these and update records accordingly.</p>
Non-disclosure (Aug-19)	N2	The Head of Practice and Policy, in consultation with the Quality Assurance Manager, will assess these Locality responses and action plans on the basis of the evidence from the case sampling exercise before approval.	31/10/19	HPP	Complete - for closure	Head of Practice and Policy has reviewed and accepted all action plans provided by localities and is satisfied that there are appropriate measures in place to monitor the accurate application of Non-disclosure measures.

Non-disclosure (Aug-19)	N3	All 19 cases which contained an incompetent ND condition to be reviewed with the Hearing Reporter/Assistant Reporter to ensure understanding and application of the legislative requirements, and remedial action taken. This to be confirmed to the Head of Practice and Policy.	31/10/19	LRMs	Complete - for closure		This was completed in the relevant localities, and managers were asked to contact with the relevant social work manager in the local authorities. In every case remedial action was able to be progressed where required, which would ensure that the child's whereabouts could still be protected. This action involved: 1. Advice from practice team about the use of an alternative non-disclosure provision for the next hearing (where the ND measure in the order was rendered incompetent, the reporter was asked to apply rule 16 in advance of the next hearing, liaise with the social worker and provide a note to the hearing) 2. The Quality Assurance Manager included a case note of the issue and the remedial action that had been communicated to the LRM.
Decision Making (Nov-19)	DM1	To review the 16 cases in which the assessment was that the decision was not appropriate or justified and advise the HPP of the findings and to undertake any remedial work required	30/11/19	LRMs	Complete - for closure		No remedial work was required and there were no instances where the child was considered to be left unprotected or with inappropriate measures in place as a result of the decision made by the reporter. Feedback was provided to the individual reporters as required.
Decision Making (Nov-19)	DM2	Advise the CSAS training lead of the outcome of this exercise and to add key messages regarding recording onto the CSAS training materials	31/12/19	Practice Mgr	Complete - for closure		This has been reviewed. The CSAS training materials will include step by step processing and there will not be the opportunity for key messages to be included in the training materials. The key messages will require to be fed by local managers during implementation and will

							be incorporated into DM3 action below.
Role of Reporter (Nov-18)	R2	The Supervision Framework should be amended to include an expectation that observation of Reporters and Assistant Reporters in Hearings are carried out every two years.	01/01/19	SOMs/Head of HR	Complete - for closure subject to publication of revised document on Connect		The amendments from this action were agreed at the HR sub group on 26.04.19, but further amendments (relating to other matters) were to be finalised on 10.03.20, with SR framework published thereafter. The revisions to the Framework incorporate this action but awaits publication on Connect. NOTE: Observation of the reporter at the hearing was considered as a topic for the case sampling programme for 2020-22. It was not considered to be a priority in comparison to the selected topics. A review of the implementation of the 'expectation' will be undertaken during 2021, with the findings of this being fed into the development of the next case sampling programme.
Role of Reporter (Nov-18)	R3	Localities to provide practice sessions in relation to accurate completion of statutory forms, using materials prepared by the Practice Team in accordance with action N2 (Non-disclosure exercise, February 2018).	01/04/19	LRMs	Complete. For closure	31/05/19	This was completed in 7 localities by 24.04.19 and in the final two localities by 17.07.19.

Non-disclosure (Aug-19)	N5	Recording of Hearing decisions to be discussed at the next PQN in order to agree a suitable method of assessment of the effectiveness of the training sessions.	30/10/19	HPP	For closure - superseded by CSAS development		The new case management system will provide the opportunity for improvement in the recording of purposes and decisions of Hearings, as a pick list of standard purposes and decisions will be integrated into the system build. This will be supported by easy to follow reference materials developed by the Practice Team. It was noted that there will need to be some early quality control and monitoring of the reporter's interaction with the new case management system, and the changes to how the report of proceedings and statutory forms are completed by Reporters will need to feature in this, to ensure accuracy of drop down/pick list selection. On this basis the action is superseded by the CSAS development and should now be closed.
Appeals – August 2016	A4	Training course to be provided for locality reporter managers and senior practitioners on appeals.	01/03/17	Practice Manager	Incomplete	31/12/20	This remains on the work plan for the Practice Team. This action has been outstanding for three years now, and the need for this was reviewed when the 2020-22 case sampling programme was being developed in January, and by the Head of Practice and Policy and Senior Operational Managers on 12.02.20. The upcoming programme includes a desktop review of appeals where the reporter has not opposed the appeal. It was concluded that there is still a need to ensure managers are consistently applying the same principles when a decision is being taken to not oppose an appeal, and this action would be necessary to support consistent practice and to support the upcoming case sampling

							exercise. In light of the current business continuity arrangements, a revised date of 31.12.20 has been proposed by the Head of Practice and Policy
Non-disclosure (Aug-19)	N4	The ND operational processes are to be simplified to remove the requirement to record the same details in multiple locations. This to be achieved through the new CSAS development, and through the consistent use of Form 1.	30/06/20	Practice Manager	Not yet due	30/10/20	The business requirements for ND handling in the new system have been provided to the CSAS senior user in December 2018, and were reviewed at the Digital Programme User Engagement Session on 26th September 2018. Feedback from the Senior User is that there is a degree of auto-population and single input recording in the development, and a dedicated recording field for non-disclosure information, all of which should lead to an increased visibility and single source of information about non-disclosure. Accompanying operational processes to support the functionality in CSAS will require to be developed (with Practice Direction 4 revised accordingly)
Decision Making (Nov-19)	DM3	Locality case sampling on Reporter interaction with the decision making screens to be carried out after implementation of the new system, and to	Jun-Sep 20	LRMs	Not yet due	Jan - Mar 21	

		discuss outcomes at a future P+QN					
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SCOTTISH  
**CHILDREN'S REPORTER**  
ADMINISTRATION

**CASE SAMPLING PROGRAMME 2020-22**

**Accountable Director:** PRINCIPAL  
REPORTER/CHIEF  
EXECUTIVE

**Date:** 08 April 2020

**Report Author:** QUALITY ASSURANCE MANAGER

**Recommendation:**

- 1. To provide a steer on suspension of case sampling programme.**

**Reason for Report:** *EMT Approval*

**Resource Implications:** *Not applicable*

**Strategy:** *Within approved plans*

**Consultation:** *Head of Practice and Policy, Senior Operational Managers*

**Equalities Duties:** *None. Not required.*

**Document Classification:** *Not protectively marked*



## **1. Introduction**

- 1.1 The purpose of this report is to get a steer from EMT on suspension of the case sampling programme.

## **2. Background**

- 2.1 The February Audit and Risk Committee approved the [programme of case sampling for 2020-22](#).

## **3. Update**

- 3.1 At the February ARC it was highlighted that the ability to deliver the first exercise in the programme was dependent on implementation timescales of CSAS, with a likelihood that we would request a further quarter's suspension. In light of the current position we find ourselves in, and the impact this will have on the organisation throughout at least till the end of the year (backlogs and build-up of casework, and impact on implementation timescales for CSAS), we need to ask ARC to agree to suspend the case sampling programme.
- 3.2 The table attached shows the first four exercises in the programme. I recommend that we ask ARC to agree suspension of the programme by three quarters. This provides for a six month recovery period due to the impact of coronavirus on operational activity, and a further quarter to deal with the impact of CSAS implementation. I would rather we were realistic at this stage in moving the programme by three quarters rather than going back to the ARC each quarter.
- 3.3 EMT would require to provide a steer about any other QA activity of casework they wished to be undertaken if you are in agreement with my proposal.

## **6. Conclusion & Recommendation**

- 6.1 To decide on the recommendation to the May ARC.

Exercise	Timescale of activity	Issue	Recommendation
Drafting of grounds (f grounds)	Fieldwork approx. 10 Aug – 18 Sep 20  Reporting to ARC Nov 20	<ul style="list-style-type: none"> <li>• We will either still be home working or implementing recovery plans for casework (we are going to have a huge clash of expiry reviews later in the year)</li> <li>• Data will not be available – impact on casework activity due to coronavirus means no grounds are coming to hearings on a routine basis. Data would have been drawn from Apr – Jul 20</li> </ul>	Suspension – move by <b>three quarters</b> so this moves to where the exercise on not opposing appeals currently sits (fieldwork May – Jun 21, reporting to ARC Aug 21)
Offence referrals (jointly reported offences)	Fieldwork approx. 9 Nov – 18 Dec 20  Reporting to ARC Feb 21	<ul style="list-style-type: none"> <li>• As above</li> <li>• This exercise is dependent on CSAS being implemented and there being enough data available in CSAS to draw from for the exercise. Data would be drawn from Jul – Oct 20</li> </ul>	As above (fieldwork would be Jul/Aug 21, reporting to ARC Nov 21)
Application of change in CSAS to handling referrals (identifying appropriate ground at final decision stage)	Fieldwork approx. 1 Feb – 11 Mar 21  Reporting to ARC May 21	<ul style="list-style-type: none"> <li>• All of the above</li> </ul>	As above
Not opposing appeals	Fieldwork approx. 17 May – 25 Jun 21  Reporting to ARC Aug 21	<ul style="list-style-type: none"> <li>• Dependent on Gill having delivered training to LRMs/SPs (delivery model is locality by locality, in locality office)</li> </ul>	As above



## Strategic Risk Register November 2019

Risk No	Reference to SCRA Objectives	Risk Type	Risk Description	Risk Owner	Gross Risk Score L*I	Key mitigating controls	Control Effectiveness	Residual Risk Score L*I	Risk Appetite	Target Risk Score L*I	Actions and Timescales	Action Owner /Deadline
1.	BP 2016/17 Core Strategy 1 Sustaining & Developing Our Infrastructure Actions 1	Service Delivery / Information	IT Security measures are insufficient to prevent a successful cyber-attack on SCRA case information which results in loss of data which cannot be recovered.	Head of IT	16 (4*4)	<p>Being part of the SCOTS/ITECS environment which is responsible for safeguarding SG IT from cyber-attack reduces CMS's exposure as the only access to CMS is through the SCOTS environment.</p> <p>Scottish Government have achieved Cyber Essentials Plus certification for the SCOTS network.</p> <p>Annual Penetration testing and accreditation of CMS reduces the vulnerability of CMS to common cyber threats.</p> <p>By testing CMS disaster recovery procedures regularly and reviewing and testing SCRA business continuity plans annually gives assurance that SCRA is capable of recovering from a cyber security attack.</p> <p>Kept up-to date with new threats by attending cyber security events and professional membership – SCRA's Digital Governance Lead is a Certified Information Security Manager (CISM) and a member of the Cyber-security Information Sharing Partnership (CiSP)</p>	<p>Effective</p> <p>Effective</p> <p>Effective</p> <p>Effective</p>	9 (3*3)	Cautious to Minimalist	6 (3*2)	<p>To communicate to HO Managers and IG leads the need for all staff to complete the mandatory Cyber security eLearning course and to review progress with satisfying this requirement.</p> <p>On acting on advice from both OpenText (from their IT Health Check of CMS) and Microsoft we have been unable to successfully upgrade the ADTS servers and upgrading the BPI Servers poses a bigger risk to maintaining the stability of CMS. We have DR arrangements in place to take care of a situation where a Windows 2003 server fails, and this is considered a lesser risk than upsetting the stability of CMS by trying to replace the Windows 2003 servers with new servers that are incompatible with our version of Documentum.</p> <p>Our accreditor has challenged us previously on this issue and understands the risks associated with keeping business critical legacy systems running. SCRA have a new interim accreditation certificate for CMS and this is not been identified as an accreditation issue.</p>	<p>Digital Governance Lead/June 2019</p> <p>Digital Manager Jan 2019</p>
2.	BP 2019/20 Action 4.8.10	Financial/Service Delivery/ Reputational	SR2019 does not deliver level of resources required for medium term financial sustainability	Head of Finance & Resources	20 (5*4)	<p>Five year Financial Plan.</p> <p>Regular dialogue with Ministers and SG (DCAF, Sponsor Team, Finance Manager).</p>	<p>Effective</p> <p>Effective</p>	12 (4*3)	Cautious	4 (2*2)	<p>Update 5 year Financial Plan and present at June 19 Board.</p> <p>Submit forward budget figures to SG for 2019 Spending Review Commission by end Aug 19.</p> <p>Agree and develop additional SR2019 materials and submit to Ministers/SG.</p>	<p>Complete</p> <p>Complete</p> <p>November 2019</p> <p>March 2020</p>

Risk No	Reference to SCRA Objectives	Risk Type	Risk Description	Risk Owner	Gross Risk Score L*I	Key mitigating controls	Control Effectiveness	Residual Risk Score L*I	Risk Appetite	Target Risk Score L*I	Actions and Timescales	Action Owner /Deadline
											Maintain linkages between SR2019 process and 2020/21 Budget Planning process.	
<u>3.</u>	Digital Programme Masterplan	Financial/ Information/ Service Delivery/ Reputational	The optimum model for CSAS ownership and accountability and a joint future partnership between SCRA and CHS is not adequately defined and agreed.	Principal Reporter	16 (4*4)	Senior Team Workshops Digital Programme Director/Chief Executive meetings Digital Oversight Committee DDB/Programme Assurance Group	Effective Effective Effective Partly Effective	9 (3*3)	Cautious	4 (2*2)	Proposal to senior teams on CSAS ownership and accountability. Jun 19.  Legal advice on aspects of proposed approach to ownership and accountability. Dec 19.  Implement of SCRA's accountability arrangements for CSAS (Policy development, contract arrangements and appropriate staffing structure)  Negotiation with key licencing and software suppliers.  Develop Digital Strategy beyond 2020  Develop a decision making structure and governance arrangements	Digital Programme Director. Complete.  Head of Finance & Resources. Complete.  Head of Practice & Policy/Digital Programme Director  Digital Programme Director. Underway.  Head of Strategy & CHANC/CE  SCRA PR/CE & CHS NC/CD

