

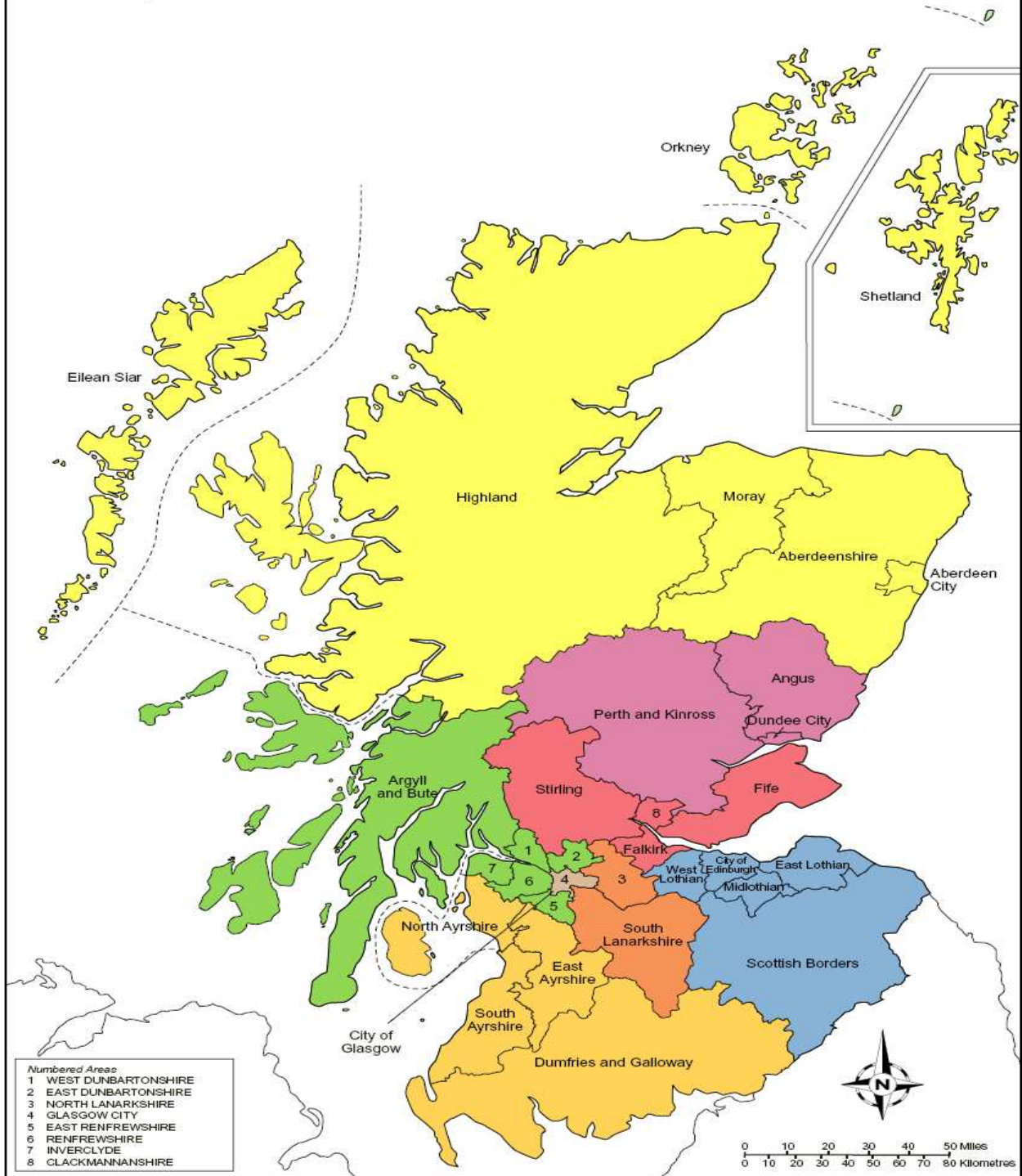
PROTECTING THE PUBLIC

**LOTHIAN AND THE SCOTTISH BORDERS
MULTI-AGENCY PUBLIC PROTECTION ARRANGEMENTS
ANNUAL REPORT
2008-2009**

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Community Justice Authorities



The blue shaded area covers Lothian and Borders.

Section 1 - Introduction

1.1 The Management of Offenders etc (Scotland) Act 2005 introduced a framework for formal multi-agency working to ensure the efficient management of specific offenders in the community, requiring relevant agencies (the responsible authorities), to establish joint arrangements for the assessment and management of risk in relation to particular categories of offenders deemed to pose a risk to the public. The designated responsible authorities are required to keep arrangements under review and to publish an annual report - this is the 2nd annual report.

1.2 The introduction of Multi-agency Public Protection Arrangements (MAPPA) across Scotland in April 2007 introduced a consistent approach to the management of certain categories of offender across all local authority and police force areas, thereby providing a framework for assessing and managing these offenders. The fundamental purpose of MAPPA is to promote public safety and minimise the risk, of both harm and offending, posed by those offenders managed under MAPPA.

1.3 In Scotland the implementation of MAPPA has been phased and currently includes Registered Sex Offenders and restricted patients. Work is ongoing at a national level, which will extend these arrangements to include the management of violent offenders. At present the vast majority of offenders supervised under MAPPA are sex offenders.

1.4 Sexual offending involves a wide range of crimes, including rape, sexual assault, sexual activity with someone under the legal age of consent, internet offending, child sexual abuse and public indecency.

1.5 There are a number of misunderstandings around the subject of sex offending and sex offenders. Not all sex offenders are paedophiles, as not all sexual offending is committed against children. Sex offenders are not usually strangers; the vast majority, of sexual offending is committed by people known to their victim whether a family member, friend or acquaintance. Sex offenders can be male or female, married or single, parents or childless, and from a range of cultural backgrounds.

1.6 Not all sex offenders are alike. Some are highly resistant to change and fully intend to re-offend, while others have regrets about their crime and benefit from the support provided to help them avoid further offending. MAPPA framework takes into account such differences in the planning of individual offender supervision. Unfortunately, there will always be individuals who manage to re-offend, despite the presence of supervision arrangements. MAPPA are intended to minimise this risk but, in reality, it can never be entirely removed.

1.7 Sexual offences cause considerable anxiety, and although re-offending rates are very low the public are understandably concerned about sex offenders and the risk they may present. Managing the risks posed by sexual offenders within the community is a complex task cutting across the organisational boundaries of local authorities, police, prisons, housing and health services. It is recognised that members of the public are one of our most important partners. Therefore it is vital they are aware of their responsibility to protect vulnerable members of the community and have the confidence to report any concerns.

1.8 Public expectations in the field of public protection have never been higher and it is right that the responsible authorities are held accountable for decision making in this area. Communities in the Lothian and Borders Community Justice

Authority (CJA) area can be confident that the public protection arrangements in the five local authority areas are to a high standard and that there is good evidence of inter-agency working, following the national guidelines.

Section 2 – National picture in Scotland

2.1 What is MAPPA?

- The Management of Offenders etc (Scotland) Act 2005 places a duty on the police, local authorities, and the prison and health services (the responsible authorities), to establish joint arrangements for the assessment and management of risk posed by certain offenders.
- The agreed structure to deliver these joint arrangements is MAPPA.
- MAPPA has been developed for Scotland, based on identified best practice, and is designed to manage the risk posed by certain sexual and violent offenders.
- A number of other agencies are under a duty to co-operate with the responsible authorities within MAPPA.

2.2 How does MAPPA work?

- Offenders eligible for MAPPA are identified and information is gathered/shared about them across relevant agencies. The nature and level of risk of harm an individual poses is assessed, and a risk management plan is implemented to protect the public. A local strategic group oversees the arrangements with representation from all the responsible authorities.
- In most cases, the offender will be managed under the ordinary arrangements applied by the agency with supervisory responsibility. A number of offenders, though, require active multi-agency management and their risk management plans will be agreed through MAPPA meetings.
- Every CJA area in Scotland is supported by at least one MAPPA co-ordinator, which is a senior post and has the responsibility of negotiating with senior managers in the responsible authorities to ensure the correct decisions and referrals are being made. They also have quality assurance duties amongst many other critical functions within the process.

2.3 Which offenders are included within MAPPA?

- In Scotland, implementation of MAPPA arrangements has been phased. During the first year, Registered Sex Offenders were included and this second year saw the inclusion of restricted patients.

2.4 National Developments

- National oversight of MAPPA is through the Tripartite Group, which is chaired by the Scottish Government and has representation from all the responsible authorities.
- Work is ongoing to agree the operational detail of including violent and other dangerous offenders, although it should be noted that such people

are already managed by the responsible authorities within their existing individual statutory responsibilities.

- The revision of MAPPA guidance is in progress and will include additional information on critical incident review, quality assurance and strategic governance.
- Linked to the National Accommodation Strategy for Sex Offenders (NASSO), each area now has Sex Offender Liaison Officers (SOLO) for housing. These posts will engage with MAPPA and will enhance existing information sharing processes.

2.5 Further Information

- Public information leaflets and further detailed information about MAPPA and related matters can be found on the Scottish Government website

<http://www.scotland.gov.uk/Topics/Justice/public-safety/offender-management/protection>

Section 3 - Area summary

3.1 The area covered by Lothian and Borders CJA incorporates the City Of Edinburgh, East Lothian, Midlothian, West Lothian and the Scottish Borders, encompassing a rich mixture of urban and rural areas. The population of Lothian and Borders CJA area is estimated at 930,250, currently 18% of the population of Scotland with: 471,650 residents in the City of Edinburgh; 96,100 in East Lothian; 80,560 in Midlothian; 169,510 in West Lothian; and 112,430 residents in the Scottish Borders. *(Population statistics sourced from General Register of Scotland 2008)*

3.2 responsible authorities represented are:

- City of Edinburgh Council
- East Lothian Council
- Midlothian Council
- West Lothian Council
- Scottish Borders Council
- Lothian and Borders Police
- Scottish Prison Service
- NHS Lothian
- NHS Borders

3.3 Prior to the implementation of MAPPA, all agencies across Lothian and Borders CJA area endeavoured to share key information, which allowed them to assess and manage those persons likely to pose a risk of serious harm to the public. This business was conducted through multi-agency meetings and formal and informal information sharing.

3.5 Since the establishment of MAPPA an operational group has been established with representatives from each of the five local authorities, health service, and Lothian and Borders Police. Over the last year, the operational group has been responsible for developing best practice, and is committed to strengthening MAPPA arrangements, and ensuring robust performance management is in place.

3.6 There has been a rolling programme of events across the CJA to raise awareness of, and continue development of, MAPPA process. This has included

training for MAPPA panel chairs; input to wider council staff groups on MAPPA; and a series of business meetings.

3.7 Each local authority has a Chief Officer's Group (COG) or Critical Services Oversight Group (CSOG), responsible for the strategic governance of child, adult and public protection within their area. The key strategic leaders of this group are the Chief Executive, Police Divisional Commander and Clinical Director of Health.

3.8 The City of Edinburgh and West Lothian Council have formed quality assurance subgroups from their public protection committees, ensuring that MAPPA is subject to on-going review. Scottish Borders Council are in the process of forming a public protection committee, while East Lothian and Midlothian Councils are making joint plans to quality assure their public protection processes.

3.9 MAPPA process recognises that intervention geared towards breaking patterns of offending and the external control of monitoring offenders' behaviour are both key to the management of risk.

3.10 The joint training and working that has taken place in the last year acknowledges the central importance of the need for a consistent approach to risk assessment.

Section 4 - Roles and responsibilities

4.1 The responsible authorities for each area are required to involve other key agencies in the management of offenders. This is an important part of MAPPA involving the exchange of information and drawing on the collective knowledge and expertise of numerous agencies. The roles and responsibilities in relation to MAPPA in Lothian and Borders area are outlined below:

4.2 **Lothian and Borders Police** is responsible for the enforcement of the notification requirements of the Sexual Offences Act 2003 (sex offender registration), and policing activities including risk assessment, preventative monitoring strategies coupled with investigation and prosecution of any Registered Sex Offender who re-offends. Police statutory responsibilities include: maintaining an accurate record of those in the Force area subject to the notification requirements; to initiate enquiries where such persons fail to comply with the requirements placed upon them; and to manage sex offenders whose current behaviour is of concern. The police are the lead responsible authority for those community based Registered Sex Offenders who are not subject to any other form of statutory supervision. From a policing perspective, MAPPA implementation has positively supported policing activities through the reciprocal duty for all agencies to share information.

4.3 **The local authority** is the responsible authority for Registered Sex Offenders who are subject to statutory supervision. Criminal Justice Social Work (CJSW) is responsible for the statutory supervision of such offenders, but housing, social care and children and families services also play a key role in the management of sex offenders in the community.

4.4 A prime objective of CJSW is to contribute to public protection by supervising and managing high risk offenders. MAPPA process plays a key part in this management with regard to Registered Sex Offenders.

4.5 Criminal Justice Social Workers have responsibilities relating to the supervision of offenders on probation and released prisoners subject to statutory supervision. Criminal Justice Social Workers are required to use approved risk assessment tools and, in collaboration with other agencies, to develop plans for the risk management and supervision of offenders. Criminal Justice Social Workers can request that additional conditions be placed on orders and licences by the courts and parole board. These conditions can range from restrictions relating to accommodation and employment, to instructions to avoid certain areas or victims or to attend for counselling or treatment programmes. These conditions allow the social workers to monitor and control aspects of offenders' behaviour as breaches of conditions can lead to the court or parole board being informed, which might in turn result in the offender being admitted to custody.

4.6 Each local authority within Lothian and the Borders has a Sex Offender Liaison Officer, line managed by CJSW, who acts as a single point of contact for information relating to both registered and unregistered sex offenders. They have responsibility for: chairing risk management case conferences; liaising with other agencies as appropriate; and addressing issues relating to disclosure in conjunction with the police.

4.7 **Housing agencies** under a duty to co-operate are local authority housing services and providers and Registered Social Landlords. Their role is to contribute to the responsible authorities' management of risk through:

- co-operating with the responsible authorities by providing accommodation
- liaising with the responsible authorities regarding the ongoing management and monitoring of the risk of the offender as a tenant, including any tenancy moves or evictions
- having regard to community safety and having in place exit strategies where a property is no longer suitable and/or the offender's safety is at risk.

4.8 The local authority is responsible for ensuring the development of a strategic response to the housing of sex offenders. However, in any local authority area there is likely to be a multiplicity of housing providers, and local authorities must involve and consult Registered Social Landlords (RSL) in their area when developing their strategic response. This should include an assessment of local need and provision for the range of accommodation for sex offenders and should clarify the contribution by RSL in their area.

4.9 It is the responsibility of the local authority to provide an initial single point of contact for accommodation requests from other responsible authorities. This single point of contact is the housing SOLO, who will provide strategic co-ordination in relation to housing sex offenders within any local authority area. The SOLO role involves:

- identifying the most appropriate housing provider following the risk assessment carried out by the responsible authorities
- ensuring that when an appropriate housing provider has been identified, they are included by the responsible authorities in liaison arrangements relevant to the identification of appropriate housing and the management of risk
- liaising pro-actively with responsible authorities and housing providers regarding ongoing risk management and community safety issues

4.10 **The National Accommodation Strategy for Sex Offenders in Scotland (NASSO)** has clearly enhanced the arrangements, when housing registered sex

offenders. This strategy allows for the early identification of suitable accommodation for prisoners prior to release, which takes into account their victims' whereabouts and reduces the risk to future victims.

4.11 For all prisoners, the Scottish Prison Service (SPS) is responsible for carrying out risk and needs assessments to assist in determining the management of the prisoner during sentence and in preparation for pre-release planning and release. SPS is also responsible for pro-active joint working with the CJSW supervising officer during sentence and in preparation for release. This process of sentence planning is referred to as Integrated Case Management (ICM). A key objective of ICM is to ensure that, along with police and CJSW, SPS meets statutory requirements to establish joint arrangements for assessing and managing the risk posed by sex offenders, including the sharing of information.

4.12 Electronic monitoring service providers are included in the duty to co-operate, in acknowledgement of the important service they can provide as part of a high risk management plan. Currently the Scottish Government contract for the provision of electronic monitoring in Scotland is with SERCO Ltd.

4.13 SERCO's duty to co-operate is to be understood as being synonymous with their contractual responsibilities. In practical terms this may involve them:

- providing a point of contact for advice to the responsible authorities on the available technology, explaining what it can and cannot do; and
- attendance by a member of the SERCO Ltd management team at MAPPAs or MAPPP meetings when the circumstances of a particular case deem it appropriate for them to do so.

4.14 It is recognised that electronic monitoring can support an offender's supervision package by making it more robust. SERCO Ltd must ensure that appropriate protocols are put in place to share information about MAPPAs offenders. These protocols will shape communication with partner agencies and ensure that information on any failure by the offender to comply will be passed to appropriate agencies within an agreed timescale.

4.15 NHS Lothian and NHS Borders have a duty to co-operate with other agencies in all cases subject to MAPPAs. Representatives from mental health services, either attend MAPPAs meetings, or, where they cannot attend, act as points of contact. Where individuals subject to MAPPAs are currently patients of mental health services in NHS Lothian or NHS Borders, appropriate information is shared with other agencies and steps are taken to ensure that staff from mental health services are working with other relevant agencies. Where an offender has had previous contact with mental health services then appropriate background information is accessed, and necessary information to help manage risk is shared with the other agencies involved. Information sharing in such cases is always done in accordance with relevant legislation, common law and guidance. Information is shared where it is necessary and legal to do so.

4.16 Where it appears that an individual subject to MAPPAs may pose a risk towards other patients or staff within the NHS, then such information is passed on to the relevant clinical service so appropriate steps can be taken to minimise the risk to others. This is unnecessary in the case of most individuals subject to MAPPAs as in most cases there is no specific risk to staff or other patients. However, where there is such a risk it is important that this is managed appropriately. Information shared with NHS Lothian or NHS Borders through MAPPAs is transmitted and stored in accordance with the Government Protective Marking Scheme (GPMS).

4.17 A senior clinician from the forensic mental health service and the senior practitioner from public health attend MAPPAs level 3 Meetings. For NHS Borders the Director of Public Health attends MAPPAs level 3 meetings. At Borders MAPPAs level 2, representation is by a community psychiatric nurse and a lead nurse. It is not always possible for NHS representatives to attend every MAPPAs meeting, but where attendance is not possible, relevant information is accessed and shared, and NHS representatives are always available as points of contact for other agencies.

4.18 **SACRO (Scottish Association for the Care and Resettlement of Offenders, Safeguarding Communities – Reducing Offending)** services have had involvement with MAPPAs across Lothian and Borders. Principally this has been through the provision of Intensive Support and Monitoring Services, (ISMS), but also through the supported accommodation and throughcare services.

4.19 SACRO services include:

Intensive Support and Monitoring Service, the funding of which must be specifically approved by the Scottish Government, has been used in relation to a small number of high risk offenders assessed as requiring the highest level of monitoring in the interests of public safety. SACRO has provided staff to directly monitor those offenders, as part of a risk management plan agreed by MAPPAs level 3 meetings.

SACRO provides supported accommodation, which can be accessed by MAPPAs, for those offenders who have no permanent accommodation and require a level of support and monitoring as part of their risk management plan.

Offenders who are not subject to statutory supervision are eligible for SACRO's voluntary throughcare service, which provides assistance with matters such as employment, benefits, and addressing alcohol and drug-related issues.

4.20 **The purpose of the duty to co-operate** is to help strengthen MAPPAs. The principal responsibility for protecting the public from sexual offenders rests with the responsible authorities. However, the effectiveness of public protection often depends on more than just a criminal justice response. It is well known that other agencies play an important role in helping offenders to resettle and avoid re-offending. Re-offending among offenders who have stable accommodation on release from custody is similarly lower than for those without. The important contribution other agencies can make is also highlighted in cases where offenders have mental health problems, or where they pose a risk of harm to children.

4.21 While specific remits for respective agencies involved in MAPPAs are different, a formal means of co-operation is required when their responsibilities and expertise cover some of the same ground. In the absence of effective co-operation there is the risk of either gaps in arrangements or overlap. Placing that co-operation on a statutory basis, via MAPPAs, ensures the "duty to cooperate" is reciprocal and requires all agencies to work with each other in assessing and managing the risks posed by MAPPAs offenders.

4.22 Throughout the reporting year the responsible authorities have worked toward agreeing a pan Lothian and Borders Memorandum of Understanding (MOU) for information sharing within MAPPAs. The final version has now been agreed but falls outwith the reporting year and will be detailed in the 2009-2011 annual report.

4.23 The City of Edinburgh Council, Lothian and Borders Police, NHS Lothian, Scottish Children's Reporter Administration, the Scottish Prison Service and MAPPA Co-ordination Unit established an Offender Management Committee in June 2008. The Committee, is linked through membership to the Edinburgh Child Protection and Adult Protection Committees, and has responsibility for overseeing service provision in relation to offenders, presented a business plan (October 2008) which addresses:

- the establishment of staff guidance/roles and responsibilities document for Edinburgh.
- consistent application of management arrangements for MAPPA level 1 cases.
- establishment of comprehensive policies and procedures for the management of high risk offenders in Edinburgh.
- plans to develop consistent arrangements, with other responsible authorities in Lothian and Borders, for sharing knowledge, and disseminating best practice.
- the establishment of a quality Assurance subgroup which reports, as part of its work, on a range of MAPPA processes.
- The establishment of a Significant Incident Review Protocol.

4.24 A MAPPA committee has been operating in West Lothian since Autumn 2008. This is a multi-agency group with representation from the responsible authorities and other related areas including adult protection, child protection and MAPPA co-ordinator. The committee contributes to the development of strategic planning of MAPPA and risk management strategies by promoting a multi-agency response to the management of sexual and violent offenders in the community who pose risk of harm, promoting public safety and protection of victims. To date the committee has developed:

- Significant incident review procedure
- West Lothian MAPPA guidance
- West Lothian information sharing procedure
- Transfer of sexual offenders procedure

4.25 Scottish Borders established a MAPPA committee, which convened in Summer 2009, to ensure good governance, accountability and strategic development of the local procedures.

4.26 Midlothian and East Lothian Councils have established a Joint Critical Services Oversight Group (JCSOG) which receives reports on MAPPA activity. Information on MAPPA is also provided to the Midlothian Community Safety Partnership for their interest. Notwithstanding, a proposal to establish a joint Mid and East Lothian panel to provide strategic oversight of MAPPA, similar in structure to child and adult protection committees, will be considered by the JCSOG. This would be consistent with the developing joint public protection arrangements for Mid and East Lothian.

Section 5 - The operation of MAPPA

5.1 In Lothian and the Scottish Borders area, the management of MAPPA is structured by a central co-ordination unit with local supervision of the Registered Sex Offenders and restricted patients.

5.2 In the Scottish Borders the police offender management unit and criminal justice social workers are co-located to facilitate information sharing and multi-agency working. This has been supported and funded through the CJA.

5.3 Within the City of Edinburgh, the police offender management unit is co-located with the CJSW, Sexual Offender Liaison Office (SOLO). The SOLO acts as the conduit for the effective sharing of information between the police and the social work offices within the city. These units are based within Operation Amethyst, where a wider engagement exists with the co-location of the police Public Protection Unit, children and families services and NHS Lothian.

5.4 In West, East and Midlothian, the police offender management units are based independently from the CJSW offices. Each area has a SOLO based within their respective social work offices.

5.5 In the summer of 2009, a new Civic Centre will be opened in Livingston. West Lothian Council, Lothian and Borders Police, Scottish Courts Service and the Procurators Fiscal Service have worked in partnership on this project. The CJSW team will be centrally located with the divisional police Offender Management Unit. There are plans in place for the lead officers in respect of MAPPA, Child and Adult Protection, to be co-located within the Civic Centre by the end of 2009, the aim being to promote a holistic approach to public protection.

5.6 The five local authorities in the Lothian and Borders area are all engaged in delivering the new MAPPA guidance, but each have local arrangements in place for the management of sex offenders. These arrangements can differ due to structure, geography and scale.

5.7 The following levels illustrate the differing multi-agency management levels within MAPPA in Scotland. Persons who may present a significant risk of harm may be managed by a single agency, as the other agencies have no information to share or no active role to play in the management of the offender. Therefore the level at which an offender is managed is not solely dependant on risk presented by an offender, but also on the ability to manage, that risk on a multi-agency basis.

5.8 All agencies are engaged in ensuring the prescribed timescales relative to notification, referral and multi-agency meetings are followed. Any offender being managed at levels 2 and 3 is subject to regular reviews, dependent on the nature of the risk.

5.9 However, this is a dynamic process and agencies will respond to new intelligence and information by quickly convening a multi-agency meeting or re-scheduling the review date to discuss any change which affects or may affect the risk the offender presents to the community.

5.10 Level 1 – Ordinary management – The identified risk can be managed by one agency without the significant active involvement of other agencies. There is still an expectation that information will be shared and there will be joint working and collaboration between agencies.

5.11 This is the day-to-day business of managing an offender in the community, and staff from each agency may speak on the telephone or meet personally on a daily basis across the Lothian and Borders area. There is a great deal of inter agency working which does not require formal multi-agency meetings. There can be joint agency discussions, joint agency offender home visits, assessments of risks and amendment to risk management plans which reflect the need to

manage these offenders in a dynamic, proactive and responsive manner. Offenders may also be subject to statutory social work supervision, which allows further monitoring of their activities.

5.12 The Scottish Borders have a specific monthly multi-agency risk panel, where operational managers and front line staff meet to consider the risk and agree multi-agency risk management plans. All Registered Sex Offenders resident in the Scottish Borders will be discussed by this panel and are subject of review.

5.13 West Lothian similarly holds a monthly multi-agency risk panel. All Registered Sex Offenders will, either at sentence, release from prison or on registering with the police, be subject of an initial discussion at a risk management panel and a risk management plan agreed. A decision is then taken at that time as to whether a further formal review is necessary.

5.14 East Lothian, Midlothian and The City of Edinburgh arrange specific multi-agency case conferences to discuss individual cases where operational staff, meet to assess the risk presented by the offender and develop a risk management plan.

5.16 Multi-agency Risk Management Panels (RMP) or Risk Management Case Conference (RMCC) are the key meetings where information exchange, assessment of risk and development of risk management plans by operational staff working with the offender, are discussed and implemented.

5.17 All areas hold regular joint discussions between police and social work to review level 1 cases, for example, in City of Edinburgh managers from the police Offender Management Unit and CJSW SOLO meet to review these cases every two weeks. Such reviews consider the risk management plans and determine, jointly, whether the risk factors have changed resulting in the need to consider multi-agency review.

5.18 Level 2 – Multi-agency management – The risk management plans for these offenders require the significant active involvement of more than one agency via multi-agency public protection meetings.

5.19 The Scottish Borders hold monthly level 2 meetings where in addition to the core group of senior representatives from each agency, operational staff working with the offender may also be invited. This group collectively considers the assessment of risk and development of the risk management plan. This group regularly reviews each level 2 offender and monitors and reviews their risk management plans. *Ad hoc* or emergency meetings are convened as required.

5.20 The other authorities have a two-tier system where the key operational staff, attend multi-agency risk management meetings to assess the risk and deliver the risk management plan. The minutes of this operational meeting are then used to inform the level 2 senior representatives of the operational assessment of risk, and the risk management plan. The level 2 core group then independently ratifies, reviews or amends the risk management plan, with specific operational staff invited as necessary. Attendance of the relevant criminal justice team manager and SOLO at the level 2 meeting provides the link to the risk management case conference. In Midlothian, operational staff are routinely invited to attend their level 2 meetings.

5.21 The City of Edinburgh has two MAPPA level 2 meetings per month, and each of the other local authorities have one meeting per month.

5.22 Level 2 meetings are chaired either by a Detective Chief Inspector, Detective Inspector, Criminal Justice Service Manager, Consultant Forensic Psychiatrist or Consultant Clinical Psychologist, dependant on local arrangements.

5.23 Each local authority area has a core membership of senior personnel from all agencies who have the authority to implement appropriate strategies and agree decisions at level 2 on behalf of their agency. These include representatives from police, CJSW, children and families services, community care, and housing and health. Midlothian also have a representative from the education and communities division.

5.24 Where the level 2 panel agrees that the current risk management plan has reduced the risk of harm, and the offender is being managed appropriately within the community, then they may reduce the offender to level 1. However, level setting and risk assessment are ongoing and any change in circumstances which affects or may affect the risk of harm they present could generate an immediate operational meeting and formal review at level 2.

5.25 Level 3 Multi-agency Public Protection Panel (MAPPP) – As with level 2 but these cases additionally require the involvement of senior staff to authorise the use of special resources, and/or to provide ongoing senior management overview. These cases are the “critical few”.

5.26 The Detective Superintendent responsible for Public Protection, Lothian and Borders Police, or the Chief Social Work Officer of the relevant local authority chair these meetings. Senior representatives of core agencies attend and generally operational staff have also been invited to attend these meetings.

5.27 Management of restricted patients and the health service role in MAPPA.

5.28 During the reporting year, NHS Lothian has been a responsible authority within MAPPA for restricted patients. restricted patients (mentally disordered offenders) fall into three legal categories:

5.29 Patients subject to a Compulsion Order and Restriction Order (CORO). This group of individuals will have been either convicted of an offence or found insane (either at the time of the offence or in bar of trial) and, due to their risk of further serious offending, are made subject to a CORO by the court. Such patients are initially detained in hospital (usually a secure hospital). When sufficient progress has been made in terms of treatment and rehabilitation so that the person is not considered to pose an immediate risk in the community, patients are gradually introduced to spending time in the community through escorted and unescorted periods of suspension of detention. When a patient has made sufficient progress and the risk posed is such that they can be safely managed in the community, then they will usually progress to conditional discharge in the community where they are still subject to a Restriction Order, and to recall to hospital if there are any concerns about them. In most cases there is a prolonged period lasting a number of years on conditional discharge in the community, and only when risk posed is not such as to warrant ongoing compulsory measures the patient is moved to absolute discharge where they are no longer subject to the Restriction Order.

5.30 **Patients subject to a Transfer for Treatment Direction (TDD).** Patients subject to TTD are sentenced prisoners who are transferred to hospital when they develop mental disorder in prison. When such patients no longer require treatment in hospital they are transferred back to prison. If they reach the end of

their prison sentence whilst in hospital then they are either released or detained under civil mental health legislation. If released or placed under civil mental health legislation, they are no longer restricted patients.

5.31 Patients subject to a Hospital Direction (HD). These patients have been convicted on indictment of serious offences and have been given a prison sentence, but at the time of sentencing the court directs they be detained in hospital for treatment of mental disorder. Like patients subject to TTD, following treatment they may return to prison to serve the rest of their sentence. Alternatively, if they remain in hospital, then they will either be released or detained under civil procedures when they reach the end of their prison sentence.

5.32 Like other patients in the state hospital, restricted patients detained at the state hospital have a legal right of appeal against detention in conditions of excessive security. If they win such an appeal then they must be transferred to a less secure hospital in Scotland. restricted patients may only be transferred between hospitals with the permission of the Scottish Ministers. restricted patients may only be granted escorted or unescorted suspension of detention out-with hospital with permission from the Scottish Government. Only the Mental Health Tribunal can grant conditional or absolute discharge, therefore the clinicians involved in the care and treatment of restricted patients do not have any discretion in allowing transfer, time out-with hospital or discharge.

5.33 restricted patients must be managed using the Care Programme Approach (CPA). The CPA is a process whereby there is regular multi-disciplinary review of the care and treatment of patients, including review of the risk posed by the patient and how that risk should be managed. CPA is a case management process for clinicians and other staff involved to plan ongoing management of the case.

5.34 restricted patients must be notified to MAPPa Co-ordination Unit whether they are in hospital or the community. They must be referred for review at MAPPa level 2 before unescorted suspension of detention out-with a secure setting, before conditional discharge and before absolute discharge. The ongoing management of most restricted patients is at MAPPa level 1. However a small number of cases may be kept under review at MAPPa level 2 on an ongoing basis where there are specific concerns. In unusual cases, for example high profile cases where there may be media interest, or cases where there are particular concerns about the risk posed, MAPPa reviews at level 2 might occur before a patient is transferred between hospitals, or before the patient has escorted suspension of detention outwith a secure setting. The primary aim of MAPPa level 2 reviews in such cases is to review the risk management plans, including multi-agency involvement in the management of cases, so as to ensure that all measures that can reasonably be taken to protect the public from serious harm, have been taken.

5.35 Statistics on restricted patients in Edinburgh, the Lothians and the Scottish Borders are provided in table 4 (within section 10, Statistical information). Forty restricted patients were managed in hospital or in the community in Lothians and the Scottish Borders from April 2008 - April 2009. Most of these individuals were managed on an ongoing basis at MAPPa level 1. Eleven were reviewed at level 2, all but two of these cases returned to level 1 following one review. There was one very minor untoward incident, as detailed in the statistical report.

5. 36 The state hospital - Risk Assessment and management at the state hospital is an integral part of the care and treatment planning process for all restricted patients. Structured clinical judgement tools for violence risk

assessment and management have been introduced, and must be used for all patients. The policy is that:

- All clinical teams are required to adhere to a standard risk assessment and management protocol.
- Structured professional judgement tools must be used for violence and sexual violence assessment. HCR-20 is the tool of choice for risk of violence assessments, and Risk of Sexual Violence Protocol (RSVP) for risk of sexual violence.
- Risk assessments and management plans should be updated and reviewed at the intermediate and annual review
- Risk assessments must never be completed in isolation and must be embedded into the patient's care and treatment plan.

5.37 The Risk Management Authority (RMA) has accredited the Hospital's manner of risk assessment and management for a three-year period from September 09. Following the publication of CEL 13 (2007), http://www.sehd.scot.nhs.uk/mels/CEL2007_13.pdf a 'traffic light' contingency plan may be provided to aid the risk management process for patients transferring to less secure environments.

5.38 At the state hospital, risk reduction programmes associated with MAPPA offenders are agreed as part of the care and treatment planning process (CPA). Risk management is co-ordinated through the intermediate and annual CPA reviews at level 1.

5.39 Pharmacological and cognitive behavioural therapy treatments form the backbone of treatment programmes for patients suffering from mental illnesses. This is complemented by participation in: sex offending; drug and alcohol; anger management; fire raising; coping with mental illness; and other group work programmes.

5.40 There are two medium secure units in Scotland, one of which is located within NHS Lothian's area, the Orchard Clinic. Mentally ill restricted patients are admitted to the Orchard Clinic from court, prison or the state hospital, and when ready to move on, individuals are then transferred to less secure hospital units or the community. During the reporting year, along with patients from the Lothians, there have been restricted patients in the Orchard Clinic from Fife, Forth Valley, Glasgow, Tayside, Borders and the Highlands. Patients from other health board areas are transferred back to those areas when they no longer require medium secure care. An important function of medium secure units is to safely and gradually reintroduce patients to spending time in the community, when it is assessed as safe to do so, and with an appropriate risk management plan in place. MAPPA plays a role in overseeing this process from a public protection perspective.

5.41 Most of the restricted patients with mental illness who are in hospital are in the Orchard Clinic. A small number are in open rehabilitation wards. Patients on conditional discharge are managed by the forensic mental health service based at the Orchard Clinic, or by the rehabilitation service. Restricted patients with learning disabilities are managed within the learning disability service, which has low secure hospital provision and a community service.

5.42 **The NHS Lothian Sex Offender Liaison Service (SOLS)** was developed primarily to help criminal justice agencies with the management of sexual offenders (subject to MAPPA) in the community. It was established in April 2007, when MAPPA was introduced. The SOLS takes referrals from CJSW, police

offender management units, mental health services, and primary care from across the Lothian and Borders CJA area. The aim of the service is to provide assessment and management advice on individuals with a history of sexual offending, or who pose a risk of sexual offending, and where there are complex clinical issues of relevance to risk management, such as the presence of personality disorder or sexual deviation. This service is led by a consultant psychiatrist and consultant psychologist, who also represent NHS Lothian at MAPPA meetings. The SOLS is the only service of its type in Scotland. The service helps make available the type of complex risk assessment and risk management advice that the RMA has recommended is available in the highest risk and most complex cases. The clinicians who lead the service are RMA accredited risk assessors, ie. they are accredited to assess risk in serious violent and sexual offenders. Although the service is able to provide consultation and management advice, it has not so far been able to offer psychological treatment. However, pharmacological treatment has been offered in a minority of cases where sexual offenders have problems with sexual preoccupation, hyper-sexual arousal or sexual deviation which cannot be addressed in other ways. Where locally available services (e.g. psychotherapy) may be able to provide other treatments individuals have been directed to these. There are plans to make psychological treatment available as part of the service. Since the service was established, more than 50 cases have been assessed.

5.43 Case studies – The majority of offenders are effectively managed through ordinary agency risk management at MAPPA level 1. Highlighted are two level 1 cases and a further case, which required management at level 2. These cases evidence the spectrum of risk and illustrate the range of intervention and monitoring undertaken by agencies.

5.44 Case study 1 – Level 1

5.45 In 2005 Offender A plead guilty to a charge of sexual breach of the peace, for which he received 120 hours community service. The complainer in the case, then aged 13 years, was known to him. The breach of the peace, committed when Offender A was under the influence of alcohol, involved him making inappropriate sexual comments towards his victim. Offender A has previous convictions for crimes of dishonesty, vandalism, breach of the peace and carrying of knives.

5.46 Offender A and his girlfriend live together and have three young children, the youngest being a 6 month old baby. Children and families services are fully aware of the situation. There are no concerns that Offender A presents a sexual risk to his children, and there are no conditions preventing him from having unsupervised access to them.

5.47 Offender A is required to register for a period of five years from the date of his conviction, and Lothian and Borders Police is the responsible authority. Police offender management unit officers visit him on a six monthly basis. During each home visit, officers interview Offender A and carry out a further assessment of the risks he presents.

5.48 Offender A is flagged on police and local authority systems, to allow for prompt sharing of information that may affect the risk he presents.

5.49 Case study 2 – Level 1

5.50 In 1977, Offender B was convicted of attempt murder, and sentenced to 11 years detention in young offenders institution. The offence consisted of him

indecently assaulting and then strangling a pre-pubescent boy, leaving him for dead. In 1992, he was convicted of two subsequent charges of sodomy and sentenced to six years imprisonment. The victim was a 12-year-old boy. Offender B also has convictions for theft, theft by housebreaking, and common assault. On 1st September, 1997 the Sex Offenders Act 1997 came into force, but as Offender B was neither in prison or subject to supervision at that time, he was not required to register as a sex offender.

5.51 In 2004 police received intelligence that Offender B had been sitting on a bench in the children's play area in a public park. He also admitted to a support worker that he had visited a public venue, predominantly frequented by children.

5.52 On the strength of the above concerns, the police applied for a Sexual Offences Prevention Order (SOPO), which was subsequently granted. As a result he then became subject of the notification requirements of the Sexual Offences Act 2003 (sex offender registration). The SOPO contained the following conditions:

- That the subject does not approach, speak or communicate in any way, either directly or indirectly, or allow within his home address any child under the age of 16 years.
- That the subject does not enter any public park, children's play area, children's leisure area, school or nursery grounds or areas where children habitually congregate.

5.53 In 2007 he was arrested for breaching this SOPO after inviting a young boy and girl into his home to look at his Christmas tree, and giving them each a small sum of money. Nothing further untoward took place at that time. One of the children told their parents who reported the matter to the police. Offender B was convicted of breaching the first of the above conditions of his SOPO and sentenced to two years imprisonment.

5.54 In 2009 his SOPO was varied to include the following two additional prohibitions:

- From residing at any address, whether temporary or permanent, without prior risk assessment and approval of the Chief Constable of the area in which the defender resides.
- From engaging in any employment, whether paid or voluntary, without prior risk assessment and approval of the Chief Constable of the area in which the Defender resides.

5.55 Offender B is required to register for a period of ten years and will be managed by the police as a Registered Sex Offender throughout this period. The police are the responsible authority and are the single agency involved in the management of this offender. The police visit him a minimum of once every six weeks.

5.56 Offender B has been convicted of several serious sexual offences against children, and has breached his SOPO once. He currently presents as being compliant. Notwithstanding, the police have, and will continue to, periodically undertake investigations into his lifestyle to validate the information Offender B provides and ensure that he is not breaching his SOPO conditions.

5.57 Offender B is flagged on police and local authority systems, to allow for prompt sharing of information, which may affect risk.

5.58 Case study 3 – Level 2

5.59 Between, 1996 and 2002, Offender C induced familial female children to have sexual intercourse with him. The offences were reported and a police investigation also found that he had been downloading indecent images of children from the internet. In 2004 he was convicted and sentenced to eight years imprisonment, plus three years extended sentence. Offender C will be subject of statutory supervision until 2015. He was released from prison in 2008.

5.60 Risk management – Offender C was made subject of the following licence conditions.

- Not to undertake paid, unpaid or voluntary work, without prior approval of his supervising officer.
- Not to approach, speak or communicate in any way, either directly or indirectly, with a child under the age of 17, without the prior approval of his supervising officer.
- Not to enter any public parks, children’s play areas, children’s leisure areas, school or nursery grounds, without the prior approval of his supervising officer.
- To undertake offence focused work, particularly in relation to sex offending, as directed by his supervisory officer.
- Not to have means to access the internet at home, not to access the internet at home or elsewhere without the prior approval of his supervising officer.
- To co-operate with the monitoring of all computer, mobile phones or other equipment capable of accessing the internet.

5.61 Offender C was accommodated in adult only accommodation. Victims were made aware of his release and offered support. A family tree was prepared and children and families services visited all parents/carers, re-enforcing Offender C’s licence conditions that he cannot have contact with their children. A risk assessment was undertaken to ensure the parents/carers were able to protect their children from the risk presented by this offender.

5.62 Offender C is attending the Community Sex Offenders Group Work Programme (CSOGP). He has weekly face to face meetings with his Criminal Justice Supervising Officer. The Police prepared and circulated internal bulletins, ensuring local officers knew of offender C’s return to the community. In addition, the police inspect all computer equipment, mobile phones or other equipment capable of accessing the internet, Offender C has access to.

5.63 To date Offender C has been compliant with all his licence conditions and there is no intelligence to suggest he has contact with children.

5.64 Key Factors in the management of this case:

- Detailed and extensive multi-agency research to identify children within the family who may be targeted by Offender C, either through family connection or friendships.
- Pro-active use of disclosure to re-enforce licence conditions and engage with families and carers to ensure the protection of children in their care.

- Work undertaken with victims to ensure they were fully supported and aware of the active inter-agency co-ordination in managing the risk presented by offender B.

5.65 Civil Orders

Intended to aid in protecting the public from the risks posed by sex offenders, either by subjecting them to the notification requirements of the Sexual Offences Act, 2003, restricting their foreign travel where there are child protection concerns or by placing prohibitions on their behaviour. The following four types of civil orders are available:

5.66 Sexual Offences Prevention Order (SOPO)

A court may impose a SOPO at the point of sentencing an offender. Alternatively, the police can apply for such an order to a civil hearing of the Sheriff Court, on account of the offender's behaviour in the community. A SOPO can be sought in respect of an offender with a conviction for a relevant sexual offence, (whether a Registered Sex Offender or not), providing there is evidence of current concerning behaviour suggesting the offender presents a risk of sexual harm. The order is intended to place prohibitions on the offender's behaviour in the community in order to minimise opportunity for further sexual offending. Prohibitions must be proportionate and necessary to address an identified risk, and may include for example, prohibiting an offender from entering a defined area where children are known to congregate. Where a SOPO is obtained for a non-registered sex offender, they are required to comply with the notification requirements of the Sexual Offences Act, 2003 for the duration of the order. If subsequently convicted of breaching a prohibition contained within the order, they are liable to up to five years imprisonment.

5.67 Risk of Sexual Harm Order (RSHO)

Where there is evidence that on two or more separate occasions a person has engaged or involved a child in sexual activity or other specific behaviour of a sexual nature involving a child, and as a result there is reasonable cause to believe it is necessary for such an order to be granted, a Risk of Sexual Harm Order may be obtained. The subject of the order need not have any previous convictions (sexual or otherwise).

5.68 Applications for the above orders are made by the Chief Constable, to a civil hearing of the Sheriff Court, for offenders who reside or are intending to reside within their policing area. This order places prohibitions on a person's behaviour to protect children from the risk of sexual harm.

5.69 Foreign Travel Orders (FTO)

An application for a Foreign Travel Order can be made in respect of any Registered Sex Offender with convictions against children if there is evidence indicating that the purpose of travel is to offend against children abroad and such an order is necessary for the purposes of protecting children abroad from serious sexual harm. This order can prohibit any foreign travel or, travel to specific destinations, or restrict foreign travel to specific destinations.

5.70 Notification Order (NO)

Where a person has been convicted of a sexual offence in a foreign country, and they intend or have returned to live in the United Kingdom, then providing their offence would have constituted a registerable offence, had it been committed in the UK, the Chief Constable of the area in which they reside or intend to reside, can apply to a civil hearing of the Sheriff Court for a Notification Order. If granted, this order requires the subject of the order to comply with the

notification requirements of the Sexual Offences Act 2003 ie. become a Registered Sex Offender.

Section 6 – Developments in work with MAPPA offenders

6.1 The importance of staff training in risk assessment and the management of MAPPA offenders cannot be over emphasised.

6.2 The two principal risk assessment tools used by police and criminal justice social workers in Lothian and Borders are Risk Matrix 2000, and Stable and Acute 2007. The Scottish Government has identified these tools to ensure consistency of assessment throughout Scotland. Training in RM2000 has been rolled out across Lothian and Borders since 2005, and Stable and Acute from 2007.

6.3 Risk Matrix 2000 is a structured risk assessment tool comprising two short questionnaires that gather information about an individual's offending history and behaviour. It measures reconviction rates for sexual offending and non-sexual violence. It has been shown to have approximately 80% predictive accuracy. Structured risk assessments have shown a considerably higher reliability than professional judgement alone. This tool has been validated against an English male population, and more recently validated by a Scottish study (Prof Don Gruben, Newcastle University), which confirmed similar predictive accuracy within a Scottish offending population.

6.4 Stable and Acute 2007 (SA07) was developed in Canada where there has been a successful validation study. It is in the process of being rolled out across the UK and Ireland. The tool consists of two parts, which measure stable dynamic and acute dynamic risk factors.

6.5 The stable section of the above tool considers the individual's personal and behavioural characteristics. These factors have the potential to change, particularly with professional intervention, but generally endure for months or years. This section provides both a more detailed, individualised picture of the individual risk of re-offending and a picture of the offender's treatment needs. The assessment is revised on an annual basis.

6.6 The acute section of the tool considers factors related to the offender's current circumstances and emotional state. These factors are potentially subject to change (potentially over a very short period of time), and this assessment should be completed each time an offender is seen. It is designed to guide and enhance risk management.

6.7 Risk assessment training on the above two nationally agreed assessment tools was delivered in June and July 2008, and again in June 2009. Staff from Lothian and Borders Police have also been able to attend training in neighbouring CJA areas. All relevant staff currently in post have now been trained.

6.8 The Violent and Sex Offenders Register (ViSOR) is a UK wide information management system, which provides a computerised intelligence database that can record details of all MAPPA offenders. ViSOR allows far greater collaboration between the services, and is used as the key system for sharing information, recording and auditing actions and risk management plans. It has been utilised by Lothian and Borders Police for the last three years.

6.9 All CJSW staff involved in supervising sex offenders are required to be trained in the use of ViSOR. During the past year 10 courses have been delivered for

CJSW staff, so all relevant staff have now completed training. A further two courses are planned for August 2009 to train all newly appointed staff.

6.10 A development day for MAPPA minute takers was held in October 2008, and work is currently proceeding to develop guidance for the conduct of MAPPA meetings, to assist the process of minute taking.

6.11 Members of staff from police, CJSW, and partner agencies have attended training from the RMA on using the CD Rom 'Assessing and Managing Risk.' Two CJSW managers and one police officer have attended a five day pilot course on risk management commissioned by the RMA. Subsequently two CJSW managers attended a two day course in order to be able to deliver the training. The five day and two day courses by RMA are specific to risk assessment, formulation and management for Orders for Lifelong Restriction (OLR).

6.12 The CJA Training Outcome Group has established a subgroup to examine how best to ensure the development and delivery of appropriate training in assessing and managing risk to staff in all partner agencies across Lothian and the Borders. This group has representatives from police, CJSW and health, and is expected to make recommendations regarding appropriate training before the end of 2009.

6.13 Within Edinburgh CJSW, a small scale pilot project has been established to examine the feasibility and usefulness of CJSW practitioners completing HCR-20 risk assessments on high risk violent offenders who will be released from prison subject to statutory supervision. It is hoped that this project will contribute to the preparations being made to include violent offenders within MAPPA arrangements. The pilot is expected to run from June 2009 to June 2010. Accredited Health professionals are providing additional training for the staff involved.

6.14 A serious incident reported to the Procurator Fiscal resulted in a significant case review being undertaken on a multi-agency basis. This identified areas of good practice, and areas where procedures could be improved. As a result, all high risk offenders within Lothian and Borders Police area were reviewed to consider whether there was justification for an application for a Sexual Offences Prevention Order. Additionally, work is ongoing with Crown Office Procurator Fiscal Service (COPFS) regarding the process of obtaining such orders on conviction.

6.15 Developmental work with duty to co-operate agencies

6.16 As previously highlighted SACRO, SERCO, the Scottish Children's Reporter Administration (SCRA), relevant Health Boards and Registered Social Landlords (RSLs) are all actively involved in MAPPA under their duty to co-operate. The active engagement is evidenced by their involvement at MAPPA meetings or at committee level. Scottish Borders are developing protocol and procedures in respect of RSLs and homelessness.

Section 7 - Diversity issues

7.1 In the course of planning service provision, consideration is given to equality and diversity requirements of all persons involved. In all MAPPA meetings, equality and diversity runs through the core business of the agenda or cases, to ensure all the needs of the persons involved are discussed and met where appropriate. All agencies in MAPPA will ensure that equality and diversity issues continue to form an integral part of any risk management plans.

Section 8 – Victim work

8.1 The victim focus of MAPPA includes not only those who are already victims; as already stated, consideration must also be given to new or potential victims, and it is this, which requires focussed risk assessment. In some cases a victim may not be an individual but a group of people who may be at risk by virtue of their location, race, religion, culture, sexual orientation, age, gender, disability or other distinguishing characteristic.

8.2 The risk an offender may pose to some particularly vulnerable groups, such as children, requires effective inter agency communication and working. Liaising with victims, particularly those who are most vulnerable, requires careful assessment and delivery.

8.3 The police are more likely to be the initial agency, which has contact with a victim and therefore in the more serious cases Family Liaison Officers are deployed to assist, not only the victim but those persons who have been seriously affected by the offence itself for example, the family of a murder victim. The Police will support the victim until the case has progressed to prosecution where they will liaise and introduce members of the Victim Information and Advice (VIA) staff who are part of COPFS. VIA provides factual advice and support to victims on the progress of a case from initial reporting to the Procurator Fiscal, through to trial.

8.4 Victim Support Scotland (VSS) is the lead voluntary organisation in Scotland, which helps people who are affected by crime. This organisation is independent from statutory organisations and provides:

- free confidential help when it is needed.
- information about the criminal justice process, compensation schemes, insurance, crime prevention, anti social behaviour.
- emotional support, reassurance and understanding.
- help with practical issues.
- referral to another agency if other support is needed, providing the victim consents

8.5 Trained and vetted volunteers provide the service through a network of community based services in every local authority area within the Lothian and the Scottish Borders CJA.

8.6 The witness service is part of VSS and helps people through the judicial service by providing practical and emotional support before, during or after trial. The witness service, as well as Women's Aid and Rape Crisis Centres and other voluntary agencies, provide an essential support service to victims.

8.7 The Victim Notification Scheme was brought into being on the 15th May 2008. In cases where a victim's assailant has been sentenced to 18 months imprisonment or more, the victim has the right to apply to receive information including, the date the person will be released or that the person is unlawfully at large.

8.8 From 15th May 2008, in cases where the victim's assailant is sentenced to 4 years or more in prison, victims also have the right to apply to receive information including, if the person has become eligible for temporary release,

and can make representations to the parole board prior to a decision being taken on the release of the offender.

8.9 The challenge for MAPPA is ensuring that the risk assessment and risk management plans delivered for the offender take full account of the known concerns of any victims. The plans must be robust to minimise the likelihood of the offender causing further serious harm. There is a commitment by all agencies in seeking to protect identified victim(s) and the community at large by delivering risk management plans at all levels and at various stages of the process.

8.10 During the course of every MAPPA meeting there is a discussion central to the victim or potential victim(s), which focuses on reducing the risk of harm presented by the offender. The range of options available to MAPPA panel included formal disclosure, a range of preventative civil orders, recommendations to vary parole licence conditions, referral to child and/or adult protection procedures. Where an individual has been made aware of potential risk they will be offered support whether from statutory or voluntary agencies and where appropriate potential victims will be afforded advice and practical personal protection.

8.11 In Lothian and Borders CJA area Registered Sex Offenders assessed as requiring management at either level 2/3 will be discussed by MAPPA panel, prior to their release from prison. This enables the panel to make early checks on the current status of victims (where known), and taking their needs into account, contribute to the request for specific licence conditions. Consideration of risk in the community needs to be addressed when preparing prisoners for release and decisions on appropriate licence conditions should be considered within the prison's integrated pre-release case conference. The criminal justice supervising social worker, often accompanied by the police Offender Assessment Officer, will reinforce to the offender the requirement to comply with licence conditions and the possibility, as discussed in section 4, of being recalled to prison in the event of non-compliance.

8.12 Where circumstances subsequently arise which require either recall to prison or revision to original licence conditions, the request to the parole board will be made by the supervising criminal justice social worker. Such requests to the parole board, must be supported by proportionate and justifiable reasons, linked to the risk posed by the individual offender.

8.13 The CJA Training Outcome Group has a remit to develop multi-agency staff awareness raising training around issues for victims and the CJA has allocated funds to support this. There are plans to develop a training programme with the express aim of ensuring victims remain at the forefront of all our work.

Section 9 – Disclosure

9.1 The primary purpose of sex offender management is the protection of the public from the risk of sexual harm presented by offenders, by managing known risks so as to reduce the likelihood of further offending. In order to achieve this, there are occasions when information regarding an offender may have to be disclosed to a third party. Such information would usually be disclosed where it is necessary to allow a specific individual, or an establishment, to make informed decisions regarding child protection or their own future involvement with the offender.

9.2 The following scenarios illustrate when such a disclosure may be appropriate:

- To a new partner, where there is an identified risk either to that individual or to members of their family (for example where an offender's previous sexual offending has been against children and the new partner has children of their own)
- To an employer, in circumstances where an offender's employment may be inappropriate (for example, bringing them into direct contact with members of the public in a manner which may allow them access to potential future victims).
- To an educational establishment, where an offender's attendance may again give access to potential victims, and the risk is so great as to require their attendance to be re-considered, or closely monitored.

9.3 Such disclosures are made on a case-by-case basis, and generally as a last resort when other management options have already been considered and deemed insufficient to address an identified risk.

9.4 Broadly speaking, disclosure falls into two categories:

1. Registered Sex Offender status, and
2. Other relevant information

9.5 Responsibility for the management of the notification requirements of the Sexual Offences Act 2003, for all Registered Sex Offenders living within a policing area, lies with the Chief Constable for that area. As such, responsibility for maintaining details of all Registered Sex Offenders resident within the Lothian and Borders CJA area lies with the Chief Constable of Lothian and Borders Police. Therefore disclosure of a sex offender's 'registered' status cannot be made without the prior written authority of the Chief Constable.

9.6 Other relevant information may be disclosed to a third party by local authority Social Work staff, acting lawfully under their own authority, or by the Police. Other relevant information may relate to sexual previous convictions, previous offending history or lifestyle and similar information.

9.7 In deciding whether to disclose such information to a third party, consideration should be given to the proportionality necessary to achieve a clearly identified purpose. The decision to disclose should be justifiable and defensible. This process must also take into account the rights of the offender.

9.8 Where the risk to members of the public, or an identified individual/s is/are so great as to outweigh any rights of the offender, and other risk management options do not adequately address the risk, disclosure may be the only viable option and in such circumstances is likely to take place.

9.9 Where possible, any decision to disclose will have been discussed by partner agencies in advance and shared with the relevant offender. However there will be occasions where any delay in disclosing information necessary to protect members of the public would be unacceptable. In such circumstances, disclosure would take place as soon as possible if not immediately and the details of the disclosure shared with partner agencies and the offender thereafter. This is particularly relevant where child and adult protection issues have been identified. In these circumstances, the welfare of the child or vulnerable adult is paramount and overrides any other consideration.

Section 10 –Statistical information

This section is required to be included in MAPPA CJA Annual Reports as per S11 3 (a) and (b) The Management of Offenders etc (Scotland) Act 2005.

*Unless stated the statistics recorded are for the reporting period 1st April 2008 to 31st March 2009.

Table 1: Statistical information*

REGISTERED SEX OFFENDERS (RSOs)	NUMBER
a) Number of Registered Sex Offenders (RSOs):	
i) At liberty and living in your area on 31 st March 2009:	544
ii) Per 100,000 of the population on 31 st March 2009:	58.47 (based on mid 2008 population estimate of 930,250)
b) The number of RSOs having a notification requirement who:	
i) Complied with notification requirements:	517
ii) Were reported for breaches of the requirements to notify:	27
c) The number of wanted RSOs on 31st March 2009:	6
d) The number of missing RSOs on 31st March 2009:	7

Table 2: Statistical information*. This table shows civil orders applied and granted in relation to RSOs.

The number of...	Applied for by police	Granted by the courts
Sexual Offences Prevention Orders (SOPO'S)	12	12
Risk of Sexual Harm Orders (RSHOs)	1	1
SOPO'S imposed by courts at time of conviction:	N/A	1
Interim SOPOS	N/A	0
Interim RSHOs	0	0
Foreign Travel Orders (FTOs)	0	0
Notification Orders (NOs)	3	3

Table 3: Statistical information*

REGISTERED SEX OFFENDERS (RSOs)	NUMBER OF OFFENDERS
a) Number of RSOs managed by MAPPA Category¹:	
i) Level 1 – Ordinary Risk Management:	529
ii) Level 2 – Local Inter-agency Risk Management:	175
iii) Level 3 – MAPPP:	6
b) Number of Registered Sex Offenders convicted of a further crime of sexual harm or non sexual violence:	
i) MAPPA Level 1:	4
ii) MAPPA Level 2:	10
iii) MAPPP 3:	0
c) Number of RSOs returned to custody for a breach of statutory conditions (including those returned to custody because of a conviction of further serious sexual or violent offence):	12
d) Number of RSOs returned to custody for a breach of SOPO:	8
e) Number of RSOs returned to custody for a breach of FTO:	0
f) Number of RSOs returned to custody for a breach of RSHO:	0
g) Breached their statutory conditions but were not returned to custody:	30
h) Were subject to formal disclosure:	10

¹ These statistics represent a full year and it should be noted that offenders move between levels of management depending on identified risk which can change with changing circumstances. This is a dynamic environment where effective risk assessment and information sharing is vital. Very few offenders remain at level three for long periods as the management of risk is usually agreed and settles to allow the person to be managed at level 2 or level 1. Level three are the critical few which requires the involvement of senior management due to the high risk involved or the complexity of the situation which may require unusual resource commitment. Note: The level 1 figure should include all offenders who have been notified to MAPPA Co-ordinator by the responsible authorities and who have not been managed at either levels 2 or 3 between the periods 1st April and 31 March. The level 2 figure should include those offenders who have not been managed at level 3 at any point between 1st April and 31st March.

Table 4: Statistical information*

Statistics on restricted patients in NHS Lothian and NHS Borders

RESTRICTED PATIENTS (RPSs):	NUMBER
a) Number of RPS	
i) Living in your area on 31 st March 09:	30 (5 on conditional discharge; 24 in hospital)
ii) During the reporting year:	40
b) Number of RPs per order (does not include patients from Lothian and the Scottish Borders in the state hospital):	
i) CORO:	34
ii) HD:	0
iii) TTD:	6
c) Number within hospital/community²:	
i) state hospital:	8
ii) Other hospital no unescorted suspension of detention (SUS):	16
iii) Other hospital with unescorted SUS:	19
iv) Community (Conditional Discharge):	5
d) Number managed by category between 1st April 2008 and 31st March 2009 (does not include patients from Lothian and the Scottish Borders in the state hospital):³	
Level 1 – ordinary agency risk management:	29
Level 2 – through inter agency risk:	11*
Level 3 – MAPPAs, (critical few):	0
e) Number of RPs convicted of a further crime of sexual harm or non sexual violence⁴:	
i) MAPPAs level 1:	0
ii) MAPPAs level 2:	0
iii) MAPPAs 3:	0
f) No of RPs on Suspension of detention:	
i) Who did not escape/abscond or offend:	33
ii) Who escape/absconded:	1**
iii) Who escaped/absconded and then offended:	0
iv) Where escapes/absconson ⁵ resulted in withdrawal of suspension of detention:	1**
g) No. of RPs on conditional discharge:	
i) Who did not breach conditions, not recalled or did not offend:	5
ii) Who breached conditions (resulting in letter from the Scottish Government): ⁶	0
iii) Recalled by Scottish Ministers due to breaching conditions:	0
iv) Recalled by Scottish Ministers for other reasons:	0

² The lowest level within the reporting year should be reported, ie how many restricted patients have been in the community.

³ As per footnote 1.

⁴ The highest level that a patient has been at within the reporting year should be reported.

* 9 were reviewed once at level 2 and then managed at level 1; 2 have remained under level 2 review on an ongoing basis

* *The patient in question ran from an escorting nurse and went a few metres before being stopped and taken back to the ward.

Table 5: Delineation of RSOs by age on 31st March 2009.

Age	RSO Number	RSO Percentage %
Under 18	2	0.4
18-21	16	2.9
22-31	80	14.7
32-41	119	21.9
42-51	158	29.0
52-61	84	15.5
62-71	60	11.0
72-81	23	4.2
82-91	2	0.4

Table 6: Delineation of population of RSOs on 31st March 2009.

Sex	RSO Number	RSO Percentage %
Male	542	99.6
Female	2	0.4

Table 7: Delineation of RSOs by ethnicity on 31st March 2009.

Ethnic Origin	RSO Number	RSO Percentage %
Asian or Asian British Any other Asian	4	0.74
Asian or Asian British Bangladeshi	0	0
Asian or Asian British Indian	0	0
Asian or Asian British Pakistani	7	1.29
Black or Black British African	0	0
Black or Black British Any Other Black Background	3	0.55
Black or Black British Caribbean	0	0
Chinese or Other Ethnic Group Chinese	2	0.36
Chinese or Other Ethnic Group Other	0	0
Mixed Other	5	0.92
Mixed White and Asian	0	0
Mixed White and Black African	2	0.36

⁵ An abscond is defined in the SG Memorandum of Procedure, and should be applied for reporting purposes, as "an occasion when a restricted patient is absent without authority, namely: from a ward; from a work placement; from open supervision (ie. supervision which does not require the use of physical restraints nor continued oversight); exceeds his or her authorised suspension of detention; or flees from an escort.

⁶ As per footnote 1.

Mixed White and Black Caribbean	0	0
Not Known	5	0.92
Subject Declines to define Ethnicity	0	0
Subject Does Not Understand	0	0
White British	498	91.54
White Irish	4	0.74
White Other	14	2.58

Table 8: Number of RSOs managed under statutory conditions and/or notification requirements on 31st March 2009:

Number of RSOs	Number	Percentage %
On Statutory supervision:	163	30
Subject to notification requirements only:	381	70

Table 9: Delineation of RSO victims:

No. of RSOs:	Number	Percentage %
Convicted of a notifiable offence against a child under 16 years:	198	36.4
Convicted of a notifiable offence against a victim over 16 years:	111	20.4

There are a large number of offenders with an index offence of possession of indecent images. The age of the victim has not been recorded as it is not known. The results cannot highlight where there were multiple victims, or in a conviction for Breach of the Peace in some occasions where no age was recorded. Some Public Indecency offences do not have an age recorded.

Section 11 – The Scottish Prison Service

11.1 Introduction

11.2 The Scottish Prison Service (SPS), a responsible authority as described in sections 10 and 11 of the Management of Offenders etc (Scotland) Act 2005 (the Act), is fully committed to working with partners across the Scottish Criminal Justice system to improve levels of public protection and reduce the risks associated with offending behaviour.

11.3 SPS complies with the requirements of MAPPA as laid out in the Act, sharing relevant information - including risk assessments and action plans - with police forces, CJSW services and health services, contributing to the creation of robust risk management plans for sex offenders being released into the community following a custodial sentence.

11.4 SPS is legally required to keep in safe and secure custody those offenders sentenced by the court to a period of imprisonment. During 2008/09, the average daily population in Scotland's prisons was 7,991, an increase of 8% when compared to 2007/08 and 11% when compared to 2006/07. In addition to maintaining safe and secure custody and order, SPS also plays a vital part in preparing offenders for release.

11.5 Offender management

11.6 Throughout their period in custody, all offenders are subject to the Integrated Case Management (ICM) process. Offenders subject to post-release supervision (including all sex offenders serving six months or more in prison) are managed via an enhanced version of the ICM process, where prison and social work staff (both prison-based and community-based) work together to assess the risks associated with individual offenders and develop an action plan aimed at addressing risk and need through a series of appropriately sequenced interventions (such as prisoner programmes and approved activities).

11.7 These risk assessments are reviewed on an annual basis (as a minimum) and prior to release. They are used to inform decisions on progression through the prison estate and discussed openly with the offender and a range of key staff (including social and healthcare professionals). The forum for this discussion is the ICM Case Conference, a meeting between the offender and key staff that takes place each year during custody. Where an offender is considered to present a high risk, prior to release (or transfer to less secure conditions), other key staff involved in criminal justice (such as the police) are invited to attend the (pre-release) Case Conference, allowing for a level of information-sharing between criminal justice agencies not seen prior to the implementation of MAPPA (and ICM).

11.8 The risk assessments and pre-release case conference help inform decisions on how the offender should be managed on release (ultimately informing the decision on which MAPPA level is appropriate). This is the point at which all relevant information is collated and provided to MAPPA co-ordinators across the eight Criminal Justice Authorities (CJA's).

11.9 Monitoring and assurance

11.10 Following the implementation of MAPPA in 2007, several audits were carried out in several prisons to establish the level of compliance with stated procedures. All but one prison received a positive level of assurance. An action plan was put in place to address some minor procedural issues found in that particular site and assurance was subsequently provided that these issues had been addressed.

11.12 SPS subsequently developed internal MAPPA standards (based on the procedural guidance) which provide local managers with a mechanism for delivering ongoing assurance in terms of compliance with MAPPA procedures. A further (internal) audit of SPSs compliance with MAPPA is scheduled for later this year.

11.13 The recent joint inspection by HMIP⁷, HMICS⁸ and SWIA⁹ on the management of high risk offenders considered levels of compliance with MAPPA; SPS has responded to the findings and is currently developing plans for improving the application of offender management processes. Additionally, SPS is working with police colleagues to consider ways of improving the sharing of information with regard to progression of high risk offenders through the prison estate.

11.14 Wider MAPPA community

⁷ Her Majesty's Inspectorate of Prisons (Scotland)

⁸ Her Majesty's Inspectorate of Constabulary for Scotland

⁹ Social Work Inspection Agency

11.15 SPS continues to support both local and national MAPPA groups through senior managers' attendance at MAPPP meetings (for all offenders managed at MAPPA level 3). Partnership arrangements with the CJAs and MAPPA co-ordinators continue to develop through the efforts of SPS's dedicated CJA Liaison Managers.

11.16 Formal reporting

11.17 In line with formal reporting requirements, this SPS submission for the year ending 31st March 2009 includes:

- Details of programme completion for registered sex offenders (RSOs) (by establishment and CJA);
- The number of risk assessments carried out on RSOs (by establishment and CJA); and
- Training statistics relating to staff working with sex offenders in Scottish prisons.

11.18 Programme completion

11.19 SPS continues to provide nationally accredited programmes and other interventions that aim to drive improvements in the attitudes and behaviours that have led to offending, encouraging those in prison to accept responsibility for their actions, learn to manage their behaviour and consider the impact their actions have on family members, friends and the wider community.

11.20 The Sex Offender Treatment Programme suite (SOTP) is the primary vehicle for addressing the above issues with those prisoners convicted of sexual offences (or offences that contain some sexual element). There are currently four specific programmes that offenders undertake depending upon the level of risk they present and their own individual level of need:

- Core SOTP is aimed at those sex offenders presenting a medium, high or very high risk of sexual re-offending
- Extended SOTP is primarily aimed at those prisoners who have completed the Core programme, but the level of risk they continue to present requires further intervention;
- Adapted SOTP aims to achieve the same goal but takes account of particular issues with prisoners who have some limitation in terms of their social functioning; and
- Rolling SOTP is aimed at sex offenders presenting a low risk of sexual re-offending.

11.21 These programmes are delivered in HMPs Barlinnie, Edinburgh and Peterhead and HMYOI Polmont. Other prisons will send offenders to one of the above, should they be considered suitable for the SOTP and express a willingness to participate.

11.22 In addition to the SOTP programmes, SPS also delivers a range of interventions (termed Approved Activities) including Anger Management, Violence Prevention, Alcohol Awareness and Substance Misuse that are made available to sex offenders via assessment of risk and need.

11.23 During 2008/09 (the period covered by this submission), almost **200** programmes were delivered to sex offenders across the prison estate. The activity and scope of these programmes can be extensive; some involving more

than 100 hours of group work and targeted intervention. A detailed breakdown is contained in Annexe 1.

11.24 Risk assessment

11.25 In SPS, the primary tools used in assessing the risks posed by sex offenders are Risk Matrix 2000 (RM2000) and Stable and Acute 2007 (SA07). These risk assessment tools are supported by others (such as LSI-R) which look at wider aspects of offending behaviour (not limited to sexual offending) to ensure a wider appreciation of the level and nature of risk is gained by prison and social work staff (and communicated to the wider criminal justice community).

11.26 Between 1st April 2008 and 31st March 2009, more than **900** risk assessments were carried out on registered sex offenders (due to the dynamic nature of risk - in that it can change over time - some registered sex offenders undergo several risk assessments over the course of one year). A detailed breakdown is contained in Annexe 1.

11.27 Staff training

11.28 Over the past two years, significant training has been delivered - to both prison-based and social work staff - aimed at increasing the understanding of risk and the methods that can be adopted to improve public protection by reducing an individual's level of risk. During 2008/09, a total of **109** prison and social work staff received training on risk assessment/management tools and programme delivery.

11.29 During 2009/10, SPS and partner agencies will be working together to develop a generic (risk-themed) training package that will be made available to all staff working with offenders and others who support them.

11.30 Summary

11.31 This past year has seen a continuation of SPS's commitment to working with partners in criminal justice to address the needs of registered sex offenders and collaboratively manage the risks they present to the community. Links with CJAs are positive and strengthened by ongoing consultation and attendance at local and national MAPPA groups. SPS tracks the developments set out in the CJA Area Plans to ensure internal decisions support future developments and that SPS considers the implications for partners when making key management decisions.

Annexe 1

Number of programmes delivered to Registered Sex Offenders, by prison	
Aberdeen	10
Addiewell	-
Barlinnie	13
Cornton Vale	-
Dumfries	3
Edinburgh	17
Glenochil	-
Greenock	1
Inverness	8

Number of risk assessments completed on Registered Sex Offenders, by prison	
Aberdeen	53
Addiewell	3
Barlinnie	97
Cornton Vale	-
Dumfries	123
Edinburgh	267
Glenochil	-
Greenock	72
Inverness	22

Kilmarnock	-
Open Estate	1
Perth	-
Peterhead	116
Polmont	15
Shotts	1
TOTAL	185

Kilmarnock	26
Open Estate	4
Perth	54
Peterhead	83
Polmont	94
Shotts	6
TOTAL	904

Number of Programmes Delivered to Registered Sex Offenders, by CJA	
Fife and Forth Valley	21
Glasgow	31
Lanarkshire	16
Lothian and Borders	27
North Strathclyde	9
Northern	42
South West Scotland	22
Tayside	12
Outside Scotland	5
TOTAL	185

Number of Risk Assessments Completed on Registered Sex Offenders, by CJA	
Fife and Forth Valley	103
Glasgow	146
Lanarkshire	61
Lothian and Borders	244
North Strathclyde	60
Northern	112
South West Scotland	104
Tayside	44
Outside Scotland	30
TOTAL	904

Number Prison Staff Completed Training on Risk/Programme Delivery	
Aberdeen	3
Addiewell	6
Barlinnie	4
Cornton Vale	-
Dumfries	19
Edinburgh	29
Glenochil	-
Greenock	2
Inverness	6
Kilmarnock	-
Open Estate	-
Perth	2
Peterhead	20
Polmont	-
Shotts	2
TOTAL	93

Number Social Work Staff Completed Training on Risk/Programme Delivery	
Aberdeen	-
Addiewell	-
Barlinnie	1
Cornton Vale	-
Dumfries	-
Edinburgh	-
Glenochil	-
Greenock	4
Inverness	2
Kilmarnock	-
Open Estate	-
Perth	2
Peterhead	5
Polmont	-
Shotts	2
TOTAL	16

Section 12 – Community Treatment Programmes

12.1 The Community Intervention Service for sex offenders (CISSO), based in Edinburgh, is a criminal justice social work project, funded by Scottish Government. The aim of the project is to offer a specialist service across the Lothian and Borders area. The purpose of the service is to enhance and reinforce existing criminal justice social work practice with convicted sex offenders, the objectives being to maximise community safety and the protection of children and vulnerable adults.

12.2 The principal service offered by the project is the provision of an accredited groupwork programme, Community Sexual Offending Group Work Programme (CSOGP). The project offers consultancy to workers dealing with sexual offenders; it completes court assessments, in conjunction with Criminal Justice Social Workers, on individuals convicted of sexual offences and undertakes a limited amount of 2-1 individual work with offenders.

12.3 The CISSO staff group comprises an experienced staff group of one senior social worker, five main grade social workers and a criminal justice assistant whose primary role is to collect data for the accredited programme.

12.4 The programme is delivered by staff from the Community Intervention Service. The method employed is cognitive and behavioural which has been shown to be most effective in addressing offending behaviour. The CSOGP is for male offenders over the age of 21. Excluded from the programme are men with significant learning difficulties, or those with substance abuse or mental health problems and those who deny their offending. The programme is delivered to groups of around eight men who have committed a range of sexual offences. It is an accredited programme which is delivered across Scotland.

12.5 Offenders initially complete a 50 hour induction programme. An assessment is then made as to whether the client requires the full programme of an additional six modules (190 hours approximately) or a 50 hour relapse prevention programme for clients assessed as low risk. Men who have completed a relevant prison programme are referred directly into the relapse prevention module or to additional specific modules, as required.

12.6 The project has completed 11 groupwork modules, comprising: six induction groups; three relapse prevention programmes; and two core modules. There are currently three groups running two core groups and one relapse prevention module. A further relapse prevention module and an induction group started in June 2009.

12.7 During the annual reporting year, 62 men started in the groups, 47 have completed the induction module and 15 have completed induction and relapse prevention. Seven of these men have completed relapse prevention only (following a custodial programme). To date, no one has completed the core programme, due to the length of the programme. There will be no completions of the full programme for another year.

12.8 Case Study - Level 1

12.9 In 2007, Offender D, having pleaded guilty, was sentenced to a two year probation order for three offences of indecent exposure to children, and for accessing, via the internet, indecent photographs of children. He did not know any of the children whom he offended against. He was in his thirties and had no prior convictions. There was an additional condition added to his probation order, which required him to attend the sex offender groupwork programme to undertake work to address his sex offending. He was also placed on the sex offender register until April 2012.

12.10 On being placed on probation initially Offender D was required to attend 1:1 appointments with his supervising social worker. He was assessed using RM2000, which scored him as being a medium risk of reconviction for sex offending. He was also assessed as being a moderate risk of harm.

12.11 In November 2007 offender D was subject to psychometric testing, carried out by CISSO staff. He then participated in the CISSO induction groupwork programme, which involved a 50 hour assessment module. He was then subject to further psychometric testing which identified that Offender D required to undertake a relapse prevention programme. Offender D completed this group programme, which ran from June until November 2008. He was described as making a very positive contribution to the group and was thought to have gained insight into his offending. By the end of the programme he was willing to acknowledge that there had been a sexual motivation to his offending behaviour, which he had initially denied. He was not deemed to require any further input from CISSO.

12.12 In tandem with the groupwork programme, Offender D continues to meet with his social worker on a 1:1 basis, and at each of these meetings he is subject to acute assessments as part of the assessment process of Stable and Acute 2007. The supervising social worker liaises with the police and routinely convenes Risk Management Case Conferences. This will continue until the completion of his probation order in July 2009.

12.13 In addition to supervision and monitoring by social work offender D is subject to police monitoring via the sex offender register. The police conduct unannounced home visits and to date Offender D has been co-operative.

12.14 Coinciding with the time of his conviction and sentence, Offender D became involved in a new relationship and while he advised his social worker of this relationship and that he had told his partner all of the details of his offending, this was not accepted at face value. The social worker met with Offender D's partner and disclosed the offending details although it was clear she was in fact informed already. Offender D's partner, with the agreement of all parties, met with CISSO project staff while the groupwork was ongoing, and wanted to know details of her partner's progress. Offender D's partner, although supportive, held very pro-social attitudes and strongly disapproved of all offending. Offender D's partner has no children. Offender D is still subject to 1:1 social work supervision via probation and is not known to have re-offended.

Section 13 – Summary and forward plans

13.1 The Lothian and Borders MAPPA Annual Report 2008-2009 outlines how the responsible authorities and duty to co-operate agencies work together to assess and manage the risk posed by sex offenders living in the community. Throughout the year those involved in public protection have endeavoured to increase understanding of what works best, have responded to new learning and continued to build upon achievements to date.

13.2 During the year, MAPPA in Edinburgh, the Lothians, and the Scottish Borders, have worked with over 710 cases in the community, in prison and in hospital.

13.3 There was a low rate of further serious offending. Of the 10 cases of convicted re-offending involving MAPPA level 2 offenders, five were non-contact offences and two related to historical offending. There were no cases of re-offending involving MAPPA level 3 offenders. Where there has been further serious re-offending, we want to ensure we have done all that was reasonably possible to do. That is the purpose of our Significant Incident Review Protocol.

13.4 The MAPPA Operational Group, which has representation from each of the five local authorities, health and police, has been working to develop best practice aimed at strengthening MAPPA and aligned performance. This has included implementing a management system for monitoring the completion of level 2 and 3 MAPPA actions within a specific timeframe. This group also reviewed and developed practice in relation to health disclosure and the management of offenders who pose a risk in more than one local authority.

13.5 Each of the five Chief Officer Groups/Critical Services Oversight Groups (COGs/CSOGs) at local authority level has included MAPPA in their discussions. This is in recognition of the impact and link to the other service areas on an interagency basis, the outcome being the provision of clear strategic governance in the public protection areas of child and adult protection and offender management.

13.6 Operationally, MAPPA has held more than 80 meetings over the last year on level 2 and 3 cases.

13.7 Disclosure is considered at all MAPPA meetings to assess if anyone needs to know specific details of the offender in order to allow them to make informed decisions on protecting themselves or others in their care.

13.8 A memorandum of understanding across all agencies working in MAPPA has been prepared and is in the progress of being endorsed by all agencies at executive level.

13.9 Acknowledging that the most effective inter-agency working is achieved by face to face working in shared offices, have planned for the co-location of the CJSW team and police Offender Management Unit within the new Livingston Civic Centre.

13.10 During the coming year responsible authorities and duty to co-operate agencies will continue to commit to MAPPA process to ensure that everything that can be done to prevent re offending by individuals managed within MAPPA is carried out. During the coming year we plan to:

- Form a Public Protection Office Strategic Management Steering Group, which will have representation from across the Edinburgh, Lothian and the Scottish Borders area. This group will provide strategic oversight of areas such as multi-agency training, public information and multi-agency guidance and protocols.
- Publish an Edinburgh, Lothians and Scottish Borders 'Roles and Responsibility' document.
- Closely link the strategic oversight of MAPPA within the Edinburgh, Lothian and the Scottish Borders area with other critical areas of public protection such as child and adult protection
- Introduce multi-agency training regarding the practical use, and supervision of, the Stable and Acute assessment process, including contextual information to enhance practitioners understanding of the relevance of the tool. This will be rolled out in conjunction with a local guidance manual, and potentially the provision of a local advisory group for practitioners and supervisors.

- Ensure that the recommendations for agencies contained within the recently published multi-agency inspection report 'Assessing and managing offenders who present a high risk of serious harm 2009' are fully considered and discharged.

13.11 As outlined in this annual report, MAPPA brings together responsible authorities with other public, private and third sector agencies or organisations to form a network of information, risk management and support, the aim of which is to use every available means to assess and manage the risk posed by certain offenders.

13.12 While risk assessment and risk management cannot eliminate all re-offending, within the Edinburgh, Lothian and the Scottish Borders area, responsible authorities and duty to co-operation agencies are committed to doing everything they can and to do so as effectively as possible.

Section 14 - Glossary of terms

Absconded (regarding restricted patients) - Abscond is defined as an occasion when a restricted patient is absent without authority.

Care Programme Approach (CPA) - A process for organising the multi-disciplinary care and treatment of patients with mental health problems. Regular review meetings are held where needs are identified and plans put in place to meet these needs. Risk assessment and risk management are an integral part of this process.

Community Justice Authority (CJA) - Creates safer communities through a reduction in re-offending, by providing appropriate and timely services to offenders at all stages of the criminal justice process.

Criminal Justice Social Work (CJSW) - Criminal Justice Social Work services are provided by local authorities and are responsible for the statutory supervision of sex offenders who are in, or have been released from, custody (on licence) or who have been placed on supervision in the community by a court.

Community Sexual Offending Group Work Programme (CSOGP) - Accredited community based programme delivered by CJSW.

Community Service Order - Up to 300 hours unpaid work to be conducted within a set timescale.

Combination Order: Probation and Community Service. Commission of a further offence is an automatic breach of the order and if a breach is established at Court, the offender is remitted back to court for sentence for the 'new' and previous offence.

Compulsion Order (CO) - A disposal made by a criminal court where a person has been convicted of an offence or acquitted on account of insanity or found insane in bar of trial. The patient may be detained in hospital (which would usually be the case initially) or subject to compulsory treatment in the community. A compulsion order operates in a similar way to a CTO.

Compulsory Treatment Order (CTO) - A civil order under the Mental Health (Care and Treatment) (Scotland) Act 2003, which allows for the compulsory treatment of a person with mental disorder either in hospital or the community.

Conditional Discharge (CD) (regarding restricted patients) - The Tribunal is empowered to order CD when a restricted patient no longer requires to be detained in hospital. The Tribunal may impose such conditions as it sees fit. The patient is subject to recall to hospital by Scottish Ministers in the event of a deterioration in the patient's mental disorder and/or breach of conditions.

Compulsion Order and Restriction Order (CORO) - Where there is an ongoing risk of serious harm the court may make a restriction order in addition to a *Compulsion Order*. A patient on a CORO can only be transferred to another hospital or given periods of time outside hospital with the permission of the Scottish Ministers. Where a patient is subject to a CORO they can only be discharged to the community by a Mental Health Tribunal. Usually strict conditions will be placed on a patient on a CORO in the community and the Scottish Government closely monitors the management of these patients. While a patient is on a CORO, either in hospital or conditionally discharged to the community, they are a *restricted patient*.

Custodial Sentence - Short Term Prisoner: custodial sentence less than four years imprisonment. Long Term Prisoner: custodial sentence over four years.

Drug Treatment and Testing Order (DTTO) - A court order aimed at assisting offenders to reduce drug use and related offending. An offender must agree to treatment and submit to frequent and random drug tests, attend court for monthly reviews and be supervised by a DTTO Team.

Escorted Leave (regarding restricted patients) - A period of suspension of detention from the hospital accompanied by a nurse escort and following consent from Scottish Ministers.

Extended Sentence Order (ESO) - Statutory order imposed by Court at time of sentencing - may be imposed on short or long term sentence, ie. in 2000 sentenced to nine years imprisonment + five years ESO - will be released from custody in 2006 (if refused parole) but will be subject to supervision until 2014.

Foreign Travel Orders (FTO) - Prevents offenders with convictions for sexual offences against children from travelling abroad in order to protect children from the risk of sexual harm.

Formal Disclosure - If a decision is made to formally disclose, then a letter of disclosure will be drafted on behalf of the Deputy or Assistant Chief Constable of the relevant police force. This letter should be served by the police, personally, on the person to whom the disclosure is to be made. The disclosure should be limited to the information necessary to minimise the risk. Officers serving this letter should ensure that they do not disclose any information other than what is stipulated in the letter. Although no further information should be disclosed, advice and guidance on how the individual should respond to the information in order to protect themselves or others and in particular whether any further action may be necessary.

Housing SOLO - Housing Officer engaged in the management of sex offenders.

Hospital Direction (HD) - A disposal, which may be made by a criminal court where a mentally disordered offender is convicted on indictment (ie. a serious offence has been committed). The patient is detained in hospital and a prison sentence is imposed which runs in parallel. If the patient no longer requires treatment in hospital then they can go to prison to serve the rest of their

sentence. If they remain in hospital at the end of the prison sentence then they must be released or if they need to be detained in hospital, then an application is made for a CTO. While a patient is on a HD they are a Restricted Patient.

Integrated Case Management (ICM) - Predicated on a case conference model. This approach brings together the prisoner, their family (where appropriate) and other key staff to examine the prisoner's progress through custody. The case conference will consider the actions/interventions that are necessary to help make the prisoner's stay in custody successful. The case conference will also examine the assessed risks the prisoner poses and help decide on appropriate interventions aimed at reducing those risks. This particular approach should prove useful in (a) keeping the prisoner at the centre of the ICM process, (b) maintaining a focus on issues which are external to the prison as well as internal, (c) the sharing of relevant information across agencies and (d) assessing and managing risk.

Legally insane - A small number of mentally disordered offenders are found unfit to plead (also known as insanity in bar of trial) or are acquitted due to insanity at the time they committed an offence. Legally such individuals are regarded as insane, even though this is not a term used by mental health professionals. In these cases courts may make a mental health disposal and in most cases individuals are detained in hospital.

Life Licence - Those who have received a mandatory life licence (e.g. murder); those who receive a discretionary life licence – imposed in respect of repeat offenders.

Missing - A Sex Offender should be considered as Missing in the following circumstances; Where the current whereabouts of an offender are unknown and Police enquiries to establish their whereabouts have been unsuccessful. As a result of these actions the risk management process may not be achievable and there exists a requirement to trace the individual and address the risk he/she may pose and establish if further offences have been committed. Those offenders who have left the territorial jurisdiction of the United Kingdom and whose location abroad is known are not considered as missing. The requirement to comply with the registration process is suspended whilst offenders are out with the UK. Where appropriate, consideration should be given to establishing whether the offender has committed an offence relative to notification of his/her foreign travel. In this situation if an arrest warrant is issued relative to such an offence the offender should be regarded as Wanted.

Non Parole Licence - Long term prisoners, excluding life sentence prisoners, are automatically released on Non Parole Licence when they have served 2/3 of custodial sentence.

Notifiable Offence - If someone is convicted of an offence listed within Schedule 3 of the Sexual Offences Act 2003 they are required to comply with the notification requirements of the Act. They must provide or 'notify' the police with certain information about themselves at agreed points in time and for an agreed number of years (in some cases for life). This is what is commonly referred to as being on the Sex Offender Register.

http://www.opsi.gov.uk/acts/acts2003/ukpga_20030042_en_6#pt2-pb1

Notification Order (NO) – Require sexual offenders who have been convicted of a sexual offence overseas to register with police, in order to protect the public in the UK from the risks that they pose.

Order For Lifelong Restriction (OLR) - A sentence imposed by a High Court Judge in Scotland on the most serious sex offenders. The offender will be imprisoned for a period, which will be determined by on going risk assessment and will be subject of lifelong Risk Management Plans.

Parole Licence – Prisoners serving a long-term sentence can apply to be released on parole from the half way point of their sentence. The parole board for Scotland consider application for early release, the application includes reports from community social worker, prison based social worker, Personal Officer (SPS), etc.

Probation Order - Six months to three years with conditions attached, ie. address sexually offending behaviour within the community. Commission of further offence is an automatic breach of order and if breach is established at Court, the offender is remitted back to court for sentence for 'new' offence and previous offence.

Restricted Patient (RP) – This is an offender defined under the Management of Offenders etc (Scotland) Act 2005 Section 10, (11 (a) to (d)).
http://www.opsi.gov.uk/legislation/scotland/acts2005/asp_20050014_en_1#pb3-11g10

Registered Sex Offender (RSO) – This is an offender convicted of an offence specified in Schedule 3 of the Sexual Offences Act 2003 and therefore subject to the notification requirements of this act.
http://www.opsi.gov.uk/Acts/acts2003/ukpga_20030042_en_1

Restriction of Liberty Order (RLO) – A court order requiring an offender to remain within their home at times specified by the court. Compliance is monitored electronically by the person wearing a Personal Identification Device (PID) or 'tag'.

Risk of Sexual Harm Order (RSHO) - Places prohibitions on someone who is behaving in such a way which suggests that they pose a risk of sexual harm to a particular child or to children generally. The person's behaviour need not constitute a criminal offence, and s/he need not have any previous convictions.

Serious Sexual/Violent Offence -

As per the Scottish Government *Crime and Statistics Bulletin: Crime and Justice Series*.

<http://www.scotland.gov.uk/Resource/Doc/239682/0066121.pdf>

This includes crimes of sexual harm or non-sexual crimes of violence.

Non-sexual crimes of violence - Includes murder and culpable homicide (including the statutory crime of causing death by dangerous driving or causing death by careless driving while under the influence of drink or drugs). NB, an assault is classified as serious if the victim sustained an injury resulting in detention in hospital as an in-patient or any of the following injuries whether or not he was detained in hospital: fractures, internal injuries, severe concussion, loss of consciousness, lacerations requiring sutures which may lead to impairment or disfigurement or any other injury which may lead to impairment or disfigurement. Robbery - Includes offences involving intent to rob. Also includes threats and extortion and cruel and unnatural treatment of children.

Crimes of indecency - Rape and attempted rape (comprises rape and assault with intent to rape.) indecent assault, lewd and indecent behaviour (previously titled 'lewd and libidinous practices') and comprises lewd and libidinous practices against children and indecent exposure.

Other - Includes offences connected with prostitution. For the purpose of this report will also include any Scottish Offence listed within Schedule 3 of the Sexual Offences Act 2003 Part 2 -

http://www.opsi.gov.uk/Acts/acts2003/ukpga_20030042_en_12

Sexual Offender Liaison Officer (SOLO) - Criminal justice social worker engaged in the management of sex offenders.

Sexual Offences Prevention Order (SOPO) - A court may make a SOPO at the time of dealing with certain sexual offenders or when the police make a special application on account of the offender's behaviour in the community. A SOPO will require the subject to register as a sexual offender and can include conditions, for example to prevent the offender loitering near schools or playgrounds. If the offender fails to comply with (ie. breaches) the requirements of the order, he can be taken back to court and may be liable to up to 5 years' imprisonment.

Short Term Sex Offender Licence - All sexual offenders sentenced to 6 months or more but less than 4 years will be released on such a licence. Release will occur after completion of half the sentence subject to licence conditions for the duration of the sentence.

Sex Offender Treatment Programme (SOTP) - Nationally accredited programme delivered by Scottish Prison Service.

Standard Licence Conditions - Standard Licence Conditions apply to all licences whether on extended sentence, life, discretionary, parole or non-parole cases. In addition to standard conditions, the parole board can consider *additional* conditions on submissions made by CJSW.

Statutory Supervision - Includes Life Licence, Parole Licence, Non Parole Licence, Extended Sentence Order, Order For Lifelong Restriction, Short term Sex Offender Licence, Probation Order, Community Service Order. All of which are defined.

Suspension of Detention (regarding RPs) - A period of leave either escorted or unescorted following consent of Scottish Ministers.

Transfer for Treatment Direction (TTD) - A procedure under the Mental Health (Care and Treatment) (Scotland) Act 2003 Act, which allows a sentenced prisoner with a mental disorder to be transferred to a psychiatric hospital for treatment. If the patient no longer requires treatment in hospital then they can go back to prison to serve the rest of their sentence. If they remain in hospital at the end of the prison sentence then they must be released or if they need to be detained in hospital, then an application is made for a CTO. While a patient is on a TTD they are a Restricted Patient.

Unescorted (leave) (regarding restricted patients) - A period of suspension of detention from hospital under specified conditions as part of gradual rehabilitation programme and only following MAPPA consideration and Scottish Ministers' consent.

VNS Victim Notification Scheme (VNS) - Allows victims to receive information relative to the release of an offender.

Victim Support Scotland (VSS) - Provides practical and emotional support to victims.

Violent and Sex Offenders Register ViSOR - Provides a national database, accessible by a number of public protection agencies across the UK, of violent and sexual offenders managed within the Multi-Agency Public Protection Arrangements (MAPPA). It also contains details of other persons who may not have a conviction for a violent or sexual offence, or indeed any criminal offence, but are assessed as posing a risk of serious harm to the public.

Wanted - An RSO should be considered as wanted in the following circumstances; where it is known that an offender is actively avoiding police in response to police enquiries to trace that individual relative to offences they may have committed or in relation to other matters for which it is required that they be interviewed. This may include those occasions where an offender is the subject of an arrest warrant.