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**ADVANCE PAYMENT SCHEME:**

**REDRESS FOR SURVIVORS OF HISTORICAL CHILD ABUSE IN CARE**

**LOCAL AUTHORITY CONFIRMATION OF APPLICANT BEING IN CARE**

**EXPLANATORY NOTE FOR LOCAL AUTHORITIES**

This note has been prepared by the Scottish Government in agreement with representatives from COSLA, Social Work Scotland, SOLACE, ALARM and SOLAR.

The Advance Payment Scheme is for survivors of historical child abuse in care before 2004 who either have a terminal illness, or are age 70 or over. Applicants need to provide a supporting document which shows they were in care as a child in Scotland before December 2004.

Applicants are not required to provide any evidence of abuse, but they are required to sign a self-declaration as part of the application process. Further details about the Scheme can be found [here](https://www.gov.scot/publications/financial-redress-for-survivors-of-child-abuse-in-care-advance-payment-scheme/).

This note and the two attached templates (one to be completed by the applicant and the other by the local authority) are intended to assist local authorities support individuals to obtain a suitable supporting document that shows they were in care as a child in Scotland before December 2004. The completed template from a local authority will suffice as the required supporting document for the purpose of the Advance Payment Scheme.

**Helping an applicant contact a Local Authority**

Applicants do not need to access their full records for the purpose of applying for an Advance Payment, though they may subsequently wish to do so. It is intended that a local authority can simply confirm that the applicant was in care with the local authority as a child. This confirmation of in care status is sufficient for the purposes of the Advance Payment scheme. For audit purposes though, we are required to ask local authorities to note on the template the name of the source document or file which provides this confirmation (this is purely for ease of reference should we be required to undertake a sample audit check in the future).

Where an approach to a local authority is necessary, the Advance Payment Team within the Scottish Government will provide the applicant with the template in Annex A ‘Request for Confirmation of In Care Status’.The applicant can send this directly to the relevant Chief Social Work Officer of the local authority to seek confirmation of their time in care.

Please note that this template is not a request for a full Subject Access Request. It is simply a request for confirmation of being in care in Scotland before 2004, for the purpose of the Advance Payment Scheme. This agreed approach should simplify the process for applicants and allow local authorities to respond more easily and quickly.

**Processing a request for confirmation of being in care**

A local authority may wish to seek some form of identification from an applicant before they process personal data. We ask that any request for ID is proportionate and appropriate to the request.

On receipt of the completed template from an individual, checks should be carried out for any record or information showing the applicant was in care in Scotland before 2004. Please note that this record of being in care does not need to be for the same place that the applicant suffered abuse. We do not need to see the actual record of in care status, but it would be helpful to note the type of record or file reference in case we need to check this later as a sample for audit purposes.

The template in Annex B ‘Confirmation of In Care Status’ offers a suggested outline for providing the necessary information to the applicant. The letter should be signed by the Chief Social Work Officer and returned directly to the applicant. It would be helpful to send two copies of the letter to the applicant - one for the applicant’s own records and the other for the applicant to send on to the Advance Payment Team.

In line with existing good practice, Local authorities are also asked that should they have knowledge of the individual being in care elsewhere, or in another local authority area, it would be helpful if they could also inform the individual of that, and provide any guidance about making further enquiries. Please notify the individual directly if you are unable to find any record which shows they were in care in Scotland before 2004 and respond to the applicant, in line with your authorities’ existing Subject Access or Data Protection procedures.

We understand that Local Authorities have a responsibility to ensure that any documents/information found are retained in accordance with the [practice guidelines](https://www.childabuseinquiry.scot/media/1568/practice-guideline-on-records-of-interest-to-the-inquiry-current.pdf) of the Scottish Child Abuse Inquiry.

If there are any questions about the Advance Payment Scheme, the Scottish Government’s Advance Payment Team can be contacted by telephone: 0808 169 9740, Monday to Thursday 10.00am - 4.00pm or by email on [AdvancePaymentTeam@gov.scot](mailto:AdvancePaymentTeam@gov.scot).

With thanks

The Advance Payment Team

Scottish Government

September 2019

**ANNEX A**

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| **(to be completed by the applicant)**  **REQUEST FOR CONFIRMATION OF IN CARE STATUS**  **ADVANCE PAYMENT SCHEME: REDRESS FOR HISTORICAL CHILDHOOD ABUSE IN CARE** |

**To: Chief Social Work Officer ………………………………………………** (insert name of council)

I wish to apply to the Scottish Government’s Advance Payment Scheme and require confirmation that I was in care as a child in Scotland before 2004. Please check for any records you may have using my personal details below. If you have a record please provide me with a signed letter in duplicate confirming this.

Name …………………………………………………….

Signature …………………………………………………….

Date …………………………………………………….

|  |  |
| --- | --- |
| **First name** |  |
| **Last name (and any previous name if relevant)** |  |
| **Contact address (include postcode)** |  |
| **Date of birth (e.g. 01/01/1949)** |  |
| **Telephone/email** |  |

Please provide as much information as you can about where you were in care to help the Local Authority look for your records. We understand you may not have exact dates or locations.

|  |  |  |
| --- | --- | --- |
| **Names of place(s) in care** | **Approximate dates** | **Locations/other details** |
|  |  |  |
|  |  |  |
|  |  |  |

If you can remember any other relevant names that may help with the search for records, please detail these below. This might include siblings that were placed with you and/or parent’s names

|  |  |  |
| --- | --- | --- |
| **Name** | **Relationship** | **Any additional information/details** |
|  |  |  |
|  |  |  |
|  |  |  |

If you can remember, before you were in care where did you reside? This might help us signpost you to another local authority if we aren’t able to find records.

|  |  |  |
| --- | --- | --- |
| **Address/Area** | **Approximate dates** | **Locations/other details** |
|  |  |  |

I hereby agree to the processing of my personal sensitive data as provided for the purpose of confirming I was in care in Scotland before December 2004 and the sharing of that information with the Scottish Government Advance Payment Scheme, where appropriate or necessary.

**I do/do not consent to the sharing of my data (please delete as appropriate)**

**Signature of applicant …………………………………………………………………**

**ANNEX B**

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| **(to be completed by the Local Authority and returned to the applicant)**  **LETTER CONFIRMING IN CARE STATUS**  **FOR THE SCOTTISH GOVERNMENT’S ADVANCE PAYMENT SCHEME** |

Dear [name of applicant]

**Confirmation of IN care status for THE Scottish Government’S Advance Payment Scheme**

We refer to your request for confirmation that you were in care as a child in Scotland before December 2004. I can confirm that we have found a record which confirms this and have included details below.

**Confirmation of time in care**

I confirm that *(insert name of local authority)* has documentary evidence that *(insert applicants name)* was in the care of *(insert name of at least one establishment where the applicant was in care or confirmation of placement in foster care)* during *(insert approximate dates or single date of record)*.

The source documentation which confirms you were in care is (*insert a brief description of the type of information which was relied upon e.g. - case/meeting notes/correspondence/personal documents etc.).*

Please note this letter is solely for the purpose of the Advance Payment Scheme, which requires a supporting document to show an individual spent time in care. You may provide the duplicate of this letter to the Scottish Government in relation to your application.

Any queries relating to the Advance Payment Scheme should be directed to the Scottish Government’s Advance Payment Team who can be contacted by telephone on Freephone 0808 169 9740 or by email [AdvancePaymentTeam@gov.scot](mailto:AdvancePaymentTeam@gov.scot).

Yours sincerely

Chief Social Work Officer