Response ID ANON-WMGK-44SF-Q

Submitted to The future of secure care and the single point of contact (SPOC) for victims in the Children's Hearings System
Submitted on 2026-03-17 14:04:18

Questions on secure accommodation criteria

Q1 Do you think the new criteria for authorising a child's placement in secure accommodation by a children's hearing are sufficient?

No

Please explain the reasons for your answer:

Whilst all 4 of the bullet points are appropriate rationales, the language is not trauma informed. We believe this new legislation could positively set an example of using plain English and non-stigmatising compassionate language. For example, 'run away' rather than 'abscond'; hurt 'themself/themselves' instead of 'engage in self-harming'; 'in need of care and protection and to prevent the risk of harm to others' rather than 'to cause physical or psychological harm to another person'.

A child may also need secure care and protection because they are, or believe that they are, at risk of harm from others and their protection cannot be guaranteed in any other type of care provision/setting. Also, in circumstances such as those considered in Question 2.

Q2 Should the criteria for secure care be revised to include children who, while not posing an immediate risk to others, may still require intensive secure, or near secure, support, protection from self-harm, or stability in near-secure residential provision, including on premises currently registered and approved to deliver secure care?

Yes

Please explain the reasons for your answer:

As in Question 1 above and Question 3 below - again, we believe it would be preferable to re-consider language use to ensure it is trauma informed and does not infer (unintentional or intentional) blame on the child (remembering that the child involved is very likely to have experienced significant trauma in their own life experience and their behaviours have developed as a form of survival, self-protection and communication of their individual care needs). For example: omit 'while not posing an immediate risk to others'.

Q3 Are there any factors or circumstances you think should be considered in potential future secure care criteria?

Please set out your suggestions below:

We agree with all of the suggested criteria above. Again, we suggest the opportunity is taken to re-consider language where possible, some potential examples/alternatives are offered below:
• Persistent, severe distress requiring a high degree of 'trauma informed care and protection'
• Repeated 'planned or unplanned care endings' due to 'significant individual care and protection needs resulting from the impact of complex life trauma' rather than 'complexity of needs.'
• Risk of harm arising from behaviour that does not fall under self-harm or to prevent the risk of harm to others.
• Situations where intensive support is required for safety and protection.

Questions on secure accommodation definition

Q4 Do you agree the definitions of relevant children's care services should be reviewed to include a new category of provision with adaptable levels of restriction which can be increased or decreased as required to contemplate necessary shifts between restriction of liberty to deprivation of liberty within the one setting, in the way envisioned by 'flex secure'?

Yes

Please explain reasons for your answer and any situations where you think 'flex secure' could be used:

We believe that it would be child-centred and trauma-informed to be able to offer levels of care and protection that are flexible to meet the individual safety needs of each child, integrated into a personalised care plan that recognises and enables personal recovery.

Q5 How could a model with adaptable levels of restriction within the one setting help protect and advance children's rights and ensure deprivation of liberty is always a last resort and for the shortest possible time, as required by Article 37 of the UNCRC and in accordance with Article 5 ECHR?

Please explain the reasons for your answer:

A model with adaptable levels of restriction within one setting could provide a more proportionate, child□centred, and rights□respecting approach. It could provide more safeguards around a deprivation of liberty and is used only, when necessary, for the shortest possible time, and within a therapeutic environment that prioritises safety, participation, and wellbeing. If applied correctly, the approach would be fully aligned with the requirements of Article 37 UNCRC and Article 5 ECHR.

Questions on models proposed in the 'Reimagining Secure Care' report

Q6 Do you support the concept of community-based hubs?

Yes

Please explain the reasons for your answer:

We know that children benefit from remaining within their local communities where possible, and that delays with access to factors like mental health support can exacerbate difficulties for families. Resourced correctly, community-based hubs would help to alleviate some of these issues.

Q7 Do you support the wider adoption of the concept of multi-disciplinary teams?

Yes

Please explain the reasons for your answer:

We know from previous research that gaps in provision are a concern for young people, and can result in their care and support needs not being fully met. The multi-disciplinary teams proposed may help to alleviate this.

It would also be helpful to emphasise the essential component of ensuring that the support is shaped, offered and experienced as trauma informed and trauma responsive. The Bairns' Hoose is a useful model to emulate.

Questions on mental health provision

Q8 What further actions could be taken to integrate secure care and mental health services?

Please explain the reasons for your answer:

CAMHS link workers for secure settings may support with maintaining consistency and easy access.

It may be useful to consider the experiences, learning and positive impact of the Bairns' Hoose model currently being implemented in areas across Scotland.

Q9 How can these systems work together to ensure that children and young people - both within secure settings and those on the edge of admission - receive trauma-informed, holistic support that prioritises wellbeing alongside safety?

Please explain the reasons for your answer:

A link worker from CAMHS for each secure setting could support continuity of care and relationship building with the team and young people. It would also be beneficial for a pathway into CAMHS for young people not 'in the system' so they can access assessment and support to try and prevent crisis and the need for secure care - similar to the pathway for care experienced young people who do not need to join the main waiting list, but have a fast track system based on the need and preventative support.

This would support GIRFEC whilst also being proactive to try and prevent young people entering secure care by quick, effective and coordinated early interventions thus preventing crisis, rather than being reactive and waiting until they are at the point of moving into secure accommodation.

It would be helpful to ensure that children have access to advocacy services in a way that enables them to have consistent relationships with advocacy workers throughout their pathway.

Young people should also be enabled, as far as possible, to sustain relationships with trusted family members, adults, friends, and pets in their lives to support them throughout their experience in care settings.

Q10 What improvements in information sharing across services are needed to ensure we fully understand and meet the health and wellbeing needs of children and young people?

Please explain the reasons for your answer:

Shared systems for the multi-disciplinary team supporting the child or young person may reduce the potential for them having to reshare their story and any associated retraumatisation. This would also allow for a joined up mental health plan and approach for all members of the multi-disciplinary team to follow when there are specific risks such as self injurious behaviours and suicide ideation. A passport may be beneficial (idea from maternity) that would follow the journey and allow everyone including the young person and family to be involved in their care which can support with reducing anxiety in these times.

It should be ensured that children have access to consistent independent advocacy and support for their individualised communication needs. Alongside this, it must be ensured that there are feedback loops in place around their views being heard, included and recorded, and decisions and rationales about their care being fully discussed with and explained to them.

There may be learning from 'Better records together' that would be useful to consider.

Questions on prevention, alternatives, community based support and transitions

Q11 In your experience, which alternative care and support options are currently most effective in preventing the need for secure care placements, particularly on welfare grounds?

Please explain the reasons for your answer:

Those which work in ways that are trauma-informed and rights based, where staff spend time listening to children and shaping care plans and day to day experiences that meet their individualised needs and enable their recovery. We know how important relational practice is, and often it is the relationship with one particular individual that makes all the difference. A setting which lawfully allows for restrictions to be adjusted depending on the individual young person's risks would better prepare young people for life in a community setting; support continuity of relationships; and mitigate against some of the concerns about readmission rates into secure.

Q12 Where alternatives to secure care are available, what factors most strongly influence whether they are used in practice (for example, workforce confidence, secure care placement availability, commissioning arrangements, risk)?

Please explain the reasons for your answer:

Availability of places and cost are likely the main factors, however we know there are concerns about workforce resources, including relevant training and opportunities, within the current staffing crisis experienced by social care.

Q13 What gaps currently exist in the availability of alternatives to secure care across Scotland?

Please explain the reasons for your answer:

There is currently no care service category for this in Schedule 12 to the Public Services Reform (Scotland) Act 2010 meaning existing 'close support' services have to register as either care homes or school care – neither of these options allows them to lawfully deprive young people of their liberty (if this was, on occasion, required for the child's safety). As Schedule 12 is currently under review, we believe this is a good opportunity to make this change.

Q14 How can learning from local authority practice approaches to alternatives be shared and scaled across Scotland?

Please explain the reasons for your answer:

By amplifying and sharing examples of best practice to affirm and encourage the workforce.

Leaders and workforces should be supported through training, professional development, and reflective support opportunities, with investment in staff care, terms and conditions, and holistic resources.

Q15 Is there scope for sharing and pooling of resources to support specialist alternatives to secure care on a multi-authority basis?

Please explain the reasons for your answer:

Not answered.

Q16 What role should health, education, and justice services play in supporting children with complex needs?

Please explain the reasons for your answer:

Health, education, and justice services should aim to work together to explore and enable ways to ensure joined up communication channels for holistic, rights-based decision making, care planning, and delivery; with effective review mechanisms that include the child and assess impact and outcomes.

Q17 How can we measure the effectiveness of community-based supports in meeting the needs of children and young people?

Please explain the reasons for your answer:

Our grading of services offers an indicator of how well they are doing in meeting the needs of children and young people. We know that in recent years the average grading of community-based care services (e.g. care homes) for children and young people has increased, despite the very real resourcing challenges faced by the sector.

Q18 What support should be in place to ensure successful transitions, including to Young Offenders' Institutions, and reintegration for children and young people leaving secure care into their communities, including as they transition into adulthood and more independent living?

Please explain the reasons for your answer:

As detailed above, flexible levels of restriction are beneficial in order that young people do not experience a 'drop off' when they transition to a community setting.

The significance of maintaining important relationships, where possible, should be recognised as relevant for all young people.

Young people should be provided with accessible information, including visits, prior to the move so that they are as informed as they can be.

Questions on national co-ordination of secure care placements

Q19 How can we improve access to secure accommodation placements to ensure that children who cannot legally be placed elsewhere (e.g. those remanded or sentenced by the courts) are always accommodated appropriately?

Please explain the reasons for your answer:

The primary factor here is ensuring availability of beds, so that we do not experience a situation where there are none available for a young person.

Q20 Do you agree there should be nationally-funded facilities whereby there is guaranteed access to fulfil court orders and do you think that would be sufficient to build confidence in decision makers?

Yes

Please explain the reasons for your answer:

Yes, there should be nationally-funded facilities but whether or not that will be sufficient to build confidence depends on the quality of care provided and the extent to which children's needs are effectively met and their rights realised.

Q21 Do you agree Scotland should introduce a single national system for co-ordinating secure care placements for children?

Yes

Please add your comments in the box below:

It should give consideration to location, peer groups, and specialisms of individual services – to ensure compatibility of admissions and that young people's needs can be appropriately met.

Please add your comments in the box below:

No.

Please add your comments in the box below:

All children's support needs should be given consideration on an individual basis.

Q22 When creating a new national system to coordinate secure care placements for children, which type of model do you think Scotland should look at and take ideas from?

Please explain the reasons for your answer:

We would suggest it would be beneficial to start with children's holistic needs and build it from, there ensuring that their 'voice' is part of the design. There must be a range of options to best meet individual needs.

Q23 Beyond the specific models referenced in this section, please share any other proposals or comments you have in relation to national co-ordination.

Please explain the reasons for your answer:

Not answered.

Questions on national co-ordination and secure care placement allocation

Q24 If Scotland were to establish a Multi-Agency Panel to make decisions about secure care placements, similar to Northern Ireland's model, which professionals do you think should be part of that panel? Do you also think that care experience should be represented on the panel?

Please explain the reasons for your answer:

Similar to Northern Ireland's Multi-Agency Panel – this should include professionals from across health and social care, health boards, education and justice. Given the increasing numbers of neurodivergent children, and those with speech, language and communication needs experiencing secure care, the panel should also include professionals with these areas of expertise e.g. LD CAMHS, SLT etc.

Care experience voice should be included alongwith the voice of families. Note that this should not be mere 'representation', but equal involvement through an advisory 'expert by experience' voice.

Questions on the nationalisation of secure care

Q25 Do you support the concept of the wholesale nationalisation of secure care provision in Scotland so it is run as a national service in the future?

Yes

Please explain the reasons for your answer:

This may support consistency of provision. We know the inconsistencies across the sector have been a concern for some young people, and reduce the benefits of experiential knowledge.

Questions on potential secure care funding reform

Q26 In the short-medium term, do you agree Scotland should move away from 'spot purchasing' by local authorities or the Scottish Government as the main way secure placements are funded and services are supported to remain sustainable and supported to plan for improvements and modernisation?

Yes

Please explain the reasons for your answer:

Whatever funding model is agreed, services should be supported to remain sustainable and supported to plan for improvements and modernisation.

Q27 Which funding model (or combination of models) would best support the sustainability and equitable use of secure care in Scotland, and why?

Please explain the reasons for your answer:

Not answered.

Q28 How can Scotland make sure that any new approach – whether national, local or mixed – guarantees equity of access for all children?

Please explain the reasons for your answer:

All children's support needs should be given consideration on an individual basis. Given the increasing numbers of neurodivergent children experiencing secure care, any new approach should give specific consideration to their needs.

Questions on secure care transport standards

Q29 Based on the areas expected to be covered in the standards, as referred to above, do these fit with your expectations?

Yes

Please add your comments in the box below:

Questions on the Single Point of Contact for victims

Q30 How should the SPOC service interact with other possible support routes for victims and what kind of specialist training do you think staff need to work effectively in this service?

Please explain the reasons for your answer:

We would suggest that staff must all be skilled, trauma informed, and responsive practitioners across all roles; from frontline to specialist.

Q31 How should the SPOC service interact with other organisations within the sector and what features should it include to make it accessible, age-appropriate and trauma-informed?

Please explain the reasons for your answer :

Key points to consider would be staff knowledge, skills and expertise; a range of augmentative and alternative communication tools; and accessible environments.

Q32 Do you agree that the support services that may be provided should extend to signposting victims and their families to counselling and other support and advice services?

Yes

Please explain the reasons for your answer:

A holistic approach to supporting young people and their families in this way would be of benefit.

Q33 Do you agree that the SPOC service should be resourced to commission and to offer those services to victims?

Yes

Please explain the reasons for your answer:

A holistic approach to supporting young people and their families in this way would be of benefit.

Q34 If a SPOC delivery model encompassed trained staff, with some aspects potentially delivered by volunteers, what do you think would be the benefits of this approach and do you have any views on the priority training and qualifications of SPOC personnel providing support services?

Please explain the reasons for your answer:

They must all be skilled trauma informed and responsive practitioners across all roles, from frontline to specialist.

Q35 In order to provide support and explanation to victims whose cases are not disposed of by a Children's Reporter or children's hearing decision, do you agree that the SPOC service should be able to access information from others, including the chief constable of the Police Service of Scotland and local authorities, where cases are dealt with by diversionary measures like Early and Effective Intervention?

Yes

Please explain the reasons for your answer:

Effective information sharing such as this may support a coordinated approach which feels more accessible for people.

Questions on assessing impact

Q36 What, if any, do you see as the data protection related issues that you feel could arise from the proposals set out in this consultation?

The following data protection issues may arise from the proposals set out in this consultation :

There may be data protection related issues in the sharing of information proposed, and the implications of this should be robustly explored.

Q37 What, if any, do you see as the children's rights and wellbeing issues that you feel could arise from the proposals set out in this consultation?

The following children's rights and wellbeing issues may arise from the proposals set out in this consultation :

As noted above, all children's support needs should be given consideration on an individual basis. Given the increasing numbers of neurodivergent children, and those with speech, language and communication needs experiencing secure care, any new approach should give specific consideration to their needs.

Q38 What, if any, do you see as the main equality related issues that you feel could arise from the proposals set out in this consultation?

The main equality related issues which may arise from the proposals set out in this consultation are :

As noted above, all children's support needs should be given consideration on an individual basis. Given the increasing numbers of neurodivergent children, and those with speech, language and communication needs experiencing secure care, any new approach should give specific consideration to their needs.

Any other comments

Q39 Please share any other views you have about this consultation, or any other issues you feel it raises.

Please share any other views you have about this consultation and/or any other issues it raises:

As Scotland works towards delivering the promise, it is essential that children in need of the state's care and protection receive support in the most appropriate setting for their needs. While secure care provides intensive, restrictive support for those who require it, the Independent Care Review set out a vision for delivering high levels of care out with the secure estate - allowing more children to be kept safe and supported within their own communities. It is important the promise's research and perspectives on supporting the Reimagining Secure Care report are included in this consultation: https://thepromise.scot/policy/position-secure-care/

About you

What is your name?

Name:
Care Inspectorate

Are you responding as an individual or an organisation?

Organisation

What is your organisation?

Organisation:
Care Inspectorate

Further information about your organisation's response

Please add any additional context:

The Scottish Government would like your permission to publish your consultation response. Please indicate your publishing preference:

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Yes

What is your email address?

Email:
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Where did you hear about this consultation?

Consultation newsletter

If other, please say where::