Ministerial Foreword

We recognise the huge opportunity that, across our respective portfolios, Bairns’ Hoose offers to improve experiences for children who have experienced trauma, by providing a child-centred approach to delivering justice, care and recovery. We believe that every child victim or witness has the right to consistent and holistic support, to access specialist services and to recover from their experiences.

The consultation on these draft standards mark an important step in our journey towards realising our vision that:

All children in Scotland who have been victims or witnesses to abuse or violence, as well as children under the age of criminal responsibility whose behaviour has caused significant harm or abuse\(^1\) will have access to trauma-informed recovery, support and justice.

The Bairns’ Hoose standards are based on the solid foundation of the United Nations Convention on the Rights of the Child (UNCRC) and on the European Barnahus PROMISE Quality indicators. We are hugely grateful for the time and expertise of the professionals and children and families with lived experience who have contributed to a common understanding of what the international model means in a Scottish context through these draft standards.

Through this work we are confident that the Scottish Bairns’ Hoose model will also be aligned with our key policy programmes of Keep The Promise and Getting it right for every child (GIRFEC), which recognise that all children must receive the right help at the right time.

The eleven Standards set out what the vision will mean in reality for the children and young people and their families as well as for the professionals who will work to support with them throughout their journey to justice and recovery. The standards will provide a blueprint for delivery and support consistent national implementation of Bairns’ Hoose which will be driven by the National Bairns’ Hoose Governance Group.

We welcome the consultation on these draft standards, and look forward to continuing our close work with partners, to deliver the wrap-around support that children, young people and their families deserve, and that through the implementation of these standards, Bairns’ Hooses will provide.
Keith Brown

Humza Yousaf

Clare Haughey

Cabinet Secretary for Justice and Veterans

Cabinet Secretary for Health and Social Care

Minister for Children and Young People
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Introduction

The European Barnahus model

The first Barnahus or ‘Child’s House’ was established in Iceland in 1998 to improve the statutory response to child sexual abuse. Inspired by the Child Advocacy Center model from the United States, the Barnahus model is underpinned by the United Nations Convention on the Rights of the Child (UNCRC) and is internationally recognised as an evidence-based model for children and families who are victims and witnesses of abuse and violence.¹ ²

Article 39 of the UNCRC places an obligation on states to take all appropriate measures to promote physical and psychological recovery from abuse and exploitation.³ It states this should take place ‘in an environment which fosters the health, self respect and dignity of the child.’⁴ Barnahus has a critical role in upholding this right.⁵ The views and experiences of children and families highlight the importance of feeling heard, respected and supported by professionals ‘under one roof.’⁶ ⁷ Barnahus is conceptually described as a ‘house with four rooms’: health services, child protection services, judicial or investigative proceedings and therapeutic recovery.⁸ The roof of a Barnahus provides expertise through collaboration, consultation, training and awareness-raising on upholding the child’s rights to care, protection, recovery and justice.

Children’s right to participation in all judicial and administrative proceedings about them is enshrined in Article 12 of the UNCRC. This right is upheld through the relationships that are developed, processes and design of an effective Barnahus.⁹ Barnahus plays a further critical role in ensuring that a child’s journey through the justice process as a victim or witness is coordinated. Barnahus also plays an important role in enhancing awareness and knowledge of violence and abuse against children.¹⁰

The Barnahus model is recognised by the Lanzarote Committee of the Council of Europe as a good practice example for a child-friendly multidisciplinary response and in 2006 was the recipient of the Multidisciplinary Award from the International Society for the Prevention of Child Abuse and Neglect. The UN Committee on the Rights of the Child highlighted the success of the legislative, institutional and policy measures taken to implement the Convention on the Rights of the Child, in particular the implementation of the Barnahus model.
The Bairns’ Hoose

In Scotland, the application of Barnahus to our specific legal, health, social care and child protection context is called **Bairns’ Hoose**.

Bringing Barnahus to Scotland has been a long standing and crosscutting government ambition. In 2015, the Evidence and Procedure Review Team’s first report highlighted research that showed that the existing procedures for taking evidence in court from a vulnerable witness a) risked their potential retraumatisation and further harm and b) were not conducive to securing the most accurate, reliable and comprehensive evidence.\(^{11}\) The review identified the potential benefits of pre-recording the evidence of vulnerable witnesses in an appropriate non-courtroom setting.\(^{12}\) This led to the development of the Scottish Child Interview Model (SCIM), an evidence-based protocol for interviewing child witnesses, which commenced rollout in 2021.\(^{13}\) Having visited the Barnahus in Oslo, Norway, the Evidence and Procedure Review Team concluded that ‘there is a compelling case that the approach taken in Norway [Barnahus] provides the most appropriate environment and procedures for taking the evidence of a young or vulnerable witness’ and recommended the development of such facilities in Scotland.\(^{11}\)

The development of these standards is the culmination of pledges to consider how lessons from the experience of Barnahus internationally could apply in the Scottish context. As initially highlighted in Equally Safe – A Delivery Plan,\(^ {14} \) development of a national Bairns’ Hoose model will embed the core principles of Getting it Right For Every Child (GIRFEC); support the work of The Promise\(^ {15} \) in transforming care for children and young people in Scotland and improve health pathways of care access to forensic medical examinations. It will support the delivery of reforms made to the vulnerable witnesses legislation and the Scottish Government’s transformational priorities on delivering person-centred and trauma-informed practices across the justice sector to improve the experiences of children.\(^ {16} \) More information on function of justice system and its relationship to Bairns’ Hoose is outlined in Appendix 1.

Bairns’ Hoose is part of a wide programme of redesign and public sector reform in Scotland to put prevention, rights and people at the centre of the design of services.\(^{11,17}\) A national Bairns’ Hoose model requires development in the context of other significant Scottish Government key priorities and systems transformation including the National Care Service.
Delivery of the standards

In its 2021-22 Programme for Government, the Scottish Government committed to establishing a national Bairns’ Hoose model.

In line with Bairns’ Hoose—Scottish Barnahus visions, values and approach the overall vision of a Bairns’ Hoose is that:

All children in Scotland who have been victims or witnesses to abuse or violence, as well as children under the age of criminal responsibility whose behaviour has caused significant harm or abuse, will have access to trauma-informed recovery, support and justice.

The vision sets out Scottish Ministers’ agreed scope for who will access Bairns’ Hoose. ‘Significant harm’ refers to serious interruption, change or damage to a child’s physical, emotional, intellectual or behavioural health and development. Where information is received by police, health or social work that a child may have been abused or neglected, or is suffering or is likely to suffer significant harm, an interagency referral discussion (IRD) must be convened as soon as reasonably practicable. IRDs will be a critical factor in ensuring that every eligible child has access to a Bairns’ Hoose.

In line with the scope outlined in the Scottish Government’s visions, values and approach the standards will apply to:

- all children under the age of 18 in Scotland who are believed to have been victims or witnesses to abuse or violence which has caused or is likely to cause significant harm, and
- all children under the Age of Criminal Responsibility (ACR) whose behaviour has caused significant harm or abuse.

The delivery of Bairns’ Hoose requires a coordinated and collaborative approach across justice, police, health, social work, children’s services and third sector partners. Strong and effective leadership will be critical from all partners to maximise collaboration and establish trust as partnerships jointly respond to the complexities of system change. Further conversation will be required to overcome barriers and address critical questions in the delivery of these standards. The Scottish Government Bairns’ Hoose Unit was established in November 2021 to deliver on the Ministers’ vision, values and approach. It will continue to work collaboratively with key stakeholders to design and refine the Bairns’ Hoose model over the coming years.

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§ As per Section 39 (1) of the Age of Criminal Responsibility (Scotland) Act 2019 this includes children under the age of criminal responsibility whose behaviour has risked causing harm.
In February 2022, Scottish Ministers appointed Val de Souza, formerly Chief Officer, Health and Social Care Integration, combined with Director of Social Work Services in South Lanarkshire (retired May 2021) to be the independent chair of a National Bairns’ Hoose Governance Group. With support from Scottish Ministers, Ms de Souza’s agreed approach is to place the responsibility for Bairns’ Hoose with the thirty public protection Chief Officers’ Groups to develop implementation plans using the national standards as a blueprint for delivery. The standards are intended to be specific and detailed to enable partnerships to use them to clearly demonstrate their progress towards implementing the Bairns’ Hoose model.

Healthcare Improvement Scotland and the Care Inspectorate have been jointly commissioned to develop the standards in collaboration with key partners and agencies. Together we have taken an intelligence-led approach to the development, and any future revision, of these standards as partnerships embed change and evaluate learning. Further information about the development of these standards is available in the appendices.

**Putting children’s rights first**

The European Barnahus network (known as the PROMISE network) envisions a Europe where all children are protected and their rights under the UNCRC are upheld. The Scottish Parliament unanimously passed the UNCRC (Incorporation) (Scotland) Bill in March 2021. The intent behind the Bill is to deliver a proactive culture of everyday accountability for children’s rights across public services in Scotland. It requires public authorities to take proactive steps to ensure the protection of children’s rights in their decision making and service delivery and make it unlawful for public authorities, including the Scottish Government, to act incompatibly with the UNCRC requirements as set out in the Bill. Children, young people and their representatives will have a new ability to use the courts to enforce their rights.

Central to the Bairns’ Hoose model are the following key articles:

**Article 1** defines the age of the child as everyone under the age of 18.

**Article 2** establishes the rights in the UNCRC are to be given to all children without discrimination.

**Article 3** establishes that the best interests of the child should be the primary consideration in all actions concerning children.

** The UK Supreme Court judgment in October 2021 found that certain provisions in the Bill were outwith the legislative competence of the Scottish Parliament. The Scottish Government remains committed to the incorporation of the UNCRC to the maximum extent possible and to bringing an amended Bill back to Parliament for reconsideration as soon as practicable.
**Article 12** establishes that children have the right to express their views on all matters affecting them, and for those views to be given due weight, in accordance with the age and maturity of the child. Part 2 of the article states that children have the right to be heard in administrative or judicial proceedings affecting them.

**Article 13** relates to the right to seek and receive information of all kinds.

**Article 18** relates to the involvement of both parents (or people with parental responsibility) in the upbringing of the child and the state’s responsibility to provide assistance and support.

**Article 19** establishes children’s right to be protected from violence, abuse, neglect or exploitation while in the care of parents or guardians.

**Article 24** states that children have a right to the highest attainable standard of health.

**Article 39** states that all appropriate measures should be taken to promote physical and psychological recovery from abuse.

**Children’s involvement in the standards**

Article 12 of the UNCRC outlines children and young people’s right to express their views in all matters that affect them. The Bairns’ Hoose Standards Development Group (see Appendix 3) is committed to upholding this right and ensuring that children with lived experience of the current system help shape the Bairns’ Hoose standards for Scotland.

In December 2021, before the formation of the Bairns’ Hoose Standards Development Group, children and young people across Scotland were asked one key question: ‘what would you like to see in the standards?’ This built on the work of the Glasgow Initiative for Facilitation Therapy who, in partnership with the Moira Anderson Foundation, made a series of recommendations to the Standards Development Group. The Standards Development Group were presented with this feedback at the beginning of the process.

From February 2022, participation and rights workers from six organisations have supported children to play an active role throughout the six months standards development period. Through creative sessions, play, videos, group work and one-on-one sessions, children input their ideas into the standards and fed back on their experiences to the Standards Development Group at every meeting. A children’s version is available on our website.

The following sections were written by children in partnership with the Bairns’ Hoose project team:

- standard statement
- ‘children and young people told us,’ and
- what this means for children.
An holistic approach that understands trauma

Published in March 2020, The Promise outlines the findings of the Independent Care Review into children’s experiences of the care system. Crucial to the design of Bairns’ Hoose, it states:

Families and children’s needs are best met through an effective multiagency, holistic response to [...] abuse that incorporates a child-friendly, non-victim blaming and trauma-informed approach. That must be accompanied by coherent, joined up thinking from police, the broader criminal justice system, health, children’s sector and education.

It is a key national priority of the Scottish Government that services and the workforce across Scotland are trauma-informed and responsive. Trauma-informed services are those that recognise the prevalence of trauma and realise when individuals have been affected by trauma. Their design takes account of the knowledge and understanding of trauma and its impact, and ensures this is embedded across systems, policies and environments. Trauma responsive practice recognises the central importance of relationships in supporting recovery, in responding safely and in ways that reduce retraumatisation.

GIRFEC is the national policy developed to support the wellbeing of all children and young people in Scotland. It is central to all policies which support children, young people and their families and underpins the Bairns’ Hoose standards. Within the GIRFEC approach, all work should enable children’s wellbeing, protect children and prevent long-term harms by intervening early.

As part of GIRFEC:

- the timing, process and content of all assessment, planning and action must apply to the individual child and to their present and future safety and wellbeing
- children’s views must be heard and given due consideration in decisions in accordance with their age, level of maturity and understanding
- services must seek to build on strengths and resilience as well as address risks and vulnerabilities within the child’s world, and
- partnership must be promoted between those who care about and have responsibilities for the child.
Age of criminal responsibility

The age of criminal responsibility (ACR) in Scotland is the age at which a child can be held responsible in law for the commission of an offence. In Scotland that age is currently 12.†† The scope of the Scottish Government’s vision for Bairns’ Hoose specifically includes children under ACR whose behaviour has caused significant harm or abuse. The Bairns’ Hoose will be an environment in which the context of the behaviour can be understood and positive interventions can be made to minimise the risk of further harmful behaviour.

Any child will be able to access a Bairns’ Hoose if they have been, or are believed to have been, the victim of, or witness to, abuse or violence which has caused, or is likely to cause, significant harm. It will be immaterial whether they have separately been responsible for criminal or harmful behaviour (at any age).

The ACR Advisory group is reviewing the Age of Criminal Responsibility (Scotland) Act 2019, which is the Act that increased the ACR to 12. The group is considering evidence and the operational requirements for a possible future increase. The National Bairns’ Hoose Governance Group will link with the Advisory Group to further consider the impact on the Bairns’ Hoose model.

Format of the standards

All our standards follow the same format. Each standard includes:

- an overarching standard heading
- a statement of the level of performance to be achieved
- feedback from children and young people who shared their views during development of the standards
- a rationale explaining why the standard is important
- a list of criteria describing the required structures, processes and outcomes
- what the standards mean if you are a child or a family member accessing the service
- what the standards mean if you are a member of staff, and
- what the standards mean for organisations, including examples of evidence that demonstrates how you are meeting the standard.

†† Section 41 of the Criminal Procedure (Scotland) Act 1995, as amended by the Age of Criminal Responsibility (Scotland) Act 2019, states that ‘a child under 12 cannot commit an offence.’ This change came into force on 17th December 2021.
Terminology

For the purposes of the Bairns’ Hoose standards, we will use the following terms throughout this document:

**Agency or organisation** refers to any group or body with involvement in a Bairns’ Hoose, for example third sector agencies, NHS boards, social work teams or police divisions.

**Child** refers to any person below the age of 18, as outlined in Article 1 of the UNCRC, who may be referred to a Bairns’ Hoose.

**Child under the age of criminal responsibility** refers to any person below the age set out in the Age of Criminal Responsibility (Scotland) Act 2019. Throughout this document, this term relates to those children under the ACR who may be referred to a Bairns’ Hoose.

**Family** refers to the child’s non-abusing family members and includes parents, siblings, foster carers and siblings, adopted families and extended family.

**Staff** refers to any individual providing support or a service directly to a child in a Bairns’ Hoose, regardless of their employer.

**The Bairns’ Hoose partnership** refers to any group responsible for planning, commissioning or delivering a Bairns’ Hoose. The partnership should include, as a minimum:

- health services including community mental health services
- local authority social work
- organisations with expertise in delivering therapeutic support, and
- Police Scotland.

The partnership will consult with appropriate organisations such as the Crown Office and Procurator Fiscal Service (COPFS), Scottish Courts and Tribunal Service and the Scottish Children’s Reporter Administration (SCRA) to ensure that practices and facilities are of the required standard for any legal process.

**Therapeutic support**, in the context of these standards, refers to formal therapeutic input or psychological intervention. It also includes other therapeutic activities which may draw on the principles of psychological intervention such as art or play therapy.\(^{24,25}\)

**Trauma informed**, in relation to practice and training, is defined by the National Education for Scotland Transforming Psychological Trauma Knowledge and Skills Framework.\(^{24}\) Any appropriate training in this area will be in line with the Scottish Psychological Trauma Training Plan.\(^{26}\)

**Trusted person** refers to a professional chosen by the child or family to support them through their journey at a Bairns’ Hoose, for example a support worker, social worker, residential care staff member, independent advocate, nurse or health visitor.
How to participate in the consultation process

We welcome feedback on the draft standards and will review every comment received. We are using different methods of consultation, including:

- online and face-to-face focus groups across Scotland
- engagement with children and families through our children’s engagement framework
- meeting and event attendance to raise awareness and hear feedback
- an online survey tool: https://www.smartsurvey.co.uk/s/K0W5T1/

Submitting your comments

Responses to the draft standards should be submitted using our online survey: https://www.smartsurvey.co.uk/s/K0W5T1/.

The consultation closes on 4 November 2022. If you would like to submit your comments using a different format, please contact the project team on his.barnahusstandards@nhs.scot.

Consultation feedback

At the end of the consultation period, all comments will be collated and the project group will respond to each comment received on the draft standards. The response will explain how the comments were taken into account in producing the final standards.

A summary of the responses to the consultation will be made available on the Healthcare Improvement Scotland website (www.healthcareimprovementscotland.org).

The final standards will be published in February 2023.
The Bairns’ Hoose standards

1. My rights are upheld. My best interests are always considered, I am listened to and my views are taken seriously.

2. Senior leaders across Scotland work together to ensure Bairns’ Hoose helps me and other children.

3. If I am referred, I can go to a Bairn’s Hoose no matter why I need to go, what my needs are or where I live.

4. The Bairns’ Hoose feels cosy, comfortable, relaxed and well-kept. I have to travel to as few places as possible.

5. The people who help me work well as a team. Things are explained to me in a way that I can understand.

6. I am supported to tell the police and social work what happened. My interview will be videoed, unless I don’t want it, so that I don’t have to repeat myself as much.

7. If I need to give evidence in a court process, someone explains what is happening and supports me through this.

8. My physical, emotional and mental health is looked after. Someone helps to plan appointments and I’m supported to go.

9. If me or my family need help we can speak with someone who understands what we are going through. I get the help and support I need to recover. I have one person who I trust who is there for me throughout my time at Bairns’ Hoose.

10. The people who help me at Bairns’ Hoose understand how to protect my rights. They are able to work as a team and they get the help they need to do their jobs well.

11. People at the Bairns’ Hoose listen to what I have to say about my experience there. What I tell them helps to make the Bairns’ Hoose better for other children.
Standard 1: Key principles and the rights of the child

Standard statement
My rights are upheld. My best interests are always considered, I am listened to and my views are taken seriously.

Children told us:

- it should be about me and what works best for me, not what works best for services
- I should have the chance to make choices about what I want and need
- I should be genuinely involved and know what is happening at every step of the way
- things should happen at a speed that I am comfortable with. I should be able to stop and start when I want to, and
- there needs to be support for my family and those who look after me.

Rationale
The key principle of the Bairns’ Hoose is to uphold children’s rights. UNCRC Article 3 outlines the general principle that the best interests of the child must be ‘a primary consideration in all actions concerning children’. The full application of the concept of the child’s best interests requires the development of a rights-based approach, engaging all actors, to secure the holistic physical, psychological and spiritual integrity of the child and promote their human dignity.

The views expressed by children through supported participation should be considered in decision making, policy and preparation of laws or measures as well as their evaluation.

Article 12(1) of the UNCRC states that all children should be given the opportunity to be heard and their views given due weight on all matters affecting them. Children who are supported to fully participate and have their rights upheld report lower levels of subsequent trauma following disclosure of abuse. Effective engagement with children should underpin the design and delivery of Bairns’ Hoose. Article 13 enshrines that ‘children’s right to seek and receive information’.

Article 39 of the UNCRC states that all appropriate measures should be taken to promote the physical and psychological recovery of children who have experienced abuse, neglect or violence. Such recovery and reintegration should take place in an environment which fosters the health, self-respect and dignity of the child.
Criteria

1.1 The best interests of the child are at the core of all actions and decisions made about them.

1.2 Children’s views are listened to and their thoughts given due weight including in any judicial and administrative proceedings relating to them.

1.3 Children and families are supported to participate in the planning, service design and evaluation of each Bairns’ Hoose.

1.4 Bairns’ Hoose processes are integrated and designed around the needs of children, including:

- going at the child’s pace, for example ensuring regular breaks
- ensuring children do not experience undue delay in having their needs assessed and met
- explaining the processes and procedures using formats and languages that children and families with different capabilities and at different ages and stages can understand.
- giving children and families space and support to ask questions, and
- ensuring the support of a trusted person of the child’s choice throughout, except in circumstances where that is not legally possible.

1.5 Online videos, websites and leaflets describe what happens at the Bairns’ Hoose and are developed in partnership with:

- children and families who have experience of justice or child protection proceedings
- children of all ages
- children and families who do not have English as a first language, and
- disabled children including children who use communication tools or who are non-verbal.
1.6 Children and families are supported to understand what is happening in the Bairns’ Hoose and receive information that is:

- inclusive
- in their own language
- adapted to their age and development
- in a format and language they understand
- relevant
- consistent, and
- timely.

1.7 Service specifications, delivery plans and improvement plans contain specific provisions relating to each relevant article of the UNCRC and the Bairns’ Hoose partnership can demonstrate evaluation against these provisions.

1.8 All requirements under the Equality Act (2010) are met to ensure that the rights of disabled children and children with other protected characteristics are upheld.

1.9 The rights of refugee children, trafficked children and care experienced children are upheld without discrimination.

1.10 The Bairns’ Hoose partnership makes decisions and provides information about decisions made in a timely manner to reduce undue delay.

1.11 Children and families are consulted about what information is shared, where possible. Their right to privacy is respected at all times unless it compromises their right to safety or justice or someone else’s right to safety or justice.

**What does the standard mean for children?**

- Your rights will always be upheld and people will stand up for your rights.
- Decisions about you are made with your input and in your best interests.
- You will be included in decisions and given as much choice as possible.
- The information you get will be clear, understandable and useful. You will get it when you need it.
- Your family will be involved if you want them to be.
- You will be able to ask questions and will be helped to understand the information you get.
- You will have a chance to be involved in how the Bairns’ Hoose is run.
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<th>What does the standard mean for staff?</th>
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<tr>
<td><strong>Staff:</strong></td>
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<tr>
<td>• ensure that the best interests of the child are at the centre of all actions relating to children and decisions made about them</td>
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<tr>
<td>• are supported to deliver a rights-based serviced which revolves around the needs of children</td>
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<tr>
<td>• work collegiately to put children’s rights at the centre of their work</td>
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<tr>
<td>• take into account the impact of trauma and understand children’s experiences, and</td>
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<tr>
<td>• are trained and competent to assess and determine the best interests of the child and deliver care and support that is respectful and compassionate.</td>
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<th>What does the standard mean for the Bairns’ Hoose partnership?</th>
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<tr>
<td><strong>The partnership:</strong></td>
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<td>• upholds children’s rights in all of its work</td>
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<tr>
<td>• designs systems and processes around the needs and best interests of children</td>
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<td>• works collaboratively and effectively to reduce undue delay</td>
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<tr>
<td>• gives due weight to the thoughts and opinions of children, and</td>
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<tr>
<td>• manages and handles data legally and sensitively.</td>
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<th>Practical examples of evidence of meeting standard <em>(NOTE: this list is not exhaustive)</em></th>
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<tr>
<td>• Information is provided in alternative formats and languages, including videos and online material developed in partnership with young people.</td>
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<td>• Implementation of peer advocacy, Champions Boards and young people’s reference groups.</td>
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<td>• Children’s involvement in panels, boards, steering groups and decision-making bodies.</td>
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<tr>
<td>• Alignment between service plans and national children’s frameworks.</td>
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<tr>
<td>• Feedback from children and young people.</td>
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Standard 2: Collaborative leadership and governance

Standard statement
Senior leaders across Scotland work together to ensure Bairns’ Hoose helps me and other children.

Children and young people told us:
- things should actually change and be different for children who go through what I did
- people in power should stick to their promises
- the Bairns’ Hoose should be checked against the standards
- the adults responsible for the Bairns’ Hoose should actively seek out children’s views and listen to them, and
- I should be involved in the way the Bairns’ Hoose is run.

Rationale
The Bairns’ Hoose model should be governed with strong, dedicated leadership with a vision to uphold children’s rights to care, protection and justice, to participation, and to be protected from abuse. The needs and rights of children must be the primary concern of strategic leadership, expressed through a national, regional and local coordinated effort that reflects geographical context. The Bairns Hoose should be formally embedded in national and local child protection services with partnership agreements established. Partnerships should reconfigure services, realign budgets and refocus strategic planning around the needs and rights of children and families.

There can be great anxiety and uncertainty for children and families involved with complex, disparate systems across justice, child protection, and health and therapeutic support. A consistent and coordinated approach reduces undue delay, uncertainty and trauma by providing a holistic and integrated response.

Effective service design places people at the centre. In developing a Bairns’ Hoose, partnerships should use evidence-based quality improvement and service design methods, including committing to a system for continuous learning and evaluation. Children and young people should be involved in a way that is right for them at all relevant stages.
All governance, partnership and operational management of Bairns’ Hoose will recognise the independent role of the Lord Advocate as head of the system of investigation and prosecution of crime in Scotland and the independent role of the Principal Reporter in Scotland’s Children’s Hearing system.

Criteria

2.1 There is collective, collaborative leadership at all levels including:

- National Child Protection Leadership Group
- Public Protection Chief Officers Groups
- joint children’s services planning structures such as Integration Joint Boards and children’s partnerships
- groups with responsibility for the delivery of relevant national change programmes such as The Promise
- Child Protection Committees, and
- local delivery groups.

2.2 There is a national agreement for the governance and oversight of Bairns’ Hoose which specifies the commitment, resourcing and expectation required from all relevant agencies.

2.3 There is a formal partnership agreement for the operation and maintenance of each Bairns’ Hoose which specifies the commitment, resourcing, roles and responsibilities of all agencies and team members.

2.4 Formal partnership agreements are regularly reviewed to support continuous improvement and ensure objectives are being met, and take into account:

- children and families’ views and experience about what matters
- the results of ongoing evaluation, data collection and tests of change
- changes to policy or legislation, and
- current good practice and best evidence.

2.5 Every Bairns’ Hoose is formally embedded in local child protection partnerships, systems and processes.
2.6 There is a sustainable delivery plan for the establishment and operation of each Bairns’ Hoose which outlines the partnership’s:

- shared aims and culture
- governance structure
- coordination mechanisms
- engagement with children and families
- roles and responsibilities
- workforce and staffing model
- outcomes framework and corresponding data collection processes, and
- performance monitoring arrangements.

2.7 Each Bairns’ Hoose has a jointly agreed staffing model which:

- is based on compassion and understanding of trauma
- supports the development of relationships
- enables continuous safe care and support to be provided
- is sustainable, and
- protects staff capacity to facilitate and embed system-wide change.

2.8 Each Bairns’ Hoose has internal and external governance processes which:

- ensures a mechanism for children and young people to provide feedback
- include effective independent quality assurance including inspection
- include internal quality assurance mechanisms and structures, and
- include a robust and transparent complaints procedure.

2.9 There is a designated member of staff with responsibility for oversight of the Bairns’ Hoose including coordination across the relevant agencies.

**What does the standard mean for children?**

- People in charge will plan the way a Bairns’ Hoose runs and agree what it looks like.
- You can give feedback on your experience of a Bairns’ Hoose and it will be listened to.
- You have the chance to make a formal complaint if you need to. This will be taken seriously.
- Bairns’ Hooses will have to show that they meet these standards.
### What does the standard mean for staff?

**Staff:**
- work within a coordinated system with strong leadership which puts children’s rights at the centre
- are equipped and supported to understand the national and local context they work in and how it relates to and supports their role
- have protected time and appropriate training to understand the changing context within which they undertake their role
- can access local, cross-sector networks to build relationships and better understand the role of partners, and
- operate within an environment which allows them to follow clearly-defined policies, procedures and processes.

### What does the standard mean for the Bairns’ Hoose partnership?

**The partnership:**
- has a clear delivery plan for Bairns’ Hoose which is responsive to local need
- has clear and robust governance mechanisms which support a strategic, networked approach to delivery
- involves children and families in the design, delivery and improvement of Bairns’ Hoose
- routinely monitors and evaluates outcomes to support continuous improvement, and
- ensures that staffing levels are safe and sustainable.
### Practical examples of evidence of achievement *(NOTE: this list is not exhaustive)*

- Joint delivery plans or standards implementation plans.
- Active engagement with children in joint delivery or implementation plans.
- Tests of change and use of quality improvement tools and methods.
- Involvement in strategic network-building, collaborative learning events and collective problem-solving.
- Formal multiagency steering groups terms of reference or local written agreements.
- Rights-based outcome measures, baseline measures and self evaluation against these measures.
- Independent registration and inspection reports confirming that the Bairns’ Hoose standards are being met.
- Policies, procedures, codes of conduct and guidance on governance and quality assurance mechanisms.
- Protocols and agreements for interagency working including role descriptions.
- Staff skills, training and safe staffing data.
- Satisfaction or other data relating to complaints resolution.
Standard 3: Inclusive access

Standard statement
If I am referred, I can go to a Bairn’s Hoose no matter why I need to go, what my needs are or where I live.

Children and young people told us:
- everyone going to a Bairns’ Hoose needs help
- children whose behaviour might have caused harm should also be treated with respect and be able to get support, and
- support should be available for my family too.

Rationale
Children and young people’s right to non-discrimination is enshrined in both national and international law. Children and young people with one or more protected characteristics, children who are care experienced, and children with additional support needs are all more likely to experience trauma, yet are also less likely to disclose abuse. Children under the ACR are likely to have experienced or witnessed abuse themselves.

Children who have experienced neglect or any type of physical, emotional or sexual abuse may experience poor health and wellbeing outcomes well into adulthood. Exposure to domestic abuse may have profound effects on children’s long-term health and wellbeing, including brain development, stress-related physical illness, mental health and resilience. All children who have experienced or witnessed any type of abuse should be considered for referral to Bairns’ Hoose. Bairns’ Hoose should be extended to siblings and non-abusing parents who play a key role in supporting the recovery of children.

All components of the Bairns’ Hoose (that is, health, justice, child protection and therapeutic support) should be accessible to all children. All components should be available regardless of where children live.

Criteria
3.1 All children who have experienced or witnessed any type of abuse or violence which may have caused significant harm are considered for referral to the Bairns’ Hoose at an IRD.

3.2 All children who are under the ACR are considered for referral to the Bairns’ Hoose at an IRD.
3.3 The Bairns’ Hoose has protocols in place for supporting and upholding the rights of children under the ACR.

3.4 Children in rural and island communities can access Bairns’ Hoose as close to home as feasible.

3.5 The Bairns’ Hoose is accessible for all children and families including disabled children and disabled family members.

3.6 Translation, interpretation and communication support is provided to children and their families when needed.

3.7 Family members including siblings are able to access holistic support at the Bairns’ Hoose.

**What does the standard mean for children?**

- These standards are for you no matter where you live, who you are or why you are going to a Bairns’ Hoose.
- The standards are for you if you go to a Bairns’ Hoose because your behaviour might have caused harm to someone.
- There will be people at the Bairns’ Hoose who speak your language.
- There will be things like sensory equipment, quiet spaces, hearing loops and ramps if you or your family need it.

**What does the standard mean for staff?**

Staff:

- ensure all children feel welcomed
- work flexibly across different locations where this is required
- can access appropriate services, such as interpretation services and communication support, and
- have a clear understanding of how people can access the Bairns’ Hoose.
## What does the standard mean for the Bairns’ Hoose partnership?

The partnership:

- has clear protocols, guidance and training to ensure that the Bairns’ Hoose is accessible for all children and families who access its services
- plans effective services to meet the needs of rural and island communities, and
- has arrangements to access appropriate services to support children to attend and fully engage in the Bairns’ Hoose.

## Practical examples of evidence of achievement *(NOTE: this list is not exhaustive)*

- Place-based needs assessments to ensure equity of delivery in remote, rural and urban areas.
- Protocols for assessing additional support needs for children and young people.
- Clear processes for referral to the Bairns’ Hoose.
- Evidence of processes and mechanisms to meet the specific needs of children under the ACR.
Standard 4: Design and environment

Standard statement
The Bairns’ Hoose feels cosy, comfortable, relaxed and well-kept. I have to travel to as few places as possible.

Children and young people told us:

- the Bairns’ Hoose should look and feel welcoming, inviting and safe on the outside and the inside. It should be bright and have windows in every room
- there should be activities, games, music I can control and things to fidget with to help me relax. I should have a space to be a kid
- the Bairns’ Hoose should be cared for and invested in. Nothing should be old, broken or forgotten
- there should be things like toys and activities for older and younger kids
- every Bairns’ Hoose should feel the same no matter which one you go to, and
- there should be somewhere nice outside with plants and toys where I can play and relax when I choose to.

Rationale

Children and young people who have experienced or witnessed harm report that feeling safe is essential to allow them to communicate what happened, support their recovery and reduce trauma. Children report that when talking about what has happened, the size of the furniture, formal environment and adult design of the building can contribute to the child feeling unsafe or overwhelmed. Travelling to unwelcoming and adult-centred spaces for assessments and interviews leads to additional feelings of disruption, powerlessness and trauma. Place-based approaches to the planning and design of services can support children and young people while building on the assets of local communities. The environment in which a child or young person is interviewed has an impact on the quality of the information collected. The Bairns’ Hoose should provide an environment which feels welcoming, safe and comfortable. It should have furnishings, fittings and décor that feel homely and access to an outdoor space which is designed to promote play and enhance wellbeing. Where possible, children and families should have control over the environment, such as lighting levels, ability to play music or use of outdoor space. Partnerships should ensure that child-friendly spaces are also suitable for taking recordings of the required quality for interview.
It is critical to ensure that the needs of all children to feel safe are met. The Bairns’ Hoose should be designed to be inclusive, physically accessible and uphold Article 2 of the UNCRC which states that the rights in the UNCRC are to be upheld for all children without discrimination.  

**Criteria**

4.1 Health, police, social work, recovery and justice services are co-located under one roof unless it is demonstrably not in the best interests of children.

4.2 Children experience assessments, examinations and interviews in a setting that is comfortable, informal, child friendly and designed with their needs at the centre.

4.3 Children and families travel the minimum amount necessary from their home.

4.4 Children and families are involved in the physical design of the Bairns’ Hoose from an early stage and at regular review points.

4.5 The planning and location of the Bairns’ Hoose takes into account:
   - the need for privacy and discretion
   - family safety in situations of domestic abuse and coercive control
   - community assets such as local health services
   - public transport, parking and accessibility, and
   - accommodation for children and families in circumstances where they have to travel long distances.

4.6 The Bairns’ Hoose feels cosy, safe and welcoming for all children and their families by offering:
   - a comfortable, safe child’s space
   - private space for families such as a living room
   - a space for play, creative activities or games
   - refreshments
   - sensory toys and relaxation materials
   - green outdoor space which can be accessed at any time
   - dedicated rooms appropriate for health assessments and visually-recorded interviews, and
   - children and families’ control over lighting, temperature or ventilation where possible.
4.7 Toys, games, entertainment technology, reading materials and craft materials in the Bairns’ Hoose are:

- appropriate
- adaptable to meet the needs of all children
- chosen as a result of meaningful engagement with children and families
- up-to-date
- well maintained, and
- continuously reviewed.

4.8 Technical equipment such as recording and medical equipment is shown and explained to children and families as part of the introduction process.

4.9 The Bairns’ Hoose is designed so that families have separate spaces where timetabling separate appointments is not feasible.

4.10 All facilities including reception areas, interview and examination rooms are comfortable, welcoming and adaptable to meet the needs of all children.

4.11 The Bairns’ Hoose is designed and planned to support staff to work effectively together including:

- collaborative space and shared systems where appropriate
- space for planning and administrative work, and
- separate, private space for staff reflection and supervision.

<table>
<thead>
<tr>
<th>What does the standard mean for children?</th>
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</thead>
<tbody>
<tr>
<td>- You will get the help you need in one place as much as possible.</td>
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<tr>
<td>- It will be private and be as close to home as possible.</td>
</tr>
<tr>
<td>- A Bairns’ Hoose will feel like a comfortable and welcoming place to be.</td>
</tr>
<tr>
<td>- Children will have a say over the design of the Bairns’ Hoose.</td>
</tr>
<tr>
<td>- You won’t come into contact with anyone who might have harmed you or other people you know.</td>
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<table>
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<tr>
<th>What does the standard mean for staff?</th>
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<tbody>
<tr>
<td>Staff:</td>
</tr>
<tr>
<td>- ensure that the environment is child-centred, well maintained and is welcoming and safe</td>
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<tr>
<td>- can access support that meets each child’s needs, and</td>
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<tr>
<td>- can access quiet spaces for staff time, privacy, breaks and practice reflection and supervision.</td>
</tr>
</tbody>
</table>
**What does the standard mean for the Bairns’ Hoose partnership?**

The partnership:

- involves children and young people in the planning, including the location, and design of the Bairns’ Hoose, and
- ensures that the Bairns’ Hoose is appropriately equipped and maintained for supporting all children including those who have experienced high levels of trauma.

**Practical examples of evidence of achievement (NOTE: this list is not exhaustive)**

- Accessible and high quality premises with appropriate equipment and facilities including toys, games, internet access and outdoor space.
- Inclusive service planning processes which involve children and young people and their families.
- Use of community-based planning tools and data to identify local transport links, proximity local services and communities most in need.
Standard 5: Planning for children

**Standard statement**
The people who help me work well as a team. Things are explained to me in a way that I can understand.

**Children and young people told us:**
- the Bairns’ Hoose should be designed around me and my needs
- I should have the option to visit or have a virtual tour to see the place before I go
- I should be able to meet the people who work there or find out about them before I go
- all staff should be on the same page, so children and young people feel safe enough and supported
- the people who support me should be kept up to date with what’s going on in my life so that I don’t have to repeat myself
- I shouldn’t have to risk meeting people I know or people who have caused harm to me
- I should have a person who I trust who tells me what is happening
- I should be asked things I actually have a choice about before I go, and
- I should have a say over who I would like to support me.

**Rationale**
Where concerns about a child have been identified, an IRD should be convened as soon as practically possible to begin the formal process of information sharing, risk assessment, analysis and decision making. All joint child protection processes and planning should follow the National Child Protection Guidance (2021) to focus on integration, prevention, early intervention and whole family support. All services for children and young people should follow the multiagency and integrated planning policy outlined in GIRFEC. Section 3 of the Children and Young People (Scotland) Act 2014 states that all public bodies should ensure that children’s services are planned and provided in a way which is most integrated from the point of view of the child. The provision of a fully coordinated multiagency team ensures that agencies have shared responsibility and knowledge of roles and responsibilities.
Child protection processes and planning for children including those under the ACR in the Bairns’ Hoose should build on existing knowledge about the child and their family and continue existing plans and support where it is working well. Robust information governance mechanisms, informed by the Data Protection Act 2018 and other relevant legislation, policies and guidance, should be adhered to by all agencies throughout the process.

Article 12(2) of the UNCRC states that all children should be given the opportunity to be heard in any judicial and administrative proceedings affecting them. Participation throughout the planning process should be supported, meaningful and put children’s best interests at the centre.

Having one person to support children and families throughout the process reduces feelings of confusion, powerlessness and alienation. Good relationships between workers and children are key to promoting participation in processes and engagement further down the line.

**Criteria**

**5.1** Bairns’ Hoose support and interventions are part of the single planning process involving all relevant agencies that begins before referral to the Bairns’ Hoose and continues during and after the period of contact with the Bairns’ Hoose.

**5.2** Records about children and families are accurate and written sensitively.

**5.3** Each Bairns’ Hoose partnership has data sharing agreements which cover:

- information sharing between agencies in line with legal duties relating to the child protection process
- legal duties to report to SCRA or COPFS
- information sharing guidance to support recovery, and
- information sharing for law enforcement, prosecution or Children’s Hearings proceedings.

**5.4** Children and families are fully informed about their right to privacy and how this will be upheld.

**5.5** Children are offered:

- choice over the sex or gender of their interviewer, trusted person and other professionals or healthcare practitioners where possible
- time to reflect on who their trusted person might be, and
- support and information on any processes they might experience.
5.6 Every child is:

- supported to freely express their views and have their views given due weight throughout the process, and
- able make choices that are important to them as much as possible.

5.7 There are processes in place to minimise contact between families with planned appointments and other visitors to the Bairns’ Hoose, for example, children who may need to attend urgently.

5.8 There is a lead professional who has responsibility to ensure that there is continuous and seamless multidisciplinary support and follow up for the child and their family throughout the process.

5.9 There is a dedicated person who has responsibility for the daily operation of the Bairns’ Hoose, including scheduling visits and planning staffing requirements.

5.10 Children can choose a trusted person to support them throughout and ensure their rights are upheld and their views are heard.

5.11 Digital systems are:

- up-to-date
- efficient and functional
- integrated as appropriate as far as legally and practically possible, and
- designed to support effective data sharing, performance monitoring and quality improvement.

What does the standard mean for children?

- Social workers, police and health professionals will work together to help you.
- You will have the name of a person who is there for you and who will explain what is happening.
- You will be involved as much as possible in the process. This involves being able to make choices about what’s important to you as much as possible.
- Your privacy is important and will be respected. You will be helped to understand what information is being shared about you and why things are being shared.
### What does the standard mean for staff?

**Staff:**

- work together to deliver consistent and coordinated care
- ensure that they understand their roles and responsibilities within an integrated team, and
- are aware of what information can and should be shared, and how to communicate this to children and their families.

### What does the standard mean for the Bairns’ Hoose partnership?

The partnership ensures that:

- there is infrastructure in place to embed the Bairns’ Hoose in the single planning process
- there are dedicated team members to fulfil coordination and support roles
- the child’s right to privacy and confidentiality is upheld
- information is shared according to legislation and data sharing agreements
- there are clear lines of accountability for the delivery of all statutory obligations, and
- services are coordinated, consistent and seamless both inside and outside the Bairns’ Hoose.

### Practical examples of evidence of achievement *(NOTE: this list is not exhaustive)*

- Jointly-created process maps, service pathways and operating procedures.
- Compliance with data protection and information sharing legislation, principles, policies and protocols.
- Integrated reflection, learning and decision making meetings for interagency staff within the Bairns’ Hoose.
- Joint improvement work, including action plans, data collection and review of data.
- Dedicated staff members in coordination or support roles.
Standard 6: Interviews in the Bairns’ Hoose

Standard statement
I am supported to tell the police and social work what happened. My interview will be videoed, unless I don’t want it, so that I don’t have to repeat myself as much.

Children and young people told us:
- I should feel safe when I’m being interviewed
- I should feel like the person listens to me and believes me
- people should remember I’m a child and not put too much pressure on me
- the interview should go at my pace
- I might forget all the details, so people should remember that’s okay
- I should feel like the people working with me respect me and want to help me
- I should be shown where the cameras are in the room. Everything should be explained to me in a way I understand, and
- someone should take the time to get to know me a bit and make sure I feel okay to say what happened.

Rationale
The European guidelines on child-friendly justice, underpinned by the UNCRC, highlight that justice processes should be adapted to the specific needs of children. Audio or visual recording of interviews should be used where possible to avoid repeat interviewing which may affect recall and cause additional trauma. Interviews should be carried out according to evidence-based practice and protocols. All interviews should be planned, supportive and undertaken by trained practitioners. The minimum amount number of interviews should be undertaken.

An IRD should take place prior to any decision to interview a child to ensure the interview is planned and tailored to the needs of the child. Interview models should both meet the needs of the child, allowing them to provide an input-free account of what has happened, and be of a suitable standard for any proceedings that may ensue.
Special measures are available to assist child witnesses to give evidence in criminal proceedings. One of those special measures is giving evidence-in-chief by prior statement. If the court grants the use of this special measure the statement(s) that the child witness gives to the police and social work can be used as their evidence-in-chief instead of the child witness physically going to court for this purpose. Partnerships should make use of any special measures granted by the court including the use of recorded investigative interviews as evidence-in-chief. The evidence-in-chief of a child witness, if granted, should be captured and presented at trial in pre-recorded form. The subsequent cross-examination of that witness should also, on application, be recorded in advance of trial.  

**Criteria**

6.1 Investigative interviews for children who require one take place in the Bairns’ Hoose unless it is demonstrably not in the best interests of the child.

6.2 The number of interviews is limited to the minimum necessary for the investigation and takes into consideration the best interests of the child. There may be some circumstances where further interviews are required.

6.3 The Scottish Child Interview Model is used in the Bairns’ Hoose to interview children who may be victims or witnesses.

6.4 Investigative interviews of children, including those under the ACR:

- follow trauma-informed and child rights principles, and
- are planned and coordinated with input from all relevant agencies.

6.5 Before the interview, children are informed about and supported to understand:

- what will happen
- the purpose of the interview
- the recording equipment and location of cameras
- who is involved in the investigative interview and their roles and responsibilities, and
- any likely outcomes of the interview, if known.
6.6 Staff from Police Scotland and social work plan the investigative interview to meet the needs of the child. Staff will be supported and informed by people who:

- know the child well, or
- have specialist skills to meet the child’s needs.

6.7 The interview is child centred and trauma informed and takes into account the child’s situation and characteristics, including, but not limited to:

- age and stage of development
- cultural background
- strengths and resources
- complex needs
- experience of trauma and adversity
- speech, language and communication needs
- context and motivation, and
- experience of relationships.

6.8 Staff undertaking interviews receive advanced, joint, comprehensive training to deliver a nationally-approved evidence-based interview.

6.9 Staff undertaking interviews receive support and supervision alongside opportunities for manager, self and peer evaluation.

6.10 Interviews are conducted in fully soundproofed spaces.

6.11 Children are supported to feel fully comfortable in the interview space, encouraged to express any worries and have them addressed.

6.12 Interviews are:

- shared with police and prosecutors if appropriate for the purpose of investigation and prosecution of a crime
- available for professionals to view where appropriate to support the care and recovery of children, with consent, and
- stored and shared according to processes and protocols that meet legal requirements.
6.13 Each Bairns’ Hoose has facilities to support:

- high quality video recording of interviews, and
- remote observation of interviews where required as part of the investigative process.

6.14 Interpreters and people who support children with communication needs are appropriately skilled and involved in planning the interview.

6.15 All children have access to non-suggestive support throughout the interview, as and when required.

6.16 Families of children being interviewed have:

- a comfortable, soundproofed and private waiting space
- access to refreshments and play and entertainment equipment
- access to support before, during and after the interview, and
- information about who to talk to if they have any questions.

6.17 If an interview is continued or further interviews are required, children are interviewed by the same interviewers unless the child requests a change.

<table>
<thead>
<tr>
<th>What does the standard mean for children?</th>
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<tbody>
<tr>
<td>• You will be interviewed by police and social work in a special room that is designed just for this purpose.</td>
</tr>
<tr>
<td>• You will be able to see the room and be shown the equipment beforehand.</td>
</tr>
<tr>
<td>• Your interview will be planned with input from people who know you or who have the right skills to support you and help you communicate.</td>
</tr>
<tr>
<td>• The people interviewing you will be trained to a very high standard. They will let you say what happened in your own words and not interrupt. You can meet them before the interview.</td>
</tr>
<tr>
<td>• Your interview will be recorded unless you don’t want it to be. The recording of the interview might be used in court instead of you giving evidence in person.</td>
</tr>
<tr>
<td>• Your family can wait in a comfortable room where they can’t hear what you’re saying. They have someone to talk to if they are worried about you.</td>
</tr>
</tbody>
</table>
What does the standard mean for staff?

Staff who undertake interviews:

- have advanced evidence-based training and are supported to undertake interviews
- provide information and support to children and families to ensure they are kept informed about the process, who is involved and who will hear about anything they share with staff
- can access supervision and peer support as required
- are encouraged and supported to continue to learn and develop their practice through evaluations including manager, self and peer evaluation
- undertake interviews which are child centred, trauma informed and respond to the particular needs of the child
- can access people that know the child well when planning for the interview
- can access specialist advice before the interview planning such as speech and language or mental health professionals, and
- can access interpreters and any other specialist professionals to support the child’s communication in the interview as required.

Staff can, with consent:

- securely access interviews where appropriate to their role and responsibilities, and
- view interview transcripts or recordings to support the child’s recovery and reduce the need for children to repeat their account of their experiences.

What does the standard mean for the Bairns’ Hoose partnership?

The partnership:

- ensures that staff can access training, supervision and opportunities for practice evaluation appropriate to their roles and responsibilities
- ensures that practice is informed by current evidence and guidance
- has processes and protocols in place for information sharing and storage according to legislation and data sharing agreements
- ensures staff have access to wellbeing support which mitigates against vicarious trauma
- provides a dedicated and suitable interview room, designed in partnership with children, which is well equipped and regularly maintained
- ensures that staff are able to engage with people that who know the child well
- ensures that staff can access interpreters and other relevant specialist staff
• ensures that audio-visual recording equipment is of high quality and maintained to a high standard to ensure recorded interviews are suitable for use within the justice process
• ensures children, young people and their families have access to support before, during and after the interview
• provides a range of information for children, young people and families about what will happen in Bairns’ Hoose, including identifying who to talk to if they have any questions, and
• provides a dedicated, comfortable and private waiting space for children, young people and their families, with access to refreshments and appropriate play and entertainment equipment.

**Practical examples of evidence of achievement (NOTE: this list is not exhaustive)**

- Evaluation of interview practice including peer evaluation, supervisor assessment and independent assessment.
- Frequency of use of SCIM interviews.
- Use of pre-recorded interviews as evidence-in-chief, if gathered at service level.
- Information about the interview process is available for children in a range of formats and languages.
- Quality assurance or evaluation of interpreter and other communication and support services.
- Input from specialist agencies in addition to police and social work during interview planning.
- Interview spaces meeting the requirements for high quality visual recording.
- Staff evaluation, training needs and wellbeing assessments.
Standard 7: Support through the court and legal process

**Standard statement**

If I need to give evidence in a court process, someone explains what is happening and supports me through this.

**Children and young people told us:**

- being involved in a court case can be difficult and upsetting so someone should be there for me to help me through it, and
- it should be easy to find out information about what happens and who can help me.

**Rationale**

Children’s right to recovery from abuse is enshrined in Article 29 of the UNCRC. Children report that involvement with legal processes through cross-examination, giving witness statements or attending a court building causes anxiety and trauma. Lengthy waits for trials, lack of communication on the progress of their case and contact with alleged perpetrators during the court process have been cited as reasons for retraumatisation.

Any child witness may still be required to be cross-examined by the defence. This may either take place at the trial using the special measure that allows a witness to give evidence via live television link from another location or at an evidence by commissioner hearing in advance of the trial if the court grants use of that special measure. The Bairns’ Hoose should be considered for this purpose if deemed suitable. When a child’s evidence is considered necessary by the Children’s Reporter, they should identify and deliver individual measures to support the child to give evidence in proceedings, including consideration of the most suitable special measures available under the Vulnerable Witnesses (Scotland) Act 2004.

The support provided in a Bairns’ Hoose throughout the criminal investigation and the legal process will be consistent with and observe:

- the Lord Advocate’s independent role as head of the system of investigation and prosecution of crime in Scotland
- the independent roles and responsibilities of the police, SCRA, prosecutors and the judiciary, and
- the current legal statutory framework including the statutory restrictions on sharing information in Children’s Hearing cases.
Not all children who attend a Bairns’ Hoose will be required to give evidence in legal proceedings. Where this is likely, it is essential that the child and their family have the right information and support to reduce the possibility of further trauma or anxiety that might be caused by the uncertainty over having to give evidence. The information and support given must take account of whether the child may have to give evidence in criminal proceedings or children’s hearing related court proceedings or both.

**Criteria**

7.1 Each Bairns’ Hoose has facilities and processes in place to enable remote attendance at court proceedings or children’s hearing proceedings.

7.2 Children and families have access to specialist therapeutic support if required before, during and after a court case.

7.3 A lead professional is identified to:
   - coordinate the Bairns’ Hoose involvement in legal proceedings
   - keep children and their families informed about the court process where information is available
   - obtain information about the progress of the case and any changes through established mechanisms, and
   - share information with relevant agencies about the case to support integrated planning.

7.4 Children and families:
   - are informed about their rights and supported to uphold them
   - are regularly updated on progress of the investigation or court process including that no further information is available
   - are given opportunities to ask questions, and
   - receive information in a way and format that is right for them.

7.5 Children and families can access independent advocacy throughout the court process if they do not already have access to this service.
### What does the standard mean for children?

- Information about the court or hearing process is explained to you in a way that you can understand.
- You have the name of a person you can go to who will keep you and your family up to date on what’s happening.
- You can take part in the court process remotely from the Bairns’ Hoose if this is allowed by the court.
- You can talk to someone to help you with your feelings while you are waiting for a trial or hearing.

### What does the standard mean for staff?

**Staff:**

- understand children’s rights in relation to the justice process and are supported to uphold them, and
- are informed about a child or family’s progression through any legal processes to support effective planning.

### What does the standard mean for the Bairns’ Hoose partnership?

**The partnership:**

- works closely with legal and court services to share available information, as appropriate
- shares relevant information with children and families when it is available, and
- ensures the Bairns’ Hoose is adequately equipped and has processes in place to facilitate children participating remotely in legal proceedings.

### Practical examples of evidence of achievement *(NOTE: this list is not exhaustive)*

- Facilities and processes to enable remote participation in legal proceedings.
- Service level agreements for the provision of advocacy support.
- Information flow between legal agencies and partnerships.
- Shared systems and record-keeping.
- Early commencement of therapeutic support in cases where there may be legal proceedings.
- Codesigned and accessible information on the court or legal process for children and families.
- Positive evaluation from children and families.
Standard 8: Health and wellbeing

Standard statement
My physical, emotional and mental health is looked after. Someone helps to plan appointments and I’m supported to go.

Children and young people told us:
- anywhere I go for a medical examinations should feel bright and comforting
- health staff should be well trained, calm and welcoming
- I should have the option to meet the medical staff before any examinations so that I am more familiar with them
- I should be able to choose the sex of the person examining me
- if I need support for my health or wellbeing at any point of my time at Bairns’ Hoose I should get it, and
- I should get advice and support for my mental health.

Rationale
All children have the right to the highest quality health, as outlined in Article 24 of the UNCRC. Children who have experienced abuse are more likely to experience poor health and wellbeing into adulthood. Children should have access to a comprehensive child protection medical assessment to identify and meet needs relating to physical injury, emergency contraception, sexual health and blood borne viruses, neglect and any wider holistic health needs. Staff should coordinate multiple appointments on behalf of children and families.

Avoiding delay in assessing and responding to any physical, mental and emotional health needs is vitally important in supporting a child’s recovery. Intervention within four to six weeks of a trauma or disclosure of abuse has been shown to decrease long-term post-traumatic disorders. A comprehensive health and wellbeing assessment should be undertaken by an appropriately trained individual within the Bairns’ Hoose to get an understanding of potential concerns both for the child and their family members.

All healthcare assessments should be part of ongoing child protection proceedings, and be conducted in line with national guidance. Forensic medical examinations undertaken in the Bairns’ Hoose should meet national standards for person-centred and trauma-informed care, putting the health needs of the child first.
Criteria

8.1 All children can receive a comprehensive health and wellbeing assessment in a Bairns’ Hoose if required.

8.2 All examinations or assessments including those not undertaken in a Bairns’ Hoose for clinical reasons are undertaken in child-friendly settings.

8.3 The Bairns’ Hoose staff proactively coordinates any assessment or treatment required with wider health services without delay including:

- acute medical services
- acute forensic medical services
- primary care and community services
- dentistry
- mental health
- sexual health, or
- drug and alcohol services.

8.4 Children and their families have their mental health needs assessed in a Bairns’ Hoose if required, and can access support to meet any identified needs.

8.5 The Bairns’ Hoose has facilities to document injuries or other relevant physical evidence of abuse or neglect to a forensic standard.

8.6 Healthcare assessments and forensic medical examinations are carried out by trauma-informed practitioners with specialist training.

8.7 Forensic medical examinations meet the requirements for decontamination, corroboration and maintaining the chain of evidence.

8.8 Health and wellbeing appointments are planned and coordinated and children and their families are supported to attend.
### What does the standard mean for children?
- You will have someone to check your health and wellbeing at a Bairns’ Hoose, if this is what you need.
- Staff will plan any appointments you need and organise them all for you.
- The staff who look after your health will take the time to consider your feelings and experiences.
- If you need support for your mental health, you will be able get it when you need it in a way that’s right for you.
- Checks-ups and tests will go at your pace and you can take a break.

### What does the standard mean for staff?

**Staff:**
- coordinate appointments on behalf of children and families
- are aware of referral pathways and service level agreements with relevant health services, and
- have access to the correct equipment and systems to undertake appropriate assessments in a Bairns’ Hoose.

### What does the standard mean for the Bairns’ Hoose partnership?

The partnership ensures that:
- there are established referral pathways and partnership agreements to support integration of the Bairns’ Hoose with acute and community health services
- the child’s ongoing health and wellbeing needs are met, in a way that is experienced by the child and their family as being seamless, and
- children are proactively and practically supported to attend any follow-up health appointments.

### Practical examples of evidence of achievement *(NOTE: this list is not exhaustive)*

- Routine screening for health needs including mental health assessments.
- Protocols and pathways for holistic healthcare assessments and forensic examinations.
- Reporting through national datasets for child sexual abuse.
- Meeting healthcare and forensic medical services quality standards and indicators.
- Referral pathways for relevant health services.
- Staff training audits.
Standard 9: Access to therapeutic recovery services

Standard statement
If me or my family need help we can speak with someone who understands what we are going through. I get the help and support I need to recover. I have one person who I trust who is there for me throughout my time at Bairns’ Hoose.

Children and young people told us:

- my family should get the right support so they can help me
- I should have a person throughout, who I trust, who doesn’t judge me, and is there for me. I should be able to choose them and change them without it being a problem
- I should be able to get support at the right time for me, even if it’s after I have been to the Bairns’ Hoose
- I should be given time to think about what support and help I want and need, and
- I should be able to get support even when someone is off ill or on annual leave.

Rationale
Article 39 of the UNCRC requires the promotion of physical and psychological recovery and social integration of children who have been victims of abuse and that such recovery should take place in an environment which supports the health, self-respect and dignity of the child. The provision of holistic and relational support to help the child’s recovery from abuse and trauma should be understood by the whole team as a core aim of the Bairns’ Hoose.

Many children accessing the Bairns’ Hoose will have a range of complex child protection, social and emotional care needs. The Bairns’ Hoose should provide a safe therapeutic environment within which to continue the ongoing assessment of the child’s needs and provide evidence-based recovery services. Good relationships and trust between children, families and support workers are critical. The way that wrap around support is delivered needs to be non-stigmatising to families. It should also take into account the wider context and support needs of the family and avoid duplication of services and repeated disclosures. Children and families should be given a named point of contact to go to for help or advice.
Children with disabilities are at significantly higher risk of abuse and young children may be more likely to be overlooked. Children under the ACR are at high risk of having experienced or witnessed abuse and require specialist, tailored support. Children’s rights to justice should be protected throughout; any therapeutic support or services offered to a child victim or witness where there is a pending prosecution should follow appropriate measures to balance the needs of the child with legal requirements.

The response of the child’s primary carer(s) is a critical mediating factor in determining a child’s psychological recovery. Children and their families should be offered appropriate and tailored support, including mental health assessments, where required, within four weeks of disclosure. Support should be tailored to the needs of the individual child and take account of support that may already be in place for the child and their family. Support will be provided in the context of GRIFEC and take account of local authority, health board, police and third sector responsibilities for children who may be in need of care and protection.

**Criteria**

9.1 The Bairns’ Hoose partnership:

-coordinates tailored therapeutic recovery support for children and their family, and

-offers specialist support for recovery in the Bairns’ Hoose.

9.2 The Bairns’ Hoose partnership works collaboratively with local therapeutic support services and other agencies supporting the child and their family to ensure that children and families get the right support, in the right place at the right time.

9.3 Children can choose a trusted person to support them to express their views throughout the process and ensure these views are listened to and taken into account.

9.4 Services who that are already known to and trusted by children and families are recognised as part of the child’s team in the Bairns’ Hoose.

9.5 Where the need for therapeutic support is identified, this begins as soon as possible, paying due regard to any ongoing investigation or court case and avoiding undue delay.

9.6 The Bairns’ Hoose partnership has established referral pathways to support children to access longer-term therapeutic support where there is an assessed need.
9.7 Staff members providing therapeutic recovery support receive appropriate training in the assessment and treatment of children who have experienced complex trauma.

9.8 Children and their families are offered tailored support and therapy which is continuously reviewed and adapted to their:

- choices and wishes
- age and stage of development
- sex and gender identity
- development
- cognitive ability
- sensory or physical adaptations
- communication needs
- family and cultural background, and
- emotional state and impact of their experiences.

9.9 Children and families receive follow-up support and can re-access therapeutic recovery services if needed.

9.10 Families can access specialist therapeutic support where there are conflicting and different needs, for example where there are concerns that a child has harmed another in the family.

What does the standard mean for children?

- Someone will sit down with you and talk to you about what support you need.
- You will have someone to help you with how you’re feeling.
- You will get the help and support you need to recover.
- Support will be available. You can access support when the time feels right for you.
- You will be able to go at your own pace and work with people who you trust.
- There will be a person who is there for you and you will know who they are.
- Your family will be supported to help you as well as they can.
### What does the standard mean for staff?

**Staff:**

- are aware of, and follow, relevant pathways to support children and families to access high quality therapeutic support which reflects their needs, wishes and choices, and
- work seamlessly together in the best interests of the child to deliver consistent and coordinated care.

### What does the standard mean for the Bairns’ Hoose partnership?

**The partnership ensures that:**

- there is a designated person who acts as a ‘trusted adult’ for the child
- children’s support needs are assessed and met
- families are helped to best support the child
- resources are used effectively, and
- services are coordinated, consistent and seamless.

### Practical examples of evidence of achievement *(NOTE: this list is not exhaustive)*

- Established referral pathways into different therapeutic support services to meet different needs.
- Commissioning data to demonstrate provision of specialist support services.
- Service provision within the Bairns’ Hoose including therapeutic support.
- Gap analysis of local support services and improvement plans to address gaps.
- Data on referral and take-up rates of therapeutic support and evidence of this data being used to inform future referrals.
- Evidence of impact.
Standard 10: Multidisciplinary staff training and support

**Standard statement**

The people who help me at Bairns’ Hoose understand how to protect my rights. They are able to work as a team and they get the help they need to do their jobs well.

**Children and young people told us:**

- the people who help me should understand trauma and how it might affect me
- staff should be able to talk about their feelings and get the right support for themselves so they can be the best support for children and young people
- I should feel well supported by all members of staff, no matter which part of the Bairns’ Hoose I am in, and
- staff should enjoy working with children.

**Rationale**

A range of mechanisms is required to develop, embed and maintain skills, to support staff wellbeing and ensure the safety and wellbeing of those using services.

All staff working with children and young people who are victims or witnesses of abuse or under the ACR should be trained to the appropriate trauma practice level. It is essential that all staff are supported through coaching and supervision to apply and embed their skills and knowledge into practice. Given the known risks associated with the impact of trauma work, all staff across the team should have routine access to appropriate reflective practice supervision or clinical supervision, depending on their role and remit, as defined within the Scottish Psychological Trauma Training Plan.


Criteria

10.1 Multiagency training is planned and delivered to staff working in a Bairns’ Hoose in line with the Scottish Psychological Trauma Training Plan.

10.2 The Bairns’ Hoose partnership has a jointly-agreed workforce plan which provides detail on:

- shared aims, vision and culture which all staff are expected to support
- team structure, including clearly-defined roles and responsibilities, ongoing learning and evaluation to improve joint practice
- resourcing
- risk assessment and escalation policies, and
- whistle-blowing and interagency conflict resolution.

10.3 All staff are trained to enable and ensure children’s rights are upheld in the Bairns’ Hoose.

10.4 All staff are trained to the required trauma practice level (skilled, enhanced or specialist practice).

10.5 All staff work to a shared competency framework and have access to continuing professional development.

10.6 Staff who are providing direct support to children and families are offered training in court skills where relevant.

10.7 Staff have routine access to appropriate reflective practice supervision or clinical supervision, depending on their role and remit.

10.8 Staff have a wellbeing plan which is regularly reviewed with a supervisor.

10.9 Staff have individual training plans which are fully implemented and reviewed regularly.

10.10 All those involved in mentoring and supervising others receive adequate training on:

- effective and supportive people management
- embedding reflective practice, and
- how to develop their own skills.
### What does the standard mean for children?

- You will be listened to.
- The people working at Bairns’ Hoose will support you in the best way possible.
- Staff will understand what your rights are and do everything they can to uphold them.
- You will be treated with kindness and respect.

### What does the standard mean for staff?

**Staff:**

- work in an integrated team with shared values and behaviours
- attend relevant training and undertake continued professional development
- achieve required competencies and qualifications relevant to their roles and responsibilities
- are supported by their managers and colleagues to fulfil their responsibilities
- can access guidance, supervision, counselling and peer review, and
- can be confident that all the professionals they work with are appropriately trained and supported.

### What does the standard mean for the Bairns’ Hoose partnership?

**The partnership:**

- provides the environment for a shared professional culture and effective integration across agencies
- is fully committed to offering all staff guidance, supervision, counselling and peer review where appropriate to role and responsibility
- ensures that training and continuing professional development opportunities are available and accessible to all relevant staff, and
- ensures that opportunities for multiagency and multidisciplinary training are developed.

### Practical examples of evidence of achievement *(NOTE: this list is not exhaustive)*

- Information about supervision, support, peer review, guidance and counselling.
- Appraisal data, career pathways and established programmes of mentoring.
- Training and development plans including professional competencies frameworks.
- Delivery of interagency and multidisciplinary training.
- Staff training audits.
Standard 11: Prevention, sharing knowledge and learning from good practice

Standard statement
People at the Bairns’ Hoose listen to what I have to say about my experience there. What I tell them helps to make the Bairns’ Hoose better for other children.

Children and young people told us:

- the Bairns’ Hoose should keep getting better and keep learning from others
- my thoughts and ideas should be listened to, and
- I should be able to see where things have changed.

Rationale
Sharing good practice is essential for the development and improvement of services. External engagement and learning enable continuous improvement and facilitate multiagency research and knowledge sharing. The Bairns’ Hoose should share good practice with all agencies involved in responding to children experiencing or witnessing abuse.

Prevention and awareness-raising of child abuse and neglect is a key component of the Barnahus model. The Bairns’ Hoose should facilitate societal change and provide accessible information to professionals, parents and children.\(^{56, 67}\)

Improvement measurements, internal review and evaluation should be informed by children’s experiences.\(^{7, 21}\)

Criteria

11.1 There are mechanisms in place for the collection and sharing of evidence which informs policy, practice and quality improvement.

11.2 The Bairns’ Hoose partnership takes a lead role in raising awareness of children’s experience of abuse or neglect and works collaboratively to undertake prevention activity.

11.3 There are robust internal and external evaluation processes which:
- involve children and families
- allow learning from experience, and
- help identify and develop best practice.
11.4 The Bairns’ Hoose has an ongoing programme of outreach work to raise awareness of the service among children, families and professionals.

11.5 There is a designated lead within the Bairns’ Hoose who has responsibility to build competence and knowledge among professionals and practitioners working with children.

11.6 Staff can demonstrate engagement with national and international professional networks and share learning from elsewhere.

<table>
<thead>
<tr>
<th>What does the standard mean for children?</th>
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<tbody>
<tr>
<td>• The help you get at a Bairns’ Hoose will be the best it can be.</td>
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<tr>
<td>• You will have the chance to provide feedback and see where changes have been made.</td>
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<tr>
<th>What does the standard mean for staff?</th>
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<tr>
<td>Staff:</td>
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<tr>
<td>• understand how their work supports improvement and spread in all services for children</td>
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<tr>
<td>• have the skills to effectively engage with children and families to support improvement programmes in areas that matter to them, and</td>
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<tr>
<td>• are supported to undertake research and participate in activities and professional networks that promote good practice and shared learning.</td>
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<tr>
<th>What does the standard mean for the Bairns’ Hoose partnership?</th>
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<tbody>
<tr>
<td>The partnership:</td>
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<tr>
<td>• supports staff to participate in national and international networks, and</td>
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<tr>
<td>• supports capacity and sustainability within the Bairns’ Hoose and with partner agencies and networks.</td>
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<table>
<thead>
<tr>
<th>Practical examples of evidence of achievement (NOTE: this list is not exhaustive)</th>
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<tbody>
<tr>
<td>• Identification and spread of good practice.</td>
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<tr>
<td>• Tailored information for professional groups on referral mechanisms, eligibility, outcomes and prevention.</td>
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<tr>
<td>• Attendance at national, regional and international professional network events.</td>
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<tr>
<td>• Coordinated prevention activity in partnership with local agencies.</td>
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</table>
Appendix 1: Bairns’ Hoose and the justice system

The evidence of children who have been victims of, or witnesses to, abuse or violence may be used in court proceedings in Scotland. How this evidence features will depend on whether those proceedings are criminal court proceedings or children’s hearing proceedings.

Certain special measures are available to assist child witnesses to give evidence in criminal proceedings. One of those special measures is known as giving evidence-in-chief by prior statement. If the court grants the use of this special measure the statement(s) that the child witness gave to the police and social work can be used instead of the child witness physically going to court to give evidence-in-chief. An investigative interview recorded in a Bairns’ Hoose, if judged suitable by the prosecutor, can be used for this purpose. When this special measure is employed, any child witness may still need to be cross-examined by the defence. This will either take place at the trial, possibly using the special measure that allows a witness to give evidence via live television link from another location, such as a Bairns’ Hoose, or at an evidence by commissioner hearing in advance of the trial if the court grants use of that special measure.

Evidence by commissioner hearings will usually be conducted in special facilities provided and managed by the Scottish Courts and Tribunals Service, rather than a Bairns’ Hoose, given the need to accommodate the judge, prosecution and defence lawyers, court and technical staff, as well as providing a means for the accused person to view proceedings. There may be cases in which a child witness will be able to live link from the Bairns’ Hoose into an evidence by commissioner hearing.

The Vulnerable Witnesses (Criminal Evidence) (Scotland) Act 2019\textsuperscript{57} introduced a rule that the evidence of child witnesses in High Court cases relating to specified violent or sexual offences must be given in advance of trial, unless certain conditions apply. It is intended that this rule will be extended to child witnesses in sheriff and jury cases over the coming years, so the use of pre-recorded investigative interviews and/or evidence by commissioner hearings in criminal proceedings will become the norm for child witnesses in many serious cases. There are currently no plans to implement this rule in summary cases; the option of pre-recording is available and can be applied for in appropriate circumstances. Use of pre-recorded evidence in High Court and sheriff and jury cases will generally be in line with the requirements of the 2019 Act.

In children’s hearing cases which relate to an offence by another child, the child’s evidence is approached in broadly the same way as in criminal proceedings where the whole of the child’s evidence may be pre-recorded.
In all other children’s hearing cases the civil rules of evidence apply. This means hearsay evidence is admissible and key facts can be proved without the need for corroboration. The Children’s Reporter will generally not call a child to give evidence in court where there is other evidence available that the Reporter considers will satisfy a court as to the fact or facts in issue. In some cases, the Reporter may rely on the investigative interview as the child’s whole evidence. This means that in many cases the Reporter will not call a child to give evidence unless it is necessary to do so to prove the case. Other parties may still call the child to give evidence.

In any children’s hearing court proceeding where the child is called as a witness, special measures can be used, including the child giving evidence by live link from a remote location, or pre-recording their oral evidence in advance at an evidence by commissioner hearing. As with criminal proceedings, a live link from a Bairns’ Hoose to the court may be possible.

There will be many children who attend the Bairns’ Hoose who are not ultimately involved in justice processes. For these children, their investigative interview can significantly inform the ongoing child protection investigation and planning for the child and other children. If the child is considered to be at risk of significant harm, information gathered during an investigate interview may result in the child being added to the child protection register and a child protection plan being developed. These steps minimise the risk of harm to the child.
Appendix 2: Development of the Bairns’ Hoose standards

The Bairns’ Hoose standards have been informed by current evidence, best practice recommendations and developed by group consensus.

Evidence base

In early 2021, the Bairns’ Hoose standards project team commissioned work to review the international evidence and identify good practice. In summer 2021, the University of Edinburgh, in partnership with Children 1st, undertook a comprehensive review of the literature and evidence which has been used to develop this document.

In addition, the project team defined seven key research questions relating to the scope of the Barnahus standards project, as identified at a large stakeholder workshop. A systematic search of the literature was carried out using an explicit search strategy devised by an information scientist based in the HIS Evidence Directorate. Databases searched include ERIC, Cinahl, Embase, Medline, ASSIA and Public Health and PsychArticles. Additional searching was done through citation chaining, identified websites, grey literature and stakeholder knowledge. A further literature search for qualitative and quantitative studies that addressed children, young people and family’ experiences of services was undertaken, including experiences of inequalities. This evidence was used to inform the Equality Impact Assessment, engagement framework and the Children’s Rights and Wellbeing Impact Assessment.

Standards development

The Scottish Government jointly commissioned the Care Inspectorate and Healthcare Improvement Scotland to develop standards for a Barnahus model in Scotland. In 2019, a standards development group, co-chaired by Linda de Caestecker, Director of Public Health for NHS Greater Glasgow and Clyde, and Iona Colvin, Chief Social Work Advisor to the Scottish Government was formed.
The standards development group began reviewing the evidence and adapting the European Barnahus Quality Standards. Throughout the drafting process, the group undertook a number of activities including:

- a multi-sector engagement workshop on 19 June 2019
- site visits to pilot Barnahus and specialist paediatric sexual assault referral services
- learning from international advisors and specialists
- standards development group workshops and meetings, and
- input and feedback from the Victims Support Organisations Collaborative Forum Scotland.

In March 2020, Healthcare Improvement Scotland and the Care Inspectorate paused the development of the standards in order to reduce undue strain across the system and prioritise resources to support the national response to COVID-19. The standards project team took the time to review the progress of the work and identify specific themes which could inform the next phase of the standards development process. Between autumn 2020 and spring 2021, the project team reviewed the first phase of the Bairns’ Hoose standards development and the current policy and practice landscape. This was followed by a national symposium on the adoption of the Barnahus model in Scotland and the publication of The Foundations for Bairns’ Hoose (Scottish Barnahus) in September 2021.

In November 2021, the standards development group was reconvened, co-chaired by Iona Colvin, Chief Social Work Adviser to the Scottish Government and Eddie Doyle, Senior Medical Advisor in Paediatrics to the Scottish Government. The group considered the evidence and best practice for Bairns’ Hoose including:

- feedback from a three-week scoping engagement exercise
- evidence and literature, and
- feedback from children and young people across Scotland.

The standards development group held six meetings and was supported by two technical subgroups (legal and health and support).

Membership of the development group is set out in Appendix 3.

A standards steering group with membership representing key Scottish Government policy areas provided advice on the direction and content of the standards. Membership of the standards steering group is set out in Appendix 4.
Consultation feedback and finalisation of standards

Following consultation, the Standards Development Group will reconvene to review all comments received and make final decisions and changes. More information can be found in the consultation feedback report which will be available on the Healthcare Improvement Scotland website.

Quality assurance

All development group members were responsible for advising on the professional aspects of the standards. Clinical members of the development group advised on clinical aspects of the work. The co-chairs had lead responsibility for formal clinical assurance and sign off on the technical and professional validity and acceptability of any reports or recommendations from the group.

An Editorial and Review panel met to agree editorial changes and to provide formal sign-off of the document. Membership of the Editorial and Review Panel is outlined in Appendix 5.

The Editorial and Review Panel reviewed the standards document as a final quality assurance check. This ensures that:

- the standards are developed according to agreed International Society for Quality in Healthcare (ISQua) methodology for developing standards
- the standards document addresses the areas to be covered within the agreed scope, and
- any risk of bias in the standards development process as a whole is minimised.

All development group members made a declaration of interest at the beginning of the project. They also reviewed and agreed to the development group’s terms of reference. More details are available on request from his.barnahusstandards@nhs.scot.

The standards were developed within the Operating Framework for Healthcare Improvement Scotland and the Scottish Government (December 2018), which highlights the principles of independence, openness, transparency, and accountability.

For more information about Healthcare Improvement Scotland’s role, direction and priorities, please visit: www.healthcareimprovementscotland.org/
### Appendix 3: Membership of the Bairns’ Hoose Standards Development Group

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Organisation</th>
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<tbody>
<tr>
<td>Iona Colvin</td>
<td>Chief Social Work Adviser</td>
<td>Scottish Government</td>
</tr>
<tr>
<td>Edward Doyle</td>
<td>Senior Medical Adviser Paediatrics</td>
<td>Scottish Government</td>
</tr>
<tr>
<td>Susan Baird</td>
<td>Consultant Clinical Psychologist</td>
<td>NHS Greater Glasgow and Clyde Children’s Services</td>
</tr>
<tr>
<td>Tim Barraclough</td>
<td>Executive Director, Tribunals and Office of the Public Guardian</td>
<td>Scottish Courts and Tribunals Service</td>
</tr>
<tr>
<td>Gordon Bell</td>
<td>Practice Reporter</td>
<td>Scottish Children's Reporter Administration</td>
</tr>
<tr>
<td>Eileen Bray</td>
<td>Clinical Services Co-ordinator</td>
<td>CAMHS at NHS Ayrshire &amp; Arran</td>
</tr>
<tr>
<td>Kathleen Carolan</td>
<td>Director of Nursing and Acute Services</td>
<td>NHS Shetland</td>
</tr>
<tr>
<td>Laura Caven</td>
<td>Chief Officer – Children and Young People</td>
<td>Convention of Scottish Local Authorities</td>
</tr>
<tr>
<td>Marianne Cochrane</td>
<td>Chair of Royal College Paediatrics Child Protection Sub Committee Scotland, Lead Paediatrician</td>
<td>NHS Grampian</td>
</tr>
<tr>
<td>Bernard Colvin</td>
<td>RCPCH Child Protection Subcommittee Scotland, Consultant Paediatrician</td>
<td>NHS Tayside</td>
</tr>
<tr>
<td>Kim Coutts</td>
<td>Art Psychotherapist</td>
<td>Glasgow Initiative of Facilitation and Therapy</td>
</tr>
<tr>
<td>Sharon Glasgow</td>
<td>Social Work Professional Adviser</td>
<td>Scottish Government</td>
</tr>
<tr>
<td>Louise Hill</td>
<td>Head of Evidence and Impact (Barnahus)</td>
<td>Children 1&lt;sup&gt;st&lt;/sup&gt;</td>
</tr>
<tr>
<td>Name</td>
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<tr>
<td>Sarah Hill</td>
<td>Lead Paediatrician for Child Protection</td>
<td>NHS Greater Glasgow and Clyde</td>
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<tr>
<td>Jillian Ingram</td>
<td>JII National Implementation Coordinator</td>
<td>Convention of Scottish Local Authorities</td>
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<tr>
<td>Angela Latta</td>
<td>Child Protection Adviser</td>
<td>Scottish Government</td>
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<tr>
<td>Jennifer Lavoie</td>
<td>Chancellor's Fellow - Global Challenges</td>
<td>University of Edinburgh</td>
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<tr>
<td>Jamie Lipton</td>
<td>Principal Procurator Fiscal Depute</td>
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<tr>
<td>Yolande Love</td>
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<td>Tracey McFall</td>
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<td>Partners in Advocacy</td>
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<tr>
<td>Neil McKenzie</td>
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<td>Moira McKinnon</td>
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<td>Cheryl Mitchell</td>
<td>Service Manager Public Protection – JII Coordinator</td>
<td>East Renfrewshire Health and Social Care Partnership</td>
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<tr>
<td>Mary Mitchell</td>
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<td>Lorrette Nicol</td>
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<td>Anna O’Reilly</td>
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<td>Kirsty Pate</td>
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<td>June Peebles</td>
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<tr>
<td>Jillian Taylor</td>
<td>Chief Nurse for Universal Children’s Services</td>
<td>NHS Forth Valley</td>
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<tr>
<td>Leanne Tee</td>
<td>Clinical Lead - North of Scotland Forensic Medical Services and Custody Health Care Alliance</td>
<td>NHS Highland</td>
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<tr>
<td>Kate Rocks</td>
<td>Head of Public Protection and Children Services, Chief Social Work Officer</td>
<td>East Renfrewshire Health and Social Care Partnership</td>
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<tr>
<td>Charlotte Strong</td>
<td>Consultant Clinical Psychologist</td>
<td>NHS Greater Glasgow and Clyde Children’s Services</td>
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<tr>
<td>Alison Wales</td>
<td>Policy Officer</td>
<td>NSPCC</td>
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**Children and young people’s link workers**

<table>
<thead>
<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Meg Binns</td>
<td>Barnahus Participation Lead</td>
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<tr>
<td>Paul Brockhurst</td>
<td>Safeguarding Lead</td>
<td>Kibble</td>
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<tr>
<td>Gary Cushway</td>
<td>Project Worker/Participation Officer</td>
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<tr>
<td>Rachel McKechnie</td>
<td>Participation Officer</td>
<td>CAMHS at NHS Ayrshire &amp; Arran</td>
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<tr>
<td>Paula Smith</td>
<td>Manager, Family Hub75 West</td>
<td>Dumfries and Galloway Council</td>
</tr>
<tr>
<td>Julia Swann</td>
<td>Participation Worker</td>
<td>Children and Young People’s Centre for Justice (CYCJ)</td>
</tr>
<tr>
<td>Meg Thomas</td>
<td>Head of Research, Policy and Participation</td>
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## Appendix 4: Membership of the Bairns’ Hoose Standards Steering Group

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<thead>
<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Rachel Hewitt (co-chair)</td>
<td>Programme Manager for Bairns’ Hoose Standards</td>
<td>Healthcare Improvement Scotland</td>
</tr>
<tr>
<td>Henry Mathias (co-chair)</td>
<td>Head of Professional Practice and Standards</td>
<td>Care Inspectorate</td>
</tr>
<tr>
<td>Iona Colvin</td>
<td>Chief Social Work Adviser</td>
<td>Scottish Government</td>
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<tr>
<td>Edward Doyle</td>
<td>Senior Medical Adviser Pediatrics</td>
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<tr>
<td>Rod Finan</td>
<td>Professional Social Work Adviser, Office of the Chief Social Work Adviser</td>
<td>Scottish Government</td>
</tr>
<tr>
<td>Chantelle Lalli</td>
<td>Justice Lead, Bairns’ Hoose</td>
<td>Scottish Government</td>
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<tr>
<td>Angela Latta</td>
<td>Professional Social Work Adviser</td>
<td>Scottish Government</td>
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<tr>
<td>Belinda McEwan</td>
<td>Strategic Inspector</td>
<td>Care Inspectorate</td>
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<tr>
<td>Neil McKenzie</td>
<td>Professional Police Adviser, Child Protection Unit</td>
<td>Scottish Government</td>
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<tr>
<td>Carol Ann Mulgrew</td>
<td>Project Officer for Bairns’ Hoose Standards</td>
<td>Healthcare Improvement Scotland</td>
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<tr>
<td>Jack Murray-Dickson</td>
<td>Senior Policy Adviser, Bairns’ Hoose Unit</td>
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<tr>
<td>Paula O’Brien (until December 2020)</td>
<td>Administrative Officer</td>
<td>Healthcare Improvement Scotland</td>
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<tr>
<td>Arvind Salwan</td>
<td>Strategic Communications Adviser</td>
<td>Care Inspectorate</td>
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<td>Name</td>
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<tr>
<td>Christine Stuart</td>
<td>Administrative Officer</td>
<td>Healthcare Improvement Scotland</td>
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<tr>
<td>(until June 2022)</td>
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<tr>
<td>Lesley Swanson</td>
<td>Head of Bairns’ Hoose Unit</td>
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<tr>
<td>Fiona Wardell</td>
<td>Team Lead, Standards and Indicators</td>
<td>Healthcare Improvement Scotland</td>
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## Appendix 5: Membership of the Bairns’ Hoose Standards Editorial and Review Panel

<table>
<thead>
<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Iona Colvin</td>
<td>Chief Social Work Adviser</td>
<td>Scottish Government</td>
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<tr>
<td>Edward Doyle</td>
<td>Senior Medical Adviser Paediatrics</td>
<td>Scottish Government</td>
</tr>
<tr>
<td>Rachel Hewitt</td>
<td>Programme Manager for Bairns’ Hoose Standards</td>
<td>Healthcare Improvement Scotland</td>
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<tr>
<td>Roberta James</td>
<td>SIGN Programme Lead</td>
<td>Healthcare Improvement Scotland</td>
</tr>
<tr>
<td>Christopher Lumb</td>
<td>Service Manager, Strategic Scrutiny, Children and Young People</td>
<td>Care Inspectorate</td>
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<tr>
<td>Henry Mathias</td>
<td>Head of Professional Practice and Standards</td>
<td>Care Inspectorate</td>
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<tr>
<td>Carol Ann Mulgrew</td>
<td>Project Officer for Bairns’ Hoose Standards</td>
<td>Healthcare Improvement Scotland</td>
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<tr>
<td>Safia Qureshi</td>
<td>Director of Evidence</td>
<td>Healthcare Improvement Scotland</td>
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<td>Meg Thomas</td>
<td>Head of Research, Policy and Participation</td>
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<td>Healthcare Improvement Scotland</td>
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36. Taylor J, Stalker K, Stewart A. Disabled children and the child protection system: A