



**South West Scotland
Multi Agency Public
Protection Arrangements
Annual Report 2023-2024**



Foreword

On behalf of the Responsible Authorities and agencies with a Duty to Cooperate across South West Scotland, and as Chairperson of the South West Scotland MAPPA Strategic Oversight Group, I am delighted to present this, my first Multi-Agency Public Protection Arrangements (MAPPA) Annual Report. This report aims to provide an overview of MAPPA activity from 1 April 2023 until 31st March 2024. I would like to thank my predecessor, Det Superintendent Derek Cree for his stalwart stewardship of the SOG over the last two years. His tenure saw the lifting of covid restriction and the return to the “New Normal” of virtual meetings.

The Multi Agency Public Protection Arrangements have been in place for seventeen years now and are a set of arrangements that allow us to align and coordinate the efforts of the key stakeholders involved in Public Protection to deliver the best possible level of protection to the public. Some crimes cause the public greater concern than others. Sexual offences, Violence in all its forms and any crime where children are the victims. These crimes frighten and infuriate the public in equal measure and the public, quite rightly, expect that all reasonable steps will be taken to reduce the risk of harm that those who fall under MAPPA may pose. To this end, I am entirely confident in stating that by using MAPPA to coordinate our efforts, we achieve far more than acting on an individual agency basis.

I hope that the information within this report goes some way to reflect the level of commitment and the amount of work carried out by staff in all the partner agencies in this complex and challenging arena. Although this is the first annual report, I have had the privilege to prepare, it is my hope that it will clearly illustrate the contributions made by all the agencies involved in MAPPA across South West Scotland, working in order to meet the challenge of protecting the public from serious harm whilst, at the same time, keeping our staff safe.

Prior to the pandemic, the administration of MAPPA was primarily through face-to-face meetings with the professionals involved in each case. Such face-to-face meetings were later deemed unsafe, so we have maximised digital solutions and now routinely use secure on-line video conferencing. A corollary of this

has been that across all partner agencies we have been able to introduce hybrid working and we no longer need to travel throughout South West Scotland to attend these meetings. Previously the Scottish Prison Service did not have the capacity to travel throughout the county to attend level 2 meetings however, this technology has meant that they are now able to do so, and their contribution is valued and most welcome.

I believe it is important that the Strategic Oversight Group, support the continuing professional development and training of all our staff and to achieve this, seek out the best qualified people to train and advise us. To this end we have continued to develop our relationship with Emeritus Professor Hazel Kemshall, widely accepted as the author of MAPPA. I am delighted to report that in May this year Professor Kemshall personally attended a meeting of our Strategic Oversight Group then later provided a presentation aimed at improving the effectiveness of the SOG. She challenged us to develop a self-evaluation tool that I hope I will be able to report on within my next annual report.

Finally, I would like to take this opportunity to thank all staff from all agencies, who have continued to work tirelessly to ensure public safety by supervising and managing the risks posed to the public by those subject to the MAPPA.

Detective Superintendent Peter Sharp

Chair of South West Scotland MAPPA Strategic Oversight Group

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2. Background

What are the Multi-Agency Public Protection Arrangements (MAPPA)?

The Multi Agency Public Protection Arrangements (MAPPA) are a set of statutory arrangements that allow for the assessment and management of the risk posed by people convicted of certain sexual and violent offences. In Scotland, arrangements were established by Sections 10 and 11 of the Management of Offenders etc. Scotland Act 2005 and became operational in 2007. MAPPA brings together the

Police, Local Authority Social Work Justice Services, the NHS and Prison Service. In addition, some other agencies are under a duty to co-operate with the Responsible Authority in respect to the arrangements. These include, local authority housing, the Reporter to the children's panel, certain registered social landlords and electronic monitoring providers.

MAPPA in South West Scotland

Since the enactment of the Management of Offenders Act 2005, Local Authorities, Scottish Prison Service, Police and Health Boards have worked together to assess and manage people who pose a risk of serious harm to the public. This Annual Report outlines how MAPPA operates in South West Scotland, provides statistical information about the numbers of people we deal with, explains the MAPPA categories and shows how the arrangements work in practice. While it must be acknowledged that it is impossible to eliminate risk completely, all the agencies involved in MAPPA work tirelessly to ensure that every reasonable step is taken to reduce the risk of serious harm to the public. The result of this is that MAPPA help keep our communities safe.

As Responsible Authorities we are required to keep MAPPA under review and to publish an annual report. This report allows us to publicly demonstrate how effectively we manage those people who present a risk to the public. It also outlines the steps being taken to refine and improve our practice and procedures and the way we adapt to changing circumstances; the pandemic being the most obvious example. The protection of the public and management of

people convicted of violent and sexual offences is a difficult and challenging task. By working together and making the most of our joint expertise

and resources, the synergies achieved mean we can deliver a service which is more effective in reducing risk than it would be if it were operating in an uncoordinated single agency basis. In Scotland, the MAPPA arrangements encompass the management of Restricted Patients, Registered Sex Offenders and others who pose a risk of serious harm to the public. All the agencies involved in this work are highly motivated to ensure that practice and procedures are scrutinised and reviewed to minimise the risk presented to the community. The following link will take you to a short, narrated PowerPoint that will explain MAPPA and the way it operates in Scotland. <https://www.youtube.com/watch?v=Q-guspgTD8I>



Area Profile

The South West Scotland MAPPA area combines four local Councils. Dumfries & Galloway, East Ayrshire, North Ayrshire and South Ayrshire; an area in excess of 3,600 square miles. The area has a population of around 520,000, located in urban, rural and isolated communities, including the island communities of Arran and Cumbrae. The MAPPA in South West Scotland incorporates a diverse number of responsible authorities, namely; Police Scotland V and U divisions, North, South and East Ayrshire Councils, Dumfries and Galloway Council and the Scottish Prison Service (including HMP Dumfries and HMP Kilmarnock), NHS

Ayrshire and Arran Health Board and NHS Dumfries and Galloway Health Board.

All Responsible Authorities are required by law (Management of Offenders etc. Scotland Act 2005: <http://www.legislation.gov.uk/asp/2005/14/contents>) to have local MAPPA arrangements in place. These arrangements ensure we share information in order to manage risk (Scottish Government, MAPPA Guidance <http://www.scotland.gov.uk/Topics/Justice/public-safety/protection/reports>).



3. MAPPA Categories

The law in Scotland currently identifies three categories of offenders who must be managed under the MAPPA:

Category 1 - Registered Sex offenders (RSO)

These are people who have been convicted of a specified sexual offence and/or to whom the notification requirements under Part 2 of the Sexual Offences Act 2003 apply.

Category 2 – Restricted Patients

Those under:

- An order restricting discharge under section 59 of the Criminal Procedure (Scotland) Act 1995 (a compulsion order with a restriction order);
- An order under section 57(2) (b) of the Criminal Procedure (Scotland) Act 1995 imposition of special restrictions in disposal of case where accused found to be insane);
- A hospital direction under section 59A of that Act (direction authorising removal to and detention in specified hospital); A transfer for treatment direction under section 136 of the Mental Health (Care and Treatment) (Scotland) Act 2003 (transfer of prisoners to a specified hospital for treatment for mental disorder).

Category 3 - Other Risk of Serious Harm Offenders

These are people who do not qualify under Category 1 or 2 but have been assessed as currently posing a risk of serious harm to the public. The link between the offence they have perpetrated and the risk that they pose means that they require active multi-agency risk management.

Potentially Dangerous Persons

Occasionally, following an initial court appearance people who might have been remanded into custody, have been released back into the community, albeit under strict bail conditions, until a trial diet can be arranged, and their case heard.

Some of these individuals have been assessed as presenting a high risk of serious harm to the public but, as they have not been the subject of any trial, they are therefore innocent in the eyes of the law. To manage the risk such people may pose, the Police can make use of a provision whereby the MAPPA arrangements can be used to managed people in the

community who are considered by the authorities to be Potentially Dangerous Persons (PDP). Such people are not formally identified in the legislation as being MAPPA qualifying offenders, but the Multi-Agency Public Protection Arrangement framework can be used to identify and manage any risks they may pose; the Public would expect nothing less. The information sharing that occurs in relation to MAPPA qualifying offenders is required by section 10 and 11 of the 2005 act. The information sharing that takes place around a PDP is done based on the overriding principle of public safety.

4. MAPPA Risk Levels

It is never possible to predict the future behaviour of any individual with complete certainty, but, at present, every person included under MAPPA within South West Scotland has been convicted of a sexual offence and are subject to registration requirements or they are classified as a restricted patient, an Other Risk of Serious Harm Offender or Potentially Dangerous Person.

Past behaviour is one indicator of potential future behaviour. Nonetheless, some offenders will never be convicted again, whilst others have the potential to commit another offence at almost any time. By

compiling a risk profile of an individual offender and their circumstances from the information held by various agencies, we can achieve a more robust, professionally structured Risk Assessment of how likely it is that they will re-offend and the level of harm or potential adverse consequences that might ensue if they do. As the circumstances of people's lives change, the likelihood of re-offending can shift over time, so risk assessments are required to be regularly updated. The outcome of the risk assessments and accompanying relevant information are aggregated and a certain level of risk is assigned to each individual:

1

Very High Risk

There is imminent risk of serious harm. The potential event is more likely than not to happen imminently, and the impact could be serious.

2

High Risk

There are identifiable indicators of risk of serious harm. The potential event could happen at any time and the impact could be serious.

3

Medium Risk

There are identifiable indicators of risk of serious harm. The individual has the potential to cause harm but is unlikely to do so unless there is a change of circumstances.

4

Low Risk

Current evidence does not indicate likelihood of causing serious harm.



5. MAPPA Management Levels

The level of risk posed by those managed under MAPPA varies. The level of risk is assessed using risk assessment tools and analysis of the nature of all previous offending and circumstances unique to each person. Once the level of risk has been assessed and agreed, and to ensure that they receive appropriate supervision and support, each person is monitored according to their risk level.

There are three MAPPA management levels, these allow us to effectively deliver a level of service that is appropriate to need.

Level 1

Where a person can be safely managed, mainly by one agency.

People subject to Level 1 management are managed within the normal arrangements applied by whichever agency supervises them. However, information sharing between agencies still takes place and any risk actively and dynamically managed with risk level being escalated if required.

Level 2

Where more than one agency is required to implement the risk management plan.

The Risk Management Plans (RMP) for such people requires the active involvement of several agencies via regular MAPPA meetings. People managed at Level 2 are usually more complex and may involve risks related to mental health issues, substance misuse, unsuitable or unstable home circumstances and/or domestic abuse.

Level 3

Where a range of agencies are involved at a senior level to allocate the necessary resources to manage the case.

Some cases require involvement from senior officers to authorise the use of additional resources and provide ongoing senior management oversight. The assessed imminence of re-offending and the potential to cause serious harm together with the complexity of the case are carefully considered before referral to Level 3 is made. Level 3 Multi Agency Public Protection Panels (MAPPP) are chaired by a Senior Manager from the Responsible Authority.



Assessing and managing risk is complex with professional judgement and practice wisdom being an essential part of this. Whilst the primary function of the MAPPA is to ensure, as far as is possible, the public is protected, this can be challenging to achieve. Many offenders present with difficult and unpredictable behaviours and engage in covert and devious activities. Multi-agency collaboration and information sharing is the key mitigation against many of these complexities. Teamwork and cooperation allow a fuller assessment of risk and offers greater opportunities for early intervention by agencies when required.

MAPPA agencies use a range of methods to manage people including:

- The use of fully accredited Risk Assessment Tool
- Regular multi-agency meetings to share information, act and reduce the risk of harm;
- Police and Criminal Justice Social Work visits/ interviews, both announced and unannounced;
- Continual reviews of the level of risk posed by each offender;
- Multi agency environmental scanning to inform decisions on accommodation;
- Focused interventions to reduce re-offending;
- Possible recall to prison for any breach of the conditions of release or court order;
- Use of electronic tagging and conditions such as curfews;
- Control of the way in which information about specific offenders is shared with the public or key community representatives;

The police and prison service receive a notification from the courts following conviction. All people convicted of sexual offences are subject to registration, and those in the community must register with the police within three days of their conviction. For those who are in prison, within three days of their release. Failure to register is an offence which can lead to a term of imprisonment. Following conviction, each person is risk assessed and reviewed through MAPPA. Once a risk assessment has been carried out a Risk Management Plan is formulated, and the required management level agreed.

MAPPA Coordinator

Co-ordination is a crucial element of the MAPPA process and ensures that the relevant functions of the framework operate effectively. When an offender is placed under SONR, the MAPPA Coordinator receives a MAPPA notification. Where the offender meets the Level 2 or 3 criteria, a referral is also made. Thereafter, the Coordinator facilitates the responsible authorities in their statutory responsibility to do the following:

Receive referrals for RSOs, other risk of serious harm offenders and restricted patients who pose a risk of serious harm which needs to be managed at either Level 2 or Level 3

Share information relevant to the management of the risk of serious harm with other agencies within MAPPA on the basis that the information will be held securely and used by appropriate personnel within those agencies for public protection purposes only.

Receive the risk management plans and minutes from all relevant Level 2 and Level 3 meetings, clearly showing the status of each offender, the agencies which are delivering components of the plan and review arrangements.

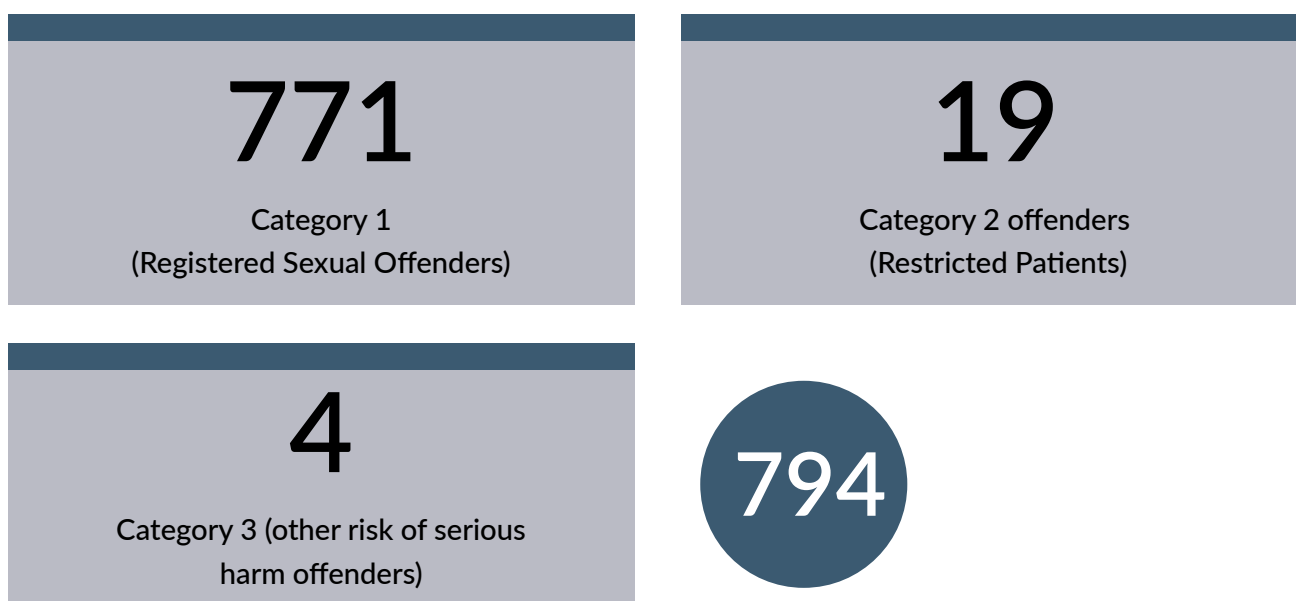
Provide a single point of contact for advice on all aspects of MAPPA.

6. South West Scotland MAPPA Statistics 2024: Overview

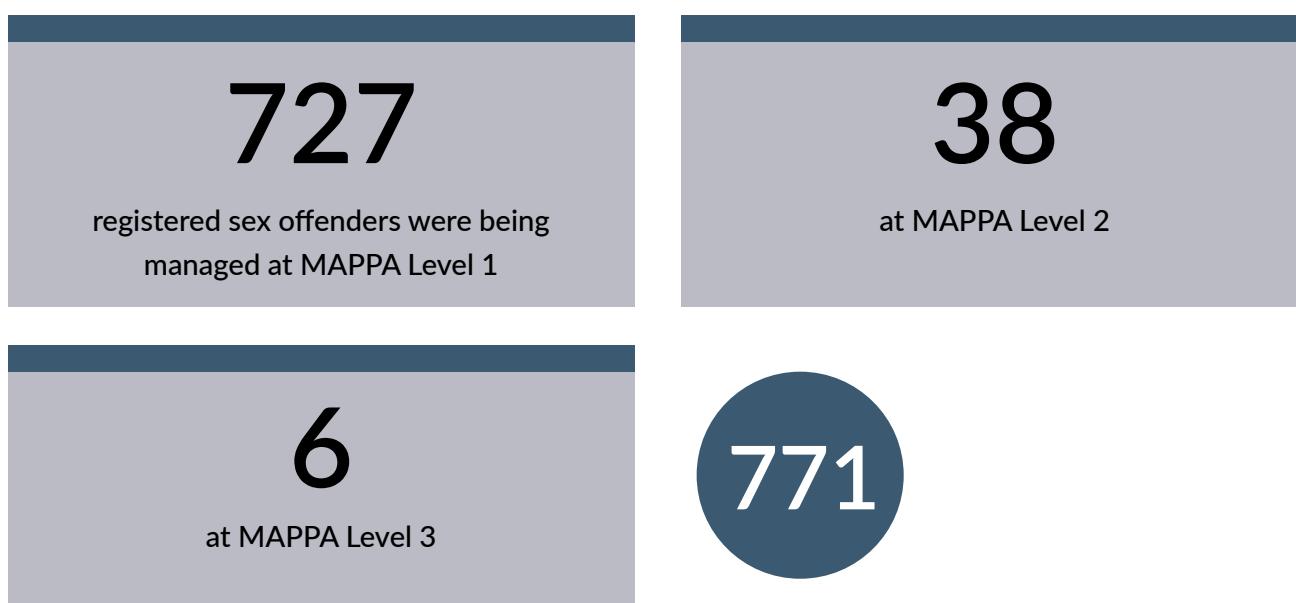
Number of People managed under MAPPA by Category on 31 March 2024

On 31 March 2024, a total of 794 people were being managed under the MAPPA in South West Scotland. This figure includes all MAPPA categories, be they in the Community, in Prison or in a Hospital. This is an increase of 7% on last year's total of 746. The 794 people being managed is broken down as follows:

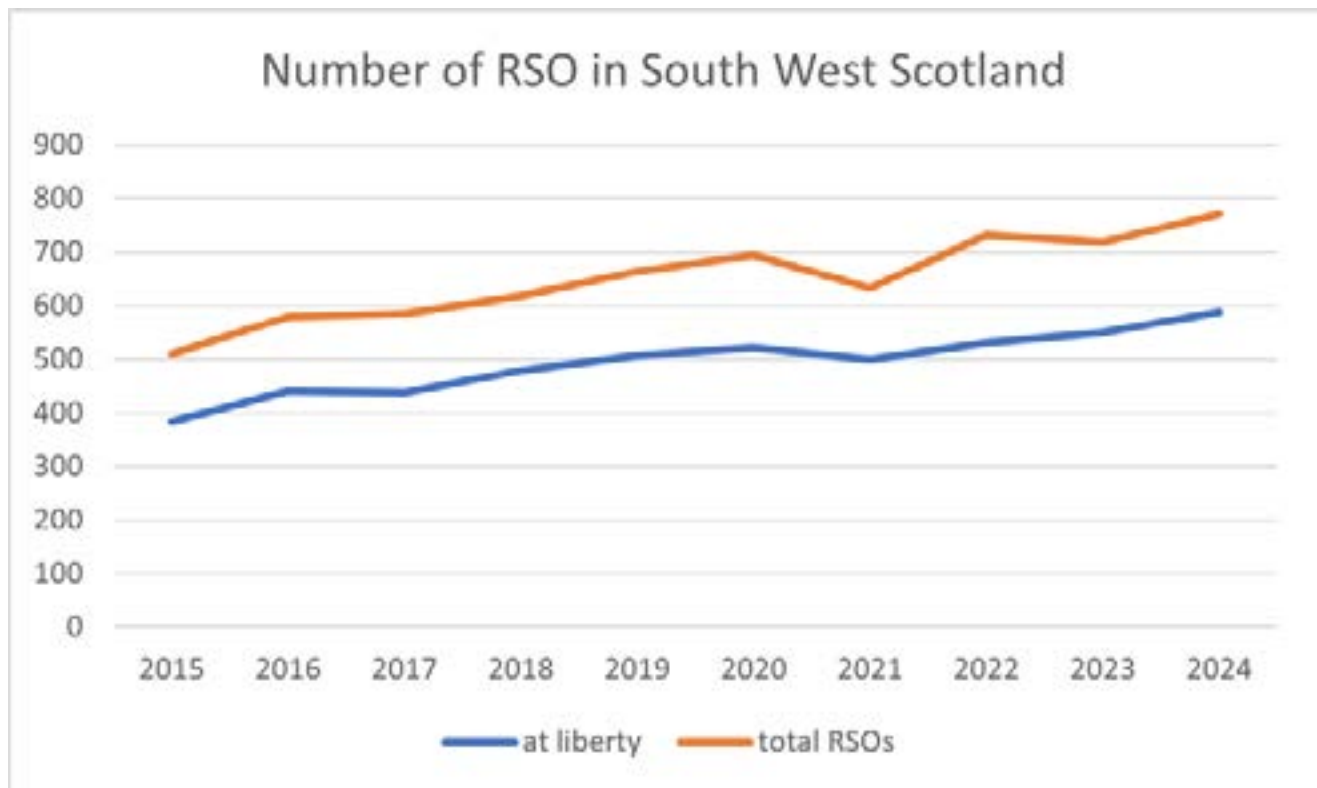
By MAPPA Category:



By MAPPA management level (Registered Sex Offenders only)



Since 2007, the number of Registered Sex Offenders managed under MAPPA in South West Scotland has continued to increase at an average annual rate of around 6% each year. Last year we had 719 RSOs, this year 771 which amounts to a 7% increase.



7. VISOR

ViSOR is the Violent and Sexual Offenders Register, often referred to as the “Sex Offenders Register”, which, in Scotland, is used as an information sharing tool, to manage, Registerable Sexual Offenders, Other Sexual Offenders, Offenders who pose a risk of Serious Harm to the community, Restricted Patients, Registerable Terrorist Offenders and other Potentially Dangerous Persons.

Visor allows each agency to place information within it that can be viewed by other partner agencies and contribute to the risk management of people in real time.

Information can be drawn from ViSOR to allow analysis of trends and to provide information that will allow

more effective resource allocation. The graph on page 11 is based upon information drawn from ViSOR and provides a comparison between areas in Scotland.

MAPPS

Visor has served us well over the last 15 years however it has now reached the point where it is approaching obsolescence, and a new system is being developed to replace it. The new system, the Multi Agency Public Protection System (MAPPS) will perform all the functions of Visor but with improved user interface and accessibility. It is anticipated that the MAPPS will go live sometime in 2025.



8. MAPPA Governance

MAPPA does not operate in a vacuum; it is a part of the wider Public Protection arrangements. The chair of the MAPPA SOG provides regular reports to all four Public Protection Chief Officers Groups and strong links have been established between MAPPA and the various Child Protection, Adult Protection and Public Protection Lead officers across the four local authority areas. In addition new links have, this year, been developed between MAPPA and Community Justice with these new links being exploited to improve service delivery with the areas of overlap. The operation of MAPPA involves a complex interplay between different, and often competing, priorities, cultures, and professional objectives. None the less, the South West Scotland MAPPA SOG have been able to deliver a consistent and effective service by dynamically balancing increasing workloads and decreasing resources.

Roles and Responsibilities

MAPPA in South West Scotland (SWS) operates with a two-tier structure; operational and strategic. Senior representatives of the Responsible Authorities form the Strategic Oversight Group (SOG) This group scrutinises and governs the arrangements. The MAPPA Operational Group (MOG) oversees the day-to-day operation of the arrangements.

The SOG is responsible for the strategic development of MAPPA and monitoring communications between MAPPA and other Public Protection partnerships such as Child Protection and Adult Support and Protection. Joint working and information sharing between agencies is the most critical part of the arrangements. Whilst the Police and Local Authority Justice Services are the lead agencies for the management of registered sex offenders in the community, the Scottish Prison Service are the responsible authority for those offenders within the Prisons estates. Health Boards are the responsible

authority for Restricted Patients and are also held to be under a “duty to cooperate” in respect of other classes of offenders. A summary of the roles and responsibilities in relation to Multi Agency Public Protection in South West Scotland is provided below.

In our area, there are four Chief Officers Groups operating within the respective local authorities; Dumfries and Galloway, East Ayrshire, North Ayrshire, and South Ayrshire.

The chair of the SOG is responsible for providing the chief officer groups with regular updates on the operation of the MAPPA.



9. The Responsible Authorities

Health: Restricted Patients

The care of all restricted patients within South West Scotland is managed through the Care Programme Approach (CPA), whether they are detained in hospital or living in the community. The mandatory CPA process for restricted patients involves regular multi-disciplinary/multi-agency review meetings (CPA meetings) with standardised documentation for Care Plans incorporating risk issues and contingency plans. The police, and other relevant agencies, are involved in the CPA process.

The Priory Ayr Clinic

The Priory Ayr Clinic is a 36-bed independent psychiatric hospital providing low secure facilities for men and women with a mental illness, mild learning difficulty, personality disorder or acquired brain injury. The service aims to allow suitable patients, who are not ready to move on, to experience a better quality of life. The hospital has 34 en-suite single bedrooms in a two-storey purpose-built facility. It has three wards; Arran, Bellisle and Low Green and a self-contained flat for two patients, known as the transitional assessment service. This is for patients preparing for discharge. The clinic also operates a separate Low Secure Unit with 8 beds at Lochlea House in Mauchline and an 8 bed step down facility, the Gatehouse, in Ayr. At any time, a small number of patients within these facilities will be Restricted Patients and subject to statutory CPA and, where appropriate, MAPPAs. A Senior Member of the clinical team sits on the Strategic Oversight Group (SOG).

Foxgrove

Currently there is no secure adolescent in-patient service for young people in Scotland. Consequently, there is a population of young people living in Scotland whose complexity of presentation and severity of risk

unfortunately is not met within NHS Scotland. This means they require to travel to England to receive care or receive a service that is designed for adults rather than children. However, there is a facility with SWS called Foxgrove which is a new 8 bed National Secure Adolescent Inpatient Service based at Irvine Central Hospital which aims to meet that need and provides a dedicated and appropriately skilled multidisciplinary healthcare team to deliver the level of care that these young people require. It is possible that some of these young people will fall under categories that require MAPPAs management and proactive engagement with the MAPPAs partners has taken place to ensure the success of this new unit which should begin to receive patients in the Summer of 2025.

Health Boards

Whether they be detained in hospital or living in the community, the Local Health Board is the Responsible Authority for all Restricted Patients. The care of Restricted Patients is managed through a process called the Enhanced Care Programme Approach (ECPA). This process is not dissimilar to MAPPAs but is aimed at the clinical care of the patient. ECPA is mandatory for restricted patients and involves regular multi-disciplinary/multi-agency review meetings (ECPA meetings) with standardised documentation for care plans incorporating risk issues and contingency plans. The police and other relevant agencies are involved in the CPA process. The information from the ECPA meeting informs any MAPPAs meeting that may be called when patient is being considered for unescorted community access.

Dumfries and Galloway Health Board and Ayrshire and Arran Health Board each have nominated a single point of contact for MAPPAs. The single point of contact, who is a senior manager within the Health Board has a place on the SOG. All Restricted Patients have a Mental Health Officer (MHO) and a Responsible Medical Officer (RMO) with specific responsibilities in

relation to the case. They attend MAPPA meetings for Restricted Patients alongside other members from the clinical team, the Police, Housing Services, or any other agency that might be involved. The State Hospitals Board for Scotland is also included in the legislation as a Responsible Authority but, as with other Health Boards, only in respect of Restricted Patients.

The Police

The responsibilities of the Police in relation to registered sex offenders include maintaining the ViSOR records of those persons in Scotland who are subject to the notification requirements of the Sexual Offences Act 2003 and to initiate enquiries where such persons fail to comply with the requirements placed upon them. The Police, as one of the Responsible Authorities within the MAPPA, has an important role in assessing and managing the risk presented by sex offenders in the community and a responsibility to develop, in conjunction with partner agencies, risk management plans for the purpose of monitoring and managing them. Where someone in the community is subject to no other form of statutory supervision, then the police assume the role of lead responsible authority for that person. This includes sharing the responsibility for assessing all registered sex offenders, within the community. The assessment is carried out by officers working within the Sex Offender Policing Unit, and colleagues within Justice Services, who have been trained in the use of specialised risk assessment tools. The Police also play an important role in the management of restricted patients and people assessed as having other risks of serious harm, particularly with regard to risk assessment and the ratification of risk management plans.

The Scottish Prison Service

The SPS is the Responsible Authority for Category 1 registered sex offenders and Category 3 other risk of

serious harm offenders, whilst they are in prison. Whilst a person is in custody, Prison Based Social Workers will apply the appropriate risk assessment tools. These tools are crucial in determining how a person should be managed during their sentence and for pre-release planning. The SPS also work in partnership with the local justice services supervising officer during sentence and in preparation for release. This process of sentence planning is referred to as Integrated Case Management (ICM).

Parole

Parole is a system that enables people to be released on licence in the community under the supervision of a community based social worker. If a person is released on parole, they are subject to be recalled to prison at any time if they breach the terms of their licence. Parole is only granted where the Parole Board is satisfied that the risk presented by the person can be managed in the community. The Parole Board for Scotland is a Tribunal Non-departmental Public Body whose members are appointed by the Scottish Ministers. The Board has a number of statutory functions but operates independently from the Scottish Government. Directions made to Scottish Ministers by the Board about early release of a person are binding, with the exception of deportation cases and applications for compassionate release where the Board will offer advice only.

Those people who are sentenced to less than four years in prison, known as "Short Term", prisoners, are released into the community unconditionally at the half way point in their sentence. The Parole Board has no role in these cases. Short term sex offenders are released on licence at the half way point and their licence conditions are set by the Scottish Government Justice Directorate. The Parole Board will only become involved if the person breaches their licence and are recalled or are seeking re-release following recall.

Those serving more than four years are entitled by law to be considered for parole once they have served half

of their sentence, this is known as the Parole Qualifying Date. If early release is not directed at the first review then the Board will reconsider the person's case at no more than 12 month intervals until the person reaches their Earliest Date of Liberation; the two thirds point of their sentence or 6 months before the expiry of the sentence depending on when they were sentenced; at which point the Scottish Ministers are legally required to release the person into the community on licence. Some people have Extended Sentences which means that they are given a custodial part and an extended part of sentence by the court. The Board will deal with two types of extended sentence offenders. Those sentenced to a short-term custodial part, but the extended part takes the sentence overall to more than 4 years will be referred to the Board for licence conditions only. If the custodial part is more than 4 years they will be considered in the same way as long-term determinate offenders. Their licence will run to the end of the extended part of the sentence. A person sentenced to life sentence is told at the time of sentencing in the court what the minimum period is that they must spend in prison. This is known as the punishment part of the sentence. They will have their case considered by a Tribunal of the Board as soon as possible after the punishment part has expired. If they are not released at the first review, they are required by law to have a further review within 2 years. Subsequent reviews will be set by the tribunal. More information on Parole can be found at <https://scottishparoleboard.scot/faq>

Local Authorities, Justice Social Work Services

The Local Authorities provide a range of social work and social care services, including the provision of justice services. The core justice social work responsibilities are:

- The provision of reports to the Court and Parole Board;
- Supervision of probation; community service and

supervised attendance orders and;

- Supervision of post-custodial licences.

Whilst public protection and the risk management of registered sex offenders is a core objective of justice social work services, the primary aims of Justice Services are resettlement and rehabilitation. Justice Services have responsibility for the risk assessment and management of all registered sex offenders subject to community supervision. All persons leaving custody are entitled to apply for voluntary throughcare up to 12 months after leaving custody. National Objectives and Standards for Justice Services lay down that reports to Court or the Parole Board should include a risk assessment and any action plan for someone on probation or a post-custodial licence should include a risk management plan aimed at reducing the risk of re-offending or the risk of serious harm. Supervision of these orders or licences should be informed by the risk management plan.

In cases where a person subject to sex offender registration is also subject to statutory supervision in the community, the Local Authority is the Responsible Authority. When Justice Services supervision ends the police will become the responsible authority, but the person will still be managed under the MAPPAs for the registration period.

Child Protection

The protection of children is the responsibility of everyone. Senior personnel from Children and Families Social Work Services will attend MAPPAs meetings and share information with other agencies where there are concerns about young people who may be considered to be actual or potential victims. This information will be shared for the purpose of developing comprehensive risk management plans of which a robust victim safety plan is a central component.

Adult Support and Protection

The Adult Support and Protection (Scotland) Act 2007 provides measures to support and protect adults who are seen to be at risk of harm, be it physical or psychological harm, neglect, sexual abuse or financial exploitation. The Act places a duty on Local Authorities to make the necessary inquiries and investigations to establish whether or not further action is required to stop or prevent harm occurring and also a requirement for specified public bodies to co-operate with local authorities and each other about adult protection investigations. Where appropriate, Adult Protection legislation will be utilised to protect any adults identified during the MAPPa process as being at risk of harm. It must be remembered that the person subject to the arrangements may, in fact, be an adult at risk.

Duty to Co-operate Agencies

Duty to Co-operate agencies such as Health Boards (in respect of registered sex offenders), Housing Providers and other Voluntary or Private Sector Organisations have a responsibility to share information, search records for any involvement with named offenders, and participate and contribute meaningfully, on a case-by-case basis, to the Risk Management Plan in accordance with their statutory function.

Health Boards

Whilst Health Boards are a Responsible Authority in respect of Restricted Patients, they have a duty to co-operate in respect of Registered Sex Offenders and those people identified as posing other risk of serious harm. Registered Sex Offenders may have contact with the health service in a number of different contexts. The majority of contacts with the NHS are via General Practitioners (GP's) outpatient or inpatient attendance at District General Hospitals, this will also include, for a few individuals, contact with Mental Health Services

where people receive treatment voluntarily or under the Mental Health (Care and Treatment) (Scotland) Act 2003 or, for example, addiction services. Where a person has contact with the health service then the health service has a duty to co-operate with other agencies in terms of information sharing and contributing to risk management. Where there are specific issues (i.e. a disability or enduring health diagnosis) that requires the provision of services to people or where there are concerns about risk to staff or other patients, then this is communicated by the MAPPa Health representative, or single point of contact, to health service staff so that appropriate arrangements to manage any risk to staff or patients are put in place. Equally, where health staff have information that is pertinent to risk management then this is shared with other agencies within MAPPa.

Electronic Monitoring Services

Electronic monitoring is well established as a potential sentencing disposal assessed at Criminal Justice Social Work Report stage, via the Restriction of Liberty Order. In addition, the ability to impose a Restricted Movement Requirement has been available as an additional requirement for a Community Payback Order. The Management of Offenders (Scotland) Act 2019 has now allowed for the introduction of electronic monitoring (EM) on Bail and the Restricted Movement Requirement on a Community Payback Order (CPO) at first disposal. Electronic monitoring requires assessment to consider the potential impact, in terms of likely compliance, supporting any risk management plan and also in terms of the impact upon other householders and also the ways such monitoring can be targeted and used creatively depending on individual risks, with restriction hours tailored around the individual's offending behaviour, employment, family commitments, and so on. If it is identified that the individual poses a risk of offending during particular time periods, the curfew can be tailored to fit such patterns and this information can be included in the assessment. The

Electronic Monitoring Order (EMO) is a common form of order, which will also be in place with all court based electronic monitoring and will therefore be imposed in tandem with any Community Payback Order which has a Restricted Movement requirement or alongside EM on Bail. There has for some time been national focus on alternatives to the use of remand with bail supervision and electronic monitoring on bail being considered as credible alternatives. Bail supervision across South West Scotland is delivered by Justice Social Work Services whereby individuals who would otherwise be held on remand are released on bail on the condition that they meet with a bail supervisor a specified number of times per week.

Housing Agencies

Housing agencies, under a duty to co-operate, are Local Authority housing services and providers and Registered Social Landlords. Their role is to contribute to the management of risk identified by Responsible Authorities by providing accommodation; liaising with the Responsible Authorities on the ongoing management and monitoring of the risk of the person as tenant, including any tenancy moves or evictions; having regard to community safety and having in place exit strategies where a property is no longer suitable and/or the person's safety is at risk. In the South West Scotland area, each local authority has recruited a dedicated Sex Offender Liaison Officer (SOLO) who works directly with person subject to the MAPPAs arrangements. These officers have proven to be critical to the overall risk management of registered sex offenders. Indeed, the SOLOs have worked closely with the MAPPAs Coordinators and the Responsible Authorities in SWS to further strengthen their risk assessment processes to ensure that community safety is at the heart of all procedures.

In South West Scotland, Environmental Risk Assessments (ERA) are carried out on every property that is potentially available (with all partners participating), in order to minimise any risks. Victim issues are the primary focus of the ERA. SOLOs are standing members of all MAPPAs meetings,

with Registered Social Landlords and supported accommodation providers additionally represented where appropriate. This collaborative approach minimises the potential for a person to be released from custody and accommodated within the same locality as a victim.

What if someone commits an offence while they are managed under the arrangements?

Initial Case Review (ICR)/Significant Case Review (SCR)

Reoffending rates of those subject to MAPPAs tend to be very low but sadly they are not zero. Whenever any person managed under the MAPPAs, goes on to commit a further sexual offence, causes some other form of serious harm or, where, as a result of their status as a Registered Sex Offender, the person themselves become the victim of serious crime, the MAPPAs SOG must review the management of that person in order to identify any learning points that may prevent such circumstances arising again. The review process is designed to examine the actions or processes employed by the agencies involved to ensure that all reasonable steps had been undertaken and to capture any learning. The level of review undertaken is determined by the nature and seriousness of alleged further offending. The review process employed by South West Scotland Strategic Oversight Group involves peer scrutiny of such cases by personnel from another local authority. Although challenging to administer, this system has been very successful and provides reassurance to the SOG that standards within the four local authorities are



consistent and high. It should be noted that the 2022

MAPPA Guidance significantly increased the threshold for a Significant Case Review, however a local process to capture learning from cases that do not meet the new serious harm threshold has been developed and is now successfully operating in the region.

Disclosure

Occasionally it is necessary to disclose information regarding a person's status to protect another person or persons. This may be done in circumstances where there are child and adult protection concerns or if a person's employment brings him/her into contact with children or other vulnerable people – this will be influenced by the nature of their offending.

Disclosure of an offender's status can happen in three ways:

- The individual can self-disclose;
 - A Public Interest Disclosure can be made by Police Scotland;
 - A disclosure can be made by social workers, in relation to the protection of children and vulnerable adults.
- Decisions are made carefully on a case-by-case basis with a number of factors considered such as:
- The type, frequency, and pattern of offences;
 - How well a person complies with the conditions or restrictions of their sentence;
 - Behaviours which may indicate further offending is likely;
 - The harm further offences would cause;
 - Potential negative consequences of disclosure to an individual, their family and whether or not they would be considered vulnerable;
 - The range of conditions on the licence or order; and
 - Whether disclosure could lead to a person absconding.



10. Risk Management

Risk Management Plans increase a person's capacity to control their behaviour and manage the risk they pose to the public. This requires a balanced approach making use of both restrictive measures and supportive measures. The supportive measures available generally amount to skill building, assisting the individual to seek appropriate employment, securing stable housing, providing treatment for any mental health issues, physical health issues or addictions that may be a factor in their offending. The restrictive measures usually amount to a legal order of some description. A variety of different statutory measures can be imposed (i.e. parole licence, non-parole licence, extended sentence, Supervised Release Order, Community Payback Orders and Civil Preventative Orders) where the risk presented by an individual makes additional, enforceable measures necessary.

Going forward, MAPPA level 2 and level 3 chairs will now routinely refer to the detail of the Risk Management Plan while conducting MAPPA meetings.

Civil Preventative Orders

Sections 10 to 40 of the Abusive Behaviour and Sexual Harm (Scotland) Act 2016 ("the 2016 Act") came into force on 31st March 2023.

These sections introduce two preventative orders which can be applied to relevant sex offenders and those who pose a risk of harm: Sexual Harm Prevention Orders (SHPO), and Sexual Risk Orders (SRO) respectively. The SHPO is a preventative order designed to protect the public from sexual harm. This order is available in Scotland, with comparable SHPOs available across the rest of the United Kingdom. This order replaces Sexual Offences Prevention Orders (SOPOs) and Foreign Travel Orders (FTOs)

The Sexual Risk Order (SRO) is a civil preventative order

designed to protect the public from sexual harm. Unlike SHPOs, there is no need for a previous conviction or equivalent. The order is available in Scotland and replaces the Risk of Sexual Harm Orders (RSHOs). If people fail to comply with the restrictions provided by these orders, they will be arrested and can be returned to prison.

MAPPA Administration

Since the last Annual Report was published, MAPPA partnership working has continued to allow us to effectively utilise the expertise of many organisations. MAPPA Administration, which supports the arrangements has continued to improve and develop in response to changing operational environment. The restrictions placed upon us during the covid 19 pandemic have eased but process improvements continue to be developed. New practices which were put in place during the pandemic have now become "business as usual" and the use of technology such as Microsoft Teams has been a key tool for MAPPA level 2 and 3 meetings. This has resulted in noted efficiency and allowed additional time to focus on operational priorities. Face to face visits with those managed under MAPPA have resumed and remain, without doubt, the best way to assess risk.



11. What we have achieved since the last Annual Report

The use of a secure online video conferencing application has proved highly successful and has allowed MAPPA meetings to take place securely whenever required. Individuals subject to the arrangements have been visited whenever it was felt necessary and risk assessed, and the free flow of highly confidential information has continued without interruption.

Continued refinement of the Data Dashboard

Since the inception of MAPPA, the SOG has continually asked for statistical information that can show how well, or otherwise, the arrangements are operating in terms of managing and reducing risk. MAPPA admin collected and collated data regarding the numbers of offenders in our area, their risk and management levels and also data on the attendance level of partners at MAPPA meetings. While this information provided the SOG with an understanding of the amount of work that was being carried out on its behalf and by whom, it did not provide any insight into how effective our combined efforts have been. Previously the SOG requested that the statistics collected be reviewed but the results produced required to be refined

For the last two years MAPPA admin have collated relevant data which has been used to populate the MAPPA Dash Board. The MAPPA dashboard in Microsoft Excel allows the user to see trend information by displaying quarterly data over the previous 2 years to make it clear and easy to see where there have been changes in performance over time. The dashboard has filters which mean the user can drill down on the data by specific areas – for example selecting a certain local authority area, by allowing comparisons to easily be made across authority areas the team can quickly ascertain whether something is working better or worse in one area and look into it further. The dashboard

tool retains the Red/Amber/Green status which was previously reported for KPIs, but this can also be viewed over time and for specific areas when filtered. There is much more additional, contextual information available to view using this tool, so as well as important KPI info, general activity and demographic data can also be monitored.

The tool is shared with members quarterly, and can be viewed and used in peoples own time, as well as being discussed in detail at the SOG meetings where a planning and performance officer talks through the recent activity. There is a summary page included in the tool which pulls the “highlights” for the most recent quarter – based on any notable changes in the trend, or significantly different recent activity. The dashboard tool has been developed over the last 2 years and the team continually look for areas to improve / add to the tool. The improvements in data accessibility, provided by the Dash Board, have been recognised and this highly effective management tool has been given approval by the SOG to be the new mechanism to capture key statistical data to provide clarity on MAPPA management information.

In the last 12 months, 21, or 15%, of meetings (142) resulted in MAPPA level being decreased (compared to 19% last year), while 5, or 4%, resulted in MAPPA level increase (1% last year).

In addition, 13 meetings this year resulted in MAPPA risk level being decreased, including 1 from very high to high and 8 from high to medium. There were 6 meetings where the MAPPA risk level was increased.

These are good indications that the resources deployed to manage risk are producing positive outcomes with reductions in both risk levels and management levels, while the increase in risk levels in a small number of cases illustrates that agencies remain alive to the dynamic nature of risk.

12. Case File Auditing

The routine auditing of randomly selected cases has now been implemented. It is anticipated that the data harvested from these audits will be incorporated into the

statistical dashboard and will add an additional dimension to our self-evaluation process.

13. RMP Training

The creation of an effective Risk Management Plan is the key factor in the MAPPA process. To support staff in this critical task, on 19th and 20th of June 2024, subject matter experts from the Risk Management

Authority, provided training on the best ways to approach this task. The training was attended by over fifty members of staff from both the Police and Justice Services.



14. MAPPA Development Day

Last Year, MAPPA South West Scotland organised training for MAPPA level 2 and 3 chairs for professionals from across Scotland. These sessions took place in Glasgow and in Perth. The trainer at these events was Hazel Kemshall, Emeritus Professor of Community and Criminal Justice at De Montfort University. Professor Kemshall is a leading expert in Multi Agency Public Protection and the management of high-risk offenders in the community, risk assessment, and combining risk and desistance approaches to offender management.

Building upon the success of these training events and the enhanced quality of MAPPA meetings across Scotland, the SOG has continued to build a relationship with Professor Kemshall. In May this year (2024) with a view to improving the quality of our oversight function, and at the invitation of the SOG chair, Professor Kemshall came to Ayrshire and took part in a meeting of our SOG. She then provided a training input to members around the functions of a SOG and challenged us to develop a Self-Evaluation Quality Assurance Process. Her input was felt to be of great value and, as a critical friend, has offered a pathway for us to continue to improve the quality of our leadership.

At the same event, SOG members also heard from Retired Detective Superintendent Gail Johnston QPM. Gail spent 15 years in Offender Management undertaking operational, training, policy, review, and strategic roles. In June 2019, Gail was awarded the Queen's Police Medal in the Queen's Birthday Honours List in recognition of her work within Sex Offender Management. Gail retired from Police Scotland in 2020 as Detective Superintendent in charge of the National Offender Management Unit, a role she had held for 5 years.

In May 2021, Registered Sex Offender, Jason Graham gained entry to the flat of an elderly woman living in the Woodlands area of Glasgow. He then carried out a brutal and sustained attack leading to her murder. The Glasgow MAPPA SOG commissioned Gail to carry out an in-depth review of the case. In her report, she made

11 recommendations and 14 suggested learning points for the agencies involved, which included Police Justice Social Work and the Health and Social Care Partnership. Gail took the SOG through the events leading up to the murder of Ms Browns highlighting her recommendation and the learning points she had identified. The South West Scotland SOG instructed that a Multi-Agency Group be formed to look at the recommendation made in the report and to consider what, if any, action needed to be taken locally to comply. The group produced a report which has been considered by Ms Johnstone and work continues to ensure that all relevant learning from the review is acted upon.



15. MAPPA in Action

A recent good example of the effectiveness of the arrangement revolved around the release of a man from prison who had reached the end of his sentence and had no statutory social work involvement. He was managed by the Police using only the Sex Offender Notification Requirements. (SONR) He had a history of sexual offending in the context of intimate relationships. While in prison the man had formed a relationship with a woman in the community who had agreed that he could live with her upon his release. The woman had young children and services were concerned for their welfare should the man be introduced into their home. The Police made a disclosure to the woman regarding the man's previous offending; however, she chose to ignore the information and went ahead welcoming the man into her home on his release from prison. All the concerns around this man's risk revolved around the protection of the children. As he was now living in their home, this risk was assessed as Very High there being an imminent risk to the children. Although there was no statutory social work involvement the MAPPA agencies agreed that Social Work would be best placed to lead the risk management aspect of the case and so a senior member of social work staff with a wealth of child protection experience undertook the task of chairing the level 3 MAPPA. All necessary child protection procedures were followed and a wraparound multi agency risk management plan implemented. Gradually, the family began to welcome the support that they were offered and the risks that were highlighted also gradually reduced. The case was eventually dropped from level 3 to level 2, social work stepped back from being the lead agency and the Police took over. At time of writing, the family seemed to have benefited from the support offered and the man remains fully compliant with his risk management plan.

A second example highlighting effective partnership working occurred when an individual was taken into custody in a different country, sentenced and wished to return to home on release, which was in our region. It was decided that this individual be managed as Level 3 case due to the nature of offending, complexities involved and requirement for senior management oversight. MAPPA Level 3 meetings are already usually busy with representatives, however the requirement to work with agencies beyond our usual infrastructure was an added challenge. However, all parties involved recognised the clear risk this individual poses and understand the need for multi-agency involvement and co-operation. Several MAPPPs have taken place in preparation for the release of the individual and a co-ordinated and robust plan has been developed by all agencies involved. There has been excellent communication and information sharing between partners, and without this, the risk management plan for this individual would not be proportionate and not serve to support the individual nor protect the public. Each agency has demonstrated sound knowledge of risk and shared their own expertise to appropriately manage this individual. While it cannot be commented on the volume of work that another area has, it is certainly evident that despite rising caseloads for Southwest Scotland, agencies in both areas have been able to prioritise and work collaboratively.



16. Appendix: South West Scotland MAPPA Statistics 2023/24

Table 1: Registered Sex Offenders

Registered Sex Offenders (RSO's)	Number
a) Number of Registered Sex Offenders:	771
1) At liberty and living in your area on 31st March :	589
2) Per 100,000 of the population on 31st March:	143
b) The number of RSO's having a notification requirement who were reported for breaches of the requirements to notify between 1 April and 31 March:	90

Table 2: Orders applied and granted in relation to RSO's

The Number of:	Granted by the courts
Sexual Offences Prevention Orders (SOPO'S) in force on 31 March	71
SOPO'S granted by courts between 1 April & 31 March	3
Sexual Harm Prevention Orders (SHPOs) in force on 31 March	46
SHPO imposed by the courts between 1 April & 31 March	17
Number of people convicted of a breach of a SOPO/SHPO between 1 April & 31 March	19
Number of Sexual Harm Orders in force on 31/3/24	0
Number of Foreign Travel Orders imposed by courts between 1 April & 31 March	0
Number of people convicted of a breach of a RSHO/SRO between 1 April & 31 March	0
Foreign Travel Orders imposed by the court between 1 April & 31 March	0
Notification Orders Imposed by the courts between 1/4/23 and 31/3/24	4

Table 3: Registered Sex Offenders

Registered Sex Offenders (RSO's)	Custody	At Liberty	Total
a) Number of RSOs managed by MAPPAs level as at 31 March:			
1) MAPPAs Level 1:	151	576	727
2) MAPPAs Level 2:	24	14	38
3) MAPPAs Level 3:	6	0	6
b) Number of Registered Sex Offenders convicted of a further group 1 or 2 crime between 1st April and 31st March:			11
1) MAPPAs Level 1:			9
2) MAPPAs Level 2:			2
3) MAPPAs Level 3:			0
c) Number of RSO's returned to custody for a breach of statutory conditions between 1 April and 31 March (including those returned to custody because of a conviction for a group 1 or 2 crime):			13
d) Number of notifications made to Jobcentre Plus under the terms of the Management of Offenders etc. (Scotland) Act, 2005 (Disclosure of Information) Order 2010 between 1 April and 31 March:			168
e) Number of RSO's subject to formal disclosure:			0

Table 4: Restricted Patients

Restricted Patients (RPs):	Number	To Be Reported As
a) Number of RPs		
1) Living in your area on 31 March	19	Number of RPs “owned” by your Health Board(s) on 31 March 2022 regardless of where they were detained in hospital or living in the community*.
2) Living in your area during the reporting year	19	Number of RPs “owned” by your Health Board(s) between 1 April 2021 and 31 March 2022 regardless of where they were detained in hospital or living in the community.
b) Number within hospital/community as at 31 March:		
1) State Hospital	7	Number reported for a) 1) above broken down into the number of RPs detained in the State Hospital, in other hospitals and those living in the community.
2) Other hospital in your area	9	
3) Community (conditional discharge)	3	
c) Number managed by MAPPA Level as at 31 March		
1) MAPPA Level 1	17	Number reported for a) 1) above broken down into MAPPA Levels.
2) MAPPA Level 2	2	
3) MAPPA Level 3	0	
d) Number of RPs recalled by Scottish Ministers during the reporting year	0	To be provided by the Scottish Government Restricted Patients Team

Of the 19 South West Scotland patients living in our area, 4 have unescorted access to the community. In addition to Ayrshire and Arran and D&G patients, the Ayrshire MAPPA area also hosts 11.

Restricted Patients who belong to other Health Boards, 4 of whom have unescorted access to the community making a total of 8 Restricted Patients with unescorted community on the relevant date.

Table 5: Statistical Information - Other Risk of Serious Harm Offenders

Other Risk Of Serious Harm Offenders (OROSHO'S)	
a) Number of offenders managed by MAPPA level as at 31 March:	
1) MAPPA Level 2:	4
2) MAPPA Level 3:	0
b) Number of offenders convicted of a further Group 1 or 2 crime:	
1) MAPPA Level 2:	0
2) MAPPA Level 3:	0
c) Number of offenders returned to custody for a breach of statutory conditions (including those returned to custody because of a conviction of Group 1 or 2 crime)	
	0

Table 6: Delineation of RSO'S by age on 31st March:

Age	RSO Number	RSO Percentage
Under 18	0	0
18-21	21	2.72%
22-25	40	5.19%
26-30	76	9.86%
31-40	171	22.18%
41-50	151	19.58%
51-60	137	17.77%
61-70	119	15.43%
over 70	56	7.26%
Total	771	100%

Table 7: Delineation of population of RSO's on 31st March:

Sex	RSO Number	RSO Percentage
a) Male	760	98.57%
b) Female	11	1.43%
c) Other DATA Not Held	0	0%
Total	771	100%

Table 8: Delineation of RSO's by ethnicity on 31st March:

Ethnic Origin	RSO Number	RSO Percentage
White Scottish	596	77.30%
Other British	121	15.68%
Irish	9	1.17%
Gypsy Traveller	0	0 %
Polish	3	0.39%
Other White Ethnic Group	13	1.69%
Mixed or Multiple Ethnic Group		
Pakistani, Pakistani Scottish or Pakistani British	1	0.13%
Indian, Indian Scottish or Indian British	1	0.13%
Bangladeshi, Bangladeshi Scottish or Bangladeshi British	0	0%
Chinese, Chinese Scottish or Chinese British	0	0%
Other Asian	1	0.13%
African, African Scottish or African British	1	0.13%
Other African	0	0%
Carribbean, Carribbean Scottish or Carribbean British	0	0%
Black, Black Scottish or Black British	0	0%
Other Carribbean or Black	0	0%
Other Ethic Group - Arab, Arab Scottish or Arab British		0%
Other Ethnic Group - Other	2	0.26%
Subject Declined to Define Ethnicity	0	0%
Subject Does Not Understand	0	0%
Not Known	11	1.43%
Data Not Held	12	1.56%
Total	771	100%

Table 9: Number of RSO's managed under statutory conditions and/or notification requirements on 31st March:

	RSO Number	Percentage
a) On Statutory supervision:	244	31.65%
b) Subject to notification requirements only:	527	68.35%
Total	771	100%



Thank You.

