



Safe and Together Institute for Scotland: Report of scoping activity

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Background

1. In June 2017, Social Work Scotland and The Centre for Inspiring Children's Futures were approached by Scottish Women's Aid, Barnardo's and the Improvement Service (which hosts the National Violence Against Women Network) to be part of a consortium that would seek to develop plans for an Institute to support the development and implementation of Safe and Together in Scotland. At the time eight local authorities had committed to implementing the Safe and Together model.
2. Safe and Together is an approach developed in the United States which provides a framework for partnering with domestic abuse survivors and intervening with domestic abuse perpetrators in order to enhance the safety and wellbeing of children. It partners with the non-abusive parent and holds the abusive parent accountable for their violence which is framed as a parenting choice.
3. The Consortium developed a proposal for an Institute which Scottish Government committed to funding 50%. The remaining funding was sought through a bid to the Big Lottery which was unsuccessful, however. During the intervening time, the organisations implementing Safe and Together were gaining a greater understanding of the opportunities and challenges of implementing this approach. A total of 13 local authorities had now committed to its implementation.
4. In recognition of the work of the Consortium and the developing knowledge and understanding of organisations, the Justice Directorate of Scottish Government commissioned Social Work Scotland to develop a detailed proposal for Institute going forward. The first stage was to undertake a small-scale scoping activity to consult with a range of partners to document the experiences of those using the model in practice and to gather views about what might be required at a national and strategic level to support the implementation of Safe and Together across Scotland.

Context

5. Each year Scottish Government issues a national bulletin presenting the statistics on domestic abuse based on details of incidents and recorded crime supplied by Police Scotland, however, as the bulletin notes not all incidents of domestic abuse are reported to the police. The definition used by Police Scotland is: '*Any form of physical, sexual or mental and emotional abuse [that] might amount to criminal conduct and which takes place within the context of a relationship. The relationship will be between partners (married, cohabiting, civil partnership or otherwise) or ex-partners. The abuse can be committed in the home or elsewhere*' (Scottish Government 2017, p.1).
6. The latest bulletin (Scottish Government 2017) reports a slight increase in the number of recorded incidents of domestic abuse in Scotland in 2016-2017, but generally levels have remained relatively stable for the last

six or seven years at around 58,000 to 60,000 incidents a year. Where it was recorded, almost 80% of all incidents had a female victim and a male accused (the same as in 2015-16) and over half (55%) of incidents (where the relationship between the victim and accused is known) were between current partners and 44% involved ex-partners. It should be noted, that these figures relate to recorded incidents only and do not reflect the smaller number of reports which result in convictions.

7. Little is recorded nationally about the numbers of children within families who may have witnessed or experienced domestic abuse, however, it is not unwise to surmise that in many of these recorded incidents there will be children living in households where domestic abuse is prevalent or present at the time of the incident; the majority of incidents take place at weekends where children are more likely to be present. The most recent child protection figures record that domestic abuse was a cause for concern for 37% of the 2,631 children on the child protection register from August 2016 to July 2017. Unlike England, Scotland does not collect national figures for children in need or for whom there may be a wellbeing concern so the reported number is likely to be much smaller than the actual number of children experiencing domestic abuse.
8. This also reflects a similar pattern in those referred to the Children's Hearing System. In 2017-2018, 2,215 of the 13,240 were referred on the grounds 'close connection with a person who has carried out domestic abuse', which was the third highest category for referring to the Reporter. Furthermore, very young children were more likely to be referred on this ground, with more referred in the first year of their life than any other age (347). This was 15.7% of children and young people referred on this ground (Scottish Children's Reporters Administration 2018).

Scoping activity: Methods

Aims and methods

9. The aim of this small scale scoping exercise was to explore the role and remit of a possible Scottish Institute for Safe and Together to inform the development of the funding proposal. This should take account of the experience of organisations using Safe and Together at operational and strategic level and the views of national stakeholders including the members of the Consortium.
10. The scoping review set out to gather data through:
 - Short review of policy and legislation within the Scottish context;
 - Short review of published evaluations of Safe and Together; and
 - 22 interviews with organisations, key stakeholders and US Safe and Together Institute.

Small-scale review of literature

11. This small-scale scoping activity considered Scottish Government's policy and legislation in relation to both domestic abuse and child wellbeing and protection which sets out the key national priorities and informs local strategic planning. Published reports on implementation, evaluations and research in relation to Safe and Together were also sourced.

Interviews

12. Thirty-one interviews were conducted with a range of professionals and organisations involved in child welfare and domestic abuse. This included 19 participants from 10 local authorities of which half held strategic

responsibility for justice, public protection or children's services. Members of the Consortium, colleagues from other interested organisations such as health, Police and Army Welfare Service (Ministry of Defense) and those working in third sector delivering services to support those affected by domestic abuse were also interviewed.

13. It should be acknowledged that despite the tight timescales for this scoping activity, all participants made great effort to be available and contribute either face-to-face or by telephone.

Surveys

14. Two additional sources of data were included in this report: the first was the inclusion of findings from a previous survey (referred to as Survey 1) which had been coordinated by the National Violence Against Women Network Coordinator to those implementing Safe and Together to gather information about their experiences of implementing the approach. Participating authorities agreed for the findings to be included in this report; and during the scoping activity, a second short survey was again coordinated by the Improvement Service and asked authorities not implementing this approach to discuss the reasons why. Six of the 21 authorities approached completed the survey (referred to as Survey 2).

Limitations

15. This small-scale scoping exercise was limited in terms of the range of participants due to time and capacity, however, the original plan to interview 22 was increased to 31 to include a wider range of stakeholders. It should be clear that this was not an evaluation of the Safe and Together model nor questioning whether there should be an Institute or not. The remit was clear that it was to explore the role and remit of a proposed Institute to help inform future funding proposals and the delivery plan of Equally Safe¹.

Scoping exercise: Context

Legislation and policy

16. Scottish Government is committed to building a fairer Scotland and for it to be the best place for children to grow up. This requires tackling inequalities and recognising that achieving change will take time and will require collective effort and a shared vision of what a fair and equal Scotland should look like in the years to come. On 5 October 2016, Angela Constance, then Cabinet Secretary for Communities, Social Security and Equalities launched the Fairer Scotland Action Plan. The plan sets out five clear commitments to change Scottish society and make it a fairer and more equal place to live:

- A Fairer Scotland For All
- Ending Child Poverty
- A Strong Start For All Young People
- Fairer Working Lives
- A Thriving Third Age

17. Recently, Scottish Government has passed a raft of legislation which tackles the issues of abuse and exploitation in various spheres. In October, 2015 the Human Trafficking and Exploitation (Scotland) Act 2015 was passed, which consolidates and strengthens criminal law against human trafficking and exploitation. In

¹ Priority 3, point 3.51 of Equally Safe Delivery Plan (Scottish Government 2017) to 'Establish a Safe and Together Institute for Scotland, and support the development of a demonstration project on the 'Safe and Together' model of child protection in a domestic abuse setting – encouraging a common understanding that perpetrators of abuse should be assessed and held accountable on their parenting choices which includes the perpetration of domestic abuse' (p.47).

July 2017, the Abusive Behaviour and Sexual Harm Act came into effect which created a specific offence of sharing private intimate images without consent. The Act includes a new statutory domestic abuse aggravator to ensure courts take domestic abuse into account when sentencing an offender and statutory jury directions for certain sexual offence cases. This was supported by awareness raising campaigns including Rape Crisis Scotland's '*I Just Froze*' to help those who might serve on juries to understand the deeply personal response by someone to being raped. The Domestic Abuse (Scotland) Act 2018 received royal assent in March 2018. This new Act creates a specific offence of domestic abuse that will cover physical abuse and other forms of psychological abuse and coercive and controlling behaviour that cannot easily be prosecuted using the existing criminal law.

18. In 2014, Scotland Government published its strategy - *Equally Safe* - for preventing and eradicating violence against women and girls, which was updated in 2016. It sets out a vision of a strong and flourishing Scotland where all individuals are equally safe and protected, and where women and girls live free from all forms of violence and abuse – and the attitudes that help perpetuate them. The aim of the strategy is to foster collaborative working between key partners in the public, private and third sectors to achieve this vision. The strategy recognises there are particular risk factors that increase vulnerability, and outline the full continuum of violence against women and girls: '*domestic abuse, rape, sexual assault, sexual harassment, commercial sexual exploitation (including victims of human trafficking), and so called 'honour based' violence continue to be prevalent across society*' (Scottish Government and COSLA 2017, p.6).
19. Key to the strategy and the Delivery Plan is the focus on primary prevention – stopping violence from happening in the first place – and in order to achieve this, *Equally Safe* identifies four key priorities:
 - a) Scottish society embraces equality and mutual respect, and rejects all forms of violence against women and girls;
 - b) Women and girls thrive as equal citizens: socially, culturally, economically and politically;
 - c) Interventions are early and effective, preventing violence and maximising the safety and wellbeing of women, children and young people; and
 - d) Men desist from all forms of violence against women and girls and perpetrators of such violence receive a robust and effective response.
20. The Delivery Plan is overseen by a Joint Strategic Board co-chaired at Ministerial level by the Scottish Government and COSLA and delivered through a Joint Delivery Group co-chaired at official level by the Scottish Government and COSLA to ensure that every agency is delivering its commitments in this Plan and that multi-agency working nationally and locally is embedded. The Delivery Plan also contained a specific recommendation for social work in relation to establishing a Safe and Together Institute and '*support the development of a demonstration project on the 'Safe and Together' model of child protection in a domestic abuse setting – encouraging a common understanding that perpetrators of abuse should be assessed and held accountable on their parenting choices which includes the perpetration of domestic abuse*' (Scottish Government 2017, p.47). It is worth noting that while the proposal for an Institute is not a demonstration project the aim is that it would deliver some of the same outcomes.
21. Core to Scottish Government's commitment to children and young people is the aim to ensure that children's rights are at the heart of legislation, policy and guidance. One key overarching framework which guides service design and delivery is Getting It Right for Every Child (GIRFEC); a framework to ensure that those providing services work together to support all families, and where appropriate, take early action at the first signs of any difficulty – rather than only getting involved when a situation has already reached crisis point. The GIRFEC approach is about how practitioners across all services for children and adults meet the needs of children and young people, working together where necessary to ensure they reach their full potential. For children and young people in need of protection, the National Guidance for Child Protection in Scotland (2014) provides a

framework for agencies and practitioners to agree processes for working together to safeguard and promote child wellbeing, particularly where there may be concerns of abuse and neglect.

22. The Children and Young Persons (Scotland) Act 2014 embeds the rights of children and young people across the public sector in line with the United Nations Convention on the Rights of the Child (UNCRC) and embeds its commitment to early years and early intervention in legislation and aims to put children and young people at the heart of planning and services. The Government also recognises how Adverse Childhood Experiences (ACEs), which include abuse, neglect and growing up in a house where there is domestic abuse, are stressful or traumatic experiences that can have a huge impact on children and young people's learning, behaviour and health throughout their lives. These risks increase as the number of ACEs increase; research from Wales found that people who reported experiencing four or more ACEs are 14 times more likely to have been a victim of violence in the last 12 months (Public Health Wales 2015). Scottish Government set out its commitment to preventing ACEs, helping to reduce the negative impacts of ACEs and supporting the resilience of children, families and adults in overcoming adversity in its Programme for Government 2018-2019 (Scottish Government 2018).

Perpetrator programmes

23. In their review of the literature on effective interventions and practices with perpetrators of domestic abuse, Brooks et al. (2014) discussed that many programmes use a combination of pro-feminist, cognition behavioural management and group work. The authors discuss how Respect² has published detailed national standards that are required to be at the core of a programme: the offender's own responsibility for his behaviour; acknowledgment that it is his choice to use violence when he does so; to contest myths and victim blaming; and to challenge expectations of men's power.
24. Brooks et al. (2014) recognise that men are usually mandated by the criminal justice system to complete perpetrator programmes which presents two difficulties. First, relatively few men who perpetrate domestic abuse are reported, arrested or charged with forms of behaviour relating to domestic abuse as under-reporting is very high. In 2015-2016 there were 12,374 convictions where a domestic abuse aggravator was recorded against the main charge, about a fifth of reported incidents (Scottish Government 2017). Second, some have questioned whether 'learning' is effective in the context of punishment (Brooks et al. 2014).
25. In Scotland, the Caledonian System is implemented in thirteen Scottish local authorities. The Caledonian System is an integrated approach to address men's domestic abuse and to improve the lives of women, children and men. It does this by working with men convicted of domestic abuse related offences on a programme to reduce their re-offending while offering integrated services to women and children. The Men's Service uses a person-centred approach with cognitive behavioural techniques to encourage men to recognise their abuse and take responsibility for themselves and their relationship with their ex/partners and children. Men will be referred to the programme if they have been convicted of offences involving domestic abuse. The system was developed for the Scottish Accreditation Panel for Offender Programmes and the Equality Unit of the Scottish Government. There is continuing support for men once they have completed the programme (Scottish Government 2018).
26. For most perpetrator programmes in Scotland, men are referred if they have been convicted of offences involving domestic abuse, but as discussed the numbers of convictions are about a fifth of number of offences reported and recorded, and as researchers have identified, domestic abuse incidents are often under-reported (Brooks et al. 2014).

² Respect is a UK-based membership organisation that develops, delivers and supports services for perpetrators and 'victims' of domestic violence. Within its remit is: training, accreditation, research, awareness raising and phone line support.

Safe and Together Model

The Model

27. The Safe and Together Model is an approach developed in the United States based on partnering with domestic abuse survivors and intervening with domestic abuse perpetrators in order to ensure the safety and wellbeing of children. Safe and Together is not an intervention or perpetrator programme in itself. Development of the model, tools and training programmes is overseen by the US Safe and Together Institute, which is a private, public and academic partnership.
28. The Safe and Together approach is predicated on the three principles of keeping a child safe with the non-offending parent, partnering the non-abusive parent and to hold the abusive parent accountable for their violence which is framed as a parenting choice. It provides a common framework for practitioners to consider and discuss concerns, challenges and solutions for families experiencing domestic abuse. The aim is for practitioners from statutory and non-statutory backgrounds to work collaboratively and reach consensus to ensure the safety and wellbeing of children living with domestic abuse. The view is that the safety of the non-abusive parent (usually the mother) is increased by partnering and supporting her to the child safe and together with her; and intervening with the offending parent (usually the father) to reduce the risk of harm to the child and to hold him to account for his use of violence and coercive control (Humphreys, Healey and Mandel 2018).
29. In delivering the three key principles in practice there are five critical components (Safe and Together Edinburgh 2017):
 - a) Professionals are asked to outline the perpetrator's pattern of coercive control to identify all forms of abuse and control in both current and previous relationships, rather than outlining singular incidents of physical violence;
 - b) Professionals are asked to outline how this has harmed the child including descriptions of direct physical, emotional and sexual abuse from the perpetrator to the child, as well as the way in which the domestic abuse has harmed them;
 - c) Full description is provided of the various ways in which the non-offending parent has promoted the safety, wellbeing, stability and nurture of their children;
 - d) Impact of the perpetrator's pattern of abuse is outlined and aims to describe the wide-ranging impact that the perpetrator's behaviour has on the child. Consideration is given to how the abuse adversely impacts on all aspects of wellbeing; and
 - e) Role of other adversities like substance abuse, mental health, culture and other socio-economic factors is outlined using the fifth component.
30. To date, Safe and Together has been implemented statewide in 11 US states, and by the Army Welfare Service and some local authorities in Scotland and England. In Australia, the Safe and Together Institute staff consulted with elected officials, and provided training and technical assistance to child welfare agencies and their community partners.

Evaluation

31. A range of data gathering and evaluation activity has been reported in four of the 11 US states which have adopted the approach. Evaluations of practice are difficult, particularly when evaluating an approach as opposed to an intervention. Two of the evaluations focused on the impact of training, but the remaining two did gather evidence on parts of the approach to assess impact on practice.

32. In areas within Florida decreases of up to 50% were recorded in removal rate of children following training and implementation of Safe and Together. The data was collected in 2012-2013 and it is unclear whether it has been gathered annually to help identify whether this has been a continuing trend. Neither is it possible to determine cause and effect from the evidence presented, but staff locally reported that the implementation of Safe and Together had contributed to the reduced removals.
33. In a separate evaluation in Ohio, data was collected from 31 of 88 counties: 24 had trained staff in the approach and seven had not yet participated in the training. The report found significant attitude change (less victim blaming) towards adult domestic violence survivors and strong changes in on-the-ground case practice. The desk reviews, interviews and surveys indicated that key child welfare practices such as screening and assessment for coercive control were improved. Child welfare services were better at partnering adult victims in order to assess victims' protective capacities and efforts to keep children safe. From a practice perspective, the evaluation reported that participants trained in Safe and Together were able to better assess and document the impact of perpetrators' patterns of behaviour on children (Safe and Together Institute 2018).
34. Other international work (Humphreys and Nicholson 2017) included Safe and Together as part of the Multi-Agency Triage (MAT) project. The pilot project was designed primarily to deliver daily collaborative multi-agency triaging of all police family violence reports in the north-eastern region of Melbourne and to explore and develop a different way of managing and responding to police referrals of family violence incidents. While the evaluation focused on the MAT project, the evaluation also found that *'Structured application of Safe and Together as part of this collaborative approach ensured the focus on the perpetrator's pattern of behavior' (p.7)* and *'how the triage process was informed by the Safe and Together principles and lens at the "front-end" of intake and triage and how this can influence the whole case progression.'* (p.6).
35. A second study (Humphreys, Healey and Mandel 2018) in Australia explored the role of the case-reading tool developed by the Safe and Together Institute in the examination of case files. Two to three case files across five Australian states were examined to assess the extent to which domestic and family violence is identified in child protection case files and to assess the quality of case practice from a domestic and family violence-informed perspective, as documented in the case file. While the focus of the research was on the content of the case files, auditors *'talked positively about the way that the training and tools shifted the focus of a complex case to a DFV focus and required them to articulate details about behaviour rather than hide behind euphemisms'* (p.286).
36. While the evaluation on the approach and its impact on practice is limited, the clearest account of measuring impact was undertaken by City of Edinburgh (2017). Before staff were trained in the approach, the authority audited 26 case files from children and families in 2014 where there had been three or more domestic abuse concern forms sent to the authority within a six month period, and where a risk and needs assessment had been carried out. In 2017, similar sample parameters were set and the audit was made up of 18 cases allocated to social workers not trained in the model and 12 cases which had been allocated to Safe and Together Champions to allow for some comparisons. Some of its key findings were that:
- The percentage of assessments which partially or fully met best practice in relation to domestic abuse rose from 69% (2014) to 100% (2017) of cases allocated to Safe and Together Champions; after the training there were no cases allocated to Safe and Together Champions which failed to meet best practice, in comparison to 31% (2014) of cases audited before the training.
 - The percentage of child's plans which fully or partially recognised the wide-ranging impact on the child rose from 72% of cases audited in 2014 to 100% of the audited cases allocated to Safe and Together Champions cases in 2017.

- The percentage of child’s plans which fully or partially made clear what parents are expected to do about the domestic abuse rose from 50% of cases audited in 2014 to 100% of the audited cases allocated to Safe and Together Champions cases in 2017.
- The percentage of child’s plans which partially or fully evidenced that the perpetrator was at the centre of interventions rose from 61% of the audited cases in 2014 to 80% of the audited cases allocated to Safe and Together Champions cases in 2017.

37. Through discussions with the Institute, it was clear that the organisation, in partnership with international colleagues, tries to be as responsive and as flexible as possible so that the Safe and Together model and training programmes meet the needs of local organisations and within the contact of often difficult financial constraints.

Training programmes

38. In order to ensure there is integrity to the Safe and Together Model, the Safe and Together Institute in the United States offers its ***Safe and Together Training and Technical Assistance Package*** using skill based to help practitioners improve their capacity to conduct safety and risk assessments, interview family members, accurately document domestic violence dynamics, develop safety plans and legal filings. Elements of this package include, for example:

- Half-day briefing session to raise awareness across all stakeholders and partners;
- Four-day training for practitioners working with families and frontline staff on the *Safe and Together* model;
- *Supervising Domestic Violence Cases* training for supervisors and managers;
- Training on domestic violence consultation or peer review skills.
- Training for child welfare legal staff
- Training on the *Safe and Together* model for community child welfare service providers including in home services such as family preservation and parent aides, prevention workers and child guidance clinics.

Scoping exercise: Findings

39. Through the interviews, participants were asked to share their experiences locally of training and implementing Safe and Together and to explore their views on the arrangements for a Scottish Institute. The data gathered was supplemented by the findings from both Survey 1 and Survey 2.

40. Participants were open, thoughtful and reflective and a range of views were expressed. In general, the views expressed coalesced around key themes explored in the remainder of this report, but there were two separate, but linked issues where a range of views were expressed: the extent to which Safe and Together is a new approach; and the relationship with the US Institute.

41. Many commented that the theoretical underpinning to the Safe and Together approach reflected the same values and principles which underpin good and effective practice with children and families who may have experienced domestic abuse, but there was acknowledgement that the practical tools developed as part of the model were new. Some reflected that if given the time, capacity and resources then organisations in Scotland could develop an approach for Scotland without invoking the licensing arrangements of US model. It was accepted that within current budgetary constraints and capacity issues, this was unlikely to happen and Safe and Together offered a developed model which puts this thinking into practice.

42. This linked to the second issue about the relationship with the US Institute. Some thought Scotland should retain a close working relationship with the US Institute. Many organisations implementing the model had received extensive informal support from the US Institute in addition to the formal training, which had been greatly appreciated and welcomed. It was also thought that links with the US Institute could offer opportunities to work in partnership to inform national and international developments, research and evaluations. Other participants thought that the business model of Safe and Together posed financial and ethical difficulties for public sector budgets under significant pressure.
43. Another view expressed from the different perspectives was the role of Scottish Government. Several participants spoke of the need for leadership and clarity from Scottish Government if systems change was to be affected across the country.

Experiences of training and implementation

44. A series of questions were explored with participants:

- Current developments
- What does Safe and Together offer organisations?
- What has been achieved so far?
- Challenges of implementing Safe and Together

Current developments

45. Eleven organisations had commissioned the Safe and Together Institute to train some of its workforce in the Safe and Together approach. This include ten Scottish based local authorities and one UK-based organisation which employed staff working within Scotland, but arrangements varied across the eleven organisations. Two local authorities and the UK-based organisation had commissioned the four-day training delivered to frontline workers twice meaning that 90 workers were trained in the approach in each organisation. In one authority, the training was made available to team managers. A third authority commissioned one cohort of training for 40 frontline staff and a fourth trained 40 staff across two cohorts of training and shared each with different neighbouring authorities. The six remaining authorities commissioned training with a partner authority, which meant that 20 frontline staff were trained in each participating authority.
46. Six local authorities had provided a half-day information session for strategic leads across their authority, partner agencies and, in some cases, strategic leads from neighbouring authorities. Five commissioned the Safe and Together Institute to provide specific training to managers and supervisors, although most areas had included some managers in the training to frontline staff. Most areas offered places predominantly to children and families, and criminal justice workers, but also to colleagues working for health, police and the third sector including local women's aid organisations. Finally, some were involved in the forthcoming training planned for November 2018, which has been commissioned from Safe and Together, to develop a pool of accredited trainers based in Scotland.
47. From the responses to Survey 2, discussions had been or were underway in all six local authorities exploring the options and implications of implementing the Safe and Together, and many of these discussions had also included key partners. In two authorities, a decision had been taken to implement Safe and Together, but no agreement had yet been reached in three. In the sixth authority, the decision had been not to implement.

What does Safe and Together offer your organisation(s)?

48. Two key messages emerged from the scoping. First, domestic abuse was given greater attention and focus in local strategic planning fora, particularly in light of the new Domestic Abuse (Scotland) Act 2018 and its emphasis on emotional abuse and coercive control. Safe and Together provides an approach to deliver on both the national guidance for child protection and the delivery plan for Equally Safe. Second, the approach helped to operationalise and put into practice the values and principles of all those working within child protection and domestic abuse. It helps those working with victims of domestic abuse and perpetrators; as one interviewee commented: *'Safe and Together joins the dots between perpetrators choices to abuse, child protection and survivor strengths'* (Interview 7). The approach offers a shared language for all those working with children and families in all parts of our communities:

We recognised that we needed a different way of managing as the vast majority of child protection referrals are domestic abuse and not just from the areas of deprivation. We are finding there are issues of control and mental health in more affluent parts of our community.'

[Interview 10]

What has been achieved so far?

49. Generally, those interviewed reflected that the implementation of Safe and Together was in the early stages in their local areas. The commissioning and delivery of the training programme was a significant achievement, but recognised that this was a start to the process of systemic change. Implementation following the training was more variable. For some organisations, trained individuals often returned to practice in teams where only one or two colleagues were trained in the approach. Without support from team managers or supervisors, or opportunities to share their experiences, staff found it difficult to continue to use the approach in practice especially if assessments or reports were questioned in other forums including Children's Hearings or in Court.
50. Implementation appeared to have greater impact where specific training had been delivered to team managers and supervisors, and that those trained were brought together on a regular basis to share experiences:

'We bring our trained staff together as a mentors group every two months and supervisors together quarterly. We [Training Manager and Service Manager] sit on both groups and share information across the two groups. People really engaged and looking at the model, how it is applied and its impact. We are continuing to do development sessions with others. The Mentors Group looks at supporting Mentors with their own practice and also supporting others in teams.'

[Interview 6]

'Rolled out training and with community members...Elected members are being asked to some work within their own communities. This is the next step and led by elected members within their own wards.'

[Interview 10]

51. Respondents to Survey 1 also reflected that skilled and passionate champions had helped drive forward practice change and enabled more effective implementation.
52. Some participants thought that Safe and Together offered the opportunity for culture and systemic change, but that this would not be achieved through implementing this approach alone. The training and information

sessions held locally had increased awareness of the approach and of domestic abuse, and two to three authorities felt that the culture was beginning to change, however, others felt it was too early to comment.

53. Safe and Together offers a common language and consistent approach to assessment and report writing for a range of staff working within child protection and domestic abuse. It had also provided a language, giving a means and confidence for staff to challenge the views of others.

What have been the challenges in implementing or developing the approach?

54. The key challenge for implementing or developing the approach is sustainability and there were several contributing factors which were identified through the interviews and replies to Surveys 1 and 2:

- **Critical mass:** authorities discussed the need to reach a critical mass in terms of staff being trained and adopting the approach in practice, but were unclear about how and when this would be reached. Most thought that more staff need trained in the approach.
- **Cost:** the costs identified was mainly in relation to training:
 - Initial training: it is important to understand the scale and the costs of training in Safe and Together for both small and large authorities. Small authorities struggled to access budgets to commission Safe and Together training, but the proportion of the workforce trained was significant and while large authorities may be able to access the same budget more easily, the proportion of the workforce trained is minimal. As mentioned, several authorities had commissioned training in partnership and while this reduced costs, it also reduced the number of those trained in the approach.
 - Continued training: there is likely to be continued training needs for newly qualified practitioners, for new members of staff not trained in the approach and further developmental needs identified as staff become more experienced in the approach.
 - Accredited training: while many welcomed the opportunity to develop a pool of accredited trainers in Scotland some felt that the business model adopted by the Safe and Together Institute was unsustainable. The training to become accredited requires commitment from authorities in terms of releasing staff and the costs of the training. Once accredited, trainers needed to maintain their accreditation through delivering training to at least one cohort each year. The training is videoed and reviewed by the Safe and Together Institute and feedback is given to trainers. Participants welcomed the rigour and integrity of the accreditation process, but there was still a cost attached to each person trained to be paid to the Safe and Together Institute and individual accreditation required to be renewed every two years.
- **Organisational and culture change:** Safe and Together needs to be reflected in the strategic planning structures and local procedures - *'[it is] about linking into local strategic planning partnerships and community planning partnerships'* (Interview 10) - and clear management support is needed at all levels within the organisation – *'Achieving clear political commitment, leadership and expectations on Community Planning Partnerships, or at least Councils, Health and Social Care Partnerships and Health Boards'* (Response, Survey 2). The support of middle managers and supervisors was particularly crucial and without this individual staff members sometimes felt isolated within their teams and struggled to continue to use Safe and Together if the team was not open to the approach or supported by the team manager or supervisor. Another important factor was to clarify the expectations, roles and responsibilities of the different partners, and to agree that implementation of Safe and Together is a shared priority.

- **US model:** the underpinning values and principles of the model translated easily into practice in Scotland, however, for some staff the language, terminology and case examples used in the training materials could act as a barrier. Nor do the materials currently reflect Scotland's policy and legislation in relation to children's wellbeing and protection, and domestic abuse. Participants recognised that it changes to the materials needed to be agreed with the US Institute, but were unsure to what extent copyright extended to presentations and handouts; at what point are materials developed locally, owned locally?

What has been the impact of implementing Safe and Together?

55. Only one area had implemented for a sufficient period of time to undertake two case file audits to explore the impact of Safe and Together within the local organisation (Safe and Together Edinburgh 2017), but for most it was thought too early to undertake evaluations. Another authority was supporting the implementation of Safe and Together through a managed case implementation. The multi-agency team around the child were brought together and supported to use the tools to map a perpetrator's pattern of abusive behaviour and the survivor strengths. The DASH Risk Indicator Checklist³ was used to measure change in risk. The findings from the first managed case implementation highlighted that a significant reduction in risk has been identified (DASH RIC initial score = 14, DASH RIC final score = 4). Other outcomes included:

- Non-abusing parent less isolated.
- Perpetrator taking on some parenting responsibilities.
- Children more able to talk about Dad's behaviour.
- Schools had more information on Dad's pattern of abusive behaviour

56. Several areas were collecting anecdotal examples from practice. One area had noted increased perpetrator engagement, particularly in the early stages of child protection investigations, and more nuanced assessment with better analysis of risk and needs reflected in clearer reports. This area noted a reduction in child protection registrations due to domestic abuse:

'We are hearing and seeing the language of safe and together; for example, we are trying to embed the approach in the MARAC process and during MARAC meetings we are seeing a focus on perpetrators and those there are trying to be more supportive of the victim and using the language of safe and together.'

[Interview 8]

'Can see the changes in peoples thinking and significant shifts in peoples approaches, attitudes. Facilitators can see the shift in the approach and holding the perpetrator to account and this is no been seen in plans. Some people are also saying they are seeing improvements in practice across different agendas such as neglect and substance misuse.'

[Interview 12]

57. In another area, a trained Safe and Together Advocacy Worker had met with a Sheriff to talk through a new local Survivors Advocacy Project and about the approach taken through Safe and Together. A few days later, the Advocacy Worker observed:

'While supporting a client in the Sheriff Court in October, I observed a woman being sentenced for a shoplifting charge. During the narration it became apparent the woman was experiencing domestic abuse and had no support. Following disposal,

³ The Dash risk checklist was developed by Safe Lives to give a consistent and simple tool for practitioners who work with adult victims of domestic abuse in order to help them identify those who are at high risk of harm and whose cases should be referred to a MARAC meeting in order to manage their risk.

the Sheriff took time to talk to the woman about services in the area and passed information to her lawyer about the Survivors Advocacy Project to enable the lawyer to discuss ongoing support for the woman. This is the first time I have witnessed a Sheriff offer services/support in this way and it was obvious he had knowledge of the service.'

[Interview 6]

58. Changes in the experience and confidence of staff were also noted:

'Another example was a midwife using the approach in deciding the midwifery care with consultants and planned births. Using Safe and Together allowed medical professionals to see the broader social needs of the child and not just making decisions on the medical needs.'

[Interview 6]

'Feedback from staff has highlighted that they welcome a structure to work with when dealing with domestic abuse cases.'

[Interview 11]

'Anecdotally, it feels as though these approaches have given the workforce permission around relational based family practice. One interesting but untested development is that staff absences have reduced.'

[Interview 10]

'Another change is the experience of people in casework in terms of approaches to working with the victim and understanding the impact on children.'

[Interview 7]

Arrangements for a Scottish Institute

59. The remainder of the interviews explored the following questions:

- What is the key vision for Safe and Together and a Scottish Institute?
- What are the key tasks for a Scottish Institute?
- What should an Institute deliver in short and long term?
- How should we measure performance?
- How might the Institute be configured and what governance arrangements are needed?

What is the vision for Safe and Together and a Scottish Institute?

60. The vision for Safe and Together across Scotland was to support the development of competent domestic abuse informed and perpetrator patterned focused child-welfare systems in Scotland. People commented on the importance of moving away from the discourse on 'failure to protect' and to have the same expectations of perpetrators in relation to parenting as the non-abusing parent.

61. Some participants reflected that the vision of the Institute should be broader than Safe and Together and about Scotland's response to issues of domestic abuse, where Safe and Together contributes to an increased understanding of domestic abuse and how this relates to child protection and wellbeing.

62. The Safe and Together Institute should work to embed the principles of the approach across Scotland and help deliver Safe and Together in a high-quality, cost effective and consistent way. The Institute should support the development of a multi-agency workforce which is confident and competent in working with families and with other professionals.
63. The vision for the Institute should reflect and link with the policy of Scottish Government, particularly in relation to Equally Safe.

What are the key tasks of a national Institute both locally and nationally?

64. It was clear from the interviews and Surveys 1 and 2 that the role of the Institute locally was as equally important as its potential national voice.
65. In terms of local support, the following tasks were identified:
- Support and develop local awareness raising events and training programmes, and help maintain momentum;
 - Provide oversight and support in undertaking case file audits with structured governance;
 - Exchange of knowledge and good and developing practice through local networks and national fora, and help develop an understanding of what is good practice. Share local case examples and case studies;
 - Develop support networks for local coordinators, champions and mentors; and
 - Build and support evaluations of local implementation plans and identify measures of change to help local areas understand their progress.
66. In terms of national and strategic role, the following tasks were identified:
- **Leadership:** provide clear, effective, visible and influential leadership.
 - **National voice:** bring local authority and organisations working in the field together to develop a national voice and perspective on the wider issues of domestic abuse and child welfare strategy, guidance and policy. The Institute should link with all partners who deliver and inspect services. Also the Institute should develop strong strategic links to help community partnerships deliver on government priorities and their equalities agenda.
 - **National networks:** develop a network of community of practice; share experiences and share good practice; and engage with all local authorities and organisations working with children and families. It was also thought important to link with other national networks such as the Violence Against Women network to share knowledge and develop practice.
 - **Online repository:** provide access to a strong evidence base and good quality information and resources.
 - **Training:** many acknowledged that training was only the start of the process of implementation, but nevertheless did not feel that a 'critical mass' had yet been trained. Four key aspects emerged:
 - a. develop a pool of accredited trainers for organisations to access to deliver training in local areas;
 - b. agree revisions to the materials to reflect the language of practice and policy in Scotland through discussion with the US Safe and Together Institute, and to ensure the materials comply with Scottish legislation and policy;

- c. develop a national programme for training and workforce development in relation to domestic abuse which includes embedding the principles into pre- and post-qualifying training for social work, health and education; and
 - d. provide training for specific national organisations and, in particular, key decision-makers such as Children’s Hearing System and panel members, SCRA and the Judiciary and Sheriffs.
- **Research and evaluation:** participants spoke of the importance of linking with research partners to develop a research agenda to continue to develop a Scottish evidence base which contributes nationally and internationally. Participants also thought the Institute could develop materials and tools to support local evaluations and perhaps undertake a national benchmarking exercise or national case file audit to understand progress across Scotland.
 - **Develop relationship** with US Safe and Together Institute to negotiate a more sustainable business model for training and, in time, establish how the Scottish Institute can inform international developments of the model through the emerging knowledge gained from practice experience, evaluations and research in Scotland.

What should an Institute deliver in the short, medium and long term?

67. In the short term, participants reflected that it would be important to provide a national strategic voice, communicate with local organisations, support the delivery of training including negotiating agreed amendments to develop materials for a Scottish context, and explore the relationship with US Institute. It was thought important to build on the current momentum and enthusiasm in some areas, and to help re-engage areas where the momentum has stalled. A national event would mark the launch of the Institute and Scotland’s commitment to tackling domestic abuse.
68. In the medium and long term, participants thought the Institute had a role in continuing the public discourse in Parliament, Scottish Government, and with the press and public in terms of domestic abuse, child protection and children and families, and continue to influence policy debates and the legislative programme. The Institute could also support the development of local implementation plans and monitor implementation across Scotland through developing measures of change in practice.

How should we measure the performance of an Institute?

69. It was recognised that it would be important to separate out evaluations of how the approach is being implemented and sustained locally from an evaluation of the Scottish Institute.
70. As mentioned previously, the Institute could perhaps undertake a national case file audit and help develop indicators for local organisations to measure their progress: is Safe and Together being implemented at the right pace? Is it being implemented effectively? Are the expected changes happening? What outcomes for children and women do we need to measure and understand?
71. Evaluation of the Institute should be proportionate and measures of progress would relate to the Institute’s agreed purpose and task. It would ultimately be about impact and use and what has been beneficial. It would be important to gather the views of families to inform evaluations. Participants suggested approaches such as contribution analysis, implementation science or build on the work of Morton and Wright (Morton and Wright 2015) to consider how outcome measurement is suited to complex systems and community-based work.

How might the Institute be configured and what governance arrangements are needed?

72. No one model was consistently identified by participants nor were there fixed views of the size of a possible team. Instead a range of specialist roles were described which were thought critical to its success and that those involved should have energy, be open, be knowledgeable and credible.

Leadership: need visible and effective leadership which is outward facing and able to provide a strategic overview and negotiate with all interested parties and promote the Institute and its agenda with Government nationally and internationally.

Coordination: there has been significant investment in training, but this is not sufficient for sustainability; the relationship between local partners and the Institute is crucial:

'Systems change is a hugely complex task impacting across a range of systems and [the Institute] needs to out in local areas constantly intense working with managers and staff; nudging and keeping momentum.'

[Interview 18]

There was recognition of the need for a national coordinator or coordinators to link with local leads or champions. Some suggested that local area identify local leads who formally link with the Institute:

'Perhaps every area has identified a lead or coordinator to take things forward and collaborate with the Institute in terms of scrutiny and audit. And perhaps the Institute can coordinate this across Scotland and develop partnerships between Improvement Service, Scottish Government and the Universities.'

[Interview 12]

Training: a pool of accredited trainers for organisations to access regularly to support initial and ongoing training and support the accreditation of trainers locally.

Data and research: this was mentioned by fewer participants, but was considered crucial to the success of the Scottish Institute. Skills are needed in change methodologies to understand and measure the impact of both the Safe and Together model and the Institute.

73. Broadly, participants commented that the Institute should be overseen by a Project Board or Steering Group. Detailed governance arrangements should be simple and its membership would need to reflect the funding arrangements, work programme agreed and where the Institute was based, but representation from Scottish Government and those implementing and adopting the approach into practice was thought key. It was acknowledged that there is likely to be a wider range of stakeholders including the US Safe and Together Institute and third sector organisations which could perhaps be represented on a wider advisory group.

74. Some participants suggested a variety of settings which could hosted a Scottish Institute including the Improvement Service, Social Work Scotland or universities.

Conclusion

75. There is clear commitment in the Government rhetoric and published material for children to reach their potential and for Scotland to be the best place to grow up. There is also a commitment to keeping our communities safe. The agenda for prevention is given as much priority as the need to address the inequalities within our society and develop services to support children and families when they are in need of support.
76. There is also a recognition across policy, practice and research of the impact and outcomes for children and young people who experience domestic abuse, the need to challenge notions of 'failure to protect' and to be clear about the expectations placed on perpetrators including their responsibilities as a parent. Many perpetrator programmes recognise these principles and have incorporated these as standards within their programmes, but most are only available to those mandated by the court. Much of these programmes address the issues and work to change behaviours after incidents of domestic abuse.
77. Safe and Together provides a model which allows government ambition and good practice principles to be put into practice. It is an approach that provides a framework and language for professionals from different perspectives to come together to work with and support a greater number of children and families. There are links also to the growing rhetoric around a shift away from the risk paradigm towards a more enabling and relational upstream approach. Safe and Together, however, is one approach that can contribute to wider systemic change, but needs support from all levels within an organisation and should be reflected in national priorities and local strategic planning structures across services.
78. Developing an approach for Scotland should be delivered through a partnership between local organisations and a national Institute. The challenges of implementing and, in particular, sustaining systemic change should not be underestimated or ignored, but nor should the enthusiasm, drive and creativity of those working in child protection, domestic abuse and criminal justice in using Safe and Together. Many local areas are looking to develop local solutions, but within the wider context of a national strategy for Scotland.

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