



UNIVERSITY OF  
**STIRLING**

# **Young People and MAPPA in Scotland**

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*July 2014*

## Foreword

There are a small number of children and young people in Scotland who present a risk of serious harm to themselves and others, some of whom are involved in sexually harmful and violent behaviour. International guidelines indicate that children and young people under 18 years should not be processed in the same systems as adult offenders and those who are subject to court processes due to the nature of their offending are a source of tension between welfare and control.

The function of MAPPA is public protection and the reduction of serious harm, and the extent to which it is compatible with guidance and best practice with supervision of children and young people with complex needs requires some clarification. This study is based on the situation in Scotland in November 2011, and although now largely historical in its nature, raises a number of significant issues regarding the use of MAPPA with children and young people under 18 years and highlights potential areas for future study.

## Acknowledgements

Thanks to DS Lee Kershaw at the Scottish Police Service Authority who shared his time and expertise in the preparation of this work, facilitated access to the ViSOR data and answered many questions in follow up.

Thanks also to the SPSA staff who completed the initial forms, MAPPA coordinators who arranged links and the local authority social work staff who completed the data schedules and contributed to interviews.

## Summary

The majority of young people in Scotland involved in offending behaviour are dealt with via the Children's Hearing system, which provides an integrated approach to addressing both welfare needs and offending or criminal deeds. While a small minority who are involved in sexual offending will be processed through the criminal courts and become subject to supervision and monitoring under Scotland's Multi-Agency Public Protection Arrangements (MAPPA), international guidelines and best practice indicate that children (all persons under the age of 18 years) should not be prosecuted in adult court and processed in the same systems as adult offenders.

The present research was an exploratory study to provide a baseline for future investigation of the responses across Scotland to children and young people involved in sexual offending and sexually harmful behaviour, and to examine comparative profiles and practices in MAPPA and Child Protection/Children's Hearing arrangements to establish shared principles for effective risk management. The aims were to:

- Profile the needs and risks presented by young people subject to MAPPA
- Establish a coherent overview of risk management practices and processes
- Understand how risks and needs of children and young people under 18, and the protection of the wider community, are managed

A multi-methods approach was adopted for the study, and due to the sensitive nature of the work, developed through a staged process of ethical and methodological approval. In conjunction with staff at Scottish Police Services Authority a data collection tool was developed to collate data from the secure Violent and Sex Offender Register (ViSOR) electronic record system. A second tool was also designed to collect data from local authority staff working with young people subject to MAPPA. Nine follow up

interviews were also held with social work staff. Mid November 2011 was the agreed date for accessing the data.

### Summary findings

- In November 2011, twenty one children and young people across Scotland were being supervised under MAPPA arrangements.
- The cases were located in eleven local authority areas, with no indication other than demographics why there was such a limited geographical spread.
- All the children and young people were aged 16 and 17, except for one 15 year old.
- Thirteen children and young people lived with their parents, two lived in supported accommodation and six were detained - three were in Polmont YOI and three in children's secure units.
- Thirteen (of 16 where additional information was available) children and young people were known to social work services before the index offence.
- Overall there does not appear to be an offending/sexually problematic behaviour profile or background that indicates common factors across this group of young people becoming supervised under MAPPA arrangements.
- The predominant determining factor why these children and young people were processed through the adult system is determined by the Lord Advocate's guidelines but may be related to their age.
- Overall MAPPA risk levels indicate six young people were assessed as low risk; six as medium, eight as high and one as very high.
- The level of risk as assessed by MAPPA has no bearing on sentencing practice. Twelve cases were prosecuted on solemn procedure; nine cases were through summary procedures. There is no clear relationship between assessed level of overall risk and being detained.
- A number of different risk assessment tools were used across Scotland including RM2000, Stable & Acute, YLS/CMI, J-SOAP, AIM, RA1-4 and LSI/CMI, and in a third of cases a combination of these
- The use of various risk assessment tools aimed at different age groups and different offence typologies, and the lack of validated tools on a Scottish population, do indicate that the assessment of risk and management for young people who have sexually offended is complex and problematic
- The variety of assessment tools indicates recognition that using a combination may best identify complex risk and need factors, but equally suggests that the way decisions are reached in relation to under 18s should be reviewed.
- All the young people had police and social work contact during MAPPA supervision, the majority of social work contact being from adult criminal justice social workers
- There was evidence that supervising local authority workers were aware and familiar with the possible developmental needs of children, but it is not clear if these were lost within the public protection focus of MAPPA.
- Where the details were available, actions plans were designed to meet a variety of criminogenic needs and risks, and were not solely focussing on monitoring and protection issues; the extent to which these action plans highlighted areas of work to meet developmental needs is less well evidenced.
- There was limited evidence of, or no focus on family based work (social capital).

- The provision of offence focussed work was evident in the action plans, and workers clearly recognised the issues evident in providing group work services for young people under 18 years of age. Most offence work was on a 1:1 or 2:1 basis.

### Issues for consideration

- For all workers involved in assessing and managing risk within MAPPA and recording and storing information on ViSOR the importance of assessing, recording and meeting the developmental needs of children and young people, in addition to the public protection and risk management aspects of supervision, should be reiterated. This should include the centrality of family work where appropriate. Additional, child centred staff training may be required.
- ViSOR is designed as a repository for multi-agency information. In light of developments in GIRFEC and the Scottish Government aim to achieve UNCRC compliance its use and purpose for under 18 year olds and the guidance on its use may have to be reviewed.
- By definition children and young people subject to MAPPA require 'compulsory measures' and should be maintained on Children's Hearing supervision if subject to such when charged. Consideration should also be given to referring all children and young people who may be subject to MAPPA requirements to the Reporter as young people in need of compulsory measures. There may be scope for the identification of a lead or liaison police officer for each young person in addition to the supervising social worker.
- Further exploration of the geographical spread of cases across Scotland is required to determine why some areas have a number of cases, when two thirds of local authority areas have none. It is important to have greater understanding of this to ascertain if this is due to differential decision making or other factors. Follow on work from this study needs to look at all children and young people processed through the Hearing system to establish a comparative study of profiles across the Hearing and Justice Systems. National statistics on children and young people appearing before a Hearing due to sexually problematic behaviour should be made available.
- Future research needs to focus on all under 18 year olds charged with a sexual offence and their pathways through either Children's Hearing or Justice Systems. Such work may shed light on decision making processes in all systems.

### Introduction

The majority of young people in Scotland involved in offending behaviour are dealt with via the Children's Hearing system, which provides an integrated approach to addressing both welfare needs and offending or criminal deeds. A small minority who are involved in sexual offending will be processed through the criminal courts and due to the nature of their offending will be subject to supervision and monitoring under Scotland's Multi-Agency Public Protection Arrangements (MAPPA), presently in place for offenders convicted for certain prescribed sexual offences.

International guidelines and best practice indicate that children (all persons under the age of 18 years) should not be prosecuted in adult court and processed in the same systems as adult offenders. The present research was commissioned to ascertain the numbers of under 18 year olds being processed under MAPPA in Scotland, the nature of their offences, how they are managed and the extent to which MAPPA arrangements are able to meet the needs of young people, in addition to protecting the public.

When a person is convicted of an offence under schedule 3 of the Act as implemented in Scotland they are subject to sex offender notification requirements (SONR) and MAPPA supervision. This report focuses on those individuals under the age of 18 who are subject to SONR if convicted of a sexual offence noted in schedule 3 of the Sexual Offences Act (2003).

## Background

*“The greatest challenge for policy and practice in relation to promoting public protection in youth justice is the children and young people are by their very nature still developing”* (Monk 2009: 69)

In 2008 the Scottish Government published a ‘living’ document (to be updated as new evidence emerges) to provide advice and guidance for professionals working with young people who present a risk of serious harm to others. The document was published under the umbrella of GIRFEC - Getting it right for every child - a policy framework designed for all services and agencies working with children under 18 and families to help deliver a co-ordinated approach which is appropriate, proportionate and timely, aiming to improve outcomes for children (Scottish Government 2008).

Adopting the GIRFEC principles, under a Whole Systems Approach, the Scottish Government is committed to working in partnership to develop more consistent approaches to prevent and reduce offending by young people by addressing all aspects of their lives. Working with children who have committed offences and who come under the jurisdiction of the courts has long been a source of debate in criminology and welfare provision as *“the complex tensions between child welfare and criminal justice are at their most apparent and the distinction between care/welfare and control/ punishment is finely balanced, if not strained”* (Goldson 2000:256).

Informing the contemporary discussion there is increasing recognition that the definition of a child should extend up to the age of 18 years, following the United Nations Convention of the Rights of the Child (UNCRC) (1989) article 1 which refers to a child as *every human being below the age of 18 years unless, under the law applicable to the child, majority is attained earlier*. However, historically in Scotland youth justice has been about young people between the ages of 8 and 16 (Scottish Government 2011a). More recently guidance published to accompany the Whole Systems Approach (Scottish Government 2011b; 2011c; 2011d ) has increasingly referred to a young person to mean an older adolescent child (aged under 18 years), although there is not a definitive reference to all persons under the age of 18 years that is common to all documents. The FRAME document (Scottish Government 2011c) specifically focuses on adopting a tiered approach to risk management of young people, recognising again the differences between adults and under 18s.

Depending on the publication, focus of work or legislative framework, the age group being referred to as ‘young offenders’ or ‘youth justice’ clients varies between 8 and 21 years of age and in Scotland, a child is defined differently in different legal contexts. Section 93(2)(a) and (b) of the Children (Scotland) Act 1995 define a child in relation to the powers and duties of the local authority as a person who has not reached 16 and those aged between the 16 and 18 who are still subject to a supervision requirement by a Children’s Hearing. Young people over the age of 16 may still require intervention to protect them and with the introduction of the Adult Support and Protection (Scotland) Act 2007, an adult is defined in this context as someone over the age of the 16.

The United Nations Committee on the Rights of the Child (CRC General Comment 10, 2008) noted in section 37 that every person under the age of 18 years at the time of the alleged commission of an offence must be treated in accordance with the rules of juvenile justice. In section 38 it was suggested that states which limit their juvenile justice rules to children under the age of 16 years, or which allow 16 or 17-year-old children to be treated as adult criminals, change their laws with a view to applying juvenile justice rules to all persons under the age of 18 years. The European Rules on Juvenile Offenders subject to Sanctions and Measures (2008) identify a 'juvenile offender' as any person below the age of 18 who is alleged to have, or who has committed an offence. Guidelines of the Committee of Ministers of the Council of Europe on child-friendly justice [CJ-S-CH (2010) 3 E]) apply to all children under the age of 18 years and recommend that no child under 18 is prosecuted for any reason. The Scottish Government (2009) response to the 2008 CRC observations recognised that UNCRC applies to everyone under the age of 18 and includes comment on provision for children in the justice system. There is little debate now that international guidelines concur that under 18s should not be subject to the same processes as adult offenders.

Although the differing legal definitions of the age of a child can be confusing, the Scottish Government has identified as a priority that vulnerable young people who are, or may be, at risk of significant harm are offered support and protection. The individual young person's circumstances and age will by default dictate what legal measures can be applied to protect that young person should they need it (Scottish Government 2011b).

Article 3 of the UNCRC indicates that the best interests of the child should be 'a' primary consideration paramount in all decisions involving children. However, sections 16 and 17 of the Children's (Scotland) Act 1995 provide that a Children's Hearing, court or local authority may take a decision that does not have welfare as the paramount consideration where this is necessary to protect members of the public whether or not serious (physical) harm takes place. This is a clear recognition that children and young people are capable of causing serious harm, but also that public protection and safeguarding children are not mutually exclusive.

### **Young people involved in sexual offending<sup>1</sup>**

The aetiology and treatment of young people who sexually offend is complex (Calley 2007) and it is not the aim of this brief background section, or the research itself, to cover the subject in depth. The many methodological and practical issues associated with such research, including differing definitions of sexual offending, various follow up periods and disagreements about recidivism make definitive statements problematic. However, it is recognised that while many sexual crimes are committed by adolescent boys aged between 12 to 18 years, the majority do not continue offending into adulthood and over 75% do not engage in further sexual offences once apprehended and treated (Rich 2009).

Within this contemporary debate there is acknowledgement that even where public protection is a primary concern, safeguarding of children and young people remains paramount (Monk 2009), and this is especially an issue for young people who have committed sexual offences.

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<sup>1</sup> There is much debate about the terminology employed when describing young people who engage in sexually problematic behaviour, convicted or not. Miccio-Fonseca (2008) describes the term "sex offender" as a legal term referring to an adult who has been convicted, or a youth who has been adjudicated, for a sex crime. Calder (2001) also refers to the term as meaning someone has been through a criminal investigation and convicted, or admitted an offence. As the young people in this study have all been convicted in court it will be the term used here.

*“There is a small but significant number of children and young people who present a risk of serious harm to themselves and others, and who have complex needs. This includes children and young people involved in sexually harmful behaviour, sexual offences and violence. We have to reduce the risk to the community and give these children and young people the opportunity to change their behaviour and become positive contributors to society. Meeting the needs of these young people, in addition to any essential controls necessary to protect individuals and manage the risks they pose, is necessary to safeguard them and their communities. Care for this group should be high quality, and approaches and programmes should be effective. Those who work with them need to have a high level of expertise” (Scottish Government 2008).*

As indicated there is a clear recognition in Scots law that young people who are involved in violent and/or sexual offending may have to be dealt with in a manner that does not always have their best interest as the primary consideration. Even with this caveat the Scottish Government have recognised that meeting their needs is an essential ingredient for effective intervention and it may also be argued that in the most high risk and extreme cases restricting a young person’s liberty and/or movement may be in their best interest if they are a risk to other people.

A substantial amount of the literature relating to risk assessments and practice with young people who are involved in sexually problematic behaviour has its genesis in work with adults. Such research does not generally consider developmental issues, or developmental differences between adults and young people (Miccio-Fonseca 2008), which is problematic when it is known that most young people have not yet developed fixed patterns of sexuality that may lead to consistent behaviours:

*“One obvious difference between juveniles and adults is that juveniles have developmental needs that must be considered. Thus workers must be concerned with the changing developmental needs of their clients while simultaneously treating their sexually abusive behaviour” (Calder 2001:41).*

Young people involved in sexually problematic and / or sexual offending in Scotland can be dealt with via the Children’s Hearing system, where they should be subject to the same risk assessments and treatment programmes as young people who may appear before an adult court. There are no nationally available statistics to indicate how many children and young people appear before a Hearing due to sexually problematic behaviour.

The International Association for the Treatment of Sexual Offenders (IATSO) Guidelines on young people who display harmful sexual behaviours (Miner et al 2006) state that:

- Juveniles are best understood within the context of their families and social environments.
- Assessment and treatment should be based on a developmental perspective, sensitive to developmental change, and on-going process.
- Assessment and treatment should include a focus on the youth’s strength.
- The development of sexual interest and orientation is dynamic.
- Should not be treated with a ‘one size fits all’ approach.
- Treatment should be broad-based and comprehensive.
- Labels can be more iatrogenic in children and adolescents than in adults. The juvenile and his/her family/primary care-giving system should be treated with respect and dignity.
- Sexual offender registries and community notification should not be applied to juveniles.

- Effective interventions result from research guided by specialised clinical experience, and not from popular beliefs, or unusual cases in the media.

There is a clear recommendation in the IATSO guidelines that sex offender registration should not be applied to children and young people. The question then arises if it is appropriate for young people under the age of 18 to be subject to sex offender notification requirements in Scotland and managed under MAPPA arrangements.

## **MAPPA in Scotland**

MAPPA was introduced in Scotland under the provisions of sections 10 and 11 of the Management of Offenders (Scotland) Act (2005). The Act places a duty on 'responsible authorities' to jointly establish arrangements for the assessing and managing of risk of three categories of offender convicted in court:

1. Registered sex offenders
2. Violent offenders
3. Other offenders

Present practice and implementation in Scotland includes:

- All sexual offenders subject to the notification requirements of the Sexual Offences Act 2003 (category 1) - SONR
- Restricted patients who are also sexual or violent offenders, and subject to Compulsion Orders and Restriction Orders under sections 57A and 59 of the Criminal Procedure (Scotland) Act 1995

For SONR cases the responsible authorities for assessing and managing risk are the police, local authorities (not just social work) and Scottish Prison Service (SPS). Health Boards are the responsible authority for restricted patients. There is also a 'duty to co-operate' for other agencies who may be involved in the provision of services to individuals. For offenders in custody or on home leave, SPS is the responsible authority; police are the responsible authority for those offenders not subject to statutory supervision and are also responsible for the SONR operation. Local authorities are the responsible authority when an offender is subject to statutory supervision in the community, generally the chief social work officer would be the lead.

Scottish guidance is clear that the fundamental purpose of MAPPA is public protection and the reduction of serious harm, with the protection of children, adults at risk and other members of the public being paramount (Scottish Government 2012). It also identifies that MAPPA reflects the Human Rights Act 1998 which must be considered in all duties carried out by the responsible authorities and duty to co-operate agencies.

Under MAPPA there are three levels of management and individuals must be assessed to ascertain which level they are managed under by the responsible authorities and the MAPPA co-ordinator.

- Level 1: Routine risk management
- Level 2: Multi-agency risk management
- Level 3: Multi Agency Public Protection Panels (MAPPP)



MAPPA supervision is restricted to those individuals who have been convicted in court of an offence under schedule 3 of the Sexual Offences (Act) 2003. Unlike England and Wales, where most children and young people involved in offending are convicted in court and can be subject to MAPPA arrangements, the situation in Scotland (where the Children's Hearing deals with most offences by children and young people) means that the majority of young people where sexual offending is an issue are not required to be registered for MAPPA. While the Children's Hearing system has no registration requirement equivalent to MAPPA for working with high risk children and young people involved in sexual offending, risk management protocols for dealing with problematic sexual behaviour provide some guidance in most local authority areas. In keeping with the ethos of the GIRFEC approach it may be argued that a child protection case conference, with the appropriate people in attendance, is able to safeguard children and protect the public through the application of multi-agency public protection principles. It has been suggested there is no technical reason why MAPPA meetings cannot be informally extended to consider children and young people in respect of whom significant concern exists (McNeil 2009; Weaver 2010). Equally it could be argued that all young people under 18 could be dealt with under Child Protection protocols which incorporate MAPPA principles and diverted from criminal processes and practices.

The extent to which MAPPA is compatible with guidance and best practice for the supervision of young people requires clarification as MAPPA has been identified as representing a 'community protection model' which focuses on the use of restriction, surveillance, monitoring, treatment and victims and community rights over those of offenders (Connelly and Williamson 1999; Wood and Kemshall 2009).

### **MAPPA research**

The Home Office (2007) reported on the first five years of the use of MAPPA in England and Wales. For level 2 and 3 cases a 0.44% serious reoffending rate was found over a period of two years, with most impact on the higher level 3 cases which receive a higher level of monitoring. However, the authors sounded a note of caution with the figures because of the short follow up period and the relatively small number of cases, where one or two either way may have a disproportionate effect on the statistics.

Wood and Kemshall (2007) undertook a small-scale qualitative study of MAPPA processes for level 2 and 3 cases in three areas of England and Wales. They found that external controls like licence conditions, police home visits and behaviour and contact restrictions were used to monitor offenders, which appeared to be more successful where they were clearly explained by supervising workers as part of a positive working relationship. Treatment programmes attempted to address internal controls of offenders, who generally reported them as beneficial.

Sutherland and Jones (2008) looked at the working arrangements and interface between MAPPA and YOTs in England and Wales. Despite problems with data returns and poor information they identified inconsistencies across England and Wales and variations in how and when young people were referred to MAPPA, with some YOTs managing high risk young people without a referral. While one of the few studies to address the issue of young people in MAPPA, it did not explicitly address the conceptual issues of dealing with 'children' in an adult oriented public protection arena.

Beyond the annual reports provided by the community justice authorities there has been little empirical investigation of MAPPA since its introduction in Scotland. Weaver (2010) provided a synthesis of MAPPA data from annual reports, indicating that across Scotland at the beginning of 2009, 2,967 registered sex

offenders were managed under MAPPA, approximately 57 per 100,000 population, similar to England and Wales. The vast majority were male, white, UK born and aged between 22 -71.

Level 1 66.1% (n=1962)      Level 2 31.7% (n=941)      Level 3 2.2% (n=64)

Data provided by the Scottish Police Services Authority (SPSA) for the publication of the present work indicates that as of May 2012 4,101 offenders were being supervised under MAPPA; 196 under the age of 22; 710 aged 22 - 30 and 3195 aged 31 and over.

In England and Wales there is a growing research literature investigating the various forms of MAPPA arrangements dating back to the late 1990s. The Baker and Sutherland (2009) edited book discussed explicitly the role and function of MAPPA in relation to young people who offend. In Scotland the literature base is particularly sparse, with no research to date investigating the role of MAPPA in managing children and young people and how this management complies with international obligations and guidelines for the management of young people in justice systems.

## ViSOR

ViSOR is a UK wide data management system, the principal purpose of which is to facilitate the general MAPPA arrangements for agencies within each jurisdiction of the country. While the purpose of this study was not to focus on the ViSOR system, its use as a repository for information requires some reflection on its management if it is to be used for under 18 year olds and comply with GIRFEC principles.

The ViSOR guidelines indicate that records for each case are managed via central and local points of contact, by a supervisor and a manager, with a partner where appropriate. Within each case record there should be a risk assessment and risk management plan recorded. The express purpose of ViSOR is to support the sharing of information within multiagency frameworks and therefore information may be used and shared for statutory responsible authority purposes. For the use of data obtained from ViSOR, outside public protection arrangements, the person wishing to use the data must consult with the current data owner. The access requested by the research team and detailed in the methods section was subject to this condition.

Information can be inputted into ViSOR in 47 separate domains, or areas for recording. If completed fully these domains should be able to provide a comprehensive overview of the factors pertinent to the supervision of offenders in the community as they cover those areas considered to be criminogenic (crime sustaining) and related to risk and offending behaviour. There is less focus on developmental needs, although arguably if all the domains are completed comprehensively they can contain all aspects of a young person's needs and risks e.g. family and peer contacts under relationships:

Activity log	Documents	Language	Phrases
Addresses	Education	Military service	Relationships
Appearance	Employment	Modus operandi	Risk assessments
Arrest detentions	Financial accounts & cards	Names	Risk management plans
Care	Firearms	Notification history	Supervisory instruments
Clothing	Foreign travel	Operations	Telecoms

Convictions	Habits	Organisations/religion	Vehicles/transport
Court appearance	Health	Paraphilia	Visits attachments
Custody	Hobbies	Passports/licences/certificates	Wanted/missing
Dates	Intelligence	Personal details	Warning markers
Diary	Interested parties	Pets	
Distinguishing features	Jewellery	Photographs	

## Study Methods

Due to the sensitivity of the proposed work a multi-methods approach was adopted that ensured the confidentiality of the young people; which in effect meant that the researchers were not aware of the names, or other personal identifying data of the young people. While this was effective in maintaining confidentiality, it created its own problems for local authority staff in identifying the young people in their area and the research team following up cases.

The aims of the study included:

- Profiling the needs and risks presented by young people subject to MAPPA
- Establishing a coherent overview of risk management practices and processes
- Understanding how risks and needs of children and young people under 18 and the protection of the wider community are managed

The research was approached as an exploratory piece of work to lay the foundation for future further investigation of the responses across Scotland to children and young people involved in sexual offending and sexually harmful behaviour, and to examine comparative profiles and practices in MAPPA and Child Protection/Children's Hearing arrangements to establish shared principles for effective risk management.

## Ethics

In recognition of the sensitive nature of the subject area the proposed research and data collection evolved through a staged process of ethical and methodological approval, commencing with the university criteria. The lead researcher then commenced the process of obtaining police clearance to collate and work with data extracted from the ViSOR system. This process was managed with the SPSA, the agency responsible for the management of ViSOR in Scotland, and agreement that data from ViSOR would be inputted onto the data schedules (see appendix 1) by analysts at SPSA. SPSA staff created a unique reference number for the research that was placed on each individual offender's ViSOR record that could be accessed, via a clearly defined route, by staff across Scotland with access. The police contact at ViSOR provided regular e-mail updates to MAPPA co-ordinators and senior management to alert them to various stages of the research as access to each individual's record leaves an electronic footprint.

The Association of Directors of Social Work (ADSW) was provided with details of the proposed research and an endorsement for the work was obtained by ADSW. In initial contacts with MAPPA co-ordinators and local authorities, acknowledgement was made of the requirement for each local authority to agree to data being collated through their own approval process.

The access arrangements established ensured that at each stage of the process none of the research team members were aware of the identity of the young people involved. Ages and gender were the only personal factors, together with local authority areas, recorded so that contact could be made with relevant personnel.

## **Data collection**

Working arrangements were agreed where analysts at SPSA were provided with a data schedule (see appendix 1) to complete using information directly from ViSOR which did not require researcher access to the ViSOR system. The data schedule was designed in close co-operation with SPSA staff, taking into account what is widely recorded on the ViSOR system and relevant to the present study. Prior to the commencement of the data collection, data analysts were provided with a short briefing about the purpose of the research, with opportunity to ask any questions about the data schedule.

The data entry period identified was a week at the end of 2011 - which in effect resulted in any young person under the age of 18 subject to MAPPA supervision on the specified date being included in the research. At this initial point of data collection a unique identifier, pertaining to this research only, was placed on the ViSOR system for each individual. This unique identifier was to enable MAPPA co-ordinators and supervising social work staff to identify the individuals, while not disclosing identities or personal details to the researchers. Young people were identified through ViSOR and data gathered in an anonymised form. However, the anonymisation of data via the unique research indicator led to some difficulties in the researchers matching information to local authority data. As a consequence not all additional local authority data for each young person could be collated.

MAPPA co-ordinators were approached in the first instance to identify the young people via the unique identifier generated for the research, and then contact was made with local authority workers to complete the LA data schedule (see appendix 2) subject to appropriate permissions and access arrangements.

Following completion of the LA data schedule, local authority case workers were contacted with a request for follow up phone interviews to provide contextual information to the quantitative data. Nine follow up interviews were undertaken, eight by phone and one face-to-face, seven of which were recorded.

The data schedules are based on those previously utilised by researchers at the CJSW Development Centre looking at sexually problematic behaviour in young people (Hutton and Whyte 2006). They were completed electronically, mailed to the researcher and stored on an encrypted memory stick prior to being inputted onto a secure Excel database. The data from both schedules and interview material, where appropriate, was combined to ensure data integrity on a single database which was then analysed and reported as descriptive statistics. There were some discrepancies between the two datasets, which where possible were followed up with appropriate personnel to clarify and amend.

## **Findings**

### **Geographic spread**

As of mid-November 2011, 21 children and young people across Scotland were subject to MAPPA supervision, representing less than 1% of all individuals subject to MAPPA. These young people were located in 11 of the 32 local authority areas, with an inconsistent geographical spread, ranging from one young person in six areas to four young people in one area. There is no immediate understanding of the

reason for the disparity between areas in the numbers of young people subject to MAPPA; further baseline information relating to sexual offences and individuals charged in Scotland would be required to illuminate the differences.

The rarity and wide geographical spread of cases of young people on MAPPA perhaps raises a question in relation to the distribution of the knowledge base and expertise for working with this client group and potentially the need for regional training. It has not been established whether these young people differ significantly in risk levels, behaviour and needs from other young people with sexually harmful behaviour dealt with by Child Protection or Children's Hearings systems; or if there are different decision making practices in different areas as to how cases are dealt with. However, these questions do require a clearer understanding, as the distribution across the country, especially with only one or two cases in many areas, has consequences for supervision expertise due to their different legal status, and the accumulated knowledge base of the supervising workers. Although individual workers will become more experienced in working with this type of case if and when more young people are subject to MAPPA, the present work indicates that in most areas cases may be so few and far between that the necessary build-up of experience will not happen. In one local authority area a staff member had over a period of time worked with four young people on MAPPA, being the only qualified social worker with this experience.

## **Demographics**

All but one (aged 15) of the young people were aged 16 and 17 years. There were 20 males and one female, and all except one (any other British background) were of white British ethnic origin. At the time of the research 13 of the young people were living with their parents, all except one in accommodation that was noted as stable. Two were in supported accommodation and six were detained – of these six, three were in secure children's units and three in Polmont Young Offenders Institution on short-term sentences. Of the young people at liberty, eight were in some form of further education, three in employment and three unemployed or not seeking employment.

## **Background circumstances**

The majority of the young people (13)<sup>2</sup> had been known to social work services prior to the commission of the index offence. The youngest came to the attention of social work services for the first time at the age of 7, for being beyond parental control. For five of the young people their first contact with social work services was for offending behaviour, three aged 14 and two aged 17. Three young people had child protection/neglect issues as their first reason for contact, one of whom at age 12 was referred to social work due to being beyond parental control, truancy and offending, in addition to the child protection concerns.

Social work records were able to identify a number of trauma issues for young people, either past or present. While these may not necessarily be related to their offending behaviour, a number of dysfunctional family relationships, lack of stable care giving relationships and witnessing domestic violence have been identified as possible/associated risk factors for sexual offending (Smith et al 2005; Lightfoot and Evans 2000). Irrespective of their co-morbidity with sexual offending in a GIRFEC/Whole Systems approach these may be needs that require addressing for the young people.

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<sup>2</sup> Local authority data was provided for 16 cases

Trauma issue	Nos	Trauma issue	Nos
Sexually abused	1	Peer group difficulties	5
Physically abused	2	Bereavement	1
Emotionally abused	5	Bullied	3
Neglect	2	Parental drug / alcohol misuse	2
Parental separation	6	Domestic violence	5
Parental rejection	3	None	2

## Offending pathways

The young person who was known to social work services at the youngest age (seven) was the only individual identified as experiencing sexual, physical and emotional abuse in the past and was the only young person to be assessed overall as a very high risk by MAPPA. He was also one of three young people who were identified as having been to a Children’s Hearing for offending and sexually harmful behaviour and also had the most number of previous appearances (6) – it is not known how many of these related to his behaviour.

Three of five young people identified as being known to social work services before their teenage years were categorised as high or very high risk, the other two being assessed as at medium risk. However, there is no discernable pattern in terms of their referral reasons, behaviour and risk and current situation as indicated in the table below where ages of first referral are known.

Age	Reason for first social work contact	Overall MAPPA risk level	Present accommodation
13	Beyond parental control	Low	Parents
17	Offending	High	Parents
14	Offending	Medium	Children unit secure
12	Child Protection; Truancy; Offending; Beyond parental control	High	Parents
14	Child Protection	High	Parents
17	Offending	Low	Polmont
12	Truancy	High	Parents
14	Beyond parental control    Offending	Low	Parents
10	Truancy	Medium	Supported accommodation
14	Offending	Low	Parents

12	Beyond parental control	Medium	Supported accommodation
14	Offending	Low	Parents
13	Lack of care	Medium	Polmont
7	Beyond parental control	Very high	Polmont

The literature relating to offending pathways for young people in terms of aetiology, development and risk factors is far from conclusive, although having experienced physical or emotional abuse or neglect and problematic functioning within the family have been identified as associated risk factors (Worling 2001; Miccio-Fonseca 2008; Smith et al 2005; Vizard et al 2007). Despite the background circumstances and history of the young person who was seven years old when first known to social work, it is difficult to identify an offending / sexually problematic behaviour trajectory that points to common factors across this group of young people finding their way into MAPPA. This may be due to the small number of people identified, or be a result of the heterogeneous nature of young people presenting with problematic sexual offending behaviour in Scotland.

## Risk

MAPPA guidance asks practitioners to consider a range of circumstances and factors relating to the perpetrator, the victim and the circumstances of the offender and offence when assigning a level of risk to individuals. It notes risk assessment tools are most likely used to inform the decisions. For MAPPA purposes the overall level of risk pertains to the level of risk of serious harm that the offender poses. Risk of serious harm is defined in the guidance *“as the likelihood of harmful behaviour of a violent or sexual nature, which is life threatening and/or traumatic, and from which recovery, whether physical or psychological, may reasonably be expected to be difficult or impossible”* (Scottish Government, 2012: para.5, s.4)

Within MAPPA overall risk levels are defined as:

- **Low:** current evidence does not indicate likelihood of causing serious harm
- **Medium:** there are identifiable indicators of serious harm. The offender has the potential to cause such harm, but is unlikely to do so unless there is a change in circumstances, for example failure to take medication, loss of accommodation, relationship breakdown, drug or alcohol misuse
- **High:** there are identifiable indicators of risk of serious harm. The potential event could happen at any time and the impact would be serious
- **Very high:** there is an imminent risk of serious harm. The potential event is more likely than not to happen imminently and the impact would be serious

The risk levels relate to the short-to medium-term risk of serious harm and the manageability of that risk, and will change as time goes on depending on a number of factors, including the person’s response to treatment, supervision and monitoring. Four of the young people had changed their MAPPA risk levels during the course of supervision – although it is not known over what period this occurred.

MAPPA guidance indicates that the risk levels do not translate automatically into supervision levels 1, 2 and 3, although most 2 and 3 cases should be considered to be in the high and very high category, unless there are unusual circumstances. Of the six young people at supervision levels 2 and 3, half are considered to be high and very high risk of serious harm. This may be a reflection of the difficulties of assessing risk posed by

young people because of the limitations of many of the assessment tools utilised and the developmental stages of the young people, or there may be unusual circumstances not apparent in the research.

Overall MAPPA risk levels indicate six young people were assessed as low risk; six as medium, eight as high and one as very high.<sup>3</sup> These MAPPA risk levels do not necessarily match the category of supervision, and without access to case records, information is not available to make any informed comment on how the assessed supervision level was arrived at in individual cases. It would be useful for further work to access minutes of meetings and risk assessments to ascertain this additional information to provide more informed comment on decision making. Fourteen young people were managed at level 1, five at level 2 and one at level 3 – the guidance indicates that level 1 cases can be managed by a single agency.

Local authority / case	Overall MAPPA risk level	MAPPA supervision level	Previous convictions		
			Non violence /non sexual	Violence	Sexual
1/1	Low	1	x		
1/2	High	1	x		
1/3	High	1			
2	Medium	3		x	
3	High	1			
4	Low	1	x		
5	High	2			
6/1	High	2	x	x	
6/2	Medium	1			
7/1	Low	1	x	x	x
7/2	Low	1			x
7/3	Low	1	x		
7/4	Low	1			
8/1	Medium	2	x	x	x
8/2	High	1	x	x	x

<sup>3</sup> Where the overall risk level was not known at the time of data collection in November 2011 the first assessment after this date has been included here.



8/3	Medium	2	x	x	
8/4	High	1			
9	Very high	2	x	x	x
10/1	High	1			
10/2	Medium	1			
11	Medium	1			

A range of different risk assessment tools were used across Scotland including RM2000, Stable & Acute, YLS/CMI, J-SOAP, AIM, RA1-4 and LSI/CMI, and in a third of cases, a combination of these. It may be positive to note this combined use (see table below), as it may suggest that some workers/local authority areas recognised that currently there is no single tool that can be used to adequately assess risk and needs for this particular group of young people. A cluster of tools was used to cover different aspects of offending, especially with the awareness of the difficulties in using tools designed for adults.

*We used ASSET, AIMS2 and material from Safer Futures. In the original court report, which I completed, we looked at Acute & Stable, but we did not calculate the total score, because it is an adult tool.*

The number of different tools in use across Scotland indicates awareness of the complexities in the assessment of young people with a variety of risk and needs. Comments from interviewees also identified the difficulties in identifying the most appropriate tool for young people displaying sexually harmful behaviour. In such circumstances reviewing how risk formulations are reached using the range of techniques and tools available may be a useful area for practice development.

Local authority / case	RM 2000	Stable & Acute	AIM	J SOAP	LS-CMI	ERASOR	Asset	YLS	Other	Overall MAPPAs risk level	MAPPAs supervision levels
1/1	x							x	RA1-3	Low	1
1/2	x		x		x					High	1
1/3	x		x							High	1
2				x						Medium	3
3					x					High	1
6/1		x			x					High	2
6/2		x								Medium	1
7/1	x			x				x		Low	1
7/2	x			x				x		Low	1
7/3	x			x				x		Low	1
7/4				x				x		Low	1
8/1							x	x		Medium	2
8/2						x		x		Medium	2
9	x	x	x							Very high	2

A number of respondents stated they understood that specific sexual offending risk assessment tools, like RM2000 and Stable and Acute, may not be suitable for people under the age of 18 years. Those working in children and families were most likely to have used risk assessment tools specific to young people, such as ASSET and AIM, although the latter had not always been accepted in MAPPAs meetings:

*In the MAPPAs meetings there was limited acceptance of AIM, even though it was the most reliable tool for this young person in our eyes.*

In adult teams, there was more of a tendency to use adult tools, with only one interviewed adult criminal justice social worker having used J-SOAP. Others were aware that adult tools were problematic, but were not always clear which ones were specific to adults and which ones were not. For example, one worker said:

*We used Stable & Acute 2007 in the court report process. We were going to use LS-CMI but were told this was not suitable because of his age.*

It is perhaps not surprising that practitioners based in children and families teams were more aware of the most appropriate assessment tools to use for under 18s. As indicated there may be a need for further training and monitoring of the use of different assessment tools to ensure appropriate and effective use. This point was explicitly referred to by one worker who had been aware of the drawbacks of adult risk assessments, but had few other options:

*That is a gap for our local authority, there is no one trained in risk assessment for under 18s in our team, like ERASOR or AIM2, which is an issue.*

Other respondents indicated there were no problems utilising specific risk assessment tools for young people as long as the supervisory and management plan captured all the risk and needs as identified by various assessments and knowledge base. There was acknowledgement from a number of respondents that the issue of risk assessment was further complicated by the fact they were assessing young people for a system that is primarily adult or 'offender' oriented, with the attendant limitations. Additionally, the Risk Management Authority in Scotland also indicates that J-SOAP, AIM and ERASOR have not been validated in Scotland (RMA Scotland 2007), another issue that requires addressing if professionals working with this age group are to utilise the most appropriate risk assessment tools.

The use of various risk assessment tools aimed at different age groups and different offence typologies, and the lack of validated tools on a Scottish population, do indicate that the assessment of risk and management for young people who have sexually offended is complex and problematic, reiterating the point about "The extraordinarily difficult task of assessing accurately the risk posed by adolescent sexual offenders" (Prentky et al 2009: 281). There may also be attendant concerns that workers who are used to assessing and working with adult risk may find it problematic to conceptualise risk and needs in young people (Sutherland 2009). This issue may be compounded at times by an over reliance on tools to assess risk, rather than a broader, holistic and tiered approach to the conceptualisation of risk that considers wider developmental needs of young people within any assessment and planning formulation.

### **Previous offences (convictions and Children's Hearing appearances)**

Twelve young people had previous convictions / charges (these will include grounds accepted at a Children's Hearing). Five young people were previously known for concerns relating to sexual offending, the indication being that prior to the index offence there were no concerns about sexually harmful behaviour for 16 of the young people subject to MAPPA. All except one of the young people with previous concerns about sexual offending also had histories of violent and non-violent offences. Four of the 12 young people with previous convictions had only non-violent and non-sexual offence histories, two had violent and non-violent offence histories and one had violence-only histories.

Of the five young people with previous sexual offending histories, one was considered to be overall a 'very high' risk managed under level 2 MAPPA, one a medium risk and level 2 MAPPA, the remainder 'low' risk

and managed under level 1. The young person considered to present the highest risk was also the youngest (seven) when first in contact with social work services and the only person identified with a previous history of sexual abuse victimisation. The one young person managed under level 3 MAPPAs was considered to be an overall 'medium' risk, with previous offences for violence.

Overall, probably due to the small number of young people included in the study, it is not possible to identify patterns or trends in offence history, although, as indicated above, there is some evidence to suggest that those young people with sexual offence histories had also been involved in other non-sexual offences.

### **Index offence(s)**

The index offences (i.e. the reason the young person was subject to MAPPAs) included rape, indecent assault, public indecency, breach of the peace (with an identified sexual element) and internet/communication offences. While many were clearly very serious offences, for some the identified behaviour may be considered to be less serious. An indication of how the criminal justice system viewed the seriousness of the offences at the point of proceeding to court is provided by the type of criminal procedure followed. Twelve cases were dealt with by solemn procedure, signifying these cases were considered more or very serious, while nine cases were taken through summary procedures, possibly suggesting these were viewed less seriously.

Where victim information was available (n=17), eleven of the cases involved a victim previously known to the young person, two of whom were relatives, while six were stranger victims. Three of the young people targeted adults (18+ years old); 14 targeted children and one young person perpetrated offences against both adults and children. Thirteen victims were female and five male. Eleven of the offences involved direct contact with a victim, eight were non-contact offences and two contained both contact and non-contact elements.

Again, without access to detailed decision-making minutes and notes it is difficult to comment on the assessment process and evaluation of risk and allocation to management levels in relation to the types of offences, seriousness of offences and victim harm. Taking into account the available information, and bearing in mind the small numbers, there does not appear to be any immediately clear relationship between type of offence, seriousness, previous conviction, overall MAPPAs risk and management level.

### **Referral to MAPPAs**

At present the MAPPAs guidance and associated practice guidance indicates that on conviction for a schedule 3 offence under the Sexual Offences Act (2003) a person is placed on the sex offender register and, subject to certain conditions regarding the nature of the offence, becomes subject to MAPPAs supervision.

The Court is required to issue the offender with a certificate of conviction and a notice of requirement to register. A copy of the certificate and notification to register is mailed electronically to the police and a ViSOR record is created. Copies also go to the local authority if a community disposal is imposed and to the Scottish Prison Service if a custodial sentence is imposed. Not less than 10 weeks prior to release from prison, SPS is required to notify the police of the offender's date of release.

In effect, the offender is subject to MAPPA from day one of the conviction and an interim risk level is assigned to them following an initial MAPPA meeting if risk information is available. At the time of the data collection, four young people had not been assessed regarding their overall risk as the relevant information was not available. There was some confusion identified in interviews about whether young people who were detained in secure care or custody had already been referred to MAPPA and who makes the referral as release date nears. With this confusion it was apparent that young people in custody may not be subject to any consistent social work input prior to their release.

The ViSOR data indicated that all the young people had both police and social work supervision/contact, although from the ViSOR database itself it was sometimes a little unclear as to whether this was criminal justice or children and families involvement. Local authority data was able to confirm input was most often from criminal justice services. There was some indication that for those young people in Polmont, the allocation of a supervising social worker would happen nearer the expected date of release and the first full MAPPA meeting for the young person.

It appeared that in some cases where the young person was sentenced to custody, the actual process and meetings around MAPPA did not begin until the young person was in the community, or at least nearing release, when the Integrated Case Management (ICM) or Community Integration Plan begins to consider MAPPA supervision. While the length of sentence was not considered in this study, clarity may be required as to whether this practice accommodates the notion of age and stage of development of under 18s in line with international and MAPPA guidelines. This may be more pertinent in the ICM process especially, as the multi-agency nature of the ICM process has been questioned elsewhere (Jardine and Rigby 2011), and there may be concern that support is delayed for this age group.

### **Action Plans - meeting needs as well as risk**

*'The risk management process should be tailored to the individual to ensure that the response is commensurate to the level of risk and specific to his/her needs and strengths. When assessing young people under 18, an understanding of the behaviour within its developmental and situational context is necessary. Risk management plans should be responsive to the young person's age and stage of development, and consistent with the assessment of how the young person's developmental needs can most appropriately be met'* (Scottish Government 2012:45)

The risk management process and action plans being tailored to individuals was evident in both interviews and the data provided from local authority schedules. Where the details of action plans were available (9), it was clear that these were designed to meet a variety of criminogenic needs and risks and were not solely focussing on monitoring and protection issues. However, the extent to which these action plans covered the developmental needs of the children and young people was less well-evidenced.

The provision of offence focussed intervention work was indicated in all action plans available, with a number of interviewees recognising the difficulties of applying the Community Sex Offender Groupwork Programme (CSOGP) or equivalent to this group of young people and subsequently delivering services on an individual basis. In nearly half of all cases (n=9) it was indicated that work was delivered on a 1:1 or 2:1 casework basis; and while these had action plans attached to the work, the absence of a structured programmed approach for this age group was evident.

Given the ages of the young people, few of the action plans had details of family engagement or work and some workers recognised a “*lack of focus on extended family.*” This absence of family work was despite the fact that over half the young people were living at home with their parents, although as living arrangements are described as stable, in most cases this may explain the omission of family-based work.

### **ViSOR as a recording and information sharing system**

The original proposal for the research was to collate relevant information recorded on the ViSOR system. However, in discussion with SPSA regarding access and the data required to be completed on the schedule, it was apparent that the information recorded was not always sufficient to identify needs, in addition to the major risk factors and intelligence in each case (data schedule 1 was designed after consultation with SPSA about the information that was likely to be recorded on the ViSOR system).

Interviews with supervising social workers identified that, although there are 625 registered social workers who can access and input onto the system across Scotland, there are differences in how data is inputted and how ViSOR is used. In some areas criminal justice social workers write up contacts, which are then passed to MAPPA administrative staff to input on the system; others input directly onto ViSOR and one area had a rota to input data. Most children and families (youth justice) workers do not have direct access to ViSOR, with information inputted/submitted by the criminal justice staff. One children and family worker indicated they were not sure if any of the information they recorded was inputted into ViSOR.

The information inputted on ViSOR relates mainly to risk management and risk analysis, rather than that pertaining to social circumstances and background information (i.e. wider developmental needs). Information re wider needs is important to support professionals in a child-centred way that takes account of young people’s age and stage. A social work respondent indicated:

*“It is the police’s system and the information they want on there is very limited. It would be ideal if our case notes were joined up with the police system, and we could just send it, but that would be too much information for them. The police want where he is, what time he’s there, any changes in physical appearance, whether he missed any appointments with services that are part of the order. In our system we would have more analysis as to why someone might have missed appointments, for example.”*

While these comments indicate the concerns of social workers regarding the amount and type of information recorded on ViSOR, the police may have different views as to the applicability of additional information to the function of the system. This is an area that may require further investigation as ViSOR provides a central repository for information and update by the police and criminal justice social work and others involved in the management offenders - it is not a ‘police system’. While ViSOR may be managed by the police, it is designed as a multi-agency risk management tool. If its use is to support all professionals in the management of offenders, a clearer protocol may be required re inputting to ensure all the domains noted above are completed with relevant information that facilitates working with children and young people in a child-centred manner taking account of both risks and needs.

While it is acknowledged that ViSOR is designed as an information system for management of risk, the absence of information relating to background circumstances, and data relating to developmental needs, is likely to limit its functionality as an information processing system that can be considered to be appropriate in terms of the ages and developmental stages of young people. It was also apparent from the two data

schedules completed there were some inconsistencies between the recording on ViSOR and that held by local authorities, for example, the recording of which agencies were to provide input and support to the young person, and also the type of risk assessment tool used to assess risk. The accuracy of information recorded on young people needs to be audited on a regular basis to ensure effective support and management.

## **Child or adult**

*Local authorities provide services to young people who offend or who are at risk of offending. This covers anyone up to the age of 16 who is offending, including registered sex offenders, and may cover those between 16 and 18. It may be that the Children's Services rather than the adult service supervises young people on community sentences (Scottish Government 2012:114).*

Data collected on the schedules and from interviews with workers indicates generally there is a recognition of the age and stage of the young people in the MAPPA system i.e. workers recognise that under 18 year olds may have different needs to adults. However, there was also some concern that in practice the young people are treated very much as adults:

*"I think there is an element of fast-tracking young people into the adult system. Once they are registered as a sex offender, the concept of them being a child is lost very quickly"*

In the interviews, it was suggested in at least four cases (20%) that young people were under Children's Hearing supervision at the time of their conviction. There was some inconsistency identified by interviewees about how such cases should be managed; some respondents believed that children should be removed from Hearing supervision shortly after registration as it was considered that the two systems could not run concurrently, while for others the two processes could be managed simultaneously. While the three cases detained in children's secure units would suggest continued Children's Hearing contact, local authority data was only forthcoming for one of these cases so further comment is restricted.

The limitations of MAPPA as a vehicle for meeting the needs of children and young people were recognised by a number of respondents who considered that it was a risk focussed system. There was considerable dissonance about the dual challenges of appropriate responses to the needs of the young people and public protection given the potential risk to others presented by this group of young people. Varied responses and actions regarding young people who were subject to Hearing supervision is perhaps the clearest example of the challenges and contradictions which exist under the present system.

## **Models of supervision**

For all the young people identified on MAPPA, records indicate that their supervision and monitoring in the community is a joint arrangement between the police and social work. This goes beyond the expectation of the guidance that level 1 cases can be managed by a single agency. On the whole, the decisions of the MAPPA meetings are unanimous in that all members agree with the plans and work, although there was also an honest recognition that sometimes there is disagreement about the care versus control dichotomy and how this is managed. The police monitoring arrangements appear similar across areas (within the need for individualised responses) and while some disagreement about the exact nature of the planned work is

evidenced, there is consensus that the MAPPA meetings are the appropriate forum for approving and implementing risk management plans.

While the schedules provide basic data indicating a collaborative process of monitoring and management, the interviews elaborate on aspects of these arrangements, indicating the actual partnership approach to supervision varies across local authority areas.

It is possible from the data to identify within the arrangements two broad models of supervision from within local authority services:

**Model 1 - Supervising social worker located in children and families services (or youth justice), but the case is 'managed' by criminal justice social work**

This was the model of practice in two areas. The MAPPA case was supervised on a day-to-day basis by a social worker with a predominantly youth justice caseload, located within a children and families' team. However, the service manager from adult criminal justice would manage the 'risk' and 'control' aspects of the case and represent it on the MAPPA panel. These areas differed in the way the case-worker fed into the panel. In one area both the worker and area manager attended the young person's MAPPA discussions, whereas in another, information usually was fed to the panel through the criminal justice manager, with the worker only occasionally present. There were no indications that families had any input to the MAPPA meetings.

The workers who practiced this model saw it as particularly helpful for working with young people with sexually problematic behaviour, because it allowed both their status as a child and the risk they presented to be jointly managed and issues addressed.

*"We use programmes that are specific to this age group and know how to approach young people. The criminal justice approach can be very black and white and focused on stringent controls. We try to nudge them along and to get a high level of compliance."*

These workers were also more likely than those located in adult criminal justice services to see MAPPA as being too narrowly risk-focused for work with young people, who while clearly involved in serious and harmful behaviour, may be still developing emotionally.

*"MAPPA increases the risk management because there is multi-agency accountability, but it is very much set up for adult sex offenders. This boy committed his offence when he was 15 and I believe there is an element of MAPPA not giving him the opportunity to mature."*

In one area, however, there was an indication from the social worker that not being a fully inclusive part of the MAPPA panel (even when present) meant that the case worker had less influence over the decisions made, which could lead to problems when the priorities of addressing needs and managing risk clashed:

*"We facilitated a training placement, but the transport issue became sticky. MAPPA would not agree on him using public transport (...). We felt planned use of public transport would work towards better socialisation, but we ended up paying for a taxi for him. The police and the social work service manager from justice both felt it was too risky."*

Here, criminal justice social work were in agreement with the police in their focus and concerns about risk, while the youth justice worker, although recognising the potential risk, was focussing on the need for



developing the social skills of the young person. The risk paradigm was the dominant influence on decision making and led to the supervising worker's views being overruled. In the other area practising this model, both youth and criminal justice workers were considered to be positioned as more focussed on needs than risks, while being cognisant of public protection.

While it is not possible to comment on which is the 'correct' position/decision in these particular circumstances, as they are likely to change for each young person subject to MAPPA, these comments highlight some of the tensions that exist in managing the risks and needs of young people subject to MAPPA, and the potential for some disagreement between agencies:

*"We feel we can manage the risk and still have the young person involved in things, which is better than them just sitting at home with nothing to do, also from a risk point of view. At times the police will make their views known, but at the end of the day it is a social work decision."*

While the young person's needs may be taken into account routinely in the everyday work delivered under this model, there might be a lack of representation of their needs on the MAPPA panel, which can lead to risk considerations overshadowing their needs. There may also be concerns that 'feeding' information about contacts with the young person and work progression into MAPPA, rather than contributing fully to a holistic ('whole system') risk management plan, may be demoralising for the workers concerned, who are likely to know the young person better. This model of working reflects practice in England and Wales where the Youth Offending Teams (YOTs) represent a 'duty to co-operate' agency under the MAPPA legislation (Sutherland and Jones 2008). Despite the responsible authority in Scotland being the 'local authority' there are indications this is interpreted in some areas as the criminal justice social work team, with children and families/youth justice fulfilling the role of duty to co-operate agency.

## **Model 2 - Supervising social worker located in adult criminal justice services**

This was the model identified through most of the interviews and was used in five of the areas. In the case of the two areas where the young person was in custody, limited further detail was available as the risk management plans had not been fully implemented in the community. In at least two other areas the supervising social worker had previously worked in youth justice and/or children and families, which they considered was a positive factor in helping them to work with the young people across the care/control interface. Similarly, three adult criminal justice social workers described how they either asked youth services for advice, or said that the young person was supported by youth justice or early intervention services as well.

In all the areas contributing to the interviews, including those where the criminal justice social worker was the primary supervising officer, there was at least some input from a youth-specific service in the support of the young people under MAPPA. This indicates that to varying degrees the age and stage of young people are taken into account. However, as in the first model, these youth services may not be fully represented on the MAPPA panel and, although often present, do not have the same level of influence on decisions being made:

*"[Children and families'] input won't change the risk management plan as such, but I suppose it means someone is looking at his needs as well as at risks, although it won't interfere with the*

*risk management plan, because that's MAPPA's priority, although they are part of the overall plan."*

Although, as in the quote above, several of the criminal justice social workers acknowledged that youth-specific services focused more on needs, they tended to see the way they themselves addressed needs for adults as appropriate for children. They argued that reducing the risk of reoffending automatically included addressing needs, because where needs were not addressed, the risk of reoffending increased. However, this tended to indicate a focus exclusively on criminogenic needs, leaving developmental or other needs unexamined.

*"I'd say the risk management plan and the action plan is one and the same, in the MAPPA paperwork, it's one and the same thing. His needs make it onto the risk management plan in a sense, because you could suggest that his needs would be the need for a good use of time, the need for education and employment, and we know from research that, for example, being in employment lowers the risk of reoffending. So, if you look at it in that sense, it is all part of the one big plan and is all recorded as such. Needs and welfare issues do tie in with risk management, so the plan will refer to things like employment."*

One criminal justice social worker recognised explicitly that young people's needs might be different from those of adults and might not be addressed sufficiently under this supervision model:

*"I think there is an issue with training re young people with HSB; we could all benefit from training in that area or in why his needs might be different because of his age. (...) I am conscious that we need to get services more in tune with young people's needs."*

The models described above may reflect a recognition in some areas of the 'expertise' of the criminal justice workers in managing risk of adult sex offenders, but perhaps does not take account of the possibility of youth justice workers being sufficiently capable of both managing risk and meeting need in the young offender population. There was one exception to this dual approach, where in one local authority area the young justice team took full responsibility for the community supervision of under 18 MAPPA cases. MAPPA meetings were chaired by a senior manager from youth justice, and there was also full children and families social work attendance if appropriate. In this local authority area the supervising worker also ensured the young person's views were represented at the MAPPA meeting, even though young people do not attend these meetings themselves.

## **Discussion and conclusions**

It is hoped that the study will be the start of a process of investigating MAPPA arrangements for young people in terms of its suitability and appropriateness for meeting Scotland's obligations under international guidelines for the supervision, and meeting developmental needs, of young people convicted of a sexual offence, in addition to protecting the public.

There are a number of limitations to the study, and requirements for future work, that would preclude any definitive statements about practice. Rather, the findings are indicative of the situation across the country in November 2011 and highlight the need for more detailed work to compare those young people processed through the courts with those dealt with by the Children's Hearing system. This report is intended to provide a baseline for future work as it often raises more questions than it is able to answer.

The data schedules completed by SPSA and local authority staff were reasonably comprehensive, covering areas identified in previous work with a similar population, but they were not designed systematically to profile the young people. As there was no access to individual case records it is not known if all aspects of a young person's history were documented. This may also reflect the limitations of recording on the ViSOR system, from which full biographies could not be obtained because they are not routinely recorded. Finally, a major limitation, due in part to the ethical concerns, was the difficulty in obtaining data for some of the young people – as the numbers concerned were low in the first instance a lack of information from some local authority areas further compromised definitive statements regarding the supervision arrangements. Information gathering was also complicated by the method used for maintaining confidentiality of young people – any future developments of the research should aim to use the ViSOR unique reference as the unique identifier so that additional measures are not required for operational staff to identify young people. It is interesting to note that Sutherland and Jones (2008) also encountered poor response rates in England and Wales in their study of young people and MAPPA; the sensitive nature of the topic under investigation may be a factor in this. Again, in Scotland, this requires looking at in terms of developing policy as the numbers involved are much lower than in England and Wales.

The numbers of young people under the age of 18 subject to MAPPA supervision in Scotland are relatively small, twenty-one in total at this snapshot in November 2011 and less than 1% of all people on MAPPA. This is likely to be a combination of the Scottish system only working with registered sex offenders at present, and the Children's Hearing system diverting some young people away from criminal justice. A more detailed examination of why some young people are convicted in the courts and others are diverted to the Hearing System should be the subject of future work, in conjunction with the differential spread of cases subject to MAPPA across the country. However, it should also be considered that the determining factor regarding processing in the adult criminal justice system may be as simple as age; all but one of the cases were 16 and 17 years of age.

The extent to which the supervision arrangements for this group of young people reflect international guidelines for the management of young offenders under the age of 18 years in taking into account their developmental needs varied, with inconsistencies and differences in practice across Scotland. Ultimately, MAPPA is a system designed to manage the risk presented by individuals, with its primary purpose one of public protection. The developmental needs of the young people supervised under these arrangements are not a primary consideration, a discrepancy that requires further attention if the system is to be GIREFC/UNCRC compliant.

The recognition in the MAPPA guidance that some children and young people may be supervised by children's services was often not reflected fully in practice. While nearly all the young people had some input from children and families social work services, or appropriate voluntary sector input, only in one local authority area were youth justice services the primary supervising workers for risk and need management. In two areas day-to-day supervision of young people was delivered by children's services, but in relation to risk management and monitoring, children's services played a secondary role to criminal justice. In other areas children and families workers operated as 'duty to cooperate' services, rather than as a responsible authority. Generally adult services took the lead in risk management and monitoring with children and families and voluntary services consulted and sometimes reported directly to the MAPPA meetings.

It is also worth considering that if young people are removed from Children's Hearing supervision when made subject to MAPPA the question this raises:

Are young people who have been convicted of a sexual offence not in need of 'compulsory measures of care'?

Section 49 of the Criminal Procedure Scotland Act 1995 also allows for children and young people not subject to Hearing supervision to be referred to the Children's Reporter, which may be a potential safeguarding measure for consideration. It could be argued that being made subject to MAPPA is in itself evidence of the need for compulsory measures to safeguard the interest of the child alongside those of victims and the community.

There is evidence that action plans for the young people focus on wider criminogenic needs, beyond immediate risk management and reduction. However, there is less evidence that these are regularly tailored to the 'age and stage' related needs of the young person, rather than to overall criminogenic needs. Most plans did not mention family based work as part of the intervention, despite the majority of young people living with their parents. Details of plans were not always recorded on ViSOR and to improve the data quality recorded for young people, it would be beneficial for those supervising workers working directly with young people to input directly onto the ViSOR system, including more of the background/developmental details, and planned responses. This would support all those working with the young person to obtain a holistic overview of their situation, and not just one that is focussed on a narrow concept of risk.

The location of young people at the transition between youth and adult justice systems, and the accompanying conceptual and practical issues in relation to care and control, are highlighted by the varying practices in local authorities regarding whether criminal justice, or youth justice social workers supervise and manage the cases - the level of children's service involvement is inconsistent across the country. In this respect one of the aims of the MAPPA arrangements to introduce consistency in the management of risk of those individuals assessed as high risk offenders (McNeill 2009) may have been missed in the responses to young people convicted of sexual offences.

The study is the beginning, in Scotland, of the investigation around the wider discourse of the role of children's services in relation to young people subject to MAPPA, which is largely missing from the literature to date (Kerry and Sutherland 2009). However, the effectiveness of these various approaches, and longer term outcomes in relation to re-offending and reduction of risk and needs, were not addressed in this study. It is therefore not possible to comment on the relative merits of the different approaches in reducing risk and meeting needs.

The indicative findings suggest that young people under the age of 18 years subject to MAPPA supervision in Scotland are ostensibly managed under adult guidelines and processes, to the extent that the way their developmental needs are being addressed varies across the country. The role of parents and family networks is generally not an area that is considered in MAPPA arrangements, yet should be central to any 'whole systems' approach to managing high risk young people.

Future research looking at the supervision of young people involved in sexual offending and problematic sexual behaviour in relation to international guidelines of good practice should focus on a comparable group of young people supervised in the Children's Hearing system. This will allow some comparison to be made between the two management systems and may begin to address some questions regarding the

most effective approaches for managing this group of young people that takes account of public protection, while addressing their ongoing developmental needs in line with guidelines for the provision of services for young people in justice services. As always, managing the care and control aspects of young people remains a substantial challenge and requires considerably more detailed investigation.

### Issues for consideration

- For all workers involved in assessing and managing risk within MAPPA and recording and storing information on ViSOR the importance of assessing, recording and meeting the developmental needs of children and young people, in addition to the public protection and risk management aspects of supervision, should be reiterated. This should include the centrality of family work where appropriate. Additional, child-centred staff training may be required.
- ViSOR is designed as a repository for multi-agency information. In light of developments in GIRFEC and whole systems approach and the Scottish Government's aim to achieve UNCRC compliance, its use and purpose for under 18 year olds may have to be reviewed.
- By definition children and young people subject to MAPPA require 'compulsory measures' and should be maintained on Children's Hearing supervision if subject to such when charged. Consideration should also be given to referring all children and young people who may be subject to MAPPA requirements to the Children's Reporter. There may also be scope for the identification of a lead or liaison police officer for each young person in addition to the supervising social worker.
- Further exploration of the geographical spread of cases across Scotland is required to determine why some areas have a number of cases, when two thirds of local authority areas have none. It is important to have greater understanding of this to ascertain if this is due to differential decision making or other factors. Follow on work from this study needs to look at all children and young people processed through the Hearing system in a similar time period as a comparative study of profiles across the Hearing and justice systems. National statistics on children and young people appearing before a Hearing due to sexually problematic behaviour should be made available.
- Future research needs to focus on all under 18 year olds charged with a sexual offence and their pathways through either Children's Hearing or Justice Systems. Such work may shed light on decision making processes in all systems.

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Appendix 1 - MAPPA-GIRFEC Monitoring Data Collection Form (ViSOR)

Case ID		Male <input type="checkbox"/>	Female <input type="checkbox"/>
Local Authority		Age when sheet completed	
<b>Ethnicity</b>			
		<b>Involvement with other services</b> <b>(all that apply)</b>	
White	British	<input type="checkbox"/>	Family service <input type="checkbox"/>
	Irish	<input type="checkbox"/>	Other sexual behavioural service <input type="checkbox"/>
	Mixed background	<input type="checkbox"/>	Psychiatric services <input type="checkbox"/>
Asian, Asian Scottish, Asian British	Indian	<input type="checkbox"/>	Psychological services <input type="checkbox"/>
	Pakistani	<input type="checkbox"/>	Children and family social work <input type="checkbox"/>
	Bangladeshi	<input type="checkbox"/>	Criminal justice social work <input type="checkbox"/>
	Chinese	<input type="checkbox"/>	Reparation / mediation services <input type="checkbox"/>
	Other	<input type="checkbox"/>	Youth justice services <input type="checkbox"/>
Black, Black Scottish, Black British	Caribbean	<input type="checkbox"/>	None <input type="checkbox"/>
	African	<input type="checkbox"/>	Don't know <input type="checkbox"/>
	Other	<input type="checkbox"/>	Comments
Other	Any other background	<input type="checkbox"/>	
<b>Disability / health</b> <b>(any that apply - diagnosed)</b>		<b>Current living environment</b> <b>(all that apply)</b>	
Learning difficulty (psychological)		<input type="checkbox"/>	Stable <input type="checkbox"/>
Learning disability (organic eg downs syndrome)		<input type="checkbox"/>	Victims in household <input type="checkbox"/>

Developmental delay	<input type="checkbox"/>	Potential victims in household	<input type="checkbox"/>
ADHD	<input type="checkbox"/>	Adequate levels of risk awareness in household	<input type="checkbox"/>
Physical	<input type="checkbox"/>	Don't know any	<input type="checkbox"/>
Mental health	<input type="checkbox"/>	Comments	
Don't know	<input type="checkbox"/>		
<b>Accommodation (one please)</b>		<b>Education / employment (one please)</b>	
With parents	<input type="checkbox"/>	Employed full time	<input type="checkbox"/>
With friends	<input type="checkbox"/>	Employed part time	<input type="checkbox"/>
B & B	<input type="checkbox"/>	Self employed	<input type="checkbox"/>
Children's unit	<input type="checkbox"/>	Unemployed	<input type="checkbox"/>
Homeless	<input type="checkbox"/>	Not seeking work	<input type="checkbox"/>
With other relatives	<input type="checkbox"/>	Further education	<input type="checkbox"/>
Own tenancy	<input type="checkbox"/>	Higher education	<input type="checkbox"/>
Owner occupier	<input type="checkbox"/>	School (mainstream)	<input type="checkbox"/>
Hostel	<input type="checkbox"/>	School (residential)	<input type="checkbox"/>
Residential school	<input type="checkbox"/>	Other (please state)	<input type="checkbox"/>
Foster care	<input type="checkbox"/>	Don't know	<input type="checkbox"/>
Supported carer	<input type="checkbox"/>	Comments	
Supported accommodation	<input type="checkbox"/>		
Other (please state)	<input type="checkbox"/>		
Don't know	<input type="checkbox"/>		

Risk (index offence)					Sexual behaviour (all index offence)	
					Manner of behaviour (all that apply)	
	L	M	H	VH	Use of physical force	<input type="checkbox"/>
Risk matrix 2000	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Use of manipulation	<input type="checkbox"/>
Stable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Use of threats	<input type="checkbox"/>
Overall risk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Previous convictions					Location of sexual behaviour	
<b>Non violent / non sexual</b>					<b>(all that apply)</b>	
Yes <input type="checkbox"/> No <input type="checkbox"/> N/K <input type="checkbox"/>						
<b>Violent</b>					Home (family / foster / adoptive)	
Yes <input type="checkbox"/> No <input type="checkbox"/> N/K <input type="checkbox"/>						
<b>Sexual</b>					Home (other eg residential/unit)	
Yes <input type="checkbox"/> No <input type="checkbox"/> N/K <input type="checkbox"/>						
Sex offender registration previous					School (mainstream)	
Yes <input type="checkbox"/> No <input type="checkbox"/> N/K <input type="checkbox"/>					School (residential)	
Sex offender registration current					Community	
Yes <input type="checkbox"/> No <input type="checkbox"/> N/K <input type="checkbox"/>						
Intervention currently (one please)						
Police monitoring only					<input type="checkbox"/>	Nature of behaviour
Police / social work monitoring					<input type="checkbox"/>	Contact
Frequency of contact -						Non contact
MAPPAs levels					1	2
					3	Both

Present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Directed at self	<input type="checkbox"/>
Previous (all that apply)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		Don't know	<input type="checkbox"/>
<b>Victim type (index offence)</b>				<b>Non contact behaviour Please leave blank if not applicable</b>		
Sibling				<input type="checkbox"/>	Yes	D/K
Other relative				<input type="checkbox"/>	Abusive language	<input type="checkbox"/> <input type="checkbox"/>
Known victim				<input type="checkbox"/>	Exposure	<input type="checkbox"/> <input type="checkbox"/>
Unknown victim				<input type="checkbox"/>	Voyeurism	<input type="checkbox"/> <input type="checkbox"/>
Don't know				<input type="checkbox"/>	Use of pornography	<input type="checkbox"/> <input type="checkbox"/>
Not applicable				<input type="checkbox"/>	Use of IT	<input type="checkbox"/> <input type="checkbox"/>
Number of incidents					Phone calls	<input type="checkbox"/> <input type="checkbox"/>
Number of victims					Letters	<input type="checkbox"/> <input type="checkbox"/>
<b>Sex of victims (index offence)</b>				Fetishism		
Male <input type="checkbox"/>	Female <input type="checkbox"/>	D/K <input type="checkbox"/>	N/A <input type="checkbox"/>	Other (please specify)		
<b>Age range of victims (index offence)</b>						
0-2 years				<input type="checkbox"/>	<b>Previous MO comments</b>	
3-5 years				<input type="checkbox"/>		
6-10 years				<input type="checkbox"/>		
11-13 years				<input type="checkbox"/>		
14-17 years				<input type="checkbox"/>	<b>Any other comments</b>	
18 or over				<input type="checkbox"/>		
Don't know				<input type="checkbox"/>		

Appendix 2 MAPPA – GIRFEC local authority data collection

Case ID (SPSAPR)		Gender	
<b>Looked after status (one only)</b>		<b>Involvement with: (all that apply)</b>	
Currently looked after	<input type="checkbox"/>	Family service	<input type="checkbox"/>
Previously looked after	<input type="checkbox"/>	Sexual behavioural service	<input type="checkbox"/>
Neither	<input type="checkbox"/>	Psychiatric services	<input type="checkbox"/>
Don't know	<input type="checkbox"/>	Psychological services	<input type="checkbox"/>
<b>Reasons for first contact with social work</b>		Children and family social work	<input type="checkbox"/>
		Criminal justice social work	<input type="checkbox"/>
Care issues	<input type="checkbox"/>	Reparation / mediation services	<input type="checkbox"/>
Child Protection	<input type="checkbox"/>	Youth justice services	<input type="checkbox"/>
Truancy	<input type="checkbox"/>	None	<input type="checkbox"/>
Beyond Parental Control	<input type="checkbox"/>	Don't know	<input type="checkbox"/>
Offending	<input type="checkbox"/>	Other (please indicate)	<input type="checkbox"/>
Don't know	<input type="checkbox"/>	Comments	
Other (Please Specify)	<input type="checkbox"/>		
Age of first contact with social work			
<b>Social work procedures</b>		<b>Current living environment (all that apply)</b>	

	pres	past	n/k	Stable	<input type="checkbox"/>
Child Protection Registration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Victims in household	<input type="checkbox"/>
Vulnerable Child / Child in Need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Potential victims in household	<input type="checkbox"/>
Supervision (home)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Adequate levels of risk awareness in household	<input type="checkbox"/>
Supervision (away from home)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Not known	<input type="checkbox"/>
Other (Please Specify)			Other (please indicate)		
<b>Previous children's hearings</b>			<b>History of truancy from school</b>		
Number of appearances			Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/K <input type="checkbox"/>
Beyond control	<input type="checkbox"/>	<b>History of exclusion from school</b>			
Lack of care	<input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/K <input type="checkbox"/>	
Victim schedule 1 offence	<input type="checkbox"/>	Any additional comments.			
Not attending school	<input type="checkbox"/>				
Offending	<input type="checkbox"/>				
Offending / sexually problematic	<input type="checkbox"/>				

<b>Risk assessments completed</b>		<b>Trauma issues for young person</b>	
Risk Matrix 2000	<input type="checkbox"/>	Actual victim sexual abuse	<input type="checkbox"/>
Stable and acute	<input type="checkbox"/>	Physical abuse	<input type="checkbox"/>
AIM 2	<input type="checkbox"/>	Emotional abuse	<input type="checkbox"/>
J-SOAP II	<input type="checkbox"/>	Neglect	<input type="checkbox"/>

LS-CMI	<input type="checkbox"/>	Parental separation	<input type="checkbox"/>
ERASER	<input type="checkbox"/>	Parental rejection	<input type="checkbox"/>
ASSET	<input type="checkbox"/>	Peer group difficulties	<input type="checkbox"/>
YLS-CMI	<input type="checkbox"/>	Bereavement	<input type="checkbox"/>
Don't know	<input type="checkbox"/>	Bullied	<input type="checkbox"/>
Other		Sibling separation	<input type="checkbox"/>
		Numerous placements	<input type="checkbox"/>
<b>Action plan points: (please detail)</b>		Parental drug / alcohol misuse	<input type="checkbox"/>
		Domestic violence	<input type="checkbox"/>
		None	<input type="checkbox"/>
		Other (please state)	
		Additional comments	
<b>Intervention currently (one please)</b>			
Monitoring only	<input type="checkbox"/>		
1:1 case supervision	<input type="checkbox"/>		
1:1 structured programme	<input type="checkbox"/>		
Name:			
Group programme	<input type="checkbox"/>		
Name:			

Any additional comments.	
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