

Human Trafficking

Introduction

In March 2014 the Community Safety Partnership discussed a paper about Human Trafficking and as a result of this it was agreed to conduct a piece of scoping work to find out more about the issue in Shetland.

Anna Sutherland, Partnership Officer and Kate Gabb, Lead Officer Adult and Child Protection completed this work.

Method

A brief questionnaire (attached at appendix 1) was drawn up. Organisations were contacted by letter and meetings were set up. In addition to using the questionnaire the attached fact sheet (appendix 2) was given out.

Meetings were held with:-

- Sister Lynda Smith – NHS Shetland A + E
- Dr Susan Laidlaw – NHS Shetland (Sexual Health Services)
- Ray Cross – NHS Shetland Director of Dental Services
- Lisa Watt – NHS Shetland Primary Health Care Manager
- Shirley Brown – Senior Through Care and After Care Team Social Work
- Border Force
- Catholic Church
- Fishermen's Mission
- Lerwick Port Authority
- Northlink Ferries
- Sumburgh Airport
- Patti Dinsdale – Shetland Islands Council Environmental Health

Additionally there was telephone and email contact with

- Police Scotland- Inspector Eddie Ross from Inverness Public Protection Unit
- Bronagh Andrews of the Trafficking Awareness Raising Alliance (TARA)

Attempts were made to discuss this with companies involved in current construction at Sullom Voe and BP and Total, but despite several requests for a meeting there was no response.

Findings

No organisation in Shetland was aware of an incident of human trafficking in Shetland, although most people commented it was useful to discuss and consider

this. One person had had experience of dealing with an unaccompanied under 16 year old who had arrived in Shetland from another country (but who had not been trafficked)

The majority of people knew something about human trafficking from advertisements on TV and articles in the media. Most people understood that it could affect children or adults and involve people being trafficked for sexual purposes or forced labour.

The issues for Shetland are recognising if human trafficking was happening – Police Scotland and Border Force do not have concerns. The Fishermen's Mission were aware of foreign nationals working on fishing boats, but they were free to travel home and able to access the Fishermen's Mission and saw that as a source of help should they need any assistance. People recognised that human trafficking would be hidden and wondered if we had a clear way of dealing with anyone who had been trafficked into Shetland. There was also concern that legitimate migrant workers may not know their employment rights in the UK, so may not have been trafficked, but may be being exploited.

Organisations have a variety of methods to communicate with people whose first language is not English. NHS Shetland use the Language Line very successfully and Google Translate for specific words or medical terms. NHS Shetland Dental services have used staff members with other languages to help translate in sensitive situations. Shetland Island Council staff also use the Language Line. Other organisations had a variety of methods using community or congregation members to translate. GP's often have a younger member of a family translating for an older member who's English is not good. This has pitfalls and GP's have been advised to be careful of this approach.

Most people said they would contact the Police if they came across a situation of human trafficking. Some people recognised that trafficking could be a child or adult protection issues and would contact duty social work.

People thought it would be helpful to have local posters and leaflets and information on websites that assisted people in recognising human trafficking and how they should respond. Additionally some sort of short workshops or training session maybe helpful – although most people felt this issue was not such a high priority as to necessitate lengthy or complex training. Being clear about indicators of human trafficking especially for those services who may come across this issue would be helpful.

A number of interviewees made some helpful additional comments.

- That we needed to be aware that the legal issues for immigrants are very complex. This poses challenges for staff assisting immigrants and we lack the expertise in Shetland in dealing with these issues.
- Having a local process of how to respond if someone was identified as being trafficked was seen as being helpful.
- TARA have a nationwide remit and made it clear that if any women over the age of 18 was found in Shetland having being trafficked for sexual purposes they could be contacted for help. Additionally they would be willing to provide

further training and information to specific groups of staff- especially those working in sexual health services- about the issues as related to the trafficking of women for sexual purposes. As TARA receives Scottish Government funding it is possible that this training could be provided at no cost to agencies in Shetland

- People trafficked as forced labour for illegal cannabis farms is something that has happened in the Highland area and it is not impossible that given the market for drugs in Shetland this could happen here.
- Environmental Health Officers occasionally have to deal with groups of Travellers who come to Shetland. There had been concerns that such groups could include trafficked people, but there has been no evidence of this.

Conclusions

Although this scoping work did not uncover any evidence of human trafficking there is no evidence to suggest that it would not happen in Shetland. Given that the Scottish Government is proposing legislation about Human Trafficking it would be appropriate to ensure we have some local interagency measures in place. Any local measures would benefit from including local businesses and employers as well as public bodies.

Recommendations

1. Awareness raising
 - To produce leaflets and posters adapted from other areas or national information
 - To get a supply of Police Scotland leaflets
 - To develop and deliver a short course on spotting indicators for services that trafficked people may access. (Border Agency have offered to assist with this)
 - To consider the offer from TARA for further training and information
2. To develop a brief clear interagency protocol to give guidance to staff. This would need to include access to training

Anna Sutherland Partnership Officer
Kate Gabb Lead Officer Adult and Child Protection
7 October 2014



Human Trafficking Factsheet

1 Introduction

This brief sheet provides some background information about human trafficking in Scotland.

2.0	Background Detail & Content
2.1	Human trafficking is the movement of a person from one place to another into conditions of exploitation; using deception, coercion, the abuse of power or the abuse of someone's vulnerability. It is possible to be a victim of trafficking even if consent has been given to being moved. Although human trafficking often involves an international cross-border element, it is also possible to be a victim of human trafficking within one's own country. Children cannot give consent to being moved, therefore the coercion or deception elements do not have to be present (Source: National Crime Agency).
2.2	There are four broad categories of exploitation linked to human trafficking: <ul style="list-style-type: none"> • sexual exploitation • forced labour • domestic servitude • organ harvesting
2.3	Anti-Slavery International, the world's oldest anti-slavery charity, estimates that 21 million people are trapped in modern slavery worldwide.
2.4	In 2011 in Scotland, the Inter-Departmental Group on Human Trafficking reported that 93 victims of human trafficking were identified in Scotland.
2.5	The National Referral Mechanism (NRM) is a process set up by the UK Government to identify and support victims of trafficking. The National Referral Mechanism is also the mechanism through which the UK Human Trafficking Centre collects data about victims. This information helps build a clearer picture about the scope of human trafficking in the UK.
2.6	The Inquiry into Human Trafficking in Scotland, published by the Equality & Human Rights Commission in 2011 highlights the following key points: <ul style="list-style-type: none"> - It is reasonable to estimate that Scotland has around 75 potential victims of trafficking each year. This figure does not include those potential victims who do not consent to enter the National Referral Mechanism or those who have not been identified at all. - Sex trafficking is the most identified purpose for Scotland

	<ul style="list-style-type: none"> - Traffickers often recruit, move and exploit victims from within their own ethnic or national community; however trafficking is not seen as a “foreign problem”, and Scotland’s role is central as a “destination” state - The majority of Scottish National Referral Mechanism referrals were female - Nearly all sex trafficking cases involved women, with a significant minority being under the age of 18 - Men form the majority of victims trafficked into forced labour or labour exploitation - At the time of evidence gathering, five countries accounted for over 65% of Scotland’s suspected and confirmed survivors of human trafficking (Nigeria, Czech Republic, Slovakia, China and Somalia) - Trafficking occurs throughout Scotland and is not confined to its major cities. Evidence identified human trafficking in Argyll (forced labour), Glasgow (all purposes), Kirkcaldy (criminal acts under duress), Edinburgh (sexual exploitation and domestic servitude), Skye (forced labour) and Aberdeen (sexual exploitation), and there was further evidence of human trafficking for all purposes in many other parts of Scotland. - The main drivers of human trafficking in Scotland were: <ul style="list-style-type: none"> • The demand for easy-to-control and exploitable labour • The lure of profit for organised crime • The social vulnerability of victims in “source” countries
2.7	Tackling trafficking is a joint responsibility between the Scottish Government, the UK Government, Police, local authorities and support agencies.
2.8	The Scottish Government is committed to working in partnership to eradicate it in Scotland.
2.9	In September 2013 Jenny Marra, MSP, lodged a consultation on a proposal for new anti-human trafficking legislation for Scotland. The consultation proposed measures to improve Scotland’s anti-trafficking response, based on recent EU law and on recommendations of the Equality & Human Rights Commission’s Inquiry into Human Trafficking in Scotland. The proposed legislation will define the crime of human trafficking in Scots law for the first time, by enshrining the UN’s “Palermo Protocol” into law. It will help stop the criminalisation of victims of trafficking by making it illegal to punish those who have been forced to commit crime as a result of their trafficking. It proposes a new survivors’ service for victims of human trafficking. It will also compel the Scottish Government to publish an anti-trafficking strategy to be agreed by Parliament every 3 years, outlining how the Government is working with the Police, Crown Office, private sector and other agencies to stamp out human trafficking in Scotland.

3 The Shetland Context

To date none of the agencies in Shetland have any confirmed incidences of human trafficking. However, given our geographical position and the maritime industries and workforce in Shetland it is appropriate to be aware of the potential for human trafficking to take place. People could be trafficked into Shetland for forced labour or sexual exploitation or Shetland could be used by traffickers as a point of entry to mainland Scotland from other countries.

4 What to do if you are concerned

4.1 If you become aware of any potential criminal activity involving the movement, forced labour or sexual exploitation of adults or children please contact Lerwick Police on 101 or in an emergency 999. The Police will investigate any potential criminal activity and will liaise with SIC Social Work and NHS Shetland if they are concerned about the welfare of any adult who has been trafficked.

4.2 An adult or child may tell someone that they are being exploited in some way. If that happens please contact the Police on 101 or the Duty Social Worker on 01595744400 so that safeguarding measures can be put in place.

Information about trafficking has come to light when an adult or child has been receiving services (e.g. medical, dental) or when the adult or child has chosen to tell someone they trust (a neighbour, a workmate, a friend, a church minister or church member)

Community Safety & Resilience Board

Report Title - Performance Against Local Policing Plan 2014-2017.
Presented by –Chief Inspector Eddie Graham

1.0 Overview/Introduction

- 1.1 To provide an update to Committee Board on the progress with reference to the objectives outlined in the Shetland Islands 2014-2017 Policing Plan.

2.0 Background Detail & Content

- 2.1 Performance 2014-2017: A summary of the current performance against the 2014-2017 Shetland Islands Policing Plan objectives is at Enclosure 1. The period covered by the report is between 1 April–30 September 2014. The Area Command is meeting most of the objectives against the Policing Plan and will strive to meet all the objectives within the first year of the 2014-2017 Policing Plan.
- 2.2 Baseline Averages: The official recorded crime statistics are produced by the Scottish Government and to date have not been published. Therefore the baseline average figures provided at Enclosure 1 are provisional and NOT official statistics. The figures have been provided to allow an indication of performance and will be amended with Official statistics once published.

3.0 Proposal/Expected Outcome

- 3.1 Members note and scrutinise the progress made against the objectives set within the Shetland Islands Local Policing Plan 2014-2017.

4.0 Risk Management Implications

- 4.1 Professional. None.
- 4.2 Political. Should the objectives within the Shetland Local Policing Plan not be met there is a risk that there will be a failure in achieving the relevant elements of the Shetland strategic objectives and Single Outcome Agreements; this may negatively impact on the Board's reputation in respect to its ability to deliver its objectives and to hold the Local Policing Commander to account.

- 4.3 Social/Demographics/Community/Customer/Stakeholder Issues.
Should the objectives within the Shetland Policing Plan not be met there is a risk that the quality of life for Shetland's residents will be negatively impacted.
- 4.4 Financial/Economical. None
- 4.5 Legal. None
- 4.6 Physical. None
- 4.7 Contractual. None
- 4.9 Technical. None

For further information please contact:

Name: Chief Inspector Eddie Graham (Area Commander) or Sergeant Judy Hill (Performance Support)

Contact information: edwin.graham@scotland.pnn.police.uk – judy.hill@scotland.pnn.police.uk

Date: 4 November 2014

END

These Data are Management Information only and NOT Official Statistics. Official Recorded Crime Statistics are produced by the Scottish Government

PERFORMANCE AGAINST SHETLAND ISLANDS LOCAL POLICING PLAN 2014/2017- 1 April 2014- 30 September 2014

PRIORITY 1 – Road Safety

GO SAFE ON SCOTLAND'S ROADS ITS EVERYONE'S RESPONSIBILITY- SCOTLAND'S ROAD SAFETY FRAMEWORK TO 2020

Target	2015 Milestone % reduction	2020 target % reduction
People killed	30%	40%
People seriously injured	43%	55%
Children (aged <16) killed	35%	50%
Children (aged <16) seriously injured	50%	65%

(In addition to the above there remains a 10% reduction target in the slight casualty rate to 2020)

Note: All statistics are provisional and should be treated as management information. All data sourced from Police Scotland internal systems and are correct as at published date.

Target	Baseline 5 Year Average	YTD 2013/14	YTD 2014/15	YTD Variation	Context/Narrative
Reduce the number of people killed on the roads in Shetland.	0	1	1	=	There have been no fatal collisions in this reporting period.
Reduce the number of people seriously injured on the roads in Shetland.	5	3	1	-2	There have been no serious collisions in this reporting period.
Reduce the number of children (aged<16) killed/seriously injured on the roads in Shetland.	0	0	0	=	
Increase the number of people detected for drink/drug driving offences.	20.2	15	24	+ 9	This figure includes failure to provide a specimen
Increase the number of people detected for speeding.	43.4	41	75	+ 34	Support has been provided by the Road policing Unit during September who visited for a period of 4 days. In addition work is ongoing to link with the Junior Road Safety Officers around speeding issues.
Increase the number of people detected for mobile phone offences.	12.6	17	8	-9	

GPMS Classification: **NOT PROTECTIVELY MARKED**

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Increase the number of people detected for seat belt offences.	31.2	32	8	-24	
Conduct a Driving Ambition Campaign at each of the High Schools within a 12 month period.	Driving Ambition has been carried out with S5 and S6 pupils in Anderson High School and Brae High School in September 2014. This included inputs from Scottish Fire and Rescue Service, Scottish Ambulance Service, Elaine Skinley- Shetland Islands Council Road Safety Officer and a mechanic from Jim's Garage on vehicle maintenance. Feedback from pupils on the half day event has been very positive.				
Participate in all Police Scotland Road Safety Campaigns.	<p>In this reporting period the following campaigns have been ongoing:</p> <p>August- National Motorcycle Campaign- Operation Zenith.</p> <p>September- Seatbelt Campaign (8th-14th September)</p> <p>October- Getting Ready for Winter Campaign (6th-12th October)</p> <p>Campaigns planned for November and December:</p> <p>November- Brake National Road Safety Week – Vulnerable Road Users (17th-21st November)</p> <p>December- Festive Drink/Drug Drive Campaign (5th December- 2nd January)</p>				
Trunk Road/Divisional Policing Units to conduct a targeted motorcycle campaign each Spring.	Motorcycle campaign- Operation Zenith was concluded in September 2014.				

GPMS Classification: **NOT PROTECTIVELY MARKED**

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PRIORITY 2 – The Supply, Abuse and Misuse of Drugs

Target	Baseline 5 Year Average	YTD 2013/14	YTD 2014/15	YTD Variation	Context/Narrative
Over a 3 yearly period conduct a programme of illegal drug awareness activities with all students at each of the High Schools and Junior High Schools in Shetland.	In this reporting period the 'Dogs Against Drugs' team have delivered 4 inputs to over 160 adults and children across Shetland. The most recent event being a New Psychoactive Substance Information day in Islesburgh. A range of partners took part in this event which included Community Alcohol Drug Support Service, NHS as well as Dogs Against Drugs.				
Increase the number of positive stop searches/ confiscations for those possessing drugs.	19	20	20	=	
Increase the number of offences reported for the supply or being concerned with the supply of drugs.	10	4	5	+ 1	
Increase the number of detections by the 'Dogs against Drugs' assets.			12	The 'Dogs Against Drugs' have been deployed 148 times in this reporting period. There have been 4 detections during this reporting period. In addition there was a significant seizure of approximately £10,000 taken under the proceeds of crime act	

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PRIORITY 3 – Protecting People

Target	Baseline 5 Year Average	YTD 2013/14	YTD 2014/15	YTD Variation	Context/Narrative
Increase in reporting of sexual crimes.	11.2	7	13	+ 6	
Meet the Police Scotland detection rate target for Sexual Crimes.	TARGET FOR 2014/15- 78%		100%	+ 22%	
Increase in reporting of domestic abuse incidents.	44.4	49	60	+ 11	Working with partners and utilising the Domestic Abuse Investigation Unit has assisted in supporting victims. The aim is to encourage victims to come forward and report these crimes so that positive interventions can take place.
Meet the Police Scotland detection rate target for domestic abuse.	TARGET FOR 2014/15- 80%		80%	=	
Increase in reporting of Hate crimes		4	4	=	
Meet the Police Scotland detection rate target for Hate crimes.	TARGET FOR 2014/15- 80%		100%	+ 20%	
In support of the Shetland Community Safety Board play an active role in preventative initiatives and campaigns.					

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PRIORITY 4 – Antisocial Behaviour and Alcohol Related Disorder

Target	Baseline 5 Year Average	YTD 2013/14	YTD 2014/15	YTD Variation	Context/Narrative
Licensed Premises Checks		1719	1349	- 370	Officers will continue to be vigilant with licensed premises checks over the coming months/year. Without doubt by working collectively with licensees we are better placed to achieve our primary focus of keeping people safe.
Conduct an annual test purchasing operation.	Planning is ongoing and a test purchase operation is likely to take place in Shetland over the coming months.				
Contribute to the Antisocial Behaviour Working Group initiatives and campaigns.	Workshops are run by the Antisocial Behaviour Co-ordinator, Preventions and Interventions Officer Police Scotland and Mediation. The purpose of this project is to educate new tenants on their responsibilities with regard to their tenancy agreements. In addition Police Scotland run two rolling operations tackling priority 4; Operation Notebook tackles antisocial behaviour in residential premises and Operation Respect tackles antisocial behaviour in and around licensed premises.				
Increase the number of positive stop searches/ confiscations for those possessing alcohol.	3.2	16	7	-9	
Reduce the number of Section 38 Criminal Justice and Licensing (Scotland) Act 2010 Offences.	37	55	29	-26	Threatening and Abusive Behaviour Crimes and Offences
Reduce the number of Breach of the Peace offences.	93.4	87	46	-41	One male is the subject of a lifetime ban through Pubwatch with ten other individuals banned for a year.

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Reduce the occurrences of common assault	87	65	86	+ 21	Crimes and Offences
Reduce the number of premises currently escalated to Stage 3 noisy behaviour through Operation Notebook.	At present there are no premises at Stage 3. Continued positive multi-agency working has meant that identified issues have/are being resolved prior to escalation.				
Number of antisocial behaviour contracts in place.			1		There are currently one antisocial behaviour contracts in place.
Reduce the incidents of vandalism	90.6	52	58	+ 6	This figure includes Malicious Mischief

PRIORITY 5 – Emergency/Major Incident Response and Resilience

Target	Baseline 5 Year Average	YTD 2013/14	YTD 2014/15	YTD Variation	Context/Narrative
Annually review and exercise, in partnership with relevant partners, major incident/facility response plans.	There were three major incident exercises during this reporting period; Islander Two at Tingwall Airport, Inter Island Ferries and Marine and Coastguard Agency, Tidal Flow at Scatsta Airport. Police Officers were present at both airport exercises. The ferries exercise related to a casualty overboard with no requirement for Police participation.				
Number of officers and staff, against an identified skills/training matrix, for dealing with a major incident.	Officers have completed liaison work for oil/gas related incidents. Work continues increasing training for supervisory ranks to undertake Police Incident Officer. This now forms part of the first line manager's course at the Scottish Police College. Two Sergeants have now undergone the Police Incident Officer training module.				
Identify a location for a multi agency incident room.	At present the Police Station can be utilised as the primary multi-agency major incident room. Should this be the subject of the incident for business continuity, 20 Commercial Road will be available, however depending on the scale of the incident i.e. if we suffer a one in twenty five year event, the Town Hall with its IT infrastructure would be the fallback option.				



SCOTTISH
FIRE AND RESCUE SERVICE

Working together for a safer Scotland

North Service Delivery Area

Orkney, Shetland & Western Isles Local Senior Officer Area

Performance Against Local Fire and Rescue Plan for Shetland 2014-17

Second Quarter Report - July to September 2014

3 November 2014

Report Sponsor

Area Manager Billy Wilson

Report Author

Group Manager Mark Loynd

Development of the Three Year Local Operating Plan for Shetland 2014-17

Group Manager Mark Loynd is completing the Scottish Fire and Rescue Service (SFRS) Three Year Local Operating Plan for Shetland. This outlines the specific actions, planned inputs and target outcomes which will be implemented to meet the priority areas which were set out in the SFRS Local Fire and Rescue Plan for Shetland 2014-17.

The Operating Plan is the mechanism through which the aims of the SFRS's Strategic Plan 2013-2017 are being delivered to meet the agreed needs of the Shetland communities. It forms a structure for local quarterly and annual performance reporting, ensuring that members of the Shetland Safety Board can scrutinise local SFRS performance outcomes within the agreed priority areas. The Three Year Local Operating Plan for Shetland 2014-17 is aligned to the Shetland Single Outcome Agreement and the activities of the wider committees and forums which report to the Shetland Partnership.

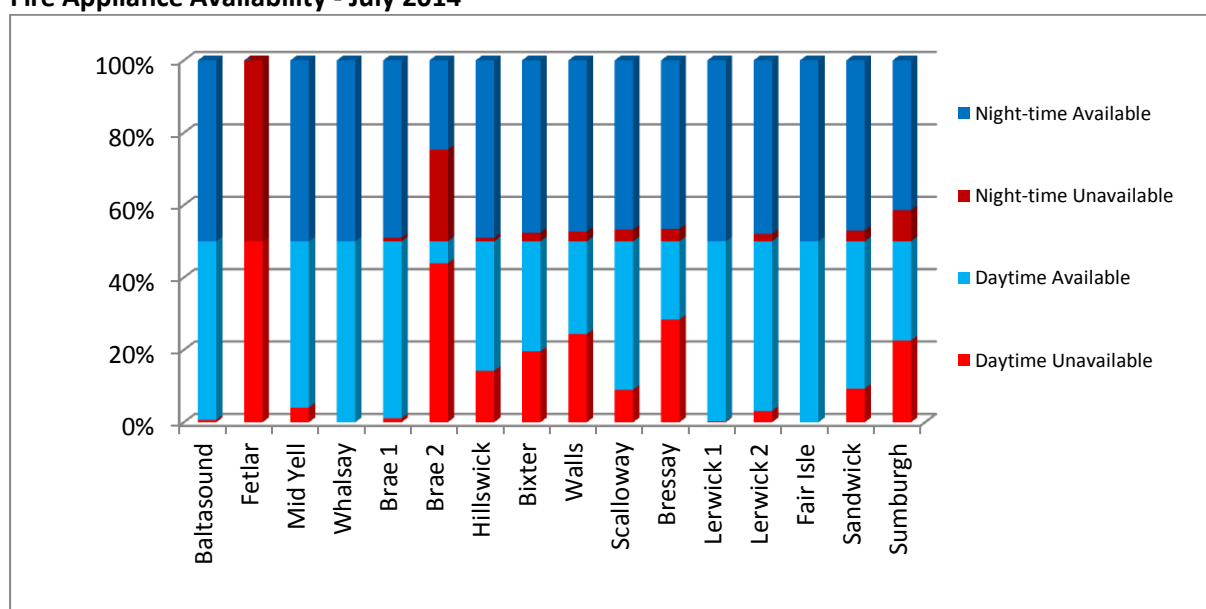
Priority 1 – Local Risk Management and Preparedness

Fire Appliance Availability

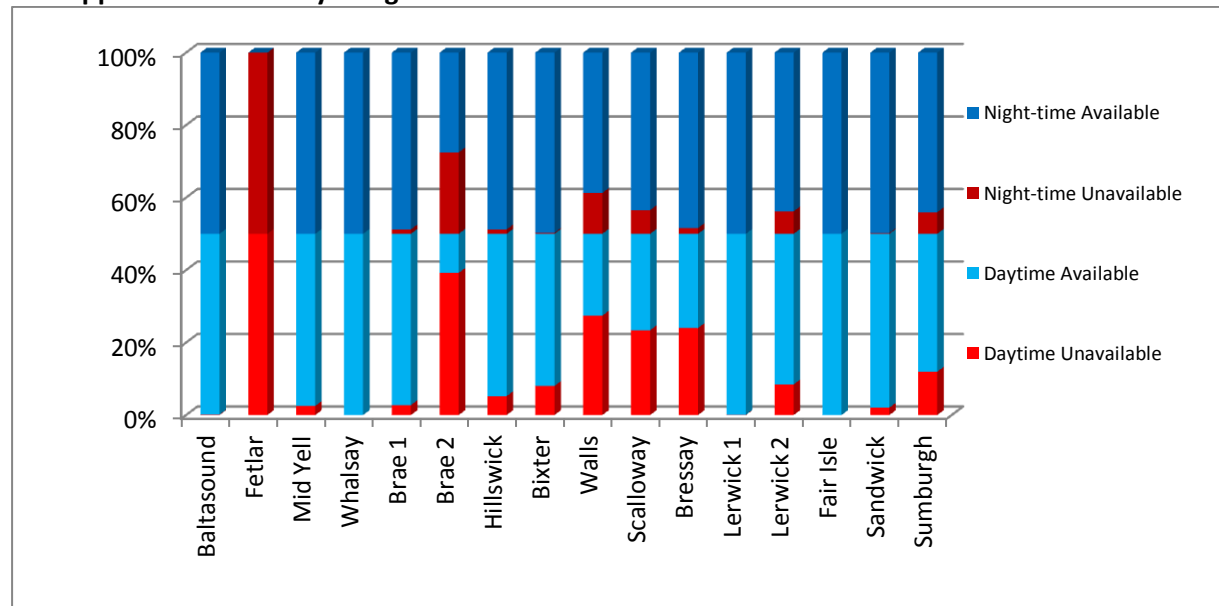
The following bar graphs indicate the operational availability of fire appliances across Shetland during July, August and September 2014. The lower half of each bar indicates the average day-time availability of a fire appliance from 6 am to 6pm across the month. The upper half of each bar indicates the average night-time availability of a fire appliance from 6 pm to 6am across the month. Blue portions of a bar indicate the percentage of time when a fire appliance was operationally available. Red portions of a bar indicate the percentage of time when a fire appliance was operationally unavailable.

Pump availability has remained fairly constant across the second quarter.

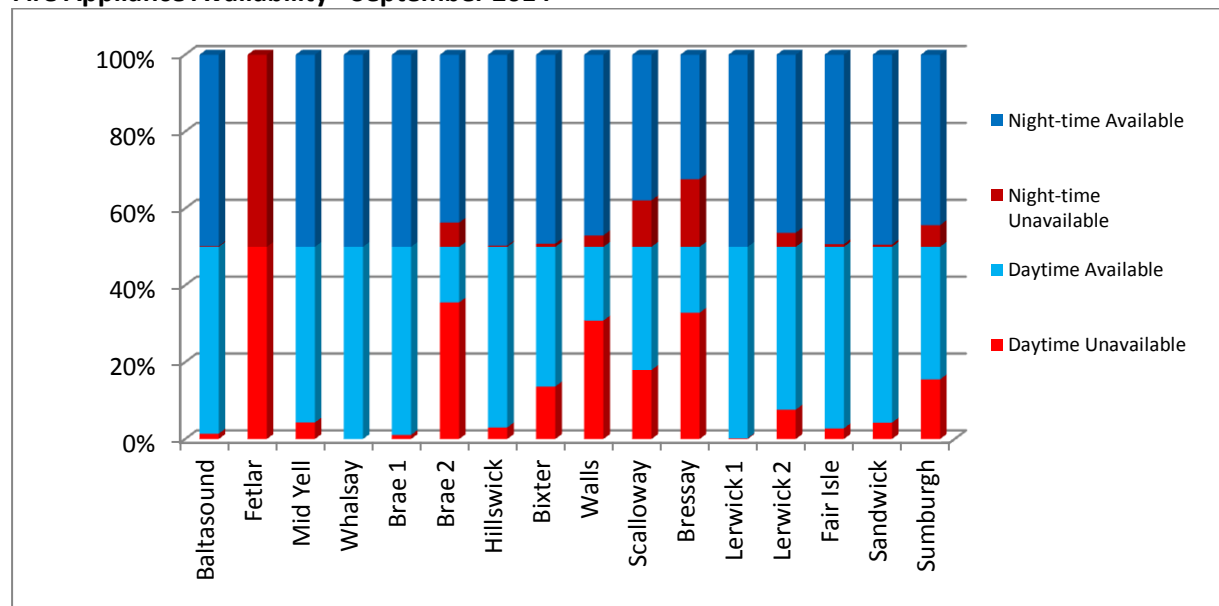
Fire Appliance Availability - July 2014



Fire Appliance Availability - August 2014



Fire Appliance Availability - September 2014



Fire Station Staffing & Recruitment

Since the report to the Shetland Safety Board in August 2014 the Bressay and Walls fire stations have shown an increase in the number of staff. Mid Yell, Bixter, Scalloway and Fair Isle fire stations have each lost a member of staff due to work or family commitments. Crewing levels at the remaining nine fire stations have remained constant.

Interest has been shown by a number of potential RDS Firefighter applicants, but they are yet to engage with the recruitment process.

Fire Station Staffing and Recruitment April to August 2014

Council Ward	Fire Station	Staffing Aug 2014	Staffing Oct 2014	Staffing Change	Full Staffing Compliment	Difference from Compliment	Recruit Applicants
North Isles	Baltasound	10	10	→	12	-2	?
	Fetlar	4	4	→	12	-8	?
	Mid Yell	10	9	↘	12	-3	?
	Whalsay	10	10	→	12	-2	?
Shetland North	Brae	11	11	→	20	-9	?
	Hillswick	7	7	→	12	-5	?
Shetland West	Bixter	10	9	↘	12	-3	?
	Walls	6	7	↗	12	-5	?
Shetland Central	Scalloway	8	7	↘	12	-5	?
Lerwick North & Lerwick South	Bressay	6	7	↗	12	-5	?
	Lerwick	19	19	→	20	-1	?
Shetland South	Fair Isle	7	6	↘	12	-6	?
	Sandwick	13	13	→	12	+1	?
	Sumburgh	9	9	→	12	-3	?

Retained Duty System Recruitment Process Improvements

Following the RDS Recruitment Process Review by Group Manager Mark Loynd, the recommended improvement actions continue to be assessed and implemented where ever possible. Local Senior Officer Billy Wilson is chairing the regional working group which is developing and implementing key improvements. Many of these recommendations require collaboration from the SFRS Personnel and Organisational Development (POD) directorate and the contracted occupational health provider.

Agreement has been reached with the SFRS POD directorate that the confined space training facilities used by Highlands and Islands Airports Limited (HIAL) are adequate for RDS Firefighter recruit testing. HIAL has kindly given permission for SFRS to use its firefighting training rigs at airports across the Highlands and Islands region. This interim arrangement will remove the requirement for a vehicle mounted confined space training rig to be shipped to Shetland and other locations for recruit applicant testing. The result will be an improvement in access to testing and a reduction in financial costs. It is planned that SFRS will install its own confined space training rig in Shetland within the next few years.

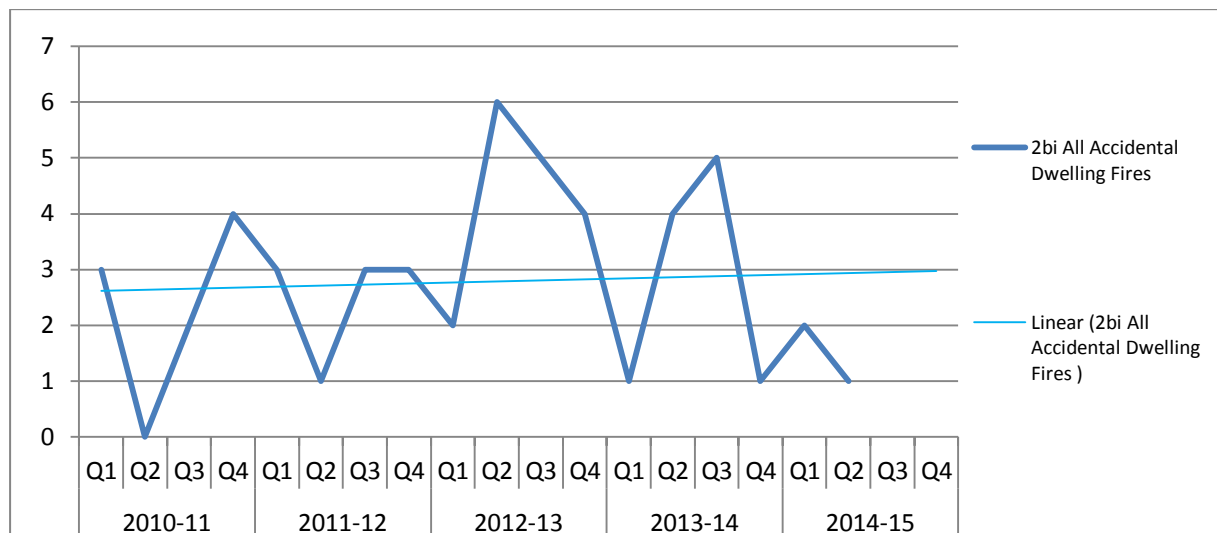
Operational Risk Intelligence Gathering and Review

Station Manager Murray has now completed the review of the Incident Response Plans for Scatsta and Sumburgh Airports. The Scatsta Airport plan was successfully tested during the multi-agency practical exercise “Tidal Flow” held on 30th September.

During the first week of September 2014 a SFRS Operational Risk Data Gather visited Shetland. Operational intelligence has now been collated and verified for the Shetland premises which potentially pose the most significant safety risk to attending fire and rescue crews in the event of an incident. The site specific information is now available to the Shetland fire and rescue crews via the Mobile Data Terminals (MDT) installed on each fire appliance. They are also available to remotely located officers who may be supporting an incident. Additional premises have been identified for which operational risk data will be gathered in the near future.

At the local level, the Watch Managers in charge of each of the RDS fire stations in Shetland have been briefed on the latest procedures for reviewing and gathering risk intelligence on the smaller premises within their “station ground”. This information will also be uploaded onto the MDTs.

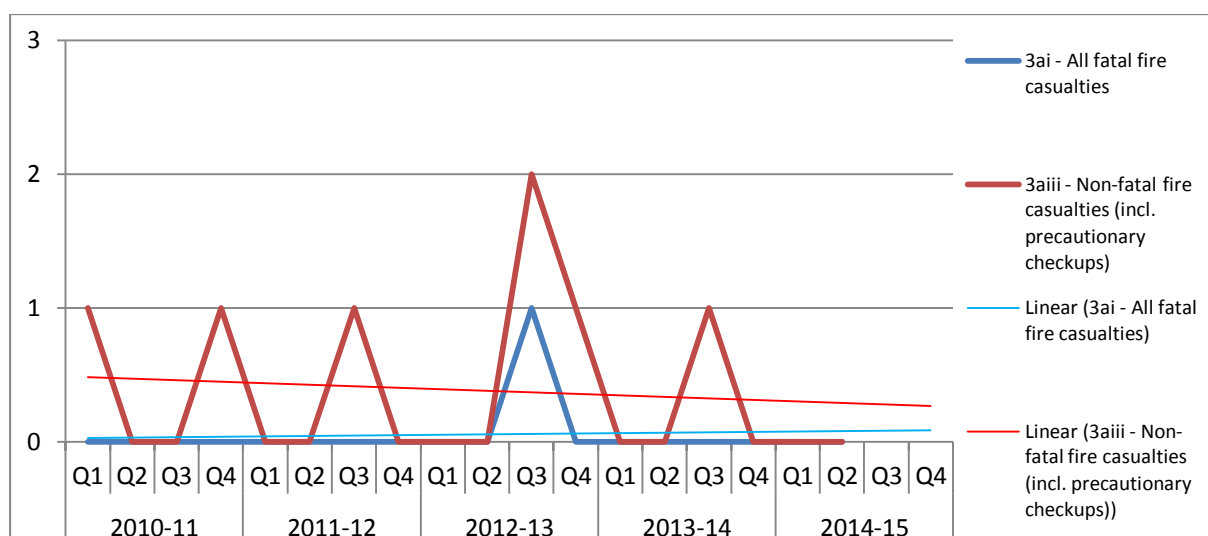
Priority 2 – Reduction of Accidental Dwelling Fires



Dishwasher Fire, Scalloway

SFRS attended one (1) domestic dwelling fire in Shetland during the second quarter. The Scalloway fire crew responded to an address in Scalloway where they found minor fire damage confined to a dishwasher which was extinguished by the time of their arrival.

Priority 3 – Reduction in Fire Fatalities and Casualties



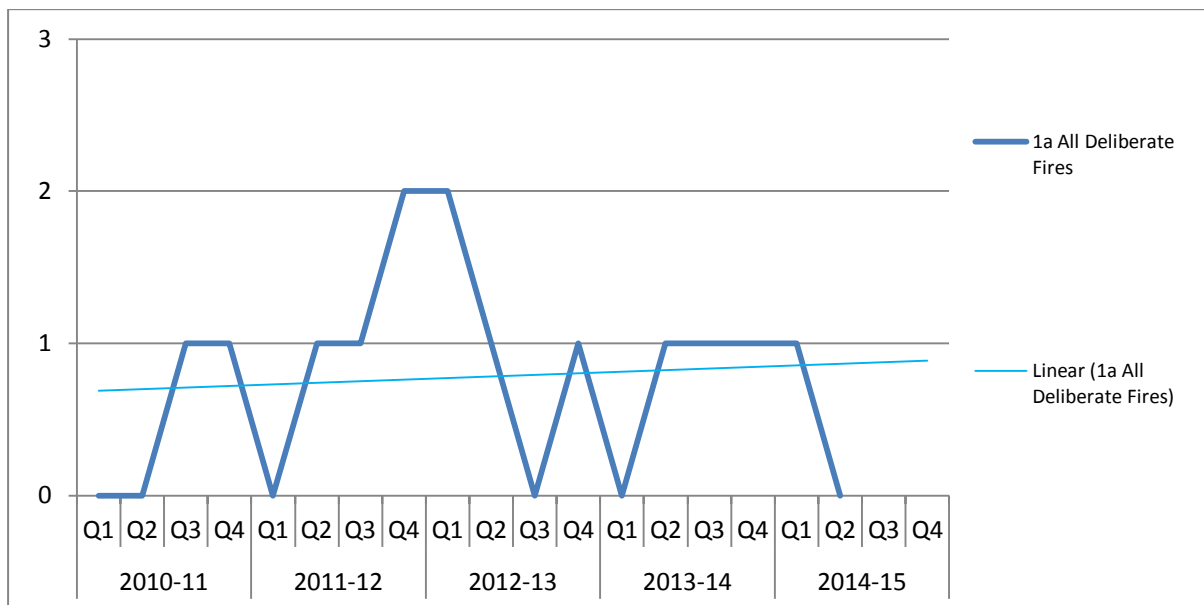
Raising Awareness with Partner Agencies

On 30th September Community Safety Advisor (CSA) Peter Stevenson attended the CADSS Drug and Alcohol meeting. He used the opportunity to identify that he was not receiving as many referrals from local agencies for Home Fire Safety Checks as previously. Peter highlighted the problems that could arise should a fire incident occur involving an at-risk client.

Improving Telecare Services

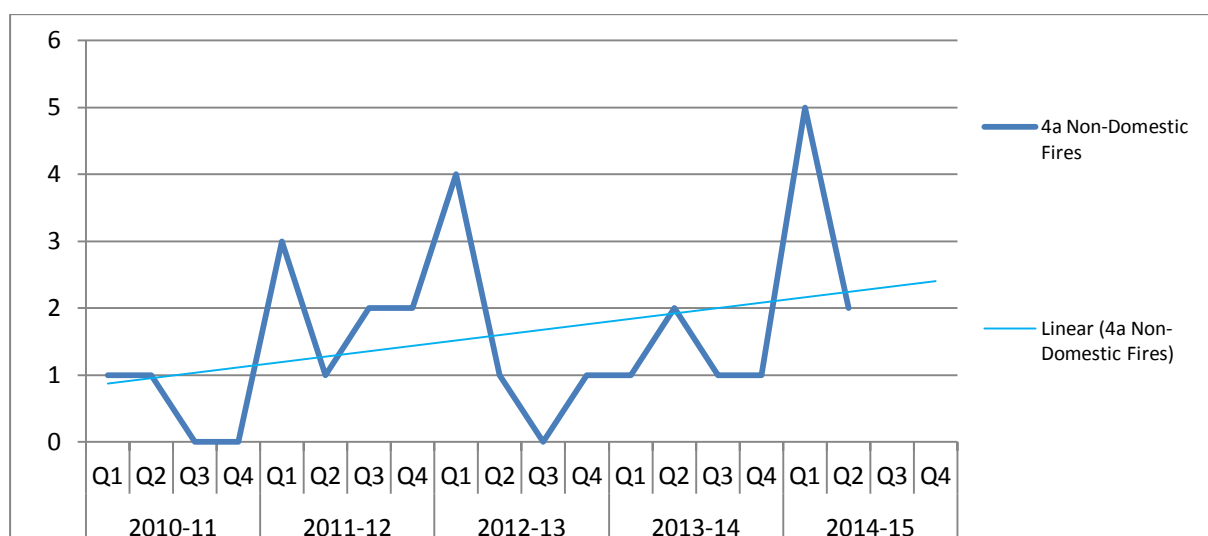
Group Manager Mark Loynd and CSA Peter Stevenson met with managers from Shetland Telecare and Social Services to address some areas for improvement identified by Peter during Home Fire Safety Visits. The Telecare system provides an alerting system which enables the carers of vulnerable people to be informed of an emergency within their home. The system can be interlinked to smoke detectors which automatically initiate a call to the Fire and Rescue Service in the event of a fire being detected in a domestic dwelling. The improvements identified and processes agreed will help to ensure that more effective testing, maintenance and recycling of the Telecare fire detection equipment.

Priority 4 – Reduction of Deliberate Fire Setting



Deliberate fire setting is not a significant problem in Shetland. The vast majority of deliberate fires attended by SFRS in Shetland are controlled burnings which have become out of control. The number of maliciously ignited fires is very low and there have been none within the second quarter.

Priority 5 – Reduction of Fires in Non-Domestic Properties



Non-Domestic Fires

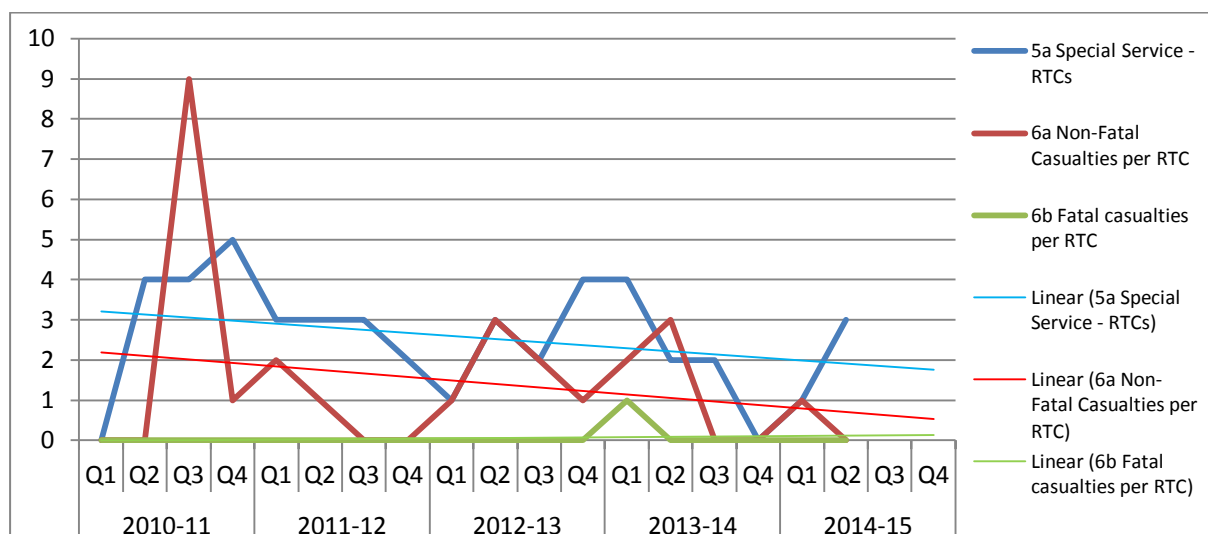
There were only two (2) non-domestic fires in Shetland during the second quarter. One of these was a car in Lerwick which was destroyed by fire causing damage to a second car and a fence. The second was a domestic shed in Scalloway which was destroyed by fire. Neither of these fires occurred in “relevant premises” where the implementation of formal fire safety measures is required - as defined in the Fire (Scotland) Act 2005.

Legislative Fire Safety Enforcement Audits

Ten (10) legislative fire safety audits were completed in “relevant premises” in Shetland during July 2014. These were delivered by two officers from the Highlands and Islands Fire Safety Enforcement Team based in Inverness. There was an initial delay in completing the first quarter fire safety enforcement target of 10.25 audits for Shetland. Following a second visit during mid-October, the team are back on schedule having now completed a total of twenty-eight (28) audits.

Priority 6 – Contribute to a Reduction in Casualties from Road Traffic Collisions and Other Non-Fire Emergencies

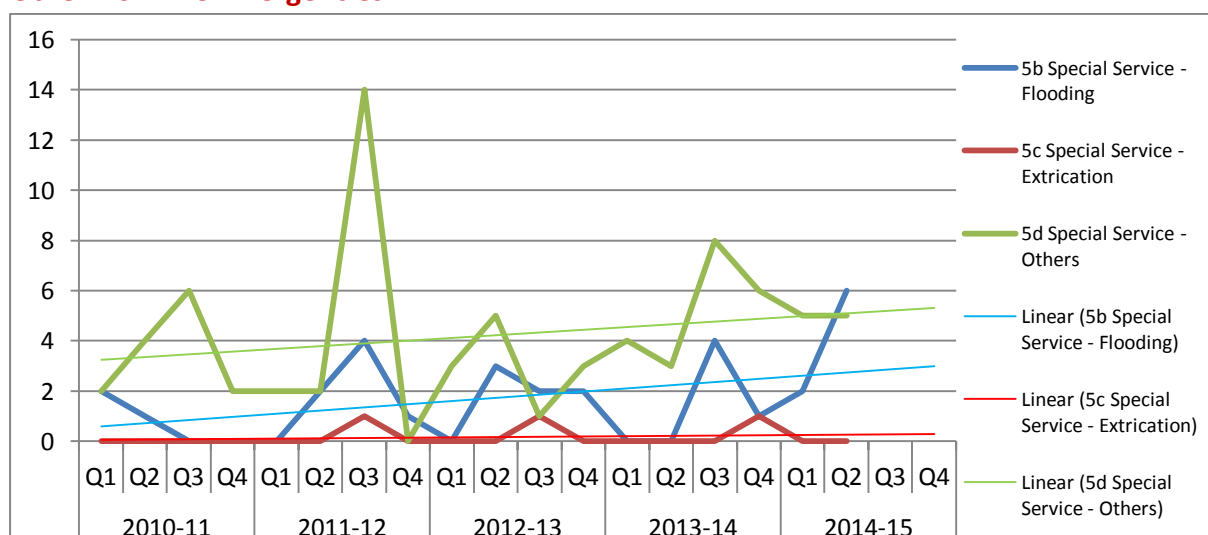
Road Traffic Collisions



“Driving Ambition” Programme for Secondary Six School Pupils

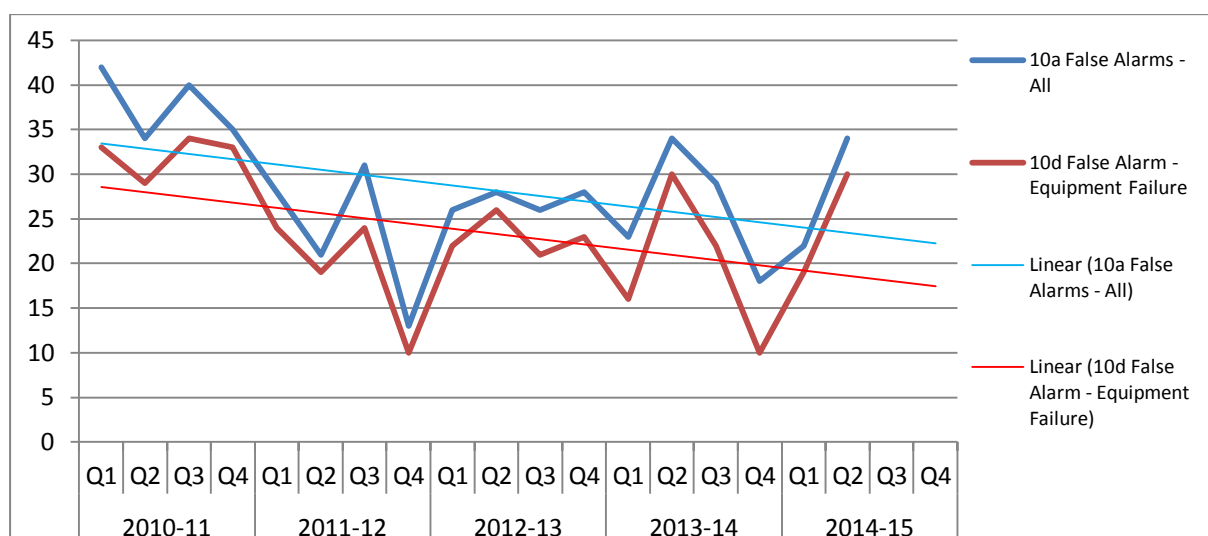
Community Safety Advisor (CSA) Peter Stevenson and Firefighter Graham Nicolson helped deliver Shetland’s second *Driving Ambition* programme along with partners from the Shetland Road Safety Advisory Panel. On 19th September SFRS hosted an event at Brae Fire Station attended by thirty (30) Brae High School pupils. This was followed by a larger event at the Clikimin Centre on 26th September 2014 attended by one hundred and forty (140) Anderson High School pupils. Feedback from the pupils was very positive.

Other Non-Fire Emergencies



SFRS attended six (6) flooding incidents during the second quarter including a spate of five (5) incidents due to heavy rain on the night of the 9th and 10th August. Recent “Special Service - Others” incidents have included a “Full Emergency” at Sumburgh Airport, a leak of ammonia from a fridge in Lerwick, the rescue of persons from a hotel lift and a bird rescue.

Priority 7 – Reduction of Unwanted Fire Alarm Signals



There has been a steady fall in the linear trend of unwanted fire alarm signals received by SFRS in Shetland over the last few years, but a rise during the last two quarters. This rise has not been attributable to any particular “problem” fire alarm systems, but from limited and occasional false alarms across a variety of premises.

During December 2014 SFRS will introduce a new harmonised policy and procedure for dealing with premises where the automatic fire detection system is repeatedly causing unnecessary alarm activations.

Local managers continue to engage with premises occupiers to identify technical and practical solutions to reduce or illuminate the re-occurrence of false alarms.



Scottish Ambulance Service

Shetland

Community Safety & Resilience Board Nov 2014

1.0 A&E Performance:

In **Shetland**, there has been an overall Increase of 1315 (25.2%) incidents compared with the same period last year. April - Oct 13, April – Oct 14

- 7.0% Decrease (11) in Cat A Incidents
- 5 Cat A's less in performance this year (95/100) as the same period last year
- 8.1% Increase (30) in Cat B Incidents
- 9.8% Increase (7) in Cat C Incidents
- 41.5% Increase (291) in Urgent Incidents
- 66.1% Increase (39) in Routine incidents

The location of incidents on the Islands can extend response times. Work is ongoing to increase community first responder and emergency responder schemes.

The North Division Management team are continuing to work with internal and external stakeholders to discuss ways to address this increase in demand particularly around urgent and routine work and to continue to explore alternative pathways of care. An increase urgent and routine work directly impacts on our availability for Cat A life threatening calls

2.0 SAS/NHSS Liaison Group

2.1 Background

Our clinical partnership working between the Scottish Ambulance Service and NHSS is an integral part of the health service activity on Shetland. Before the Ambulance Liaison Group was set up the discussions between NHS Shetland and SAS were undertaken at a front line level and through a Commissioning team route. It was decided to try and widen the involvement of other stakeholders to ensure that discussions and decisions were as representative as possible, and were able to be fed back into the governance structures of both organisations. The Ambulance Liaison Group started meeting monthly from September 2012.

2.2 Membership and roles on group

Andy Fuller (SAS Div Head of Services and Chair since Sept 13)
Carol Colligan (Air Ambulance Nurse Lead)
Catriona Barr (Air Ambulance Medical lead)
Jim Unsworth (Consultant representative)
Edna Mary Watson (Community Nursing lead)
Naomi Reifenberg/ Emma Ramsay (Outer Isles GP representatives)
Elena Mera-Long (Outer Island Nurse Representative)
Roger Diggle (Medical Director)
David Morgan (Mental health lead)
Kate Kenmure (Maternity lead)
Lynda Smith (A&E nurse representative)
Fiona Morgan (Audit lead)
Peter Smith (SAS Team Leader Lerwick)
Steve Munro (SAS Air Wing, Area Service Manager)
Malcolm McLeod (SAS Area Service Manager, Islands)
Emma Reid, SAS (Admin support)

2.3 Key pieces of work undertaken or supported so far

2.3.1 Landing lights on Outer Isles

Following an incident on an outer isle where there was a delay evacuating a patient overnight SAS undertook a full review of landing lights on outer island landing sites. Although the Coastguard, in an emergency, can fly under Search and Rescue (SAR) rules and land anywhere they deem safe, JIGSAW (a subcontracted service medical helicopter service) cannot fly under SAR rules (unless it is specifically acting as a SAR resource) and so could not land in darkness on a landing site without proper lights. This meant that for urgent cases that didn't meet Coastguard emergency criteria, options for evacuation overnight were limited, and sometimes led to delays for the patient.

All the landing site surveys have been now completed by SAS and procedures are in place to light them at night so now patients needing urgent evacuation overnight from the outer isles have an improved service as the JIGSAW resource can be also be used.

2.4 Memorandum of Understanding

Medical evacuation from the outer isles is co-ordinated by the SAS Air Desk. There are occasions when medical evacuation is needed for a patient who is 'walking wounded' but there is no scheduled transport service in an acceptable time frame. A Memorandum of Understanding has been agreed locally whereby the SAS can charter the Islander plane to collect such a patient to avoid the unnecessary use of the Coastguard helicopter. This ensures that the Coastguard helicopter is not tied up unnecessarily and is also a much cheaper option for transfer.

2.5 Air Evacuation flow chart

Ordering an Air Ambulance has historically been a complex process. SAS have put considerable resource into agreeing a flowchart for medical evacuation which covers routine, urgent and emergency categories. This work has included agreeing an enhanced set of situations that JIGSAW can be used for and improving clarity on how to order an air ambulance for transfer in from the outer isles and how to update the Air Desk if the patient's condition changes. This flow chart has been signed off by the Ambulance Liaison Group and has now been implemented. The flowchart covers all steps for both SAS Air Desk staff and requesting clinicians and is expected to resolve a number of issues that have been identified through incidents reported to the group.

2.6 Outer Isles Standard operating procedures

Calls to the Air Desk are unlikely to be handled by anyone with firsthand knowledge of Shetland geography and landing site arrangements. SAS have undertaken a piece of work to update the guidance for the Air Desk staff on the arrangements and specific issues for each of our outer islands. In conjunction with the Air Evacuation Flow Chart this will provide the Air desk staff with the most up-to-date and detailed knowledge they need to plan air evacuations from the islands. This information has been provided by staff on the outer isles and is now in use.

2.7 Updated Ambulance Response times

SAS now report on response times for the Islands in line with the rest of Scotland i.e. 75% of Category A calls within 8 minutes and 95% Category B calls in 19 minutes

2.8 Reviewing Ambulance Liaison incidents

Both SAS and NHS Shetland have an incident reporting system and some incidents which are reported involved the other organisation and so require some partnership investigation and learning. The Ambulance Liaison group have overseen the investigation and outcome of a number of incidents since it started and the group has proved a useful forum to discuss incidents in detail and agree learning outcomes. A summary of these is included below:

3.0 Shared Governance

The Ambulance Liaison meeting allows both organisations to look at governance issues that cross the boundary between them.

Liaison incidents can be raised by either organisation and are investigated by one or both of them, depending on the circumstances. The investigation reports are then reviewed by the group and learning and actions identified. An ongoing Action Log monitors the progress of actions arising from incident investigations.

4.0 Ambulance Liaison Incidents

4.1 Some themes we have identified through reviewing incidents:

- Issues with communication through the Air Desk including local staff not being notified of changes of plans due to priority changes and weather constraints
- Issues with internal communication in NHS Shetland – messages from SAS not reaching the right person.
- Retained versus paramedic crews for particular jobs and how this is planned.
- Equipment issues
- Delays in transfer due to weather or other priorities requiring changes in clinical plans.
- Issues with how air ambulances were ordered eg whether an emergency or urgent request was being made and which number was called.
- Availability of ambulances for PTS transfers and how these are arranged.
- Some onward delays with SAS land ambulance transfer from Aberdeen
- Issues with some maternity transfers including mothers not being able to travel with newborn babies and how late in pregnancy mothers can fly.
- Mutual understanding about mental health admissions and whether a qualified escort was needed.

4.2 Changes/ outcomes from these incident reviews include:

- Shared understanding where there has been a poor patient journey so we can learn and improve.
- The agreement on the Air Evacuation Flow Chart

- Clarification with Bond Helicopters (JIGSAW) on their criteria for transferring urgent patients.
- Completed landing light surveys on the outer islands and protocols implemented.
- Resolution of equipment issues.
- Making sure that all the air ambulance staff in Shetland knows who they can talk to about timings and delays.
- Audit of delays at Aberdeen has not identified a pattern. All staff knows how to upgrade calls if deteriorating patient. SAS looking at introducing a category of request for onward transfer to minimise delays.
- Re-issued guidance on when mothers can fly, and what documentation they need.

4.3 Current Actions from the Group:

- Discussions to invite a lay person onto the group
- SAS National team proposals to standardise all contractors training and Education
- New 4x4 Island specific ambulances delivered to Skerries and Fetlar for SAS/NHSS use
- Red Cross transport being trialled between Toft and GBH – NHSS
- Ongoing training and development of the retained service with new members in the recruitment process

5.0 Outer Islands SOF Update:

Fetlar	Training has progressed with two. The new Islander Caravelle, a shared resource with NHS Shetland is now in place, this will serve as patient transport/mobile clinic/nurse transport.
Skerries	We have a team of 5 here, and training is complete, and we hope to have the new Islander Caravelle in use. This is a shared resource between SAS and NHS Shetland, which will function as patient transport/mobile clinic/nurse transport. Due to arrive on 12 th Nov slightly later than intended due to bad weather
Unst, Whalsay, Yell	Our Contractor in Unst has given notice. Training has taken place during the first week of Nov for 5 recruits and 2 for refresher. There will be another session of training in Jan 15. We are trying to relocate the vehicle to the Baltasound Fire facility and we are in discussion currently. Awaiting

	<p>dates from the GPS to start training and we have now identified defib to relocate for the Drs use.</p> <p>No change to current position in Yell and Whalsay.</p>
Foula	We intend to revisit Foula and initiate contact with the Community Council at the earliest opportunity.
Fair Isle	We intend to revisit Fair Isle and initiate contact with the Community Council at the earliest opportunity.

6.3 PTS Vacancies

One part time Vacancy in Shetland

The North Division Scheduled Care Delivery Team meets regularly on a six weekly basis to review performance against the agreed North Scheduled Care Action Plan.

Only patients with a clinical need for ambulance assistance will be conveyed by the SAS.

Contacts:

Andrew M Fuller Divisional Head of Services

Malcolm Macleod Area Service Manager, Islands

Peter Smith Paramedic Team Leader, Lerwick

**Shetland Alcohol & Drugs Partnership
Community Safety Board Briefing Note**

Issue/Topic:	Alcohol and Drug Partnership
Author:	Karen Smith
Date of meeting:	

The purpose of this briefing note is to provide the Shetland Community Safety Board with concise, clear and easy to read information about the issues you/your respective Partnership/Working Group are responsible for. Please ensure that the briefing note is no longer than one page long.

Background:

The meeting scheduled for Oct was postponed. The next meeting will take place in Dec.

Current Situation:

The redesign of the Tier 3 treatment service has entered the implementation phase. A Team Leader will be appointed from a restricted pool of existing staff by the end of Dec. The rest of the team will be recruited from a restricted pool if appropriately skilled staff are already in employment.

The novel psychoactive substance group has delivered 2 awareness raising sessions and has 2 additional ones planned for before Christmas. A keep safe Christmas message is being planned in partnership with Drink Better.

Shetland has been chosen as a Pilot area for a concessionary travel project. All service users who undertake activities as part of their recovery plan will be entitled to concessionary travel (on public transport).

The annual report 13/14 has been submitted to Scottish Govt. Copies can be found at:
<http://www.shetland-communities.org.uk/sadp>

Key Considerations:

Redesign of treatment Services will involve a number of stakeholders including service users and their families.

Resources may need to be reallocated as part of the redesign. This may impact on service providers.

Conclusions:

Members will be regularly updated on the redesign progress.

**Shetland Domestic Abuse Partnership
Community Safety Board Briefing Note DRAFT**

Issue/Topic:	Domestic Abuse & Gender-Based Violence
Author:	Dr Susan Laidlaw SDAP Acting Chair
Date of meeting:	CSRB – 20 th November 2014
Background: <p>The Shetland Domestic Abuse Partnership (SDAP) is a formal multi-agency approach to addressing domestic abuse and other forms of violence against women. The Partnership feeds into the Shetland Community Safety & Resilience Board (CSRB), the key strategic partnership with responsibility for the <i>Safer</i> strand of the Single Outcome Agreement (SOA).</p>	
Current Situation: Capacity within the Partnership <p>The SDAP is still without a permanent Chair and at present there are still no arrangements in place for officer support to the group, since the Community Safety officer left. Currently no member of the Partnership has the capacity to take on chairing the group with the level of input provided by the previous Chair, and certainly not without the support of an Officer.</p> <p>MARAC The SDAP continues to support the implementation of the Multi Agency Risk Assessment Conference (MARAC) process. In the last quarter (July - September) there have been eight (all female) referrals (one from police and seven from the Independent Domestic Abuse Advisor based at Women's Aid), with fifteen children involved. This brings the total to 37 (36 female, 1 male) referrals since the MARAC was set up last year, involving 37 children.</p> <p>There is now a new MARAC Co-ordinator in post for the remaining current period of funding (until March 2015). Women's Aid continues to provide the advocacy role for women, and support is being sought from a specialist mainland organisation to provide advocacy for men. MARAC in Shetland has been funded to date by the Scottish Government's Violence Against Women (VAW) fund and is due to end March 2015. A self assessment of the MARAC process and function by the Steering group has been undertaken and this along with external evaluation which will support future funding applications.</p> <p>Awareness raising and training No change to the last quarterly report: Work has been done to identify gaps in training amongst relevant staff, particularly 'level 2' training on risk assessment and MARAC referral. Modules are being developed for both the SIC and NHS on-line training systems. However, further development of the training programme is currently postponed. A number of areas for further awareness raising work have been identified including unacceptable behaviour and sexual harassment within the community; and 'keeping safe'. These link with other areas of work within the CSRB.</p>	
Key Considerations: Capacity with the Partnership <p>A number of areas of work remain on hold until a new Community Safety Officer is in post (or there is another mechanism to support the Partnership) and a new Chair can be identified. These include further development and provision of training; development of new local awareness raising campaigns; analysis of data collected by the partner agencies; support for workplaces and other organisations to develop domestic abuse / gender based violence policies.</p> <p>MARAC Current funding runs only until March 2015. The MARAC self assessment and evaluation will be used to support funding applications to continue this valuable work from March 2015 onwards.</p>	
Conclusions: <p>As per the previous quarterly report, the SDAP is currently unable to progress any further development work whilst struggling with capacity. However, the work of the MARAC is being prioritised, to ensure that the individuals at highest risk due to domestic abuse in Shetland are identified and helped to keep safe.</p>	

Antisocial Behaviour Working Group Community Safety Board Briefing Note

Issue/Topic:	November Update
Author:	Billy Mycock
Date of meeting:	10 th September 2014

Background:

This group meets four times a year. All partner agencies are invited to attend and discuss strategic issues relating to tackling Antisocial Behaviour (ASB) in Shetland through the implementation of the PIER model and promoting positive outcomes. (PIER-Prevention, early Intervention, Enforcement, Rehabilitation).

Current Situation:

ASB Information Sharing Sub Group. (ASBIS)

25 cases reviewed (3 new, 8 closed off), 4 ABCs. No further trends at this time.

There is no longer any interest in a young tenant's prevention of vandalism & repairs project due to lack of funding so this is no longer being developed.

Community Bullying Protocol is currently being developed by a short life working group.

Continue to work with:

Noise education programme for young tenants (1st session 19th November).

FAST (diverts young men away from ASB & support positive outcomes)

Midnight Football (hoping to restart in Lerwick & start up in Brae).

Wi Wis Fir Wis Mossbank Participatory Budgeting Initiative.

Key Considerations:

As a group we discussed a more noticeable amount of clients either affected by or causing ASB that have some sort of mental health problem.

Could the agencies consider if they have seen an increase in contact or incidents with those whom may have mental health problems?

We have highlighted this to Kate Gabb chair of the adult protection committee & asked Muriel Forbes from the Mental Health Service to attend our next meeting.

We are also exploring making a link between ASBIS & Adult Protection Interagency fortnightly meetings. (between police, social work & health)

Conclusions:

The best way to tackle ASB in Shetland at the moment appears to be improved information sharing between agencies and more targeted schemes at tackling the underlying issues to ASB.

Road Safety Advisory Panel Community Safety Board Briefing Note

Issue/Topic:	Road Safety Advisory Panel
Author:	Elaine Skinley
Date of meeting:	22 September 2014

The purpose of this briefing note is to provide the Shetland Community Safety Board with concise, clear and easy to read information about the issues you/your respective Partnership/Working Group are responsible for. Please ensure that the briefing note is no longer than one page long.

Background:

The panel was established with the purpose of consultation with interested external parties and to coordinate efforts within the Council to improve road safety.

Current Situation:

- Regular updates are given by the Roads Engineer, Road Safety Officer and the Police in terms of the 4 'E's' of Road Safety. (Engineering, Education, Encouragement and Enforcement)
- A Bus safety campaign is to be developed with Education to promote safe bus usage across Shetland.
- Driving Ambition has been delivered to both Brae High and Anderson High Schools. Both events were well attended and evaluation figures look very positive.
- More work is to be developed on Child Car Seats as the recent Clinic reported 70% of child car seats are incorrectly fitted.
- October Tyre Safety month campaign is encouraging drivers to get their cars ready for winter. The month culminates with a Free Tyre Check in the Lerwick Fire Station on the 28th October. Experts will be on hand to check tyres and give advice on the best tyres to have on their vehicle for the coming winter months. A Winter Safety pack will be given to all attendees, containing tyre gauge, antifreeze, foil blanket etc.
- JRSO's will work with Police officers using the speed gun in their communities. It is hoped to progress this work in November once the schools return after the October break.
- A joint Mobile Phone campaign will be run for a week in November, with Police Scotland Officers and the SIC Road Safety officer handing out leaflets to drivers. A social media campaign will run alongside this.

Key Considerations:

To improve safety on Shetlands roads and decrease casualty numbers in line with National Casualty Reduction Targets.

Conclusions:

Road Accidents impact negatively on all levels of the community and realising a reduction in accidents is recognised as a major community priority.

The Road Traffic Act (1988) (Section 39) places a duty on local authorities to provide a programme of measures to promote road safety.

The Scottish Government's publication "*Scotland's Road Safety Framework to 2020*", details the new tighter targets expected of Scotland's road safety units.

In response, the SIC will work hard to keep up the high standards of joint working applied to our initiatives and campaigns in an attempt to meet these new tighter targets.

**Shetland Alcohol & Drugs Partnership
Community Safety Board Briefing Note**

Issue/Topic:	Alcohol and Drug Partnership
Author:	Karen Smith
Date of meeting:	

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Background:

The meeting scheduled for Oct was postponed. The next meeting will take place in Dec.

Current Situation:

The redesign of the Tier 3 treatment service has entered the implementation phase. A Team Leader will be appointed from a restricted pool of existing staff by the end of Dec. The rest of the team will be recruited from a restricted pool if appropriately skilled staff are already in employment.

The novel psychoactive substance group has delivered 2 awareness raising sessions and has 2 additional ones planned for before Christmas. A keep safe Christmas message is being planned in partnership with Drink Better.

Shetland has been chosen as a Pilot area for a concessionary travel project. All service users who undertake activities as part of their recovery plan will be entitled to concessionary travel (on public transport).

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<http://www.shetland-communities.org.uk/sadp>

Key Considerations:

Redesign of treatment Services will involve a number of stakeholders including service users and their families.
Resources may need to be reallocated as part of the redesign. This may impact on service providers.

Conclusions:

Members will be regularly updated on the redesign progress.

**Shetland Domestic Abuse Partnership
Community Safety Board Briefing Note DRAFT**

Issue/Topic:	Domestic Abuse & Gender-Based Violence
Author:	Dr Susan Laidlaw SDAP Acting Chair
Date of meeting:	CSRB – 20 th November 2014
Background: The Shetland Domestic Abuse Partnership (SDAP) is a formal multi-agency approach to addressing domestic abuse and other forms of violence against women. The Partnership feeds into the Shetland Community Safety & Resilience Board (CSRB), the key strategic partnership with responsibility for the <i>Safer</i> strand of the Single Outcome Agreement (SOA).	
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Community Safety Board Briefing Note**

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Author:	Elaine Skinley
Date of meeting:	22 September 2014

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