

Shetland Community Safety & Resilience Board

21st February 2019

Council Chambers, Town Hall, Lerwick

10am-12pm

Agenda

1. Welcome & Apologies
2. Previous Minutes & Matters Arising
3. Shetland Domestic Abuse and Sexual Violence Strategy
4. Strategic Planning & SCSN Support *(to follow)*

Police Scotland

5. Performance Against Local Policing Plan

Scottish Fire & Rescue Service

6. Performance Against Local Fire & Rescue Plan

Emergency Planning & Resilience

7. Resilience Activity *(to follow)*

Coastguard

8. Coastguard Verbal Update

Scottish Ambulance Service

9. Scottish Ambulance Report

For Information

10. Road Safety Advisory Panel
11. Road Safety Strategy & Action Plan 2019- 2022

AOCB

12. COSLA Consultation on Fireworks

Dates of Future Meetings:

16th May 2019

22nd August 2019

14th November 2019

Community Safety & Resilience Board Meeting

Held on 7th November 2018 in the Lerwick Fire Station

Item

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Present:

| | |
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| Cllr Allison Duncan | SIC (Chair) |
| Cllr Stephen Coutts | SIC |
| Cllr Beatrice Wishart | SIC |
| Cllr Duncan Simpson | SIC |
| Iain McLeod | Scottish Fire & Rescue Service |
| Matt Mason | Scottish Fire & Rescue Service |
| David Farris | Scottish Fire & Rescue Service |
| Ralph Roberts | NHS |
| Dr Susan Laidlaw | NHS |
| Angus Galbraith | Scottish Ambulance Service |
| Ian MacKay | Scottish Ambulance Service |
| CI Lindsay Tulloch | Police Scotland |
| Insp Martyn Brill | Police Scotland |
| Ingrid Gall | Emergency Planning & Resilience |
| Rachel McDill | Community Planning & Development |
| Alex Garrick-Wright | Community Planning & Development (mins) |

Apologies

| | |
|----------------------|----------------------------|
| Cllr Alastair Cooper | SIC |
| Cllr Malcolm Bell | SIC |
| Andy Fuller | Scottish Ambulance Service |
| Jan Riise | Governance & Law |
| Elaine Skinley | Roads |
| Maggie Sandison | Chief Executive |

1. Welcome & Apologies

Cllr Duncan thanked everyone for coming and opened the meeting. Apologies were read.

2. Previous Minutes & Matters Arising

There were no objections or changes to the minutes. CI Tulloch proposed adoption of the minutes, Cllr Duncan seconded.

3. Community Planning to liaise with SAS regarding registration of defibrillators.

Cllr Duncan asked about the issue of who maintains the defibrillators on islands without doctors. Angus said that this is ongoing; while agencies maintain their own defibrillators, community-purchased ones sourced through charities such as Lucky 2 B Here are more ambiguous. Work is ongoing to establish who has responsibility for their maintenance.

5. Coastguard to provide figures for emergency landings at Tingwall Airport.

Errol provided these as part of the Coastguard verbal report.

Cllr Duncan asked how the Coastguard would be changing their report to align with the Local Outcome Improvement Plan; Errol replied that he did not know how this would need to be formatted. Cllr Duncan asked that Errol liaise with Alex as to the format of the CG report for future meetings.

Cllr Duncan asked about the outcome of the upturn in Fire Officer applicants referred to in the minutes. Iain noted that, due to a number of factors, applicants are not always successful in becoming FOs. Matt added that it was a good outcome; all 8 applicants passed the most significant test and will be entering training in February 2019. Weather meant that the applicants from Fetlar were unable to get off the island; the SFRS are sending trainers to Fetlar instead. Cllr Duncan commended this.

Cllr Duncan asked about the Driving Ambition; CI Tulloch said that this is ongoing and has been very successful. It is part of a national campaign and will continue to be delivered annually.

3. Scottish Fire & Rescue Service

Iain explained that the SFRS departments on the Western Isles, Orkney and Shetland were the first in Scotland to receive the new Rapid Response Units, which are outfitted with advanced and much safer fire-fighting technology. Of the 6 distributed to those areas, Shetland received 2 (for Bixter and Bressay). He added that they have received a positive response from the FOs. This is the first time that rural areas have received brand-new equipment ahead of mainland Scotland, and Iain said this is a valuable investment in rural communities.

The SFRS management team has noted that Shetland has the highest percentage of Home Safety Visits to high-risk households in Scotland, which Iain observed was high praise for the approach that Shetland's SFRS are taking.

David explained that he is in Shetland to support the management team; he added that the difficulty is identifying the needs of rural areas in order to properly invest in them. He noted that rural areas all have the same challenges in recruiting, and that staffing methods need to evolve with society. There are a number of things to assist recruitment, including the creation of a whole-time appointment out of the retained posts, which will relieve the pressure on FOs and allow them more time for training and development. The recent move towards training applicants locally has had a notable effect, and David remarked that there is a trend of positivity around the service. Cllr Duncan felt this was very encouraging.

Matt explained that there has been a small increase in non-domestic fires, but this is significantly below the national trend, and work is ongoing to drive this figure down.

There were no casualties from fire in the reported quarter, which Matt suggested was due to the targeted HSV project.

Unwanted Fire Alarm Signals continue to be an issue, and Matt explained that they are working with local businesses to educate and support them at the point of the alarm to prevent future incidents.

The SFRS Shetland recently presented 4 officers with medals for 20 years' service, and 7 officers with medals for 30 years' service. Cllr Duncan asked that the congratulations and thanks of the CSRB be conveyed to the recipients of these awards.

Ralph asked how far the FO role has been developed towards a more preventative one; David recognised that there is more the SFRS can do to evolve the FO role. He explained that employers have signed up to an old vision of what an FO does, so when changing the role it is important to consider the effect on the individual. The SFRS has been consulting with crews to support and extend the role of FO, and negotiations are ongoing about this.

Cllr Coutts commented that, given underemployment in rural areas, there are plenty of opportunities to be seized.

Cllr Duncan asked if there were any plans, given cutbacks to the SFRS, to close or amalgamate fire stations in Shetland; David explained that it would be foolish not to look at the SFRS estate to see what is working and what is no longer required, and for different ways of operating to become more efficient. However, he said there were no plans to close any stations in Shetland.

Cllr Duncan asked if the training facilities in Sumburgh are still being used to train non-Shetland officers. David said that the SFRS has made a huge investment in training facilities in island communities, and each island group now has its own facility. The SFRS are making more of local training.

Iain added that facilities had previously been very restricted on the isles, and that the new approach has been more useful. While there are still vacancies, work is ongoing to fill them, and investment in the self-sufficiency of islands

groups is a key part of this. Matt said that there will be interviews for a rural full-time post this week, which should be a significant benefit once filled.

Cllr Duncan asked if there were any figures as to how much has been saved by this approach; Iain said that he did not currently have figures but could look into it. He noted that the SFRS has spent over £1 million on the Western Isles and Orkney replicating the Sumburgh training facilities, and this has been estimated to save around £150,000 per year.

4. Scottish Ambulance Service

Angus said that the SAS have been in the new Fire/ Ambulance Station for one month, and been made very welcome by their SFRS colleagues. Any teething issues have already been resolved, and Angus thanked the SFRS on behalf of the SAS.

There are ongoing reviews of shift patterns; 4 applicants have applied for paramedic roles, and the SAS will hopefully be up to full recruitment around Christmas.

The First Responder recruitment scheme is ongoing, with recruits currently in-training. There is currently one specialist paramedic, who is currently on the day-to-day vehicle, but the SAS are looking for funding to recruit a new paramedic for that ambulance in order to free the specialist up.

The SAS received 888,000 calls; of those, only 20% were regarding someone seriously unwell. The SAS are working with the A&E department to reduce the amount of people brought to hospital unnecessarily; Angus commented that freeing up the specialist paramedic would help.

There is still ongoing work with the outer and north isles; Angus explained that they are changing the way that staff are paid in Yell, and that the SAS is waiting on paperwork before moving ahead with this.

Angus said that the first ambulance is operational 24 hours per day, with the second ambulance available 9am-8pm Monday to Friday, and 8am-6pm Saturday and Sunday, with a voluntary rota keeping the ambulance manned out with these hours. There have been 15 shifts where the secondary ambulance has only had a single crew-member (which means it is unable to be used for transporting patients) and one instance where there was no cover. Angus said that in an emergency, the SAS can call in off-duty staff.

A double-crew is available most of the time in the isles, with recruitment ongoing to maintain this. Yell has had additional issues with the changes in pay. The SAS are looking to speak to the Community Councils about recruitment.

The Patient Transfer Service is struggling as only one member of staff is available due to long-term sicknesses. One recruit has started training and will hopefully be operational soon.

Cllr Duncan asked about the use of the Air Ambulance; Angus replied that there are always issues with the Air Ambulance as crews will fly up here near the end of their shift, and will either need to fly back south to change crews, or risk the plane being stuck in Shetland for 12-14 hours. There are only 2 AA planes, and it is important to avoid either of them becoming non-operational by being stuck in Shetland.

Cllr Duncan asked about availability on Foula; Angus explained that the SAS has been in discussion with the nurse on Foula, but nobody has come forward as interested. The SAS cannot station someone on Foula, and without local interest it is hoped that the nurse will take on the role. If the nurse is unavailable, then a helicopter would need to be sent for a call-out.

Cllr Duncan asked when the official opening of the Fire/ Ambulance Station would be; Iain said that it had been planned to coincide with the CSRB but that this had fallen through. The opening will be in the next few weeks.

5. Police Scotland

Roads

CI Tulloch reported an increase in incidents of speeding, although this can be ascribed to a new detection model. He added that social media is a useful tool for the Police keeping tabs on this issue.

The Police have engaged with Community Councils in the isles to discuss drink driving and hopefully increase their visible presence in island communities. There have not been reports made to the Police about incidents of drink driving, but CI Tulloch hoped that an increased presence in the isles would give locals the confidence to report. While the Police are looking at a deployment model for the isles, CI Tulloch advised that they need the community to report incidents when they happen.

Violence, Anti-Social Behaviour, Alcohol and Drug Misuse

There has been a steady decrease in incidents of disorder and assault.

CI Tulloch said that the Police continue to enforce drug legislation, with similar figures reported to last year. Cocaine use is a current concern, as young people have more ready access to cocaine and may not be as aware of the risks and dangers of it. CI Tulloch has spoken to Matt about the fire risks associated with drug misuse, and the Shetland Alcohol and Drugs partnership- is looking at where best to invest resources.

The Police are writing to all licensees about drug misuse on-premises, offering support and following up with visits. There have been no reports but the Police are aware anecdotally of cocaine use in pubs.

Acquisitive Crime

Incidents of shoplifting and car theft have decreased. There has been a slight increase in house-breakings, although no major instances. CI Tulloch observed that Shetland is receiving more visitors, and the Police are working with shopkeepers to help identify areas vulnerable to theft, providing advice and support.

Protecting People at Risk of Harm

CI Tulloch explained that there has been an increase in reports of sexual crimes, the bulk of which are indecent assaults, but that domestic abuse incidents have decreased. He said that MARAC is a significant factor in the increased confidence to report.

There has been an increase in hate crimes, but CI Tulloch noted that all of these were detected successfully.

Serious & Organised Crime

The Police are working with Children's Services about online safety, and are also focussing on fraud prevention.

Counter-Terrorism and Domestic Extremism

The Police continue to participate in the government's PREVENT strategy, and CI Tulloch recently attended the Emergency Planning Forum which covered this area.

Recruitment

CI Tulloch reported that the Police are struggling to fill the 4 sergeant vacancies they currently have, which is delaying 5 officers awaiting transfer to specialised roles. These roles are being occupied at the moment by constables, but the promotion process takes some time, so promoting local officers into the roles is not an easy fix.

There has been a recruitment push, and CI Tulloch is focussed on putting across that Shetland is an attractive place to live and work. The officers who transfer here benefit from the wide variety of experience that they get in this community, and have found it valuable for developing career skills.

Cllr Duncan asked about the school liaison officers; CI Tulloch explained that each school has an assigned liaison officer, who link with Elaine at SIC Roads to promote road safety.

Cllr Duncan asked if there was a breakdown in the calls about speeding. CI Tulloch advised that the speeding figures include calls about driving behaviour. Each report from the public is followed up, a statement taken, and corroborating evidence sought.

Cllr Duncan asked about licensed premises; CI Tulloch said that the Pubwatch scheme has been operating in Lerwick for 2-3 years and is very effective. Efforts have been made to encourage rural licensees to sign up to Pubwatch; Police Scotland have offered to coordinate this, and they are awaiting responses from licensees.

Cllr Duncan noted that there was a difference in the stop & search figures; CI Tulloch said he would need to look at this more closely, and will follow up with Cllr Duncan.

Cllr Duncan asked if there were any figures that explain where incidents of online fraud originate from. CI Tulloch explained that none have been identified as originating in Shetland; some are from Scotland (these are usually eBay-based frauds), but the majority originate overseas. The best thing the Police can do is give advice on how to operate safely online, as it is extremely difficult to detect these crimes on a local level. Figures breaking these incidents down can be provided.

Cllr Duncan asked about the use of security scans at Sumburgh Airport, in terms of terror prevention. CI Tulloch noted that the Police do not conduct security searches, as this is done by the airport's security officers. However, if there is an intelligence-led reason, the Police will provide support to airport security.

Cllr Wishart, noting that she is a trustee of Women's Aid, asked about the drop in domestic violence incidents, and asked if this was a genuine decrease or if people were being more reluctant to report. CI Tulloch hoped it was the former; the detection rate for this type of offence is over 90% in Shetland, and he hoped this would inspire confidence in people to come forward. However, there is no way to definitively say what the cause of this change in figures is. The Police receive positive feedback from Women's Aid but CI Tulloch advised that they are careful not to become complacent.

Cllr Duncan advised that, the day before this meeting, he had attended the COSLA Police Scrutiny Convener's Forum in Glasgow. He explained that he had been surprised by the volume of calls and incidents that Police Scotland deals with annually (over 3 million calls and 1.2 million incidents per annum, with incidents taking 3-5 years to resolve on average). He also invited the new Chief Constable, Iain Livingstone, to come to visit Shetland on behalf of the CSRB and CI Tulloch. CC Livingstone has never been to Shetland before and accepting, saying he was looking forward to it. The visit will be sometime in 2019.

CI Tulloch will discuss some local issues with CC Livingstone such as staff retention and housing, which CC Livingstone is already aware of. CI Tulloch is keen to make the point that living costs in Shetland are 30% higher than on mainland Scotland, but that there are many advantages to officers coming to work here, including the high standard of education, high detection rate, and level of partnership working.

There are a number of police houses which are now in need of refurbishment. CI Tulloch has made the housing situation a priority, and has been working closely with SIC Housing to find a solution.

6. Coastguard

Errol reported that over the last 3 months, the Shetland CG has dealt with 512 incidents: 180 in August, 82 in September and 150 in October. There has been 23 helicopter landings, with 1 in Tingwall and the rest in Lerwick. There are currently 4 vacancies for Maritime Operations Officers, with 5 applicants due to be interviewed in November.

7. Emergency Planning & Resilience

Ingrid explained that her main focus will be on the upcoming cruise ship exercise arranged for 27/03/2019. This is a joint exercise with Inverness, the Western Isles and Orkney, facilitated through the UHI's videoconferencing and coordinated by Inverness. This approach has been used successfully before. Police Scotland will be involved from a counter-terror perspective.

The exercise will be held in the Town Hall, and will focus on a counter-terror and mass evacuation of cruise ships scenario. The exercise is named Exercise Safe Stack. Invites will be sent out in due course.

Ingrid reported that work is underway on civil contingencies regarding the UK's exit from the European Union ('Brexit'). The NHS has already started work on their own post-Brexit resilience. Ingrid is questioning the Scottish Government about this; a meeting next week with all major services is planned which will inform the SIC approach. This may require a new multi-agency group, to address issues such as food and fuel supplies.

Cllr Duncan asked about the audit of the Business Continuity Plan. Ingrid explained that this is almost complete; the investigation has finished and they are awaiting the report. The audit has found that some of the plans in place are not up-to-date.

Cllr Duncan advised that CC Livingstone had discussed Brexit at the COSLA meeting; he is also concerned by disruption to food and medicine supplies which could cause civil unrest. There are serious concerns about the need to requisition officers to the south-east or parts of Northern Ireland, and contingency plans are being drawn up.

CI Tulloch added that the Police Scotland project team is also working on Brexit issues, and assured the meeting that the Police will be ready for any eventuality.

8. Roads

Matt reported that the Tyre Clinic was due to be held on 13/11/2018, and asked that everyone spread this information around as much as possible. Alex agreed to share the poster to all partners for further distribution.

9. AOCB

Alex drew attention to the proposed dates of 2019's meetings on the agenda. These have not yet been fixed and Alex asked that if there were any objections that they be passed on so that dates and venues can be booked.

Cllr Duncan thanked everyone for coming and closed the meeting.

Shetland Domestic Abuse and Sexual Violence Strategy 2018-2023

November 2018

Dr Susan Laidlaw, Consultant in Public Health Medicine, NHS Shetland
On behalf of the Shetland Domestic Abuse Partnership

1. Executive Summary

This Strategy sets out how the Shetland Domestic Abuse Partnership (SDAP) will continue to address and prevent domestic abuse; sexual violence and other forms of gender-based violence (GBV) in Shetland over the next five years, by building on the progress made by the previous two Domestic Abuse Strategies 2008-11 and 2013-16. Although this Strategy focuses on the main areas of concern in Shetland: domestic abuse and sexual violence (rape and sexual assault); it does include all forms of gender based violence.

The overarching aim of this Strategy is to reduce the number of children, young people and adults affected by gender based violence, particularly domestic abuse and sexual violence, and to minimise the consequences.

The objectives are:

- To raise public and professional awareness of, and challenges attitudes towards, gender based violence and its consequences on an ongoing basis through a local communications plan, a staff training plan and development of organisational GBV policies.
- To protect and support those who experience or are affected by gender-based violence through:
 - increasing the proportion of people experiencing domestic abuse and sexual violence who report these incidents to the police and increasing the number of detections
 - ensuring the effectiveness and sustainability of the MARAC, including securing long term funding
 - developing and / or commissioning evidence based and cost effective services to meet the needs of the Shetland population.
- To reduce harm to children and young people as a result of gender based violence, through identification of those at risk and provision of appropriate dedicated services.
- To ensure local GBV work is inclusive i.e. including people of any age, gender identity, sexuality, faith, ethnicity, socio-economic background and ability.
- To support the wider local work on tackling the underlying causes of sexual violence and abusive relationships, specifically with children and young people.
- To prevent offending and re-offending through violence reduction programmes and criminal justice work.

A series of short, medium and long term actions have been identified to be included in the Strategy Implementation Plan. A framework of indicators to monitor progress against outcomes is being produced, and will be reported through the Shetland Partnership governance processes and also through the Health and Social Care Partnership.

Further detailed information on national policy context and legislation, the local needs assessment and links to all the reference documents can be found on the [Safer Shetland website](#).

2. Introduction

The Shetland Domestic Abuse Partnership has published two previous strategies, covering 2008-11 and 2013-16, which were primarily concerned with domestic abuse. This Strategy builds on that previous work but aims to tackle both domestic abuse and sexual violence, alongside other forms of GBV. This document and associated action plan sets out how the Partnership will continue to address and prevent domestic abuse, sexual violence and other forms of gender-based violence (GBV) in Shetland over the next five years.

Gender based violence covers:

- Domestic Abuse
- Rape and Sexual Assault
- Harassment and Stalking
- Commercial Sexual Exploitation
- Childhood Sexual Abuse (CSA)
- Human Trafficking
- Harmful Traditional Practices (including forced marriage and female genital mutilation FGM)

Although this Strategy focuses on the main areas of concern in Shetland: **domestic abuse and sexual violence** (rape and sexual assault); it does include all forms of gender based violence. For definitions of domestic abuse and gender based violence refer to Appendix A.

GBV issues can affect both men and women, of any sexuality, but the majority of victims are women and the majority of perpetrators are men. Whilst GBV can affect anybody, the key risk factor is being female, with other factors such as ethnicity, disability, poverty, or other vulnerabilities also increasing the risk. However, because of the increased risk to women and underlying issues of gender inequality, the Scottish Government's current strategy ([Equally Safe](#)) focuses exclusively on violence against women and girls.¹

Any violence against women and children in particular is considered to be a Human Rights issue in terms of gender inequality.

A summary of current national activity can be found in Appendix B of this Strategy and further detail on the national and international context can be found in the reference documents on the [Safer Shetland website](#) and on the Government's [Violence against Women and Girls](#) webpages.

2.1 Local context

The Shetland Domestic Abuse Partnership is a multi-agency partnership that has been running for a number of years (refer to Appendix C for the membership of the group whilst this strategy was being developed).

Within the Shetland Community Planning context, the SDAP has in the past reported to the Shetland Community and Safety Resilience Board, which in turn reports to the Community Planning Board. The Chairperson of the Partnership has also reported to the Chief Officers' Group.

With the change from the Local Outcome Improvement Plan to the Partnership Plan (see below) and changes to the governance of the Shetland Partnership, there will

be changes to the way partnerships, including SDAP, report within the Community Planning framework. This will also be influenced by the introduction of the Integrated Joint Board and the Community Justice Partnership; and the inclusion of 'domestic abuse' as a service within the remit of the IJB, and included in the Joint Strategic Commissioning Plan.

2.1.1 The Shetland Partnership and the Partnership Plan

The Shetland Partnership is made up of a wide range of partners and community bodies who work together to deliver our collective ambitions for the future. It is the Community Planning Partnership for Shetland. Previously there have been specific actions related to domestic abuse in Partnership's Single Outcome Agreement, and latterly in the Local Outcome Improvement Plan (LOIP).

During 2017 the LOIP was reviewed and developed into [Shetland's Partnership Plan](#). The vision for the Plan is: *"Shetland is a place where everyone is able to thrive; living well in strong, resilient communities; and where people and communities are able to help plan and deliver solutions to future challenges"*

Whilst there is no specific mention of domestic abuse or gender based violence in the high level Strategy, there is a priority entitled '*People: Individuals and families thrive and reach their full potential*'

By addressing this priority, the desired outcomes for Shetland are that:

- The number of disadvantaged people and households in Shetland will be considerably reduced as a result of people being enabled and empowered to address the issues they face and helping others to thrive in the same way.
- The Shetland Partnership will be prioritising prevention and working with households and communities to provide innovative solutions to the issues they face.
- Shetland will continue to be a safe and happy place, with more people feeling connected to their communities and benefitting from living in good places and keeping active.

Although no elements of GBV are mentioned specifically, tackling domestic abuse, sexual violence and other forms of GBV as described in this strategy will clearly contribute to achieving these outcomes. This strategy follows the underlying consistent themes in the Partnership Plan of partnership working, prevention, tackling inequalities, empowerment and community engagement and responsibility.²

2.1.2 Domestic Abuse: Multi-agency Risk Assessment Conference (MARAC)

The MARAC has been running in Shetland since 2013 and is the key process for supporting and protecting people at the highest risk of domestic violence. The MARAC is currently partially funded by the Government's Violence Against Women and Girls programme. To date MARAC has not been a statutory responsibility but there have been indications that this may change in Scotland.

There is a Core Group that meets regularly to undertake the conferences; and up until April 2016 there was a local Steering Group that reported to SDAP. The process was co-ordinated locally through the Shetland Islands Council: initially within Community Safety and then Child and Adult Protection. However, since April 2016, the process has been co-ordinated through Safer Highland, although the

Conferences are still held locally. The local Steering Group has been merged into the Partnership.

2.1.3 Rape and Sexual Assault

The Domestic Abuse Partnership has expanded its remit to consider the issue of rape and sexual assault. In 2015, a sub-group of the Partnership (The Rape and Sexual Assault Working Group) was set up to progress work on tackling the apparently increasing numbers of sexual assault and harassment in Shetland. The group then began working with Shetland Rape Crisis, when this local service was set up by Rape Crisis Scotland in 2016.

In early 2017 there was considerable political and media interest, both local and national, in the issue of provision of forensic medical examination for the victims of sexual assault. At this time, NHS Shetland was not able to provide round the clock provision of a forensic examination service and sometimes victims had to be flown south for the examination. At the same time there was significant ongoing regional and national work looking at the delivery of both custody healthcare and forensic medicine across Scotland.

As a result, NHS Shetland developed plans to improve custody healthcare and forensic medicine services, including identification of staff to do this work, sourcing of training, provision of accommodation and equipment; with an emphasis on delivering a trauma sensitive service. This will be alongside partnership working with Shetland Rape Crisis and the local Police.

2.1.4 Community Justice Partnership

Community Justice is about individuals, agencies and services working together to support, manage and supervise people who have committed offences. The local Community Partnership first met in 2016 following the introduction of the Community Justice (Scotland) Act 2016 and the partners are working together to

- Prevent and reduce further offending
- Reduce the harm that offending causes
- Promote social inclusion and citizenship

The CJP wants to work with people to give them the support they need to address the underlying causes of their offending behaviour, but at the same time it must make sure that the needs of victims and witnesses of crime are met. There are a number of programmes for working with people who are perpetrators of gender based violence, however these can be difficult to implement in a small community with limited resources.

2.1.5 Impact on Children and Child Protection

Domestic abuse is highlighted in [Shetland's Integrated Children's Plan](#) as having the potential to seriously harm children and young people. Children can experience domestic abuse or violence in different ways. The abuse might be seen, or it may be heard from a different room, injuries may be seen or distress may be apparent. Domestic abuse is one of the most frequent reasons for children being on the Child Protection Register, along with parental substance misuse, and one of the highest

categories of referrals to the Children's Reporter. There are small numbers of children who go on the Child Protection Register because of sexual abuse, in 2016-17 there were none, and there are low numbers nationally. There are children in Shetland who have been identified as being at risk of child sexual exploitation, but no children required to be registered which indicates that agencies are able to respond to such concerns at a preventative level.

There is currently local work on Adverse Childhood Experiences (ACEs) which include for example experience of domestic violence, being the victim of abuse, being in a household where others are in prison or experiencing drug and alcohol abuse, having a parent with mental health problems. There is now increasing evidence about the considerable psychological and physical health effects of ACEs. The Emotional Wellbeing and Resilience project will span five years and is focused on improving our approaches for those children who are affected by ACEs, along with making Shetland a trauma informed community and improving our children's emotional health and resilience. This will include how we identify children affected by ACEs, how services respond to them, evidence based practice, engaging with children, prevention and changing culture to create a trauma informed community.

2.1.6 Shetland Multi-agency Anti-bullying Framework

This Framework was launched in 2017. Domestic Abuse can be seen as a form of bullying within a relationship (or former relationship) and there are clear links with this domestic abuse strategy. Through the Framework, the Shetland Community Safety and Resilience Board and the Shetland Planning Partnership want to give a strong and clear message that there should be a zero tolerance approach to any form of bullying behaviour that harms children, young people and adults. The focus of the framework is on keeping people safe, supporting those harmed, challenging any form of bullying behaviour and if necessary using appropriate legal measures to tackle bullying behaviour.

3. Aims and objectives

3.1.1 Aim

The overarching **aim** of this Strategy is to reduce the number of children, young people and adults affected by gender based violence, particularly domestic abuse and sexual violence, and to minimise the consequences.

This is to support the Shetland Partnership **vision**: *“Shetland is a place where everyone is able to thrive; living well in strong, resilient communities; and where people and communities are able to help plan and deliver solutions to future challenges”*

3.1.2 Objectives:

- To raise public and professional awareness of, and challenges attitudes towards, gender based violence and its consequences on an ongoing basis through a local communications plan, a staff training plan and development of organisational GBV policies.
- To protect and support those who experience or are affected by gender-based violence through:
 - increasing the proportion of people experiencing domestic abuse and sexual violence who report these incidents to the police and increasing the number of detections
 - ensuring the effectiveness and sustainability of the MARAC, including securing long term funding
 - developing and / or commissioning evidence based and cost effective services to meet the needs of the Shetland population.
- To reduce harm to children and young people as a result of gender based violence, through identification of those at risk and provision of appropriate dedicated services.
- To ensure local GBV work is inclusive i.e. including people of any age, gender identity, sexuality, faith, ethnicity, socio-economic background and ability.
- To support the wider local work on tackling the underlying causes of sexual violence and abusive relationships, specifically with children and young people.
- To prevent offending and re-offending through violence reduction programmes and criminal justice work.

These fit with the [national priorities](#) in the Equally Safe Strategy:

- Scottish society embraces equality and mutual respect, and rejects all forms of violence against women and girls.
- Women and girls thrive as equal citizens: socially, culturally, economically and politically.
- Interventions are early and effective, preventing violence and maximising safety and wellbeing of women and girls.
- Men desist from all forms of violence against women and girls, and perpetrators of such violence receive a robust and effective response

3.1.3 Indicators

Awareness raising

- Number of staff attending training / accessing online course

Protection & Support

- Number and rate of reports of domestic abuse and sexual assault /rape to Police Scotland
- Number and rate of detections of domestic abuse and sexual assault /rape
- Number of referrals and re-referrals to MARAC
- Number of referrals to Womens' Aid
- Number of women supported by Womens' Aid
- Number of women housed in refuge and number who could not be housed there.
- Number of referrals to Shetland Rape Crisis
- Number of adults supported by Shetland Rape Crisis
- Number of patients reporting rape or sexual assault at Sexual Health Clinic
- Number of people identified through routine enquiry in NHS settings
- Number of homeless presentations where applicant is citing reason for homelessness as relationship breakdown; violent or abusive

Reducing harm to children

- Number of children housed in refuge and number who could not be housed there.
- Number of children seen by Women's Aid
- Number of children supported by Shetland Rape Crisis
- Number of children referred for child protection concerns where domestic abuse or sexual violence is an issue
- Number of children on Child Protection Register where domestic abuse or sexual violence is an issue

Inclusivity

- Breakdown of MARAC figures

Tackling underlying causes of violence

- Indicators to be developed

Prevent offending and re-offending

- Indicators to be developed in line with Community Justice Partnership Outcome Improvement Plan.

4. How well do current services meet identified need

4.1 How many people in Shetland are affected by domestic abuse and sexual violence?

It is difficult to assess the true prevalence of domestic abuse and sexual violence in Shetland because many people affected are either unable to present to services, for many reasons, or choose not to. Figures tend to be based on the number of incidents reported to the police, the number of people presenting to specialised services and the number of people identified through routine enquiry or screening. We know that there will be some double counting in these figures, and also under-reporting. When figures increase over time this can be due to either a genuine increase in incidents (which is a poor outcome), or increased reporting (which is a good outcome).

As part of the implementation of this strategy we will be developing more systematic processes for data collection to report on the indicators described above.

4.1.1 Prevalence of domestic abuse - key points

- It is usually stated that around 1 in 4 women will experience some form of domestic abuse.
- WHO figures show that globally, the lifetime prevalence of physical and sexual intimate partner violence and abuse for women is around 30%. It is very difficult to know how many men are affected as reporting tends to be even less than for women.
- In Scotland, in 2016-17, there were 58,000 incidents reported.³ Where gender information was recorded, 79% of all incidents of domestic abuse in 2016-17 had a female victim and a male accused: this is a decrease from 85% in 2007-08. 18% of incidents had a male victim and a female accused, a rise from 13% in 2007-08. These figures imply that more men are now victims, or more men are reporting incidents.
- In Shetland in 2016-17 there were 115 incidents reported to the police, a steady increase from 51 in 2007-08. 50% of these included a specific crime or offence (compared to 47% nationally).
- The rate of reporting in Shetland in 2016-17 was 50 per 10,000 population compared to 109 per 10,000 nationally, approximately 20 incidents.
- In 2017, there were 35 cases discussed at MARAC, which is 38 cases per 10,000 adult women compared to 21 per 10,000 for Scotland. All the individuals were female. There were 62 children involved in these cases.
- In 2017-18, 111 referrals were received by Shetland Women's Aid for their Women's Service. 42 women received specialist counselling and 69 specialist support. 64 referrals were received by the children and Young People's Service. 18 children and young people received specialist counselling sessions and 46 received specialist support. 32 women were supported by the Independent Domestic Abuse Advocate as part of the MARAC process.
- In 2017-18, Shetland Women's Aid supported 4 women and 9 children through the refuge and in 2017-18 and were at capacity for 70% of the year.

4.1.2 Prevalence of sexual violence – key points

- There were nearly 11,000 sexual offences reported in Scotland in 2016-17, the highest level since 1971 when comparable statistics are available.
- More than half were rape, attempted rape and sexual assault.
- However the rate in Shetland (9 per 10,000 population) was the lowest Scotland, the Scottish average being 20 per 10,000.
- Shetland Rape Crisis had 24 referrals and supported a total 51 adults in 2017-18 : including 6 through the Rape Crisis Scotland National Advocacy Project (NAP)
- Shetland Rape Crisis supported two children through NAP in 2017-18.

Further statistics and needs assessment data can be found on the [Safer Shetland website](#).

4.2 Evidence based practice – what works?

4.2.1 Domestic Abuse

There have been a number of reviews and sets of recommendations for dealing with domestic abuse, or intimate partner violence which is an increasingly preferred term.^{4 5 6} The evidence base for the full range of interventions is patchy, however there are some consistent findings which can be applied to the local context.

Prevention

The evidence around prevention tends to focus on attitude or educational change rather than any impact on behavioural outcomes, which can be due to the difficulties in measuring outcomes. Most preventative work focuses on young people but there is limited evidence on what is most effective. Interventions aimed at adults are often awareness raising campaigns, but the evidence of effectiveness of these is inconsistent, some but not all seem to work.

Identification of domestic abuse

There is evidence that routine enquiry, or screening, within specific healthcare settings and situations can improve identification and disclosure of domestic abuse, particularly routine enquiry in pregnancy. There does not seem to be one tool that is better than another, or any specific training programme for staff. However organisational support and policies promote identification and referral. System centred interventions, with some degree of training and supportive materials have been shown to increase referral rates in the short term (in health settings).

Interventions for those who have experienced domestic abuse

A number of interventions have been shown to be effective including advocacy along with a range of skills-based, counselling and therapeutic interventions. Demonstrated outcomes have included reduced rates of intimate partner violence and abuse, increased safety, improved mental health and wellbeing, improved pregnancy and

child outcomes and increased access to community resources. However research in this area has tended to be with specific groups of women, often in refuge accommodation, and not the broad range of people who may be affected.

- Advocacy has been shown to be effective particularly for women who have actively sought help from professional services or are in a refuge setting, can reduce abuse, increase social support and quality of life and lead to increased use of safety behaviours and accessing of community resources.
- Group interventions have been shown to reduce abuse and improve psychological outcomes, including self esteem and coping with stress
- There is some evidence that psychological interventions are effective in reducing depression in women with a history of partner violence. The WHO recommendations for health interventions for intimate partner violence include
 - Appropriate mental health services for specific mental health conditions (either pre-existing or as a consequence of intimate partner abuse)
 - Cognitive behavioural therapy (CBT) or eye movement desensitization and reprocessing (EMDR) interventions are recommended for women who are no longer experiencing violence but are suffering from posttraumatic stress disorder (PTSD).
 - Psychotherapeutic interventions for children affected by intimate partner violence
- Multi-agency case conferences have been shown to have a positive effect on outcomes.

Perpetrators

A range of interventions are available but there is no clear evidence regarding the best approach. The main focus for interventions Individual and group programmes, both short term and long term, have been studied but with no consistent results. However, it is acknowledged that in order to prevent and improve the safety and quality of lives for women and children, perpetrators must be included in intervention work. Most long terms structured programmes will include equipping perpetrators with techniques to better control their behaviour and reactions; helping them learn to communicate more positively with their (ex) partners; improved understanding of the nature of abuse and of appropriate behaviour in relationships; a greater awareness and understanding of the inequalities that exist between men and women; and a more 'positive mindset' about both their relationships and themselves.

4.2.2 Sexual violence

According to the World Health Organisation⁷, the evidence base is extremely limited in terms of effective interventions for **preventing** sexual violence. The evaluation of interventions such as registration of local sex offenders, residence restrictions on sex offenders (e.g. not living near schools) and electronic monitoring of sex offenders suggests they are largely based on myths about sexual violence and coercion, rather than evidence, and have been ineffective in preventing sex crimes or protecting children.

Other approaches have been more successful including:

- Strategies to prevent dating violence among young people in high-income countries have been rigorously evaluated, and some evidence suggests they may be effective.
- Some school-based initiatives in low- and middle-income countries have also demonstrated promise for reducing levels of sexual harassment and abuse, particularly those that use comprehensive, 'whole-school' and community outreach approaches.
- Prenatal and postnatal home-visiting programmes have been shown to reduce the risks of physical and psychological child maltreatment and neglect: these forms of abuse are known risk factors for both sexual violence perpetration and victimisation later in life.
- Other promising initiatives include strategies to promote changes in gender norms and behaviours, and community-based efforts to improve the social and economic status of women.

In addition to the limited evidence for effective interventions, the literature also provides some principles of good practice for **addressing sexual violence**.

These principles include:

Provide a comprehensive response to the needs of survivors

This response should include:

- psychological support (and referral for mental health care if needed)
- emergency contraception
- treatment and prophylaxis for sexually transmitted infections
- prophylaxis for HIV as appropriate
- information on safe abortion
- forensic examination (if a woman decides to pursue prosecution).

Build the knowledge base and raise awareness about sexual violence

This includes using data on prevalence and patterns to engage governments and policy-makers in addressing this issue and convince them of the public health impact and costs of sexual violence.

Promote legal reforms

This includes:

- strengthening and expanding laws defining rape and sexual assault
- sensitising and training police and judges about sexual violence
- improving the application of existing laws.

4.3 What works well in Shetland

The range of services available in Shetland can be found in the [Directory of Services](#) on the Safer Shetland website.

We do have a number of services and initiatives in place currently and planned, that should be effective according to the evidence base described above, and several are indeed working well in Shetland. These include:

- MARAC process - a multi-agency case conference as described in 2.1.2 above.
- Advocacy – there are specialist advocacy workers in both Women’s Aid and Shetland Rape Crisis
- Forensic Medical Examination services - as described in 2.1.3 above
- Psychological support - within Women’s Aid and Shetland Rape Crisis
- Children and Young People’s counselling service at Women’s Aid
- Routine Enquiry in NHS Settings -specifically Maternity and Accident & Emergency Department
- Delivery of workshops in schools by both Women’s Aid (Healthy Relationships and Domestic Abuse awareness sessions with all S3s) and Shetland Rape Crisis (Rape Crisis Scotland National Prevention Programme)

4.4 Gaps in service provision in Shetland

However, there are a number of gaps in service provision which have been identified by the partners within the SDAP.

4.4.1 Capacity

There are capacity issues across all services but specifically

- Refuge capacity - there is currently provision for just one family in the local Women’s Aid refuge, and this could be used by a woman fleeing domestic abuse from any part of the UK.
- Women’s Aid needs increased staff capacity to avoid a waiting list. There is no waiting list for high risk clients and support service currently, but there is still a capacity issue. However there is currently a waiting list for children’s service and adult counselling.
- Shetland Rape Crisis currently has a waiting list for specialist trauma psychotherapy and needs to increase capacity across all its services to meet increasing demand.
- Mental health services for specialist psychological support.

4.4.2 Clear referral pathways

Whilst there is good inter-agency working Shetland, referral pathways are not always clear and consistent.

4.4.3 Training

Training to date has been largely ad hoc and dependant on external funding pots; there needs to be a sustainable rolling training programme, based on best practice and incorporating trauma informed practice.

4.4.4 Prevention

Although there is already input to secondary schools, Women's Aid are keen to deliver preventative work in primary schools, and Shetland Rape Crisis is aiming to increase their capacity for preventative work.

4.4.5 Specialist support services for men affected by domestic abuse

Women's Aid is unable to work with men affected by domestic abuse at present, and therefore we are reliant on national helplines and organisations for specialist support. Victim Support does provide a generic support to victims, but not a specialist domestic abuse service. Shetland Rape Crisis provides services for all genders affected by sexual violence.

4.4.6 Appropriate media reporting

There have been issues with media reporting in relation to gender based violence (and also in relation to the reporting of stories relating to mental health and criminal justice). Being a very small community, media reporting can be an extremely sensitive issue which is exacerbated by the widespread use of social media for commenting on local press stories.

4.4.7 Ongoing work on awareness raising with both professionals and public

Awareness raising is a key underlying activity to support prevention, recognition of GBV and access to services. This has to be ongoing with messages targeted to different audiences. Whilst there has been significant awareness raising work, this has tended to be opportunistic since the loss of dedicated funding for the Partnership. There is a gap in having a planned programme to ensure that both the community and professionals maintain an awareness and understanding of the issues.

4.4.8 Lack of organisational Gender Based Violence Policies

NHS Shetland is the only local organisation with a policy at present, this is based on national guidance for the NHS which is currently being reviewed. In common with many other local authorities, Shetland Islands Council does not currently have a dedicated policy but work is underway to take this forward. The Partnership is not aware of any other local organisations that have such a policy.

4.4.9 Work with perpetrators

There are a number of programmes for working with people who are perpetrators of gender based violence, however these can be difficult to implement in a small community with limited resources. In Shetland we use the Respect programme with men who have been convicted of violence against women. However locally we do not have the resources to work with perpetrators who have not been convicted and referred on a Court Order.

4.5 Funding

There is currently no single budget for domestic abuse and sexual violence services.

Shetland Islands Council and NHS Shetland services and activities are all funded from individual departmental budgets, and not specifically earmarked for GBV work. There are no dedicated staff for this work, but it is picked up within individual remits.

Shetland Women's Aid receives grant funding from the Big Lottery (until 2019), Scottish Government Violence Against Women and Girls (VAWG) Fund and through a Service Level Agreement with the Integration Joint Board. One element of this is for Children and Young people counselling and the other element is for refuge provision and work with adult victims.

Shetland Rape Crisis receives funding from the Government, but no local funding from public bodies.

Survivors of Sexual Childhood Abuse Information and resources (SSCHAIR) has received grants for a number of different funding bodies.

Up until July 2017, the MARAC had been funded through the VAWG fund– which covered management costs at Women's Aid; co-ordination through Safer Highland; a dedicated Advocate at Women's Aid; training and publicity materials. However, VAWG funding has been withdrawn for MARAC and now only funds the Independent Advocacy post.

The co-ordinator role was funded by the Integration Joint Board (Community Health and Social Care services) in 2017-18, and will be funded through to 2019, but there is still an identified gap going forward in the funding required to run the MARAC. However, if MARAC becomes a statutory function then there may be a clearer route for local funding.

5. Actions

These are the key actions to be included in the Strategy Implementation Plan for the next five years.

5.1 Criteria for prioritising actions

Actions have been prioritised based on

- Supporting the individuals most at risk and in need of support / services
- Evidence based practice
- Realistic timescales – based on resources and funding available

5.2 Short term actions (by end March 2019)

- Secure funding for the continuation of MARAC for 2018-19 and beyond.
- Implement locally based forensic medical examination and healthcare services for the victims of rape and sexual assault.
- Develop and implement a communications plan to raise awareness amongst public and professionals, utilising social media and other platforms, in the context of the Safer Shetland Communications Strategy.
- Map current preventative work in schools (and other settings for young people), in context of wider violence reduction education and relationship work to identify gaps and duplication.
- Develop and adopt a gender based violence policy for the Shetland Islands Council.
- Review the NHS Shetland gender based violence policy, including evaluation of its use to date.
- Provide support and guidance (e.g. simple checklists) for organisations not yet ready to adopt a policy.

5.3 Medium term actions (by end October 2020)

- Further development of forensic medical examination and healthcare services for the victims of rape and sexual assault (informed by the work of the Chief Medical Officer's Taskforce and also regional work) to ensure maintenance of high standards and sustainability into the future.
- Through a training sub-group, develop and implement a rolling multi-agency training programme, in line with the NES Transforming Psychological Trauma Framework. This will need to incorporate training needs as a result of changes in legislation (for example inclusion of psychological abuse and controlling behaviour into Scottish domestic abuse law).
- Develop and implement a comprehensive programme for preventative work in both primary and secondary schools (and other settings for young people) covering domestic abuse and sexual violence primarily, along with other elements of GBV (in line with the Curriculum for Excellence). This will incorporate the workshops already delivered by Shetland Rape Crisis and

Shetland Women's Aid and compliment the programmes already being delivered around sexual health, relationships and parenting.

- Develop and implement consistent and clear signposting and referral pathways, including into appropriate mental health services.
- Support other organisations in the development / adoption of a gender based violence policy for their staff and clients.
- Explore feasibility of including a wider range of perpetrators in perpetrator programmes where appropriate

5.4 Longer term actions (by end March 2022)

- Evaluation of training programme.
- Evaluation of the preventative work programme in schools (and other settings for young people).
- Evaluation and ongoing development of communications plan.
- Implementation of evidence based and cost effective interventions for a wider range of perpetrators, if deemed feasible and affordable.

6. References

¹ Scottish Government's Equally Safe Strategy
<https://beta.gov.scot/publications/equally-safe/>

² Shetland's Partnership Plan (2018)
www.shetland.gov.uk/communityplanning/documents/180801SPPforWebFINAL.pdf

³ Police Scotland statistics
<https://beta.gov.scot/binaries/content/documents/govscot/publications/statistics-publication/2017/10/domestic-abuse-recorded-police-scotland-2016-17/documents/00526358-pdf/00526358-pdf/govscot:document/?inline=true/>

⁴ Dr Eileen Scott, NHS Health Scotland (2015) A Brief Guide to Intimate Partner Violence and Abuse
www.healthscotland.scot/media/1166/brief-guide-to-intimate-partner-violence_5466.pdf

⁵ NICE Guidance (2014) <https://www.nice.org.uk/guidance/ph50/resources/domestic-violence-and-abuse-multiagency-working-pdf-1996411687621>

⁶ WHO (2013) Responding to intimate partner violence and sexual violence against women
http://apps.who.int/iris/bitstream/handle/10665/85240/9789241548595_eng.pdf?sequence=1

⁷ WHO (2012) Understanding and addressing violence against women: Sexual violence
http://apps.who.int/iris/bitstream/handle/10665/77434/WHO_RHR_12.37_eng.pdf;jsessionid=FA266EA93F6895A4499497DFBFD850D?sequence=1

Appendices

- A. Definitions of Gender Based Violence**
- B. Current National Work on Gender Based Violence**
- C. Membership of Strategy Group during 2018**

Appendix A Definitions of Gender based violence

The previous Domestic Abuse Strategy contained the following definition of domestic abuse:

“**Domestic abuse** (as gender-based abuse), can be perpetrated by partners or ex partners and can include physical abuse (assault and physical attack involving a range of behaviour), sexual abuse (acts which degrade and humiliate women and are perpetrated against their will, including rape) and mental and emotional abuse (such as threats, verbal abuse, racial abuse, withholding money and other types of controlling behaviour such as isolation from family or friends).”

However, domestic abuse is now often included within a wider range of issues under the heading ‘Gender based Violence’ (GBV).

Gender based violence covers:

- Domestic Abuse
- Rape and Sexual Assault
- Harassment and Stalking
- Commercial Sexual Exploitation
- Childhood Sexual Abuse (CSA)
- Human Trafficking
- Harmful Traditional Practices (including forced marriage and female genital mutilation FGM)

Some definitions have a far greater emphasis on gender (female) inequality and the fundamental issue of male power and female subordination. This is alongside an acknowledgement that men can be victims. Whilst more women than men are victims of all forms of GBV, the difference in rates varies: FGM is solely violence against women but CSA is estimated to affect up to 13% of boys and 30% of girls. It is also acknowledged that under-reporting is often greater for males than females.

The Scottish Government defines **gender-based violence** as:

“a function of gender inequality, and an abuse of male power and privilege. It takes the form of actions that result in physical, sexual and psychological harm or suffering to women and children, or affront to their human dignity, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life. It is men who predominantly or exclusively carry out such violence, and women who are predominantly the victims of such violence. By referring to violence as “gender-based”, this definition highlights the need to understand violence within the context of women’s and girl’s subordinate status in society. Such violence cannot be understood, therefore, in isolation from the norms and social structure and gender

roles within the community, which greatly influence women's vulnerability to violence."

The United Nations uses the terms violence against women, intimate partner violence and sexual violence. Violence against women is defined as:

"any act of gender-based violence that results in, or is likely to result in, physical, sexual or mental harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life."

Intimate partner violence refers to "behaviour by an intimate partner or ex-partner that causes physical, sexual or psychological harm, including physical aggression, sexual coercion, psychological abuse and controlling behaviours".

Sexual violence is "any sexual act, attempt to obtain a sexual act, or other act directed against a person's sexuality using coercion, by any person regardless of their relationship to the victim, in any setting. It includes rape, defined as the physically forced or otherwise coerced penetration of the vulva or anus with a penis, other body part or object".

Appendix B Current National Work on Gender Based Violence

1. Implementation of [Equally Safe: Scotland's strategy for preventing and eradicating violence against women and girls](#)
2. Investment of [funding for prevention and support projects](#)
3. [Strengthening the law](#) to give victims better protection, improve courts' responses, hold those committing these crimes to account and improve public safety

The [Abusive Behaviour and Sexual Harm \(Scotland\) Act 2016](#) modernises the law on domestic and sexual abuse. The following provisions came into force on 24 April 2017:

- introduce a 'statutory domestic abuse aggravator' to ensure courts take domestic abuse into account when sentencing offenders
- give courts power to make non-harassment orders in cases where they cannot do so at present
- require judges to give juries specific directions when dealing with sexual offence cases to help improve access to justice for victims
- extend Scottish courts extra-territorial jurisdiction over sexual offences committed against children to cover the other jurisdictions of the United Kingdom.

The Act also makes provision to:

- create an offence of sharing private intimate images without consent (commonly known as 'revenge porn') with a maximum penalty of five years' imprisonment
- reform the system of civil orders to protect the public from people who pose a risk of sexual harm

Following consultation on domestic abuse legislation in 2016, the First Minister launched the Domestic Abuse (Scotland) Bill in March 2017. The [Domestic Abuse \(Scotland\) Act 2018](#) is intended to better reflect victims' experiences, particularly those who suffer ongoing coercive and controlling behaviour by their partner or ex-partner.

4. Implementation of a [Female Genital Mutilation \(FGM\) National Action Plan](#)

The [Prohibition of Female Genital Mutilation \(Scotland\) Act 2005](#) made it a criminal offence to have female genital mutilation carried out in Scotland or abroad, and increased the maximum penalty from five to 14 years imprisonment. [Scotland's national action plan to prevent and eradicate FGM](#) was produced in 2016 in partnership with Police Scotland, the NHS, councils and third sector organisations. A [year one report on the FGM national action plan](#) was published in October 2017.

5. Delivering increased protection for people trapped in, or under the threat of, [forced marriage](#)

The [Forced Marriage etc. \(Protection and Jurisdiction\) \(Scotland\) Act 2011](#) came into force in November 2011. This introduced Forced Marriage Protection Orders (FMPO) to protect people from being forced to marry, or who are already in a forced marriage. To extend protection to those at risk, [forcing someone into marriage was made a criminal offence in Scotland in September 2014](#).

Statutory and practitioner guidance was produced in 2014. The Statutory guidance describes the responsibilities of chief executives, directors and senior managers in agencies that handle cases of forced marriage and roles and responsibilities, accountability, training, interagency working, information sharing, risk assessment and record keeping.

- [Forced marriage statutory guidance 2014](#)
- [Forced marriage Scottish statutory guidance: supplementary guidance, published 2014](#)

The Multi-Agency Guidance is for frontline staff and volunteers in agencies and organisations who are likely to come across adults, children or young people threatened with, or in, a forced marriage.

- [Forced marriage practitioner guidance, updated 2014](#)
- [Summary multi-agency practice guidelines, published 2011](#)

The Government also produced [guidance to help legal professionals to work with victims of forced marriage](#) sensitively and effectively, and also with other agencies involved with the victim.

6. Establishment of the [Taskforce to Improve Services for Rape and Sexual Assault Victims](#)

This was set up in 2017 by the Chief Medical Officer to consider what improvements were required for healthcare and forensic medical services for those who have experienced rape and sexual assault. The Taskforce intends to:

- drive improvements in the provision of healthcare and forensic medical services for victims of sexual assault
- provide the necessary leadership so that Health Boards commit to deliver trauma informed services to better meet the needs of victims
- reduce unnecessary delays
- address situations where victims have to travel unreasonable distances to be examined
- tackle issues around the availability of female doctors to contribute to the delivery of these services
- consider the HMICS report, HMICS Strategic Overview of Provision of Forensic Medical Services to Victims of Sexual Crime 2017, on current

arrangements for forensic medical examinations in sexual offences cases in Scotland, including the recommendations about consistency in the standards of care and support for victims

- ensure that NHS Boards are meeting the National Standards developed by Healthcare Improvement Scotland

Appendix C Members of the Shetland Domestic Abuse Partnership during 2017 and 2018 who contributed to development of this Strategy.

Ian Bray, Shetland Islands Council, Housing Services

Police Inspector Martyn Brill, Police Scotland

Kate Gabb, Shetland Islands Council, Adult & Child Protection

Linda Gray, Shetland Rape Crisis

Gordon Greenlees, Police Scotland, H&I MARAC Co-ordinator

Wendy Hatrick, NHS Shetland, Public Health

Laura Herculson, SSCHAIR

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Rachel McDill, Shetland Islands Council, Community Planning & Development

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Fiona Morton-Cluness, Shetland Islands Council, Criminal Justice Social Work

Stephen Renwick, Shetland Islands Council

Vaila Robertson, Anderson and Goodlad Solicitors

Leigh-Ann Sinclair, Hjaltland Housing Association

Melanie Smith, NHS Shetland, Health Improvement

Laura Stronach, Shetland Women's Aid

Chief Inspector Lindsay Tulloch, Police Scotland

Councillor Amanda Westlake, Shetland Islands Council

Not all individuals were members of the Partnership throughout the whole period of the strategy development. Not all members attended Partnership meetings, but all had the opportunity to comment on the development of the Strategy and to consult with their respective organisations (where applicable).

SHETLAND ISLANDS - PERFORMANCE AGAINST LOCAL POLICING PLAN 2017/20
01 April 2018 – 31 December 2018

Item
5

PRIORITY – Road Safety and Road Crime

Intention – Whilst working with Partners, enhance Road Safety across the Shetland Area

Objective – Whilst working with Partners, deliver a Road Safety Strategy which focuses on: Challenging Driver Behaviour; Education at the road side and elsewhere; Detection of offences linked to contributing factors of Fatal and Serious Road Collisions; and collectively reducing potential harm.

| Target | | YTD 2017/18 | YTD 2018/19 | YTD Variation | Context/Narrative |
|--|--|----------------|----------------|------------------|--|
| Reduce the number of people killed on the roads in Shetland. | | 1 | 0 | - | |
| Number of people detected for drink / drug driving offences | Shetland Isles – Due to system configurations these figures are not available at multi-member ward level. | 23 | 21 | -2 | Includes failure to provide a specimen |
| Number of people detected for speeding. | | 57 | 107 | 50 | It is disappointing to note this 46% increase in speeding however this is linked to increased proactivity and targeting areas identified to officers by community councils and the public. |
| Number of people detected for mobile phone offences. | | 9 | 15 | 6 | |
| Number of people detected for seat belt offences | | 10 | 13 | 3 | |
| Prevention and Intervention Activity | All school liaison officers are currently in the process of organising road safety sessions at local primary schools. Sessions will take place between now and the end of March and involve information and interactive sessions with primary school pupils covering all aspects of Road Safety and ongoing liaison with Junior Road Safety Officers. From September 2018, dedicated proactive crime car patrols have taken place targeting road traffic crime amongst other crime types. Coverage included outlying areas and islands. | | | | |
| Road Traffic Operations/Campaigns | The Festive Drink/Drug Drive Campaign 2018 ran between 1 December 2018 and 2 January 2019. Police Scotland is committed to achieving the Scottish Government's 2020 casualty reduction targets. Increasing awareness of the risks associated with drink/drug driving supports the Force's efforts to reduce road casualties. The campaign was conducted | | | | |

| | |
|--|---|
| | <p>through a combination of intelligence-led high visibility patrols and static road checks.</p> <p>Four drink drivers were reported in the Shetland area. Over 170 drivers were breathalysed by officers in Shetland during the campaign. Numbers across the Division were slightly down, however there is a trend emerging amongst males in their twenties featuring at a higher percentage than expected.</p> <p>Residents in the remote island groups of Shetland voiced concerns regarding a perceived resurgence in the culture of drink-driving. There are no recorded reports from the public relating to drink driving in these communities, this would indicate there is a reluctance in reporting these incidents to Police.</p> <p>– Interim update this initiative continues to be progressed and work is ongoing with Preventions & Interventions and the local officer. Several periods of activity have taken place although there were no offenders caught during this period.</p> <p>Final arrangements in place to carry out liaison with local secondary schools.</p> |
|--|---|

PRIORITY – Violence, Disorder and Anti-social Behaviour including Alcohol and Drugs Misuse

Intention – With partners, better understand the causes to prevent and reduce instances of Anti-social Behaviour, Violence and Disorder to enhance community safety across the Shetland Area

Objective – Work with partners to share information, support Education, Prevention, Diversionary and Enforcement Measures linked to harmful alcohol consumption; maintain robust procedures around licensed premises; support victims of violent crime by working with partners to improve service provision and prevent repeat victimisation.

| Target | Baseline 5 Year Average | Baseline 3 Year Average | YTD 2017/18 | YTD 2018/19 | YTD Variation | Context/Narrative |
|---|-------------------------------|-------------------------------|----------------|----------------|------------------|---|
| Licensed Premises Checks | | | 821 | 1608 | 787 | 48% increase on same period last year, correlates with a reduction in anti-social behaviour and violence. The Pubwatch scheme has been operating successfully in Lerwick and is supported by all license holder and the Licensing Forum. There are plans in place to develop the scheme out with Lerwick to the rural areas of Shetland. |
| Increase the number of positive stop searches/ confiscations for those possessing alcohol. | | | | | | See Stop and Search details at Antisocial Behaviour / Disorder section below |
| Increase the number of positive stop searches/ confiscations for those possessing drugs. | | | | | | |
| Total number of charges of drugs related offences | 89.2 | 112.6 | 86 | 88 | 2 | Number of detections for Drugs supply, production and cultivation In addition on 12 occasions, packages containing controlled substances have been intercepted prior to delivery. |
| Number of detections by the 'Dogs against Drugs' | | | | 15 | | Police Scotland, in conjunction with Dogs against Drugs resource has scanned 2445 persons entering the Shetland Islands area. |
| Reduce the number of Breach of the Peace/Threatening, Abusive behaviour Crimes | 87.8 | 86.3 | 60 | 51 | -9 | Threatening and Abusive Behaviour Crimes and Offences. Figure well below 5 year and 3 year average. |

| | | | | | | |
|--|--|-------|-----|----|-----|--|
| Reduce the occurrences of common assault | 111.6 | 114.6 | 105 | 84 | -21 | Crimes and offences. Lowest recorded number in 5 years. 20% reduction on same period last year. |
| Reduce the number of premises currently escalated to Stage 3 noisy behaviour through Operation Notebook. | | | | 0 | | Ongoing Partnership working with Anti-Social Behaviour Team and multiple joint agency working ongoing. |
| Number of antisocial behaviour orders in place. | | | | 0 | | Partnership working continues and arrangements are ongoing for Environmental Health to carry out shift briefings in order to raise awareness on their requirements. |
| Reduce the incidents of vandalism | 76.6 | 75 | 81 | 62 | -19 | Includes Malicious Mischief. Below 5 year average figure. During the last reporting period, tasked patrols had been deployed to relevant areas and this is reflected in the 23% YTD reduction. |
| Prevention and Intervention Activity | <p>Police Scotland, in conjunction with Dogs against Drugs, resource have presented to Scalloway Brownies, Anderson High School Hostel, Sound, Whitnass and Hamnavoe primaries and carried out 16 educational visits and presenting to 369 individuals as well as carrying out regular comprehensive scanning of persons entering the Shetland Islands area.</p> <p>Ongoing liaison with premises and educational facilities in Lerwick with regards to drugs awareness.</p> <p>"Bystander" training package delivered to Shetland Drug and Alcohol Forum. This is scenario based showing the circumstances leading to a sexual assault where a number of bystanders e.g. bar staff, door stewards, passers-by apparently had concerns about a situation but decided not to intervene. The DVD then showed how each of the bystanders might have been able to stop the situation developing had any one of them taken appropriate action</p> | | | | | |

| Violence, Disorder & Antisocial Behaviour - Stop and Searches | | | | | |
|---|--|----------------------------|----------------------------|---------|----------|
| | | April 2018 – December 2018 | April 2018 – December 2018 | Victims | % Change |
| | Number of stop and searches conducted (total) | 207 | 47 (22%) | | |
| | Number of statutory stop and searches conducted | - | - | | |
| | Number of consensual stop and searches conducted | - | - | | |
| | Number of consensual stop and searches refused | - | - | | |
| | Number of seizures made | 3 | 3 | | |
| <p>Interpretation – 207 searches were conducted in Shetland over the reporting period. Of this number 47 were positive and resulted in an item recovered and 3 searches resulted in alcohol and/or tobacco being seized.</p> <p>Positive Stop Search – A positive stop and search is when an item is recovered where possession of same implies criminality on the part of the individual being searched or any other; or potentially compromises the safety of that individual or another.</p> <p>A Seizure occurs when – alcohol, and/or; tobacco product, and/or; cigarette papers are surrendered, or are removed from an individual by a Police Officer, for the purpose of safeguarding the health and well-being of that individual or any other, in circumstances where the stop and search tactic has NOT been utilised and no physical search of an individual has taken place.</p> <p>Management Information and data in respect of stop and search can be found on the Police Scotland website via http://www.scotland.police.uk/about-us/police-scotland/stop-and-search-data-publication.</p> | | | | | |

PRIORITY – Acquisitive Crime

Intention – With Partners and Communities, prevent instances of acquisitive crime across the Shetland area

Objective – With Partners, share information, support education, prevention, diversionary and enforcement activity linked to acquisitive crime; develop work with targets – recidivist offenders to reduce reoffending linked to acquisitive crime e.g. Persistent Offenders programme; enhance the use of all media platforms to raise awareness of local and national preventative initiatives.

| Target | Baseline 5 Year Average | Baseline 3 Year Average | YTD 2017/18 | YTD 2018/19 | YTD Variation | Context/Narrative |
|--|--|-------------------------------|----------------|----------------|------------------|---|
| Number of Theft by Housebreaking Dwelling House – house used or fit for domestic purpose Non Dwelling – all roofed buildings used for domestic purpose other than dwellings Other – all roofed buildings not used for residential or domestic purposes i.e. commercial premises | 12.6 | 7.3 | 4 | 12 | 8 | Breakdown – Dwelling House – 4 Non Dwelling – 5 Other - 3 |
| Number of theft by shoplifting | 22.4 | 22 | 20 | 8 | -12 | 60% decrease on same period last year. Figures well below 3 and 5 year average. |
| Number of theft from motor vehicles | 17 | 18.6 | 15 | 6 | -9 | 60% decrease on same period last year. Figures well below 3 and 5 year average. |
| Prevention and Intervention Activity | Festive safety campaign - Police Scotland is dedicated to Keeping People Safe and the advice we shared helped the public do that. By working together and advising on simple precautions we helped to remove the opportunities for criminals to commit crime. Partnership working and running a “pop-up” shop took place in the main shopping hub for Shetland. Passing shoppers were spoken to by Police and Partners and preventative advice given on a range of topics. 60% decrease in shoplifting compared with same period last year. This can be attributed to concentrated prevention and intervention activity and education delivered to retailers. Educating retailers through Crime Prevention advice, “Mystery Shopper” sessions and raising awareness. Dedicated event to raise aware and warn Shetland residents of online/telephone scams – Scambusters – took place during this reporting period. Ongoing liaison with trading standards | | | | | |

PRIORITY – Protecting People at Risk of Harm

Intention – Protect people at risk of harm

Objective – With Partners we will focus on safeguarding communities; with Partners we will address emerging issues through Prevention and Intervention

| Target | Baseline 5 Year Average | YTD 2017/18 | YTD 2018/19 | YTD Variation | Context/Narrative |
|--|--|-------------|-------------|---------------|--|
| Class 2 Crimes -sexual crimes | 14.0 | 16 | 27 | 11 | Enquiries in relation to sexual crimes are focused on positive outcomes for victims of crime and led by their wishes. This figure also includes reporting of non-recent incidents. |
| Domestic abuse incidents | | 98 | 78 | -20 | MARAC is firmly embedded in the Shetland Isles and continued Partnership working ensures victims are supported. |
| Hate Crime | | 1 | 7 | 6 | Care should be taken in the interpretation of emerging trends or percentage changes when dealing with small numbers. |
| Ensure that people who report hate incidents feel satisfied with the response received from public agencies. | <p>Third party Reporting Centres – 10 new centres trained in Shetland over the current reporting period.</p> <p>Hate Crime Champion training completed during November providing Divisional resources who will provide advice and support to colleagues regarding hate crime as well as acting as a conduit to share best practice nationally.</p> | | | | |
| Prevention and Intervention Activity | <p>Over the reporting period there have been 23 reports of missing persons in Shetland.</p> <p>Police investigated 23 reports of missing persons in Shetland during this reporting year. Of this number, 17 related to reports of missing children.</p> <p>Shetland have a local police liaison officer who maintains contact and liaison with the residential units in the area. This role has developed and regular contact has built a good relationship with residential unit(s). Where required this officer also works in conjunction with the missing person co-ordinator who similarly enjoys a good working relationship with residential units. The multi-agency care and risk management process also identifies and manages looked after children who abscond.</p> | | | | |

PRIORITY – Serious & Organised Crime

Intention – With Partners, reduce the threat, risk and harm caused by Serious Organised Crime

Objective – With Partners work to safeguard the Shetland area by taking all opportunities to prevent crime and make the Shetland area a hostile environment for Serious & Organised Crime Groups; to improve outcomes for individuals and communities and reduce offending through prevention, early intervention and diversion; in support of our Partners in the Local Authority and NHS via the Shetland Alcohol and Drug Partnership Strategy we will direct those who are substance dependant towards recovery through prevention, treatment and support services; with Partners work to reduce the instances of substance misuse in our communities

| | |
|--------------------------------------|---|
| Serious & Organised Crime | <p>Divisional Operation - intelligence development and investigation into drug supply and use in educational establishments throughout the Division, including Shetland. All intelligence will continue to be monitored daily and passed to the Local area inspector for proactive approach.</p> <p>Divisional Operation – ongoing investigation into recent online/electronic frauds which have targeted local business/charities and have resulted in the loss of substantial amounts of money in the Division and in the Shetland Area over the current reporting year</p> |
| Prevention and Intervention Activity | Five search warrants executed in the Shetland area, all with a positive result. |

PRIORITY – Counter Terrorism & Domestic Extremism

Intention – Support the delivery of the CONTEST strategy to reduce the threat posed by terrorism and domestic extremism

Objective – Strengthen PREVENT work with Partners and institutions; with Partners, support individuals who are vulnerable to terrorism and violent extremism; strengthen PREVENT work in relation to the internet and Social Media; Effective Multi-agency planning in respect of Counter Terrorism is taking place; Develop our ability to response effectively to any terrorist attack (with a specific focus on emerging high-risk threats, and specialist capabilities).

| | |
|--|---|
| Counter Terrorism & Domestic Extremism | <p>Dedicated Highland and Islands member of staff continues to build links and carry out liaison with members of the community, schools and elected members.</p> <p>Presentation to Shetland Emergency Forum, to Childrens Services, staff at Shetland College, University of Highlands and Islands</p> |
|--|---|



Quarterly Performance Report

Quarter 3 2018-2019 (1 October to 31 December)



SCOTTISH
FIRE AND RESCUE SERVICE
Working together for a safer Scotland

DISCLAIMER

The figures included in this report are provisional and subject to change as a result of quality assurance and review. The statistics quoted are internal management information published in the interests of transparency and openness. The Scottish Government publishes official statistics each year which allow for comparisons to be made over longer periods of time.

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INTRODUCTION

This performance report provides information on our prevention, protection and operational response activities within Shetland over the period Quarter 3 2018-2019, (1st October – 30th December).

The Scottish Government provides an overarching vision for public services. This vision is supported by 16 National Outcomes which demonstrate commitment to creating a more successful country, with opportunities for all of Scotland to flourish, through increasing sustainable growth. The Scottish Fire and Rescue Service (SFRS) can make a significant contribution to improving these outcomes in Shetland by contributing to the Community Planning arrangements in Shetland.

The national priorities for the SFRS are set out in the Fire and Rescue Framework for Scotland (2016).

The SFRS Strategic Plan 2016-2019 outlines how the SFRS will deliver against these priorities and the outcomes against which this delivery can be measured.

The priorities contained within the Local Fire and Rescue Plan for Shetland 2018 reflects the Shetland Community Plan including the Local Outcomes Improvement Plan (LOIP) 2018 to 2028. The LOIP includes a range of key themes focused on delivering improved outcomes for the communities of Shetland.

The key priorities identified in the LOIP are:

- Participation; People participate and influence decisions on services and use of resources
- People; Individuals and families thrive and reach their full potential
- Place; Shetland is an attractive place to live, work, study and invest
- Money; All households can afford to have a good standard of living

The aims of the local Fire and Rescue Service in Shetland are to reduce deaths, injuries and damage to property from fires and other emergency events and to support the development of initiatives aimed at making Shetland a safer and more attractive place to live. We aim to achieve this by working in partnership, being pro-active and targeting our prevention and protection activities to where they are most required, based on evidence.

Within the Local Fire and Rescue Plan for Shetland 2018, four priorities for the local Fire and Rescue Service have been identified;







- Priority 1: Promoting Personal Safety and Wellbeing.
- Priority 2: Non Domestic Fire Safety.
- Priority 3: Unwanted Fire Alarm Signals.
- Priority 4: Emergency Response Preparedness and Community Resilience.




The Local Fire and Rescue Plan defines the activity of the Fire and Rescue Service as it contributes to the *shared* vision of the Shetland Partnership Plan:

“Shetland is a place where everyone is able to thrive; living well in strong, resilient communities; and where people and communities are able to help plan and deliver solutions to future challenges”

PERFORMANCE SUMMARY

We measure how well we are meeting our priorities using 6 key indicators, depicted below

| Key performance indicator | Apr to (& incl.) Dec | | | | | RAG rating |
|--|----------------------|---------|---------|---------|---------|---|
| | 2014/15 | 2015/16 | 2016/17 | 2017/18 | 2018/19 | YTD |
| All accidental dwelling fires | 5 | 11 | 5 | 10 | 2 |  |
| All accidental dwelling fire casualties (fatal & non-fatal (incl. p/cs)) | 0 | 2 | 1 | 4 | 0 |  |
| All deliberate fires | 6 | 1 | 3 | 1 | 3 |  |
| Non domestic fires | 16 | 3 | 7 | 5 | 5 |  |
| Special Services Casualties – All | 7 | 7 | 18 | 13 | 1 |  |
| False Alarms – UFAS | 65 | 47 | 61 | 61 | 64 |  |

| RAG rating - KEY | | |
|---|----------------|---|
|  | RED DIAMOND | 10% higher than the previous YTD period, or local target not achieved |
|  | AMBER TRIANGLE | Up to 9% higher than the previous YTD period, or local target no achieved |
|  | GREEN CIRCLE | Equal to or improved upon the previous equivalent quarter (or YTD period), or local target achieved |

Priority I – Promoting Personal Safety and Wellbeing

Safety and wellbeing of individuals and communities is a primary ambition of the Scottish Fire and Rescue Service.

Unintentional harm, or injuries as a result of fires in the home, road traffic collisions, slips, trips and falls; all impact on the health and wellbeing of the communities of the Shetland Islands.

SFRS is expanding its vision on how it can contribute to reducing injuries and assisting people to live longer and independently in their own homes. SFRS continues to work with partners on the Shetland Islands to ensure a robust referral process is maintained in line with the LOIP enabling us to target and support those most vulnerable from risk.

Accidental dwelling fires can have devastating effects on our community. The SFRS is committed to keeping people safe in their homes. We share information with partners to make sure that the right people get the right information they need, particularly those who are vulnerable due to age, isolation or addiction.

Domestic Dwelling Fire Safety Partnership Working

Our local CSA continued to engage with partner organisations to help in driving down the risk from fire to those most vulnerable in the community.

Domestic Dwelling Fires

There has been a decrease in accidental dwelling fires for the year to date compared to the same period in 2017/18. Although Shetland fire stats are lower than the national average on all aspects, we must and will, ensure that we continue to promote fire safety within the home.

The information on the following pages gives an indication of performance in relation to the following:

- The number of accidental dwelling fires
- The number of accidental dwelling fire casualties and fatalities
- The number of Home Fire Safety Visits undertaken
- The number of casualties as a result of Road Traffic Collisions

Accidental Dwelling Fires

| All accidental dwelling fires (02bi) - number of incidents | | | | | | |
|--|---------|---------|---------|---------|---------|------------|
| | 2014/15 | 2015/16 | 2016/17 | 2017/18 | 2018/19 | Sparklines |
| Shetland Islands | 5 | 11 | 5 | 10 | 2 | |
| North Isles (Shetland) | 0 | 1 | 0 | 4 | 1 | |
| Shetland North | 1 | 2 | 1 | 1 | 0 | |
| Shetland West | 1 | 3 | 0 | 0 | 0 | |
| Shetland Central | 2 | 1 | 1 | 0 | 0 | |
| Shetland South | 0 | 1 | 0 | 2 | 0 | |
| Lerwick North | 1 | 1 | 2 | 1 | 0 | |
| Lerwick South | 0 | 2 | 1 | 2 | 1 | |

All Dwelling Fire Casualties

| All accidental dwelling fire casualties (fatal & non-fatal (incl. p/c's)) - number of Casualties | | | | | | |
|--|---------|---------|---------|---------|---------|------------|
| | 2014/15 | 2015/16 | 2016/17 | 2017/18 | 2018/19 | Sparklines |
| Shetland Islands | 0 | 2 | 1 | 4 | 0 | |
| North Isles (Shetland) | 0 | 0 | 0 | 1 | 0 | |
| Shetland North | 0 | 1 | 0 | 3 | 0 | |
| Shetland West | 0 | 0 | 0 | 0 | 0 | |
| Shetland Central | 0 | 0 | 0 | 0 | 0 | |
| Shetland South | 0 | 1 | 0 | 0 | 0 | |
| Lerwick North | 0 | 0 | 0 | 0 | 0 | |
| Lerwick South | 0 | 0 | 1 | 0 | 0 | |

HFSV Total for Shetland Committee - 2018/19 Q3

CSET Risk

| | High | Medium | Low | Total 2018/19 Q3 |
|------------------------------------|-----------|-----------|----------|------------------|
| No. of HFSVs | 28 | 10 | 1 | 39 |
| No. of HFSVs with Detectors Fitted | 11 | 4 | 1 | 16 |
| No. of HFSVs with Advice Only | 17 | 6 | 0 | 23 |

In order for these visits to genuinely reduce risk, we must ensure that they are targeted towards the most vulnerable in our communities. This is achieved through the application of a risk based approach where the risk is determined on a number of factors and is calculated through the use of the Community Safety Engagement Toolkit (CSET).

The target for Shetland District is 300 visits per year, with 270 to be carried out by the Community Safety Advocate (CSA), and another 30 visits to be carried out by staff from the local stations. Per quarter that target is 75 total, therefore, as you can see we are behind target for this quarter. The Shetland CSA continues to prioritise the most vulnerable within our communities and the proportion of “high” risk visits overall reflects this targeted approach. The SFRS continues to work with partner agencies to generate HFSV referrals.

Home Fire Safety Education for Schools/Children

Operational personnel continue to accommodate requests from schools and other community groups to visit our fire stations. Our staff use these visits as an opportunity to engage with young people, where a fire safety message can be delivered.

Staff continue to use and become familiar with the Community Safety Engagement Toolkit, (CSET), which in addition to being a recording mechanism for these activities, tracks activity across the SFRS. Over time, this will allow for the sharing of community safety engagement good practice across Scotland.

Road Traffic Collisions

To date this quarter there has been one RTC.

Road safety activities in the area include Driving Ambition, which has a focused message of road safety, targeting key groups in the reduction of road related incidents as identified in Scotland’s Road Safety Framework to 2020.

Progress on local fire & rescue plan priorities

Priority 2 – Non Domestic Fire safety

Legislative Fire Safety Enforcement Audits

Fires in Non-Domestic Property can have a detrimental effect on the built environment and the prosperity of the local area. Non-domestic fires are classed as fires which took place in buildings that are not domestic households.

Legislative fire safety audits are managed by a Fire Safety Enforcement Team based in Aberdeen. This arrangement results in peaks and troughs in performance, rather than a “smoothed” performance profile. Progress against the annual fire safety enforcement targets, set out in the prevention and protection plan, are sporadic as the team have to batch together visits in order to carry out a number when attending the islands. No visits were completed in Q3, specialist Fire Safety Enforcement staff will undertake visits in Q4.

Post Fire Audits

Fires in relevant premises will be made the subject of a post fire audit. Written communication will be sent to the duty holder (normally the employer or occupier) within 3 working days of the fire, advising that an audit may be carried out. A full audit will be carried out by an auditor at an agreed time and date, where appropriate, when personal safety has been compromised or when a criminal investigation is required.

Figures for Non Domestic Fires are indicated in the table below.

Shetland Q3 2018/19

| Non domestic fires (04a) - number of incidents | | | | | | |
|--|---------|---------|---------|---------|---------|------------|
| | 2014/15 | 2015/16 | 2016/17 | 2017/18 | 2018/19 | Sparklines |
| Shetland Islands | 9 | 1 | 2 | 4 | 2 | |
| North Isles (Shetland) | 1 | 0 | 0 | 0 | 0 | |
| Shetland North | 1 | 0 | 0 | 1 | 0 | |
| Shetland West | 0 | 0 | 0 | 0 | 0 | |
| Shetland Central | 1 | 0 | 0 | 1 | 1 | |
| Shetland South | 1 | 0 | 0 | 0 | 1 | |
| Lerwick North | 4 | 0 | 0 | 1 | 0 | |
| Lerwick South | 1 | 1 | 2 | 1 | 0 | |

Shetland YTD 2018/19

| Non domestic fires (04a) - number of incidents | | | | | | |
|--|---------|---------|---------|---------|---------|------------|
| | 2014/15 | 2015/16 | 2016/17 | 2017/18 | 2018/19 | Sparklines |
| Shetland Islands | 16 | 3 | 7 | 5 | 5 | |
| North Isles (Shetland) | 1 | 0 | 1 | 0 | 0 | |
| Shetland North | 3 | 1 | 0 | 1 | 0 | |
| Shetland West | 0 | 0 | 0 | 0 | 0 | |
| Shetland Central | 2 | 0 | 1 | 1 | 1 | |
| Shetland South | 3 | 0 | 0 | 0 | 1 | |
| Lerwick North | 6 | 1 | 3 | 1 | 1 | |
| Lerwick South | 1 | 1 | 2 | 2 | 2 | |

Progress on local fire & rescue plan priorities

Priority 3 –Unwanted Fire Alarm Signals

The high level of equipment related false alarms as a proportion of all false alarms continues to be a feature in Shetland. False alarms account for between approximately 47% of all call activity in Shetland during Quarter 3.

SFRS recognises that high levels of UFAS can have a significant impact on our staff and their day-to-day employers. Evidence suggests that UFAS also has a detrimental impact on businesses and the economy.

All UFAS will be primarily investigated by the attending Watch or Crew Manager, leaving the duty holder with appropriate advice and a written copy. Should the premises be involved in further UFAS activity then this would escalate to district involvement, notification in writing and the possibility of a reduction of any pre-determined attendance, within approved guidelines.

A new Pre Determined Attendance Reduction Procedure is about to commence in Shetland which is a result of a new National Policy and Procedure which was implemented at the beginning of the year. This may result in the reduction in the amount of Fire Appliances attending an Automatic Fire Alarm at a specific premise. The aim of this is to reduce the risk to firefighters and communities through a reduction of unnecessary blue light journeys and to provide a standard approach that will assist in determining an appropriate emergency response to Automatic Fire Alarms.

Thus far a total of 18 premises, within Quarter 3 have been identified which will be subject to the application of the Reduction Decision Matrix.

SFRS recognises that high levels of Unwanted Fire Alarm Signals can have a significant impact on our staff and their full time employers. The Prevention and Protection team have examined this issue and we will undertake bespoke plans to improve the overall picture in Shetland.

Lerwick still continues to have a high level of UFAS calls to commercial premises. Operational RDS staff continue to issue advice to the occupier at the time of attending the premises with additional steps having been taken to visit the premises at a later date by Prevention and Protection staff. This will hopefully allow the occupier of the most frequently attended properties to fully understand the implications of a continued response from SFRS. The SFRS UFAS policy will be implemented on offending properties, if deemed appropriate.

The tables below and over gives an indication of figures for UFAS.

Shetland Q3 2018/19

| Unwanted Fire Alarm Signals | | | | | | |
|-----------------------------|---------|---------|---------|---------|---------|------------|
| YTD ward ave. for Shetland | 2014/15 | 2015/16 | 2016/17 | 2017/18 | 2018/19 | Sparklines |
| Shetland Islands | 26 | 19 | 18 | 19 | 26 | |
| North Isles (Shetland) | 1 | 0 | 1 | 0 | 1 | |
| Shetland North | 0 | 0 | 0 | 2 | 0 | |
| Shetland West | 0 | 0 | 0 | 0 | 0 | |
| Shetland Central | 1 | 1 | 1 | 1 | 1 | |
| Shetland South | 1 | 4 | 5 | 0 | 2 | |
| Lerwick North | 17 | 6 | 7 | 8 | 11 | |
| Lerwick South | 6 | 8 | 4 | 8 | 11 | |

Shetland YTD 2018/19

| Unwanted Fire Alarm Signals | | | | | | |
|-----------------------------|---------|---------|---------|---------|---------|------------|
| YTD ward ave. for Shetland | 2014/15 | 2015/16 | 2016/17 | 2017/18 | 2018/19 | Sparklines |
| Shetland Islands | 65 | 47 | 61 | 61 | 64 | |
| North Isles (Shetland) | 2 | 2 | 1 | 0 | 3 | |
| Shetland North | 0 | 0 | 2 | 2 | 4 | |
| Shetland West | 1 | 0 | 0 | 0 | 0 | |
| Shetland Central | 4 | 2 | 2 | 4 | 6 | |
| Shetland South | 9 | 8 | 16 | 3 | 2 | |
| Lerwick North | 38 | 18 | 26 | 34 | 28 | |
| Lerwick South | 11 | 17 | 14 | 18 | 21 | |

Progress on local fire & rescue plan priorities

Priority 4 – Emergency Response Preparedness and Community Resilience

Preparedness

The ability to respond in emergencies effectively whilst ensuring community resilience is a key area of work for SFRS. Considering the operational service on the islands is provided by Retained Duty System Firefighters this means that the service is provided by the community for the community. The SFRS continues to prepare for, and respond to major emergencies. It is essential that we have enough staff with the right skills in the right place at the right time to deliver our services when communities need them.

To achieve this, we have in place an Operational Assurance framework to ensure our firefighters possess the skills, knowledge and expertise to respond to all incidents efficiently with sufficient numbers and appropriate equipment and information. The effectiveness of this framework is assessed annually through a programmed series of Station Audits for each Station on the Islands.

The two new fire appliances are now embedded at Bressay and Bixter stations and form part of the response plans for incidents across Shetland. The introduction of the new rapid response units (RRU's) supported by the state of the art equipment including the ultra-high pressure lance and trauma kit represent a significant investment in both public and fire fighter safety in Shetland.

Further supporting the SFRS transformation process, the rural full time post has now been introduced to assist in the day running of the Shetland district stations and community risk reduction workload. This individual has been recruited from our Shetland RDS staff.

Operational Intelligence

A current review is underway in relation to Operational Intelligence of all risk premises across the Islands. This includes a new information collation system which will help produce a bespoke package available to operational crews in attendance at a premise and will contain all known risk information. We continue to work with partner organisations to ensure effective emergency response plans are developed and tested for identified local risks.

All of the SFRS Site Specific Plans (SSPs) for sites on Shetland have been reviewed and are in place. These have now been updated and communicated to relevant personnel with the documents having been uploaded onto the on-board computer system on each fire appliance.

These plans are being enhanced by the addition of digital mapping and three dimensional views of the sites to assist attending fire and rescue crews.

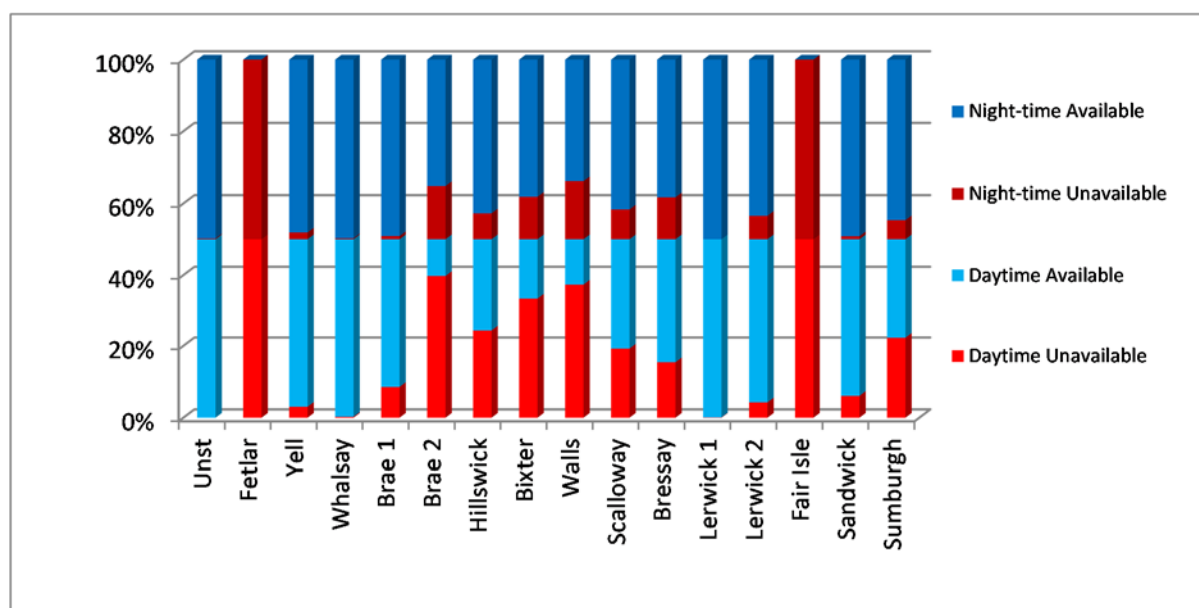
Resilience

We continue to ensure appropriate numbers of staff are recruited, developed and equipped to fulfil the purpose of meeting our current risk profile. A new recruitment drive is underway for all Shetland Stations with awareness sessions in Lerwick and Brae booked for the 3rd & 23rd of March respectively.

The table over gives an indication of current staffing levels

| Council Ward | Fire Station | Staffing Sept 2018 | Staffing Dec 2018 | Staffing Change | Full Staffing Compliment | Difference from Compliment | Recruit Applicants |
|-------------------------------|--------------|--------------------|-------------------|-----------------|--------------------------|----------------------------|--------------------|
| North Isles | Unst | 10 | 10 | → | 12 | -2 | 0 |
| | Fetlar | 2 | 2 | → | 12 | -10 | 0 |
| | Yell | 8 | 8 | → | 12 | -4 | 0 |
| | Whalsay | 9 | 9 | → | 12 | -3 | 0 |
| Shetland North | Brae | 11 | 11 | → | 20 | -9 | 0 |
| | Hillswick | 7 | 7 | → | 12 | -5 | 0 |
| Shetland West | Bixter | 9 | 9 | → | 12 | -3 | 0 |
| | Walls | 5 | 5 | → | 12 | -7 | 1 |
| Shetland Central | Scalloway | 8 | 8 | → | 12 | -4 | 0 |
| Lerwick North & Lerwick South | Bressay | 5 | 5 | → | 12 | -7 | 2 |
| | Lerwick | 20 | 20 | → | 20 | 0 | 0 |
| Shetland South | Fair Isle | 9 | 9 | → | 12 | -3 | 0 |
| | Sandwick | 12 | 11 | ↘ | 12 | -1 | 1 |
| | Sumburgh | 9 | 9 | → | 12 | -3 | 2 |

Station Availability Q3 – Oct – Dec 2018



Retained Duty System Recruitment Process Review

SFRS have reviewed the RDS recruitment process to ensure a smooth and more efficient experience for potential candidates and one which is geared towards the needs of our communities. In addition, the new process makes it easier for us to target specific stations which are most in need of RDS cover.

The new process also means that candidates hoping to serve in remote communities will be able to go through the application process with fewer long distance trips than has previously been the case; reducing the time, inconvenience and expense incurred by applicants and their employers.

This revised RDS recruitment and selection process has been designed to make the process more efficient and provide greater involvement and ownership of local managers for decision making. It reflects requests from local managers and LSOs for greater involvement and efficiency in the process and ensures applicants remain engaged in the process.



OUR PURPOSE

To work in partnership with communities and with others in the public, private and third sectors, on prevention, protection and response, to improve the safety and well-being of people throughout Scotland

OUR MISSION

Working together for a safer Scotland

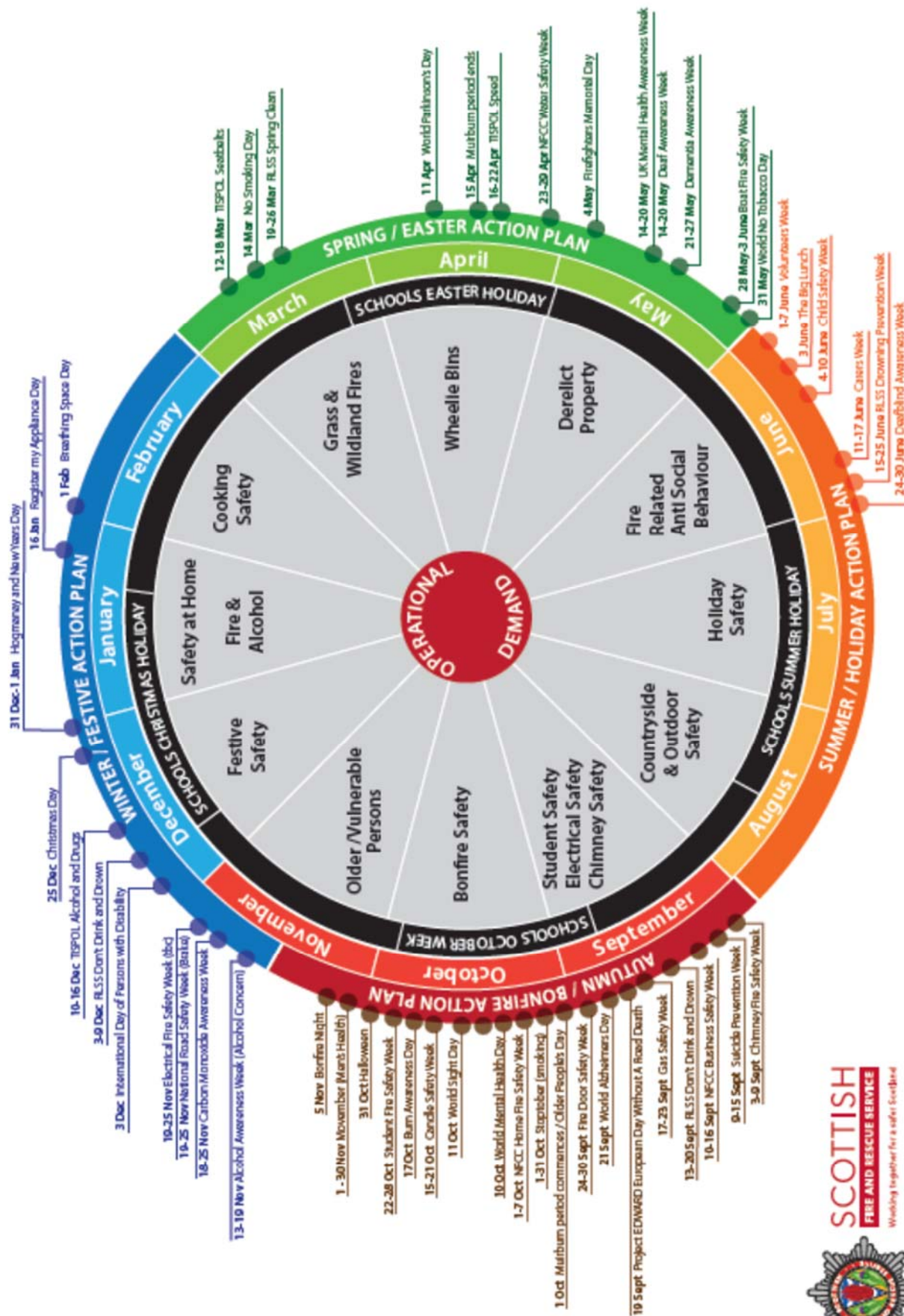
OUR VALUES

| | | | |
|--------|----------|---------|------------|
| Safety | Teamwork | Respect | Innovation |
|--------|----------|---------|------------|

OUR PRIORITIES

| | | | | | |
|-------------------------|-----------------------------------|----------------------|-----------------------|--------------------------------------|----------------|
| Improved Local Outcomes | National and Community Resilience | Modernising Response | Workforce Development | Governance and Social Responsibility | Transformation |
|-------------------------|-----------------------------------|----------------------|-----------------------|--------------------------------------|----------------|

Seasonal Community Safety Calendar 2018





Scottish Ambulance Service

Shetland

Community Safety & Resilience Board February 2019

1.0 A&E Performance:

The Clinical Response Model (CRM) was launched in late 2016 as a 12 month pilot. CRM was developed and modelled with an extensive clinical data set, allowing for a focused review of patients' clinical need and matching this to the Service response, resource and skill. Since going live the model has proven to accurately identify patient groups as predicated, based on their clinical acuity.

CRM aim is to save more lives and improve outcomes. This was demonstrated with an increase in Return of Spontaneous Circulation (ROSC) in the first quarter launch in comparison to the same quarter in the previous year. For patients who require access to an acute pathway i.e. Acute Myocardial Infarction or Acute Stroke Patients, this has been approached in the CRM by sending the right conveying emergency ambulance resource first time; this has been achieved 93.7% of the time. There has been a steady volume of staff feedback to a dedicated email address which has allowed themes to be identified and improvements to operating practice to be made. Since going live there have been no reported Significant Adverse Events.

Phase 2 involved the upgrade to the latest version of our triage software, MPDS. Introduction of dispatch on disposition with resources sent once the clinical coding in MPDS went live October 17.

We now have draft reports on location specific data but this has not yet been verified nationally to be able to release it to a wider audience but hope it will be not too long.

1.1 Actions being taken to improve the ILT Performance

- Yearly review of shift patterns. Implementation of 6 new staff into Lerwick is now complete with the development of a shift to accommodate the staff that maximises shift cover has now been agreed and was implemented in April 18.
- Progress with new Community First Responder Schemes. This is a phased approach due to the resources required to implement these.
- Ongoing dialogue with NHS Boards and NHS24 and IJB around the reasons for increasing SAS Demand and the need to put in place alternative pathways of care to reduce inappropriate admissions to hospital. This is being progressed through the NHS Boards Unscheduled Care Work Streams.
- Continue the development of Specialist Paramedics to increase see and treat and reduce inappropriate admissions to hospital. One locally for Shetland.
- Continue to work with NHS Boards to fully utilise Profession to Profession lines
- Working with partners to fully develop falls pathways for A&E Crews to access along with access to rapid response teams and hospital at home teams with responsive care packages where available. Discussion through Ambulance liaison group and local managed clinical network.
- All daily Immediate Life Threatening calls Out Of Performance are monitored daily for any notable delays in response where reflection and learning can take place. Main delays are still reported as through 'location always out with performance response time / surge demand. Delays in mobilising are still mainly due to staff responding from home locations when on call.

1.2 Actions being taken to improve the YTD Cardiac Arrest Performance

- As outlined in the ILT Performance Section
- Developing new community first responder schemes and working with local communities to install Public Access defibrillators and map these onto the C3 System. Working with Vaila from SIC to encourage local PAD responders to register their defibs with the SAS so they can be identified if required.
- Targeting another resource to attend all Cardiac Arrest calls as well as the initial response

1.3 Actions being taken to improve the Urgent Performance Target

- One staff member in Lerwick undertaking quality improvement methodology training and looking at topics for future projects including conveyance rates to the hospital.
- Progression of new Community First Responder Schemes. This is a phased approach due to the resources required to implement these.
- Ongoing dialogue with NHS Boards, IJB and NHS24 around the reasons for increasing SAS A&E Demand and the need to put in place alternative pathways of care to reduce inappropriate admissions to hospital. This is being progressed through the NHS Boards Unscheduled Care Work Streams.
- Continuing to work with NHS Boards to fully utilise Profession to Profession lines
- Working with partners to fully develop Falls pathways for A&E Crews to access along with access to rapid response teams and hospital at home teams with responsive care packages where available
- Working to improve service delivery through See and Treat figures

1.4 Actions being taken to improve the YTD Hyper Acute Stroke to Hospital < 60 mins Performance

- As outlined in the ILT/Urgent Performance Section
- Crews to take less time at location if they can achieve getting the patient to hospital within 1 hour from the call.
- Return from call under blue lights to hospital.
- Profession to profession support

SAS Context

- 888,000 calls to ACC = 686,500 ambulance responses
- Typical response outcome:
 - 2 patients in every 10 are life threateningly ill and/or injured
 - 1 patient is seriously unwell
 - 6 patients have an exacerbation of an existing condition or minor injury/illness
 - 1 patient will not require or will refuse assistance
- Current Model
 - Circa 30% of SAS responses require hospital A&E
 - Circa 80% end up there! (82.5% in Shetland)

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 from September 2012 and is still working well.

2.2 Membership and roles on group

Co Chaired by Andy Fuller SAS Head of services for the Islands and Kathleen Carolan Director of Nursing NHS Shetland the group consists of representatives from both NHSS and SAS.

2.3 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.

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 Changes/ outcomes from these incident reviews include:

- Shared understanding where there has been a poor patient journey so we can learn and improve.

4.2 Current Actions from the Group:

- QI improvement project about conveyance to hospital rates in Shetland

5.0 Outer Islands SOF Update:

| LOCATION | STATUS | Dual Response | Training Update |
|------------|----------------------|---|---|
| SKERRIES | First Responder unit | Emergency Nurse Practitioner | Live |
| FETLAR | First Responder unit | Emergency Nurse Practitioner | Live with limited numbers therefore 24/7 cover not always available |
| FOULA | To progress | Emergency Nurse Practitioner (single response) | No interest from last year's public meeting |
| FAIR ISLE | To progress | Emergency Nurse Practitioner (single response) | In discussion with SFRS re multi purpose vehicle and training of personnel |
| PAPA STOUR | To progress | Population 12 – Papa Stour have been declined grant funding to progress with P.A.D. and will now be contacting Skye based | Contact made with Community Council , however no further interest received. |

| | | | |
|-----------------|----------------------------|----------------------------|--|
| | | charity "Lucky To Be Here" | |
| UNST | Emergency Responder Unit | GP | Live |
| YELL | Contractor | GP | Co-ordinator appointed to Yell |
| WHALSAY | Contractor | GP/ Nurse Practitioner | Live |
| MAINLAND | | | |
| BRAE | First Responder Unit | SAS | Live |
| North Mainland | Community Responder Scheme | SAS | Training starts 23 rd Nov initially 6 between North and South |
| South Mainland | Community Responder Scheme | SAS | Training starts 23 rd Nov initially 6 between North and South |

5.1 Retained

There are currently two members of the retained team available with a need to recruit and train more. The current gaps in cove are filled by qualified staff. We are currently discussing the plan to achieve this with the Education and Professional Development team.

5.2 Community First Responders

There have been 3 public meetings recently in Brae, Bixter and Sandwick.

Brae: Although a scheme currently operates here with 3 volunteers one is about to leave. At the meeting 8-9 locals attended showing interest in becoming responders.

Bixter: A good turnout saw about 15 locals attend this meeting with interest in becoming a volunteer, applications have been sent out.

Sandwick: An excellent turnout saw about 20 locals attend this meeting again with interested parties being sent application forms to complete

5.3 Station update:

Staff have moved into the new station as of the 1st of October there are a few snagging issues to sort out but these are in hand. Early reports are very positive from both the SAS and SFRS staff. There will be an official opening of the new facility which will be announced in due course.

5.4 Operational cover: Quarter Three October - December

Lerwick – Second crew fully covered 24/7 with four shifts being single manned (2 Oct and 2 Dec) but able to respond and be backed up and only two occasions where no cover was secured for the second response (Dec) with the backup plan of calling out off duty staff still available.

Unst – Double crew cover

Whalsay – Double crew cover

Yell - Still remains ad-hoc cover as per responder request. The local Team Leaders have been busy in Yell however the coordinator we appointed in May last year is moving back to the Mainland of Scotland but we have had interest from staff at the sports centre which the local team are pursuing.

6.0 PTS (Patient Transport Service)

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.

Shetland Health Board Sector Comparison

| | Demand | | Difference | |
|--------------------------|-------------------------|-------------------------|------------|-----------------|
| | 02/04/2018 - 31/12/2018 | 03/04/2017 - 31/12/2017 | Demand | Demand Variance |
| Registered Journey Count | 798 | 1,015 | -217 | -21.38% |
| Journey Count | 563 | 738 | -175 | -23.71% |
| Stretcher | 47 | 171 | -124 | -72.51% |
| A&E | 0 | 0 | 0 | 0.00% |
| W | 0 | 0 | 0 | 0.00% |
| W1 | 439 | 452 | -13 | -2.88% |
| W2 | 21 | 71 | -50 | -70.42% |
| WT1 | 17 | 15 | 2 | 13.33% |
| WT2 | 1 | 7 | -6 | -85.71% |
| WC1 | 38 | 11 | 27 | 245.45% |
| WC2 | 0 | 11 | -11 | 245.45% |
| Admission | 1 | 5 | -4 | -80.00% |
| Day Patient | 0 | 0 | 0 | 0.00% |
| Discharge | 89 | 130 | -41 | -31.54% |
| House to House Transfer | 9 | 17 | -8 | -47.06% |
| Out Patient | 461 | 584 | -123 | -21.06% |

| | | | | |
|----------|---|---|----|----------|
| Transfer | 0 | 1 | -1 | -100.00% |
|----------|---|---|----|----------|

Although Shetland has a low number of requests for the service the large area in which the ambulance covers has its own challenges. The vehicle is responsible not only for servicing mainland Shetland it also covers the small islands involving ferry trips.

Shetland is starting to experience reductions in Activity and Demand, particularly in Outpatient demand which is in line with the national framework where reductions are expected.

Funding is in place for 2 WTE Scheduled Care staff however it has been challenging in terms of vacancies with 2 x 0.5WTE recruited in July 2018 ACA. Small increase in the number of renal patients which was discussed at a recent liaison group meeting in terms of eligibility etc.

During November a significant reduction in patients arriving at appointments on time has been identified which is associated with long term absence and vacancies. With the recruitment of a part-time member of staff we should see improvements in January's arrival times.

The reasons for PTS Punctuality for Pickup after appointment

- Patients requiring to be picked up from outpatient clinics with different outpatient appointments finishing at different times impacting on the pick up after appointment time

Actions being taken to improve

- AutoPlan and Shift Reviews, Working with Health Boards to streamline outpatient appointment time processes

The reasons for PTS SAS Cancelled No Resource

- Accepting all bookings and having to cancel journeys 24 hours prior to appointment time due to lack of resources
- Limited resources with Vacancies, sickness or leave having an impact on capability

Actions being taken to improve

- Fill vacant PTS Posts, Reviewing & Monitor Sickness / Absence levels, Different ways of working and engaging with Health Boards around appointment times, Working with alternative transport providers for patients who do not meet the Patient Needs Assessment (PNA) freeing up capacity for patients that do meet the PNA

Contacts:

Andrew M Fuller Divisional Head of Services

Linda Kennedy (Interim) Area Service Manager, Islands

Angus Galbraith & Chris Rice Team Leaders, Lerwick

Appendix 1

Glossary

Scheduled Care – PTS

Punctuality for appointment at hospital - Target 75%

Punctuality after appointment (uplift) - Target 80%

Journeys cancelled - Target <0.5%

The categories are:

W - The patient can walk unaided and requires no assistance.

W1 - The patient can walk and requires steadying assistance only.

W2 - The patient can walk and requires the assistance of two crew members.

WT1 - The patient has their own wheelchair but can transfer to a seat with minimal assistance. There is suitable access at their home and requires the assistance of a single crew member only.

WT2 - The patient has their own wheelchair and requires the assistance of two crew members to transfer to/from the vehicle.

WC1- The patient has a medical need to travel in their own wheelchair and cannot transfer to/from vehicle. There is suitable access at their home and they require the assistance of a single crew member.

WC2- The patient has a medical need to travel in their own wheelchair and cannot transfer to/from vehicle. Access at their home and/or their condition requires the need of a two crew members.

SAS Clinical Model

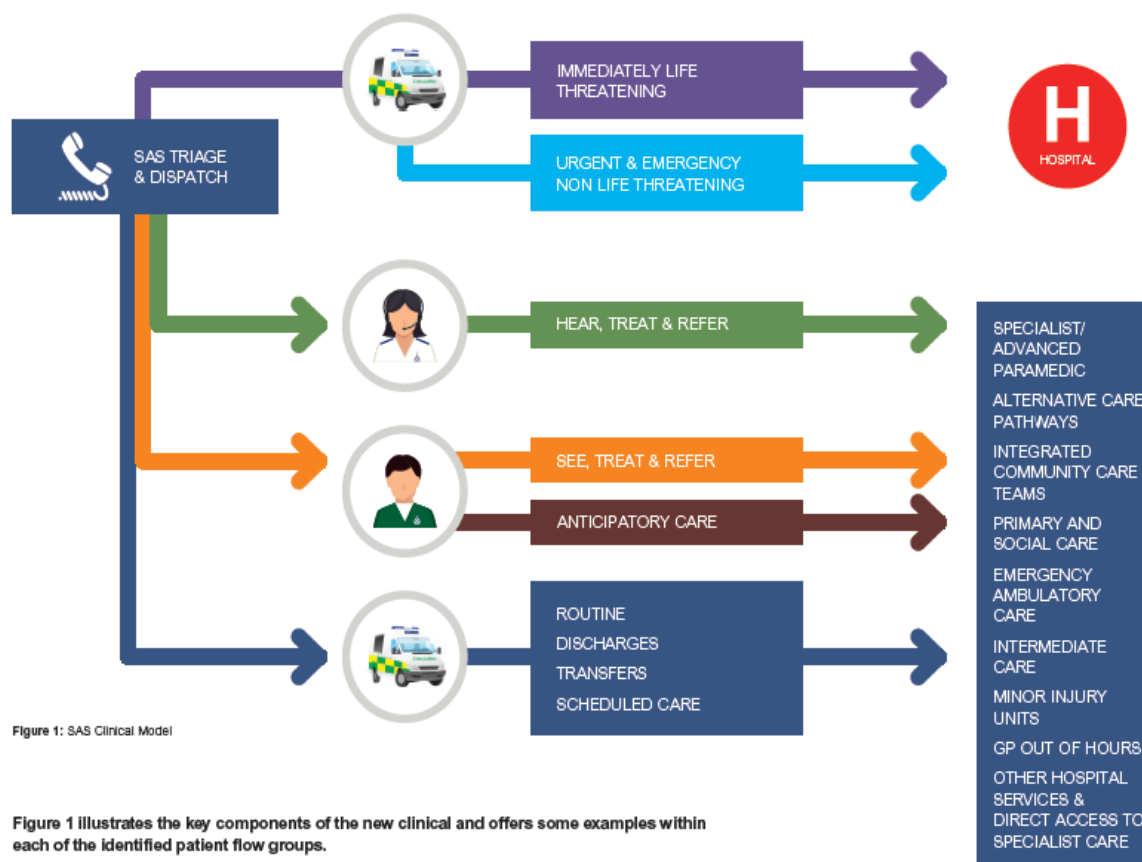


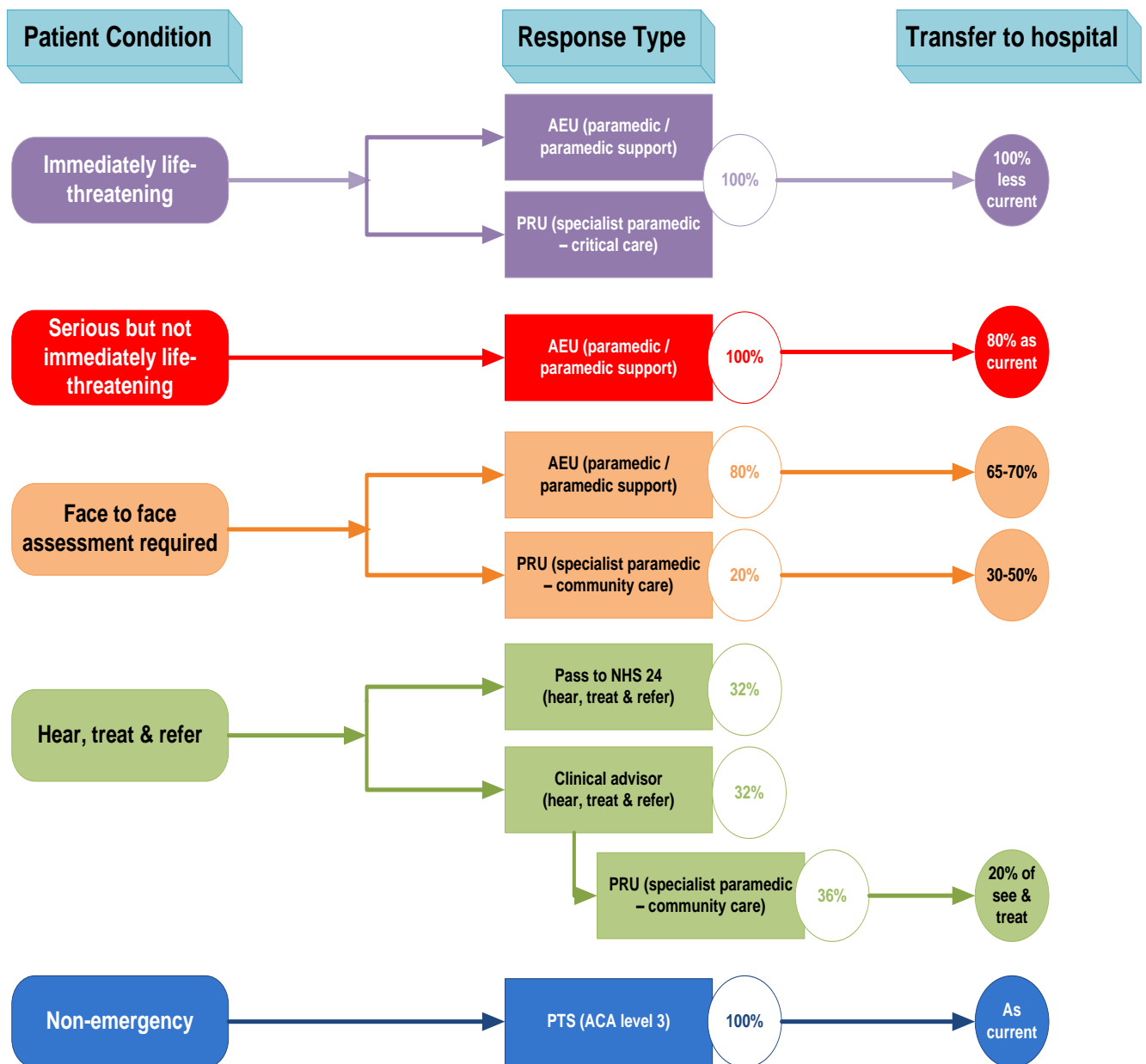


Figure 1: SAS Clinical Model

Figure 1 illustrates the key components of the new clinical and offers some examples within each of the identified patient flow groups.

|  Scottish Ambulance Service <i>Taking Care to the Patient</i>  NHS SCOTLAND | | |
|--|--|---|
| 'Taking Care to the Patient' | | |
| The Response Model | | |
| Patient Flows | Acuity | Response/skills |
| Immediately Life Threatening | Immediately life threatening 8 minute response | Paramedic/Specialist paramedic Conveying resource |
| Serious but not Immediately Life-Threatening | Time-critical Urgent GP admissions and hospital transfers | Conveying resource Paramedic plus support |
| See, Treat & Refer | Non time-critical Face-to-face assessment | Specialist paramedic/Paramedic Enhanced minor injury/illness |
| Hear, Treat & Refer | Low acuity 999 calls Calls passed to NHS24 | Clinical advisor in Ambulance Control Centres Paramedic level |
| Non-Emergency | Scheduled care Low acuity urgent-discharge/transfers | Conveying resource Enhanced Ambulance Care Assistant, Basic Life Support, oxygen, Automated External Defibrillator |



**Road Safety Advisory Panel
Community Safety Board Briefing Note**

**Item
10**

| | |
|-------------------------|-------------------------------|
| Issue/Topic: | Road Safety Advisory Panel |
| Author: | Elaine Skinley |
| Date of meeting: | 14 th January 2018 |

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 5 'E's' of Road Safety. (Engineering, Education, Encouragement, Enforcement and Evaluation)
- Winter Driving Campaign in partnership with Police Scotland checked 50 cars (lights and tyres) across Shetland.
- Winter Tyre Clinic saw 75 vehicles stop and have their tyres checked.
- Festive campaign had posters and beer mats in clubs and pubs across Shetland.
- Lerwick Town Centre Pedestrianisation formal consultation will begin in February.
- Maintenance surface dressing is complete
- Shetland's Road Safety Strategy and Action Plan is complete and will go forward to the next Environment and Transport meeting. Document is attached and any comments can be forwarded to Neil Hutcheson, Team Leader – Roads Service.
- Police Scotland gave updates on recent Police activity.

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'S ROAD SAFETY STRATEGY & ACTION PLAN

2019/22

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Foreword

It is with great pleasure that I introduce the latest Road Safety Strategy and Action Plan on behalf of Shetland's Road Safety partners. This plan recognises the many actions that have been implemented through the previous Road Safety Plan and seeks to enhance those existing measures through an effective partnership of all our road safety stakeholders.

This document shows that we exceeded the 2010 targets set by the UK Government in the document "Tomorrow's Roads – Safer for Everyone." The aim is that the enhanced and additional actions will ensure that we remain on track to meet, and hopefully surpass, the current road safety targets that are to be achieved by 2020. As chair of the Shetland Road Safety Panel, I am encouraged to report that we have made great progress towards meeting these national targets. However, to meet these targets all members of the Shetland community must take responsibility for their behaviour on our roads.

Shetland's road safety partners implemented a number of actions under the previous road safety plan. These included a 20 mph zone with traffic calming on Lerwick's Esplanade to address the 8% of Shetland's injury accidents that were occurring there. Further engineering actions included the provision of new roadside safety barriers on the A968 at Dales Lees and A971 at Weisdale, reduced speed limits at Aith and Nesbister, junction improvements at the Brig o' Fitch and motorbike guarding retro-fitted to a number of safety barriers.

There have also been a number of initiatives to educate and engage with road users. We have:

- held "Child Car Seat Clinics" to give advice to parents on the correct fitting of the seats in their vehicles;
- delivered "Bikeability" training in every primary school in Shetland, training all pupils over 10 years of age to be safe when cycling on the road;
- held "Driving Ambition" days for young drivers to encourage them to drive carefully on our roads and to highlight the dangers of speeding, not wearing seatbelts, checking their vehicle is road worthy etc.; and
- delivered a winter driving campaign each winter with various different events including a Police Scotland operation to stop vehicles and check their lights and tyres, as well as giving advice on preparing their vehicle for winter.

We must remember that even the low numbers of casualties on Shetland's roads are people with family and friends who love them. We must never be complacent, must build on our efforts and must continue to work hard at reducing death or injury on our roads. This plan will further improve the joint approach between Shetland's road safety partners and communities and as a result we should continue to see good progress being made on the reduction of those killed or seriously injured. This can be achieved through our commitment to and promotion of the 5 E's of road safety, namely Education, Engineering, Enforcement, Encouragement and Evaluation.



Councillor Robbie McGregor

Chairperson, Road Safety Advisory
Panel

Executive Summary

“Shetland’s Road Safety Strategy & Action Plan 2019/22” sets out what Shetland’s road safety partners will do to maintain and improve safety on our public roads. The document lists and details the actions in our Strategic Action Plan that have been identified by the various road safety partners, who will retain ownership of them. These actions are how we intend to address the main priorities listed in Scotland’s road safety framework and in the mid-term review of the framework undertaken by the Government in 2015/16. It is the responsibility of the relevant partners to deliver the actions within the three-year life of this plan.

The partners have given consideration to legislation, national, regional and local strategy when developing this document, which replaces its 2012 predecessor. It is linked to a number of existing policies including the “Shetland Partnership Plan,” the “Shetland Transport Strategy” and the “Police Scotland Local Policing Plan 2017-20.” It is also strongly linked to the regional “Highlands and Islands Joint Road Casualty Reduction Strategy” with which Shetland’s road safety partners will work to achieve the overarching outcomes and long term road safety vision.

This strategy details the current national road safety targets against which progress will be measured. It also considers the progress that has been made to date with the conclusion that we have been successful in reducing the number of road accidents and are on course to exceed the national targets.

Finally, this document introduces the “Vision Zero” and “Safe System Approach” concepts that the Government wishes to be “formally adopted” by road safety partners as progress is made towards the 2020 national road safety targets.

Introduction

The Scottish Government in June 2009 published its Road Safety Framework for the years 2010 to 2020 titled “Go Safe on Scotland’s Roads: Its Everyone’s Responsibility.” The Government’s road safety vision for Scotland as outlined in this document is that there will be:

“A steady reduction in the numbers of those killed and those seriously injured, with the ultimate vision of a future where no-one is killed on Scotland’s roads, and the injury rate is much reduced.”

There has been considerable progress made in Scotland in achieving, and indeed in exceeding, road casualty reduction targets. However, the risk of death and injury is still unacceptably high and more needs to be done, particularly in respect of children, young drivers and rural roads. The Framework details the aims, commitments and targets for addressing these issues and moving towards the ultimate vision of no fatalities on Scotland and Shetland’s roads.

The Government published a mid-term review of the Framework in March 2016. The review reiterated this vision but also moved the strategy further towards “Vision Zero” and “The Safe System Approach” (see Appendix 1). The review also identified the three areas of speed, age and vulnerable road users that are to be prioritised nationally for action.

It will take a considerable effort to move towards the Government’s vision. This will not only be required from the road safety community but also from the public as road users, employers, teachers, parents and all others who have a role to play in road safety. The difficulty of the task should not be underestimated. However, the Council and its partners on “Shetland’s Road Safety Advisory Panel” are fully committed to road casualty reduction and making Shetland’s roads safer for everyone. The “Shetland Road Safety Strategy and Action Plan 2019-2022” builds on our previous strategies, the Local Outcome Improvement Plan, the Regional Transport Plan, the Scottish Framework and the Government’s mid-term review to provide a detailed plan for achieving our road safety actions and targets.

This latest version of our road safety strategy and action plan is a key strategic tool to assist with the reduction of road accidents. It reviews our performance against earlier and current safety targets. It also details how Shetland’s road safety partners will work together to meet the latest targets including listing the activities to be undertaken by various organisations in a detailed action plan. The organisation specific and collective progress towards these safety targets will be monitored through the Road Safety Advisory Panel (RSAP) and the Shetland Community Safety and Resilience Board.

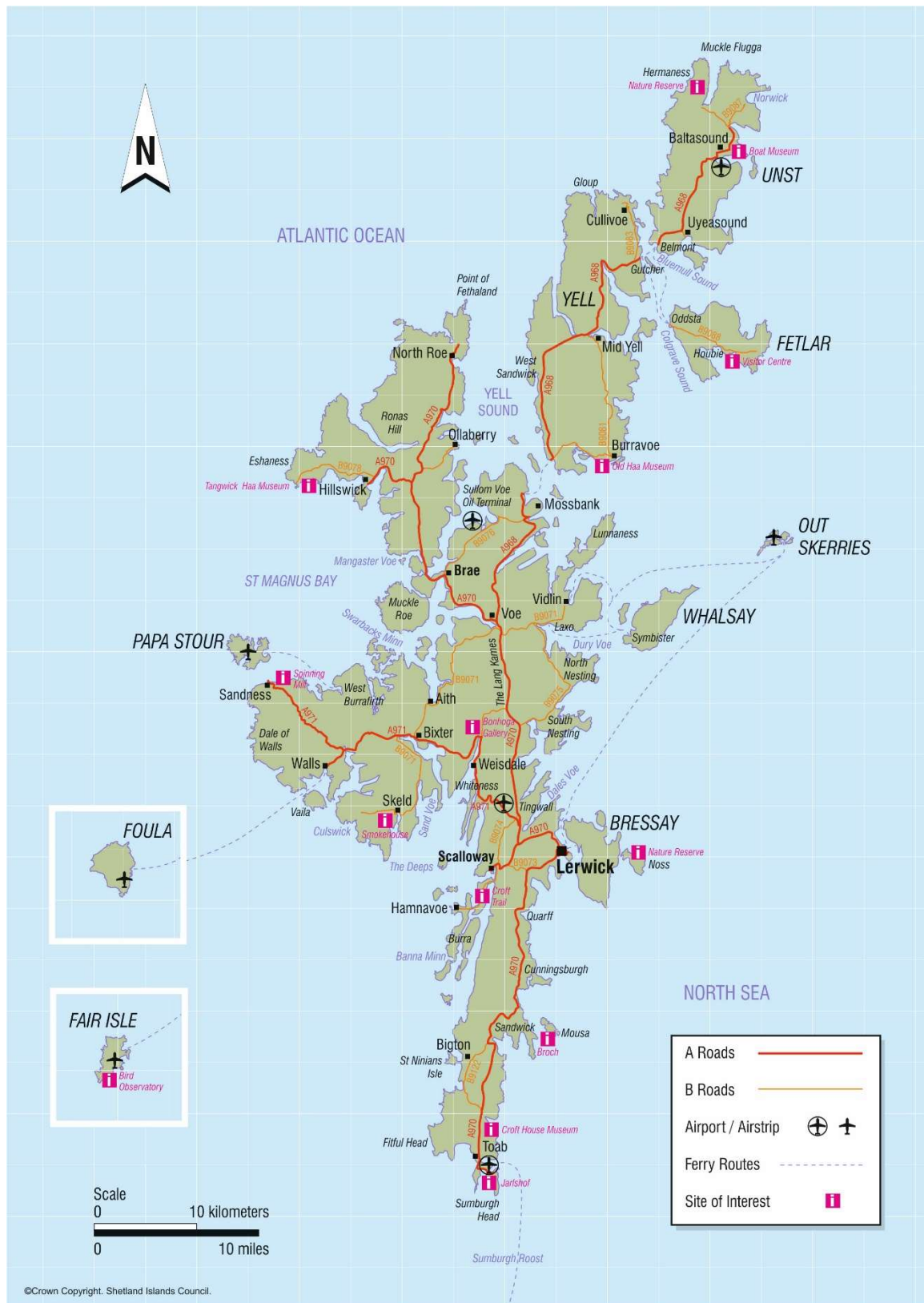
Road Safety Partners

The Road Safety Advisory Panel and the Shetland Community Safety Partnership developed this document, following consultation with all the partners that contribute to the **road casualty reduction strategy** and the promotion of road safety in Shetland. These organisations are listed in the following table.

| Partner | Responsible for | Provision |
|--|---|---|
| Shetland Islands Council, Roads Service | Road Safety Education Road Safety Encouragement | Appropriate training, campaigns and publicity. The Roads Safety Officer is based here. |
| | Road Safety Engineering | Road maintenance, traffic calming measures, speed limits, road signs, etc. |
| | Road Safety Evaluation | |
| Police Scotland | Road Safety Enforcement | National Road Policing Strategy states that the Police will “make the roads in Scotland safer by reducing death, injury and crime. |
| Road Safety Advisory Panel | Member/Officer multi-agency Panel comprising key officers from a range of agencies with the common goal of making our roads safer and reducing the number of casualties. | Membership includes representation from Police Scotland, Shetland Islands Council, Scottish Ambulance Service, Scottish Fire & Rescue Service, etc. |
| Shetland Community Safety & Resilience Board | Community Safety Strategy for 2005 – 2010 tackling issues such as crime and the fear of crime, diversity, young people, anti-social behaviour, road safety and personal safety. | Membership includes the Emergency Services, Shetland Islands Council and NHS Shetland |
| ZetTrans | The Regional Transport Partnership (RTP) for Shetland. | RTP’s are statutory bodies responsible for bringing together key stakeholders in transport planning to produce and deliver strategies that aim to make an improvement to users. |
| Shetland Islands Council Active Schools | Programme to increase activity among school pupils. | Promotes road safety with school pupils as part of their programme. |

Shetland Road Network

The following map shows Shetland's population centres, the strategic road network that links them and the inter-island ferry terminals and routes.



The public road network in Shetland currently measures 1,050 km (652 miles) in length. In addition to carriageways, the network consists of 300 bridges with a span of over 900mm, several thousand culverts, 7,500 traffic signs, 4,000 streetlights, 430 cattle grids and 56 kilometres of safety barrier. The total value of the road network is approximately £1 billion making it Shetland Islands Council's largest asset. A breakdown of carriageway length by classification is listed in Table 1 below.

| Road Category | Length 2 Lane | Length Single Track | Total Length (kilometres) | Built on Peat* |
|--|---------------|---------------------|---------------------------|----------------|
| A Class | 181 | 44 | 225 | 10.5% |
| B Class | 34 | 128 | 162 | 55.3% |
| C Class | 27 | 172 | 199 | 57.6% |
| Unclassified | 87 | 377 | 464 | 31.6% |
| Total | 329 | 721 | 1,050 | 35.7% |
| *Note – definition of “Built on Peat” includes only those roads with a structural depth of less than 650mm carrying more than 20 HGVs per day. | | | | |

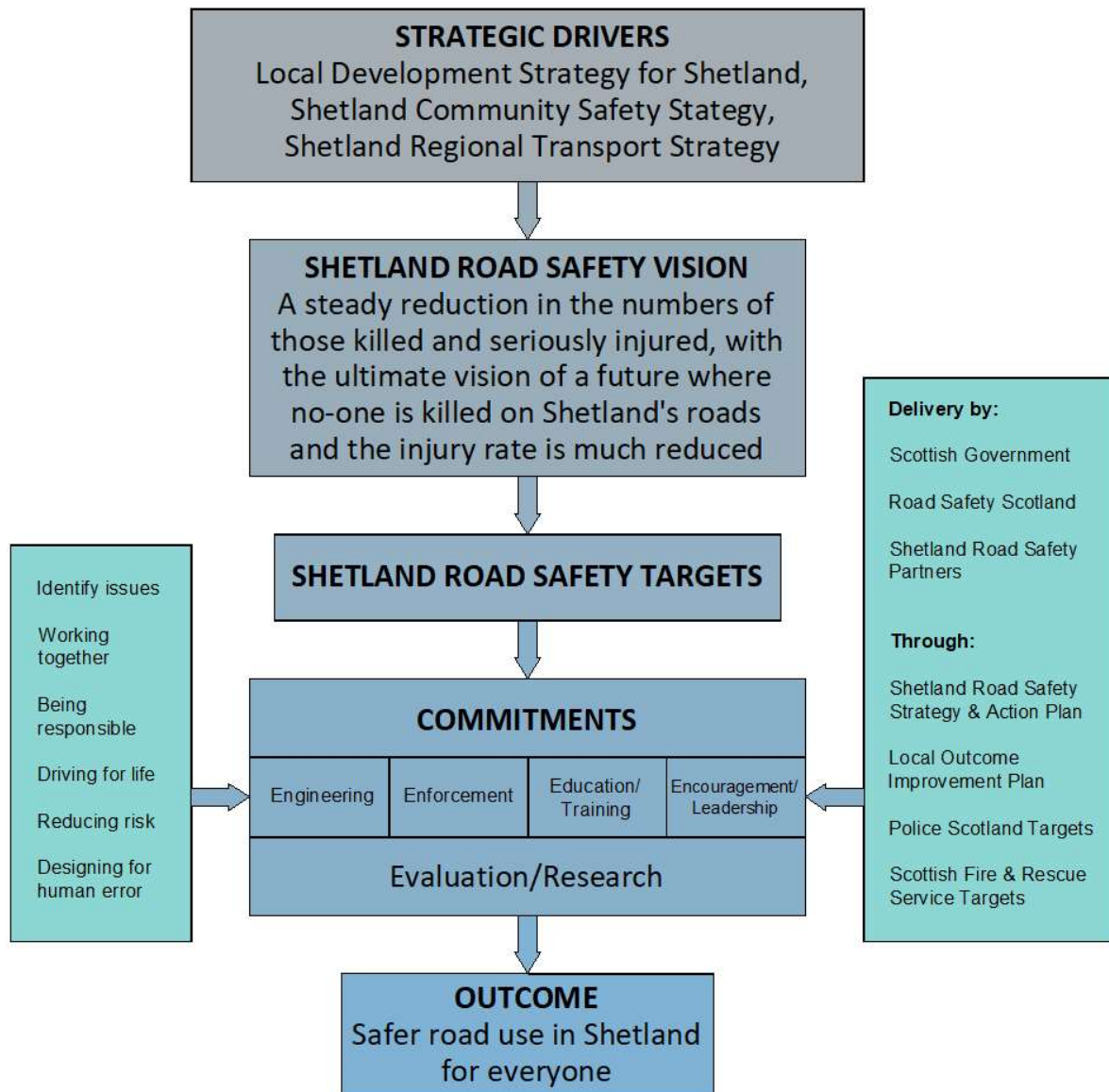
The provision of a comprehensive road and footway network benefits every business, visitor and person in Shetland and contributes to the social and economic wellbeing of the community. It is not just car users and pedestrians that benefit; all transport, emergency and other services (including utilities) require a safe and well-maintained road network to operate effectively and serve their customers.

Therefore, using the road is an essential part of everyday life and the ability to use our road safely is an essential life skill. Failure to do so can have devastating consequences. Nationally in 2016 there were 191 people reported killed and 1,697 reported seriously injured on Scotland's roads. In addition, 12 of those reported killed and 167 of those seriously injured were children.

In Shetland alone during the same period there were five seriously injured casualties of which only one was a child. Thankfully, there were no fatalities.

Strategy and Outcomes

The strategic diagram below summarises the relationships between the aims of this Framework and key strategic, policy and delivery vehicles. It also shows the main disciplines under which we will deliver the commitments with Evaluation underpinning the others.



Policy Links and Consultation

National

The Scottish Government has a number of strategic objectives and those that link most closely to road casualty reduction are:

- Safer and Stronger – Help local communities to flourish, becoming stronger, safer places to live, offering improved opportunities and a better quality of life; and
- Healthier – Help people to sustain and improve their health, especially in disadvantaged communities, ensuring better, local and faster access to health care.

These Strategic Objectives are supported by fifteen National Outcomes, with those of most relevance to road casualty reduction being:

- a) Our children have the best start in life and are ready to succeed;
- b) We live longer, healthier lives;
- c) We live our lives safe from crime, disorder and danger;
- d) We live in well designed, sustainable places where we are able to access the amenities and services we need; and
- e) We have strong, resilient and supportive communities where people take responsibility for their own actions and how they affect others.

A number of National Indicators exist to support the achievement of the National Outcomes and the most relevant to the strategy is:

- a) Reduce deaths on Scotland's roads.

The partners of the Shetland Road Safety Strategy confirm:

- a) There is a strong commitment to achieving the established national road safety targets;
- b) There is an acknowledgement of the road safety related outcomes and actions within Local, Regional and National Transport Strategies, as well as those within the plans and strategies of partner organisations;
- c) There is a strong commitment to working together with other partners to achieve our joint road safety objectives;
- d) Achievement of road safety objectives is highlighted as an important means to accomplish wider policy goals, principally those related to increased levels of active travel (e.g. walking and cycling), improved health and reduced environmental impacts.

Local

The Council in its role as Roads Authority has a statutory duty, under the Road Traffic Act 1988, to “prepare and carry out a programme of measures designed to promote road safety.”

The Road Safety Strategy and Action Plan is linked to the following documents and policies:

- Shetland Partnership Plan or Local Outcome Improvement Plan;
- Shetland Community Plan or “Our Plan”;
- Community Safety Strategy;
- Shetland Transport Strategy by ZetTrans;
- School Travel Plans;
- Active Schools Programme;
- Health Promoting Schools;
- Eco Schools;
- ACPOS National Road Policing Strategy; and
- Police Scotland Local Policing Plan 2017-20
- Shetland Local Policing Plan

The Scottish Government together with partners delivering services in Shetland and the local community has developed Shetland’s “Local Outcome Improvement Plan (LOIP).” It sets out the activity of the Shetland Community Planning Partnership to deliver the Shetland Community Plan.

The Community Empowerment (Scotland) Act 2015 gave Community Planning a statutory purpose for the first time. This concept is about how public bodies work together and with local communities to design and deliver better services that make a real difference to local people’s lives. Community planning is a key driver of public service reform at local level. Partners work together to improve local services, ensuring that they meet the needs of local people.

The LOIP and Shetland Community Plan describe the priorities that have been identified as having the greatest benefit to Shetland. These include:

“We live in communities that are inclusive, empowered, resilient and safe.”

There is a strong local commitment to work in partnership to tackle the issue of road safety. However, there is also an important connection between improving road safety, wider policy areas around connectivity, mobility and economic performance such as encouraging greater levels of active travel, enhance driver training and targeted interactions with communities and vulnerable road user groups.

Review of Road Safety Strategy & Action Plan 2012 – 2017

Stewart Stevenson, Minister for Transport, launched “Go Safe on Scotland’s Roads: Its Everyone’s Responsibility” Scotland’s Road Safety Framework to 2020 on 15 June 2009. It set out a high-level vision for road safety in Scotland, the main Scottish priorities in road safety, the first ever Scottish Road Safety Targets and a number of commitments all intended to further reduce death and serious injury on Scotland’s roads.

With regard to this Framework Shetland’s road safety partners developed the “**Shetland Road Safety Strategy & Action Plan 2012-2017.**” It listed the following aims and objectives for Shetland that linked to local programmes and initiatives:

Aims

- To reduce road casualties in Shetland;
- To reduce the number of drink and drug drivers in Shetland; and
- To encourage healthier and more environmentally friendly alternatives to car journeys such as walking, cycling and public transport.

Objectives

- To reduce the number of people killed, seriously injured and slightly injured on Shetland’s roads by 2020;
- To make Shetland roads users aware of the risks their actions impose on others and seek to change behaviour;
- To promote appropriate road speeds especially around schools and “home zones;”
- To reduce the need for single car journeys, where practical, in favour of healthier or more environmentally friendly alternatives;
- To conduct analysis of crash statistics to highlight problem areas;
- To commit resources to intelligence led policing initiatives and campaigns;
- To increase awareness of safety equipment, for example, cycle helmets and seat belts.

The plan contained many and varied actions required to achieve these objectives. Progress has been made with the majority of these actions and in particular those involving young people. These actions were based around the theme of what was then the four “E’s,” namely Education, Engineering, Enforcement and Encouragement. For example, they included the participation of school pupils in road safety issues through the Junior Road Safety Officers (JRSOs) initiative, child pedestrian training, installation of passive safety signposts and the targeted enforcement of drink/drug driving.

Earlier Targets and Accident Statistics – How We Performed

Great Britain road safety targets since 1987 have helped focus attention on the need to achieve significant casualty reductions. In 2000 the Great Britain Government, in association with the Scottish and Welsh devolved administrations, published the document “Tomorrow's roads - safer for everyone.” The document introduced targets designed to achieve a substantial improvement in road safety over the following ten years to 2010, with particular emphasis on child casualties. These targets had a baseline derived from the road accident statistics between 1994 and 1998 and were set as follows:

- **A 40% reduction in those killed or seriously injured in road accidents;**
- **A 50% reduction in the number of children killed or seriously injured; and**
- **A 10% reduction in the slight casualty rate.**

Table 1 below shows Shetland road casualties from 2000 to 2010 compared to UK targets.

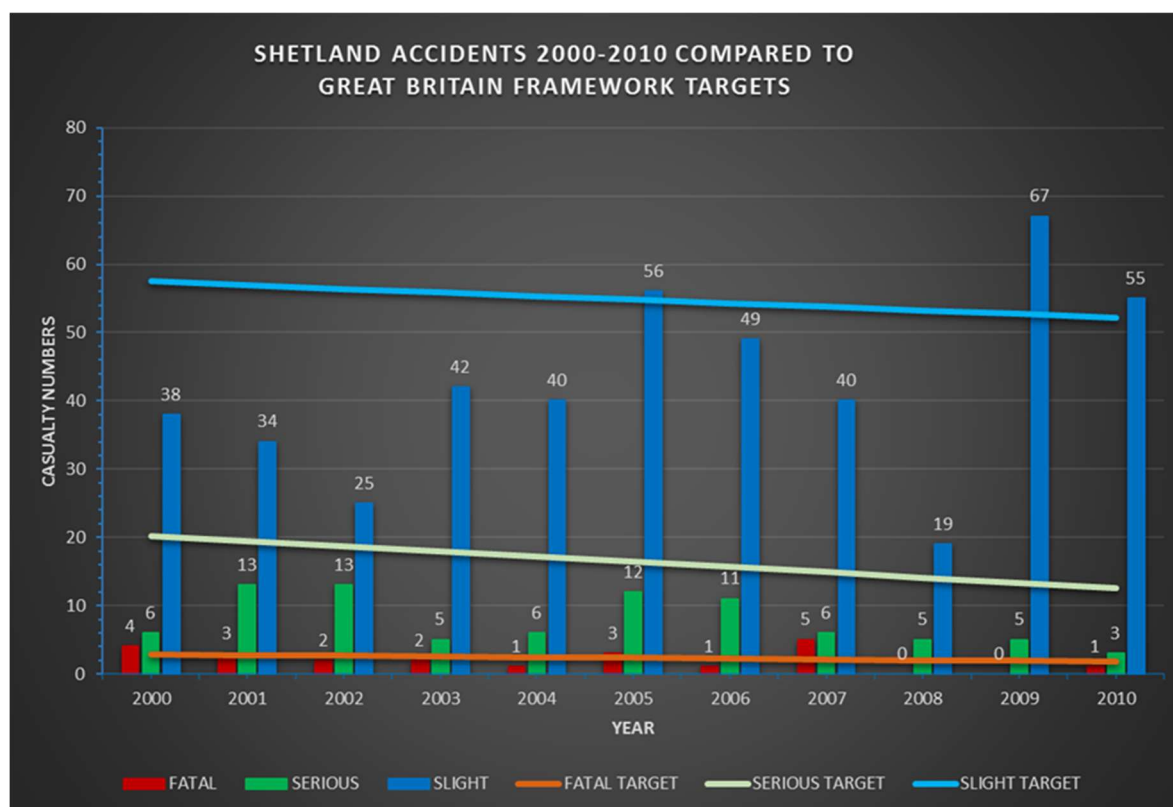
| | | Shetland Average 1994-98 | YEAR | | | | | | | | | | | | Shetland Average 2000-10 | | Reduction Compared to 1994/98 | REDUCTION TARGET |
|---------------------|---------|--------------------------------|------|------|------|------|------|------|------|------|------|------|------|------|--------------------------------|-----|-------------------------------------|---------------------|
| | | | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | | | | | |
| ALL CASUALTIES | FATAL | 3 | 4 | 3 | 2 | 2 | 1 | 3 | 1 | 5 | 0 | 0 | 1 | 2 | 9.7 | 60% | 40% | |
| | SERIOUS | 21 | 6 | 13 | 13 | 5 | 6 | 12 | 11 | 6 | 5 | 5 | 3 | 7.7 | | | | |
| | SLIGHT | 58 | 38 | 34 | 25 | 42 | 40 | 56 | 49 | 40 | 19 | 67 | 55 | 42.3 | | | | 42.3 |
| CHILD CASUALTIES | FATAL | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0.1 | 0.9 | 78% | 50% | |
| | SERIOUS | 4 | 0 | 2 | 5 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 1 | 0.8 | | | | |
| | SLIGHT | not available | - | - | - | - | - | - | - | - | - | - | - | - | | | | - |

This shows that national initiatives and the actions of Shetland's road safety partners not only met but exceeded these targets.

In the specified period the number of killed and seriously injured in road accidents was reduced from an average of 24 per year to less than 10, equating to a 60% reduction. This was 50% greater than that required to meet the 40% reduction target. Likewise, the slight injury accidents reduced from an average of 58 per year to less than 43, equating to a 27% reduction. This was 170% greater than that required to meet the 10% reduction target.

The number of child casualties both before and during the specified period was thankfully very low meaning that even one injury accident can have a significant effect on the outcome. However, the number of killed and seriously injured children has reduced from an average of four per year to less than one, equating to a 78% reduction. This was 56% greater than that required to meet the 50% target.

Graph 1 below shows Shetland road casualties from 2000 to 2010 compared to UK targets.



The graph shows that the number of fatalities on Shetland's roads was consistently low but with peaks of four, three and five in 2000, 2001 and 2007 respectively. The serious accidents are also low but with notable peaks in 2001, 2002, 2005 and 2006. However, between 2007 and 2010 this tapered down to give an average of less than 5 per year. The slight accident figures have been more variable with a significant peak of 67 extending above the target line toward the end of the period in 2009. While the reduction in slight injury accidents over this period more than met the target this peak towards the end of the period indicated an upward trend. This may have been cause for concern but the figures for 2011 and 2012 (see Graph 2 below) showed a significant reduction which has continued to the present day.

Scotland's Road Safety Framework Delivery Plan to 2020

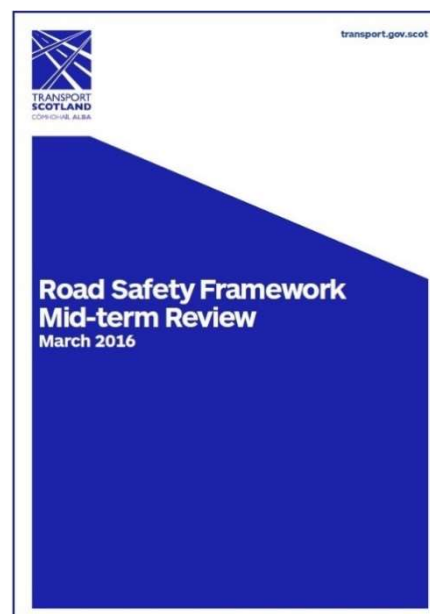
While "Tomorrow's roads - safer for everyone" applied across the whole of Great Britain its replacement, published by the Scottish Government in June 2009, only applies to Scotland. Their road safety framework titled "Go Safe on Scotland's Roads: It's Everyone's Responsibility" included Scotland's road safety vision that there will be:

"A steady reduction in the numbers of those killed and those seriously injured, with the ultimate vision of a future where no-one is killed on Scotland's roads, and the injury rate is much reduced."

The framework also contains road safety topics identified through public consultation, expert opinion, research and statistics. The eight main priorities to be focused on are:

- Leadership
- sharing intelligence and good practice
- children
- drivers aged 17-25
- rural roads
- drink driving
- seatbelts
- speed

These are the priorities that road safety partners consider important, and most in need of addressing, in order to achieve the targets and make headway towards the road safety vision.



The Government published a mid-term review of the Framework in March 2016. The review reiterated this vision but went further stating that an aim of the Framework is:

“to help move systematically towards Vision Zero” and “The Review has identified that the Safe System approach should be formally adopted in progressing towards 2020 targets.”

The Safe System approach recognises that humans as road users are fallible and will make mistakes and that there are limits to the severity of an impact or collision that people can withstand. A key part of the Safe System approach is that the road system is designed to take account of these errors and vulnerabilities so that road users are able to avoid serious injury or death on the road and that interim road safety targets are set to move systematically towards Vision Zero. More Detailed explanations of these methodologies and the implications of adopting them are given in Appendix 1.

The review also identified the three **priority focus** areas that are to be prioritised nationally for action. These priority areas and their desired outcomes are shown in Table 4 below.

| Priority Area | | Outcome |
|--|-----------------------|--|
| Speed and Motorcyclists | Speed | Increase the proportion of vehicles travelling at appropriate speeds on Scotland’s roads to support reducing road casualty numbers. |
| | Motorcyclists | Improve the safety of motorcycling by reducing levels of motorcycle injury accidents on the road network to support reducing road casualty numbers. |
| Pre-Drivers, Drivers Aged 17 to 25 and Older Drivers | Pre-Drivers | Improve knowledge, positive attitudes and safer behaviours of individuals in relation to road safety before they start driving. |
| | Drivers Aged 17 to 25 | Increase safer driving behaviours by young drivers after they pass their test. |
| | Older Drivers | Increase awareness and knowledge capability of older drivers, and their families, to make informed choices about safe driving. |
| Cyclists and Pedestrians | Cyclists | Reduce the number of cyclist casualties through good design, appropriate speed management, high awareness of and compliance with, road traffic laws and safe practices by all road users. |
| | Pedestrians | Reduce the number of pedestrian casualties through good design, appropriate speed management, high awareness of and compliance with, road traffic laws and safe practices by all road users. |

Current Targets and Accident Statistics – How We are Performing

The Scottish Government's Road Safety Framework ("Go Safe on Scotland's Roads: Its Everyone's Responsibility") set casualty reduction targets compared with the average figures from 2004-08. The Government also included milestones at 2015 as a key checkpoint for the Framework. The milestones and targets are shown in Table 2 below.

| TARGET | 2015 Milestone % reduction | 2020 Target % reduction |
|---|-------------------------------|----------------------------|
| People killed | 30 | 40 |
| People seriously injured | 43 | 55 |
| Children (< 16 years) killed | 35 | 50 |
| Children (< 16 years) seriously injured | 50 | 65 |

The new targets are deliberately challenging, particularly for child deaths. Scotland's record for child deaths is proportionately worse than that of England and Wales and the Government want to rectify this. Ambitious targets are also a powerful stimulus in developing new approaches to prevent loss of life and serious injury on the roads.

Table 3 below showing Shetland road casualties from 2011 to 2016 compared to the Scottish targets and includes the milestone set for the 2015 midpoint.

| | | Shetland Average 2004-08 | YEAR | | | | | Shetland Average 2011-15 | Reduction Compared to 2004-08 | 2015 MILE STONE | 2016 | Shetland Average 2011-16 | Reduction Compared to 2004-08 | REDUCTION TARGET |
|---------------------|---------|--------------------------------|------|------|------|------|------|--------------------------------|--|-----------------------|------|--------------------------------|--|---------------------|
| | | | 2011 | 2012 | 2013 | 2014 | 2015 | | | | | | | |
| ALL CASUALTIES | FATAL | 2 | 0 | 0 | 1 | 1 | 3 | 1 | 50% | 30% | 0 | 0.8 | 58% | 40% |
| | SERIOUS | 8 | 5 | 7 | 4 | 2 | 3 | 4.2 | 48% | 43% | 5 | 4.3 | 46% | 55% |
| | SLIGHT | 41 | 41 | 34 | 42 | 26 | 27 | 34 | 17% | 10% | 32 | 33.7 | 18% | 10% |
| CHILD CASUALTIES | FATAL | <1 | 0 | 0 | 0 | 0 | 0 | 0 | n/a | 35% | 0 | n/a | n/a | 50% |
| | SERIOUS | <1 | 0 | 0 | 0 | 0 | 0 | 0 | n/a | 50% | 0 | n/a | n/a | 65% |
| | SLIGHT | not available | - | - | - | - | - | - | No Milestone | - | - | - | No Target | |

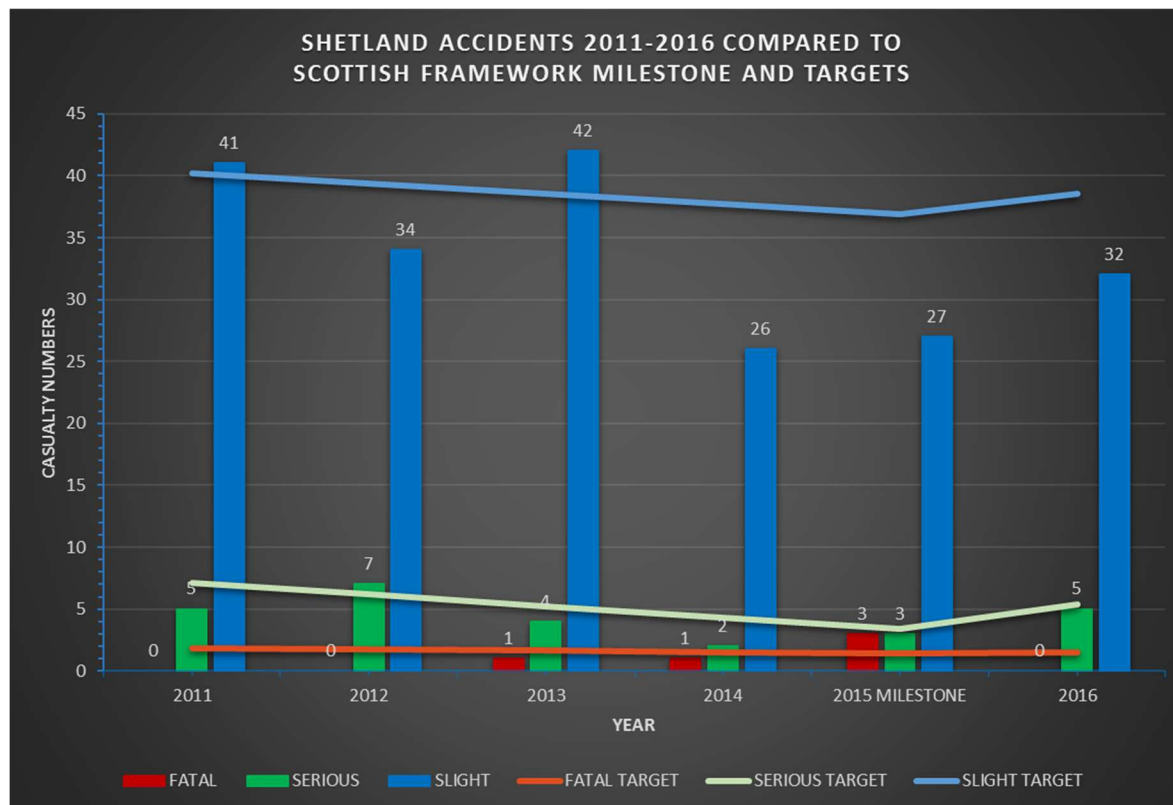
This again shows that, when we consider the 2015 milestone, we are exceeding the targets that have been set.

In the five-year period the number of fatalities in road accidents was reduced from an average of two per year to one, equating to a 50% reduction. This was 67% greater than that required to meet the 30% reduction target. The number of serious injuries reduced from an average of 8 to 4.2, equating to a 48% reduction. This was 12% greater than the 43% reduction required. Likewise, the slight injury accidents reduced from an average of 41 per year to 34, equating to a 17% reduction. This was 70% greater than that required to meet the 10% reduction target.

The number of child casualties before and during the specified period was again very low with the result that even one injury accident can have a significant effect on the outcome.

However, the number of killed and seriously injured children has consistently remained at zero over the five-year period.

Graph 3 below showing Shetland road casualties from 2011 to 2016 compared to the Scottish targets and the milestone set for the 2015 midpoint.



The graph shows that the number of fatalities on Shetland's roads has generally been either zero or one with the exception of three in 2005. This returned to zero last year. The serious accidents are also low ranging from seven in 2012 to only two in 2014. The slight accident figures were still more variable, extending above the target line for the midpoint milestone in 2011 and 2013. However, the reduction in slight injury accidents over this period does meet the target and the trend is very much downwards.

However, there is no room for complacency as the knock-on effects of these accidents spread across the whole of Shetland, affecting in one way or another on all members of the community. We need to maintain the effort made towards making our roads safer. Indeed, we need to take stock and see what more we can do.

Partnership Approach 2020

Statistical evidence shows that road casualty trends can vary quite significantly, sometimes for no apparent reason. A road user group who are shown to be particularly vulnerable during the course of several years, with involvement in increased levels of collisions, can move to a more favourable position over a relatively short time period.

While this may be because of concerted preventative activity, it can also occur for reasons which are less clear. Partners need to remain alert to changing trends and be able to respond effectively to meet new challenges, including those which fall outwith the Priority Focus Areas, as they arise.

The manner in which partners share information and the local processes used to oversee road safety activity therefore becomes increasingly important, if we wish to achieve sustainable reductions in the number of casualties.

How We Will Work

We will deliver the overarching outcome of this strategy on a joint basis through targeting resources and expertise at the above actions and by adopting the following principles:

- a) Partnership Working: We will be active participants in partnership working; We will co-operate in sharing data; We will agree joint solutions to specific problems; We will support the work of all partners in providing education to target groups.
- b) Being Intelligence Led: We will act on facts; We will analyse data to identify patterns; We will allocate resources where they will be most effective in reducing casualties.
- c) Maximising the Use of Technology: We will investigate new and emerging technology; We will adopt procedures to achieve best value; We will be innovative and proactive in our approach.
- d) Maximising Community Involvement: We will engage with local communities; We will work with vulnerable road user groups; We will consult with subject experts in the wider community.
- e) Learning From the Best: We will support the good work of each partner; We will seek out and develop research on roads safety issues; We will showcase the work of ourselves and our colleagues.
- f) Maximising Use of the Media: We will take a proactive approach to the media; We will develop joint messages; We will answer queries positively.

Through applying these principles to the key theme areas we will be able to establish clear action plans, link to wider policy development and provide a regular evaluation of performance against our desired outcome.

Strategic Action Plan

The actions in our Strategic Action Plan have been identified by the various road safety partners, who will retain ownership of them. These actions are how we intend to address the eight main priorities in Scotland's road safety framework and the three priority areas listed in its mid-term review. They are strongly linked to the regional "Highlands and Islands Joint Road Casualty Reduction Strategy" with which they will work to achieve the overarching outcome and long term vision. It is the responsibility of the relevant partners to deliver the actions within the three-year life of this plan. The actions are SMART (Specific, Measurable, Achievable, Realistic, Time based) where possible, and progress reports will be made back to the Road Safety Advisory Panel and Shetland Community Safety & Resilience Board. The actions have all been agreed by the partners as a whole and are summarised on the following pages.

The actions are grouped under the theme of the five "E's," these now being Education, Engineering, Enforcement, Encouragement and Evaluation. The partners responsible for each of the five "Es" is shown below:

- Education Shetland Islands Council, Road Safety Officer
- Engineering Shetland Islands Council, Roads Engineers
- Enforcement Police Scotland
- Encouragement All road safety partners
- Evaluation All road safety partners



Single vehicle accident on the
A970 at the Loch of Girlsta

Within each of these topic areas there will be some significant areas of work such as engagement with communities and vulnerable road user groups, encouragement of individual responsibility, community ownership of changing attitudes and practices, working with the private sector, consideration of funding streams, enhanced driver training, media and promotional activities, route action schemes, data collection, data analysis and monitoring.

Importantly, evaluation of the identified actions and what they have achieved throughout the lifespan of this strategy will be an integral part of how we operate locally.

Flexibility and responsiveness is a key principle of the strategy. If data analysis identifies new trends, or specific geographical or route based collision based concerns, action can be taken based upon the strategy's overarching outcome of seeking a reduction in the number of those killed or seriously injured on our roads.

Education

| Initiative | Aim | What we hope to gain | How we will achieve this |
|--|---|---|--|
| Child Car Seats | To reduce the numbers of incorrectly fitted child car seats | More Children in correctly fitted car seats resulting in less children injured in car accidents | Promotion and clinic to advise parents on how to fit their child car seats correctly |
| Go Safe with Ziggy | To inspire children's learning in road safety | Fewer children injured on our roads | Road Safety Officer (RSO) will visit nurseries promoting Ziggy story books and resources. |
| Street Feet Kit | To teach children how to cross the road safely | Fewer children injured on our roads | RSO will use the footpath and road mats to deliver sessions to teach the children how to cross the road safely |
| Streetsense2 | To challenge knowledge, attitudes and behaviours, enabling children to self-reflect | Fewer children injured on our roads. | RSO will use and encourage teachers to make use of the lesson plans and resources |
| DIMS | To encourage children to wear their seatbelts in the car | Fewer children injured in cars because of inappropriate seatbelt use or not wearing their seatbelts | RSO will use the car and ramp to deliver sessions to pupils demonstrating the benefits of wearing their seatbelt. |
| JRSO (Junior Road Safety Officer) | To encourage peer learning and promote partnership working | Fewer children injured on our roads. | RSO will visit the participating schools twice per year to encourage the pupils to work on promoting road safety in their school and community. |
| POP (Play on Pedals) | To teach safe cycling to nursery children | Young children learning how to cycle safely from a young age | RSO will deliver POP training to early years establishments and they will then be able to borrow the POP sets of bikes to teach the pupils how to cycle. Each set comprises 4 balance bikes, a pedal bike and 5 helmets. |
| Bikeability Levels 1&2 | To teach safe cycling to older pupils | P5-7 pupils cycling safely on our roads | Cycle Training Assistants CTA's and instructors will deliver: <ul style="list-style-type: none"> • Level 1 to P1-4 pupils in a safe off road area • Level 2 is taught to P5-7 pupils on a quiet roads near the school. |

Education

| Initiative | Aim | What we hope to gain | How we will achieve this |
|-----------------------------|---|---|--|
| Theatre in Education | To raise awareness of the dangers to which the age group may be exposed and to enable them to analyse, discuss and change decisions and outcomes. | Fewer teenagers hurt on our roads | RSO will book and organise regular performances of these plays in our schools every 3 years. |
| Your Call | To engage S1-S3 pupils in a number of activities such as risk taking, decision making, peer pressure and allow them to self-reflect on their behaviour in the road environment | Fewer teenagers hurt on our roads | PSE (Personal and Social Education) teachers use the Your Call toolkit provided by RSO in sessions with the pupils |
| Crash Magnets | To engage S4-S5 pupils in a number of activities such as risk taking, decision making, peer pressure and allow them to self-reflect on their behaviour in the road environment | Fewer teenagers hurt on our roads | PSE teachers use the Crash Magnets toolkit provided by RSO in sessions with the pupils |
| Driving Ambition | To improve the knowledge of S5/6 pupils of the issues relating to becoming a driver. To influence young driver behaviour on seatbelts, understanding distractions in the car and understanding the effects of drink and drugs on their ability to drive. To promote the importance of vehicle safety and maintenance To help them understand the responsibilities connected to driving and to deal with emergency situations confidently | Less young drivers involved in accidents on our roads | Deliver a Driving Ambition initiative every year to S5/6 pupils where they will attend 6 workshops: <ul style="list-style-type: none"> • Police Scotland • Scottish Fire Service • Scottish Ambulance Service • Driving Instructor • Mechanic • Road Safety Unit featuring: <ul style="list-style-type: none"> ○ Seatbelt convincer ○ Reactions timer ○ Beer Goggles |

Education

| Initiative | Aim | What we hope to gain | How we will achieve this |
|--|--|--|---|
| Hands Up Surveys | To take part in the national survey of all pupils travel modes to/from school, annually. | Accurate data on travel modes to and from school. Comparable results between Shetland schools and other Scottish schools. | By distributing the survey form to all schools, for completion in September each year. Sending compiled Shetland results to Sustrans for addition into the Scottish results. |
| School Travel Plans | Every School to produce a Travel Plan detailing how pupils and staff travel to school and the measures the school will take to encourage active travel to/from school. | Pupils choosing safe routes to schools. Encouragement of healthy travel choices e.g. Walking buses or cycle trains. To reduce the number of single car journeys to school if possible. To encourage safety on the road. | By contacting and working with every school to develop a suitable school travel plan. By liaising with the active schools team, Zet-trans, NHS Shetland and other partner organisations. |
| A2Bsafely.com | To support people with additional support needs to encounter the road environment safely in an interactive real-world setting | Fewer people hurt on our roads | RSO to promote the a2bsafely website to staff and parents who care for additional support needs people. |
| getinlane .com | The promotion of a website that advises and informs young people of the law and rules of the road | Fewer teenagers hurt on our roads | RSO to promote the website in schools and to young people. |
| Opportunities for Pedal Cyclists to Access Educational Information and Training | The promotion of opportunities for pedal cyclists, irrespective of age and ability to access educational information and training to encourage safe cycling. | Increased community engagement, understanding and support on cycling policy and alternatives to driving. Increased number of people cycling. Enhanced air quality. Enhanced opportunities to travel actively. | Improving junctions where increased collision rates involving cyclists occur. |

Education

| Initiative | Aim | What we hope to gain | How we will achieve this |
|--|---|---|---|
| More Co-ordinated Approach to Road Safety Education | Work across partners to develop a more co-ordinated approach to road safety training and education, to link work across current and future activity to reduce the level of road casualties. | <p>Increased awareness and knowledge of road safety in the 16-25 year age group.</p> <p>Reduced traffic speeds and reduced numbers of local concerns related to speed of traffic and driver capability.</p> | Increased engagement, understanding and support on road casualty reduction. |

Engineering

| Initiative | Aim | What we hope to gain | How we will achieve this |
|--|---|--|---|
| Road Maintenance | To provide a safe road network suitable for all road users. | A road network without hazards for road users. | Repair of potholes, verges, footways etc. as identified by regular inspections. |
| Surface Dressing & Anti-skid Surfacing | To ensure carriageways have sufficient skid resistance. | A road network without carriageways that are hazardous due to insufficient "grip." | The dressing and surfacing of the lengths of road identified by the SCRIM survey as being deficient in skid resistance. |
| Street lighting Maintenance & LED Upgrade | To provide adequate street lighting where it is required. | Roads and footways that are safe to use during the hours of darkness. | Proposed capital scheme to upgrade lanterns to more reliable LED technology and replacing columns that are in the poorer condition bands. |
| Drainage | To keep roads free of excess water. | Roads that are safe to use during all weather conditions. | By maintaining or improving drainage as necessary. |
| Road Markings and Signs | Clear guidance to all road users. | A safe and easy to understand road network. | Continue to replace road markings and signs as necessary and providing new ones when appropriate. |
| Winter Maintenance | To facilitate the safe use of the road network in wintry conditions. | Safe carriageways and footways irrespective of weather conditions. | Monitoring of forecasts, pre-salting, gritting, snow ploughing and providing public information. |
| School 20 MPH Speed Limits | To maintain the existing 20 mph limits at Shetland's schools. | Safer routes to school for Shetland's children. | Proposed capital scheme to replace and upgrade the existing variable signs, many of which are now in poor condition. |
| Residential Area 20 MPH Speed Limits | Continue to reduce vehicle speeds on the roads that run through Shetland's largest residential areas. | To provide safer streets and a better quality of life for residents, and to encourage walking and cycling. | Promotion of traffic orders, consultation and provision of traffic calming where required such as Gilbertson Road and the "North Crescents" in Lerwick. |
| Village/settlement speed limits | Continue to provide 30, 40 or 50 mph speed in accordance with national guidance | Safer roads through our rural settlements, recognising the needs of all road users. | Identify areas now suitable for a reduced speed limit (perhaps following recent housing development), consultation and promotion of traffic orders. |
| Safety Barrier Renewals | Continue the upgrading of the existing barriers at our roadsides. | Reduction in the severity of accidents involving collision with a safety barrier. | Replace timber post untensioned barrier with tensioned barriers that absorb the impact of a vehicle. |

Engineering

| Initiative | Aim | What we hope to gain | How we will achieve this |
|--|--|--|---|
| Bike Guard Motorcycle Safety Barriers | Continue to fit "Bike Guard" beams below existing safety barriers. | Improved safety performance of the barriers when impacted by motorcyclists by preventing riders from striking the barrier posts. | Assess further locations similar to the A970 Brig o' Fitch, the A970 Channerwick and the A971 Wornadale Bend for the fitting of "Bike Guard." |
| Passive Safety Sign Posts | Continue to replace hazardous large diameter steel signposts with frangible alternatives. | A safer roadside in the event of vehicle leaving the carriageway. | Proposed capital scheme to continue the programmes of steel post upgrades onto the A968. Also large signs that need to be replaced elsewhere to be installed on passive safety poles. |
| Footway/Cyclepath Improvements | Improved safety and amenity for pedestrians and cyclists. | More walking and cycling with fewer pedestrian injuries. | Provide footway and cyclepath improvements where appropriate with assistance of Sustrans as per Millbrae improvements. |
| Safety Check of Road Improvement Schemes | To ensure all road improvement schemes are as safe as practicably possible | Road improvements that are safe for all road users. | Safety checks of proposed road improvements by experienced staff. |
| Development Control | To ensure all proposed developments are as safe as practicably possible. | Developments that are safe for all road users. | Advise Planning staff of the road safety implications of proposed developments. |
| Accident Investigation and Prevention | Reduce hazards and the number of road accidents on the network. | Fewer people injured in future than might otherwise be the case. | Examine past accident patterns and undertake works to address their cause. |
| Further Review of Speed Limits on "A and B" Class Roads | Continue to ensure that local speed limits are in accordance with national guidance. | Appropriate speed limits for the road alignment, environment etc., and the level of accidents. | Apply the speed assessment framework to any length of road where there has been an increase in the number of accidents occurring. |
| Bells Brae School Safety Improvements | Improve the safety of pupils when entering and leaving the school via Gilbertson Rd and Bell's Road. | A safer route to school for pupils especially in the vicinity of the "zig zag" markings on Gilbertson Rd and the staff car park. | Proposed capital scheme to improve crossing facilities, ensure sufficient visibility is available and that vehicle speeds are reduced. |

Enforcement

| Initiative | Aim | What we hope to gain | How we will achieve this |
|---|---|---|---|
| Modify driver behaviour and reduce injury on Shetlands roads through engagement and proportionate enforcement of legislation | Reduce the number of instances of drink driving on Shetlands Roads | Maintain a further reduction in the number of people serious injury or killed on Shetland Roads. | <p>Work with partners and the community to identify drivers over the prescribed limits and target those offending through the enforcement of legislation.</p> <p>Utilise the media/ social media and partnerships to educate and influence driver behaviour positively.</p> |
| „ | Reduce the number of instances of speeding on Shetlands Roads | Maintain a further reduction in the number of people serious injury or killed on Shetland Roads. | <p>Deploy marked and unmarked police vehicles to enforce road traffic legislation in areas of concern such as schools and built up areas.</p> <p>Utilise the media/ social media and partnerships to educate and influence driver behaviour positively.</p> |
| „ | Reduce the number of instances of distraction type offences such as the use of mobile phones. | Maintain a further reduction in the number of people seriously injured or killed on Shetland's Roads. | <p>Deploy marked and unmarked police vehicles to enforce road traffic legislation in areas of concern such as schools and built up areas.</p> <p>Utilise the media/ social media and partnerships to educate and influence driver behaviour positively.</p> |
| „ | Reduce the number of instances of people not wearing seatbelts. | Maintain a further reduction in the number of people serious injury or killed on Shetland's roads. | <p>Enforce relevant road traffic legislation through and maintain a visible police presence on the roads.</p> <p>Utilise the media/ social media and partnerships to educate and influence driver behaviour positively.</p> |
| „ | Reduce anti-social behaviour and criminality on our roads. | Keep road users safe and provide re-assurance to the public. | <p>Maintain a visible police presence on the roads.</p> <p>Utilise appropriate legislation and implement police powers to remove vehicles used in an</p> |

Enforcement

| Initiative | Aim | What we hope to gain | How we will achieve this |
|------------|-----|----------------------|--|
| | | | <p>anti-social manner from the roads.</p> <p>Utilise the media/social media and partnerships to educate and influence driver behaviour positively.</p> |

Encouragement

| Initiative | Aim | What we hope to gain | How we will achieve this |
|---|---|---|---|
| Temporary “Smiley Face” Speed Indication Sign | Encourage drivers to reduce their speed and comply with the posted speed limit. | Vehicles driven at the appropriate and safe speed on the road network. | Continue to install the sign on lengths of road where the Roads Service, Police or Community Councils have concerns about excessive vehicle speeds. |
| Attend events to promote road safety | Promote road safety and reduce the likelihood of crashes occurring | | |
| Develop Communication Strategy | Increase awareness and knowledge of road safety issues and events. Media campaigns including national and local press/radio and social media. | | |
| Reinvigorate Operation Zenith | Reinvigorate the road safety initiative Operation Zenith, to reduce the number and severity of accidents among motorcyclists. | Reduction in the number of collisions involving motorcyclists. Increased public awareness of enforcement. | Consulting and working with road users. |
| Single Communication Campaign for Highland and Islands Road Casualty Reduction | Create a single communication campaign for Highland and Islands road casualty reduction. | Increased public awareness of local road safety related issues. Ability to effectively engage with the wider road using community. | The use of social media and other formats to deliver co-ordinated and relevant local road safety messages and information. |

Encouragement

| Initiative | Aim | What we hope to gain | How we will achieve this |
|--|--|---|--|
| Improved Awareness Amongst Elderly Drivers | Raise awareness amongst elderly drivers and their families about vulnerability and potential loss of driving skills over time. | Increased engagement, understanding and support for elderly drivers, in terms of their ongoing use of roads. Reduction in the number and severity of road traffic accidents involving older drivers. | Promote suitable driver training for mature drivers. Create a leaflet for senior road users. Include information on priority within local authority concessionary pass applications. |
| Engagement with Tourist Organisations | Engage with tourism and other organisations in respect of persons visiting Shetland to increase awareness of advice and guidance when using our roads. | Seek to influence tourist operators, accommodation providers and other organisations in respect of road safety. | Work with car rental companies to promote road safety to tourists and visitors who use hire vehicles to ensure that every vehicle hired contains basic road safety materials and that car hire websites provide road safety information/links. Promote and conduct local initiatives to promote safe driving by visitors. |
| Increased Qualifications, Safe Driving Attitudes and Behaviours | Promote initiatives that lead to increased qualifications, safe driving attitudes and behaviours. | Reduced traffic speeds and reduced numbers of local concerns related to the speed of traffic. | Involve the business community through bespoke Driving at Work Policies and Travel Plans. |
| Formal Links to Educational Establishments | Consideration of future technological opportunities that will aid the reduction of casualties. | Reduced traffic speeds and reduced numbers of collisions related to speed of traffic and driver capability. | Support formal links. |
| Influence the Nature of Local and National Road Safety Policies | Influence and inform the nature and content of road safety policies and strategies, both local and national, from 2020 onwards. | Identification and inclusion of local road safety issues in future road safety policies and strategies. | Actively participate in preparatory work. |

Evaluation

| Initiative | Aim | What we hope to gain | How we will achieve this |
|---|---|--|--|
| Improved Road Accident Data | Improve upon the information available in respect of those killed and injured on roads across Shetland. | Increased awareness of existing data sources among partners. Development of data sharing opportunities and protocols. | Review the collection, analysis, reporting, sharing and dissemination of road traffic collision data and intelligence, or other relevant information, to maximise local road casualty reduction efforts. |
| Bespoke Operational Group Business Process | Develop a bespoke Operational Group business process. | Defined outcome based system, providing accountability and structure for those involved in service delivery. Consistent and clear actions and initiatives delivered to communities. Future road safety priorities clearly identified, upon which future work can be based. | The annual identification and inclusion of road safety priorities based upon the five E's, which will be used to influence and monitor local road safety activity. |
| Evaluate Driving Ambition Initiative | Conduct an evaluation of "Driving Ambition" to determine whether the initiative be developed further/linked to year round community based road casualty reduction activity and wider engagement approaches to positively influence younger drivers. | Increase awareness and knowledge of road safety in the 15-18 years age group. | Compare with schemes in other Council areas. Before and after surveys of pupils knowledge. |

Evaluation

| Initiative | Aim | What we hope to gain | How we will achieve this |
|--|---|--|--|
| Review of Road Safety Education | Review the current approach to road safety education provided in schools, including the use of speed enforcement, school travel plans and parking around schools. | <p>Increased awareness and knowledge of road safety among younger road users.</p> <p>Increased engagement, understanding and support on road casualty reduction.</p> <p>Reduce traffic speeds and reduced numbers of local concerns related to speed of traffic.</p> | <p>Compare with schemes in other Council areas.</p> <p>Before and after surveys of pupils knowledge.</p> |

Delivery

Individual road users have important responsibilities for ensuring the safety of themselves and other road users. However, the public sector also bears important responsibilities for the safety of the road network, enabling residents and visitors to Shetland to travel on our road network without fear of death or serious injury.

The development of this strategy under the direction of the Road Safety Advisory Panel, demonstrates the acceptance of these responsibilities and the commitment that each organisation will bring to meeting them.

Whilst the statutory functions relating to the safe use of our road network sit with the individual organisations, we believe that they must be delivered in partnership to ensure that they are as effective as possible. Therefore a core principle of this strategy is that the RSAP will have a key responsibility to ensure its delivery and ensuring performance against the various actions identified.

This strategy contains a range of actions, the outcomes of which can potentially influence the operational plans and business practices of each of the partners, as well as the road safety policies and strategies they develop. Together, the operational plans, policies and strategies will direct delivery on the ground, enabling positive road casualty reduction outcomes to be achieved.

Delivery and outcomes will be heavily influenced by wider competing priorities and budgetary constraints. However the wider significance of road casualty reduction across Shetland cannot be underestimated.

Vision Zero and “The Safe System Approach”

The mid-term review of “Go Safe on Scotland’s Roads Its Everyone’s Responsibility” moved the Government’s road safety strategy “systematically towards Vision Zero” and advised, “the Safe System approach should be formally adopted in progressing towards 2020 targets.” These methodologies are explained below.

Vision Zero

In October 1997 the Swedish Parliament adopted its “Vision Zero” road safety policy. It set a *“target of zero deaths and zero serious injuries”* in the road traffic environment and put the *“responsibility for achieving this goal on all those responsible for the total road safety system.”* This means that the detailed design of the road, the vehicle and driving behaviour must be tackled as a “total system” so that *“a mistake in the road traffic environment does not carry the death penalty.”*

“The Safe System Approach”

The Safe System approach recognises that humans as road users are fallible and will make mistakes. There are also limits to the kinetic energy exchange which humans can tolerate (e.g. during the rapid deceleration associated with a crash) before serious injury or death occurs. A key part of the Safe System approach requires that road infrastructure be designed to take account of these errors and vulnerabilities. Therefore, in the event of a crash, the impact energies should remain below the threshold likely to produce serious injury or death.

The four guiding general principles of the Safe System approach are:

- people make mistakes that can lead to road traffic accidents;
- the human body has a known, limited physical ability to tolerate crash forces before harm occurs;
- individuals have a responsibility to act with care and within traffic laws, but a shared responsibility exists with those who design, build, manage and use roads and vehicles to prevent crashes resulting in serious injury or death and to provide post-crash care; and
- in order to multiply their effects, all parts of the system must be strengthened in combination, and road users are still protected if one part fails.

The Safe System approach rejects the view that road deaths and injuries are an inevitable price that must be paid for a highly motorised mobility and challenges the public’s frequently poor perception of risk. It sees the road user as the weakest link in the chain, unpredictable and capable of error, education and information efforts notwithstanding. In order to reduce road accidents a more holistic strategy is needed including enforcement supported by public awareness campaigns, safer road design, and improved vehicles and vehicle technologies. A strategy that improves the safety of vehicles and road infrastructure rather than just pursuing the impossible task of eliminating all human error will be more effective in reducing accidents on our roads.

Implications for Road Safety Strategy

The Government's advice that these methodologies should be "formally adopted" will have implications for road safety partners responsible for enforcement, education and encouragement. For example, closer working between the Police, roads authority and communities regarding locations for speed limit enforcement and more emphasis on risk awareness in the education programme. However, the biggest change would be in the engineering approach.

There has been a dramatic improvement in the safety of vehicles in recent years though improved "mechanical" engineering, especially since the introduction of the European New Car Assessment Programme (EuroNCAP) in 1997. This has undoubtedly played a huge part in the national and local reductions in road accident figures. Many Governments and national road authorities, including the Scottish Government, now consider a similar approach to road infrastructure to be the next area where significant road safety advances should be made.

The International Road Assessment Programme (iRAP) is a star rating process, similar to the NCAP rating for new cars, that provides a simple and objective measure of the level of safety that is 'built-in' to the road for vehicle occupants, motorcyclists, bicyclists and pedestrians. Five-star roads are the safest while one-star roads are the least safe. The process only assesses attributes that can have an impact on safety. It does not consider the accident data from the road in question.

The Star Rating can be improved by safety improvements to a road's infrastructure that will in turn reduce the number and/or severity of accidents. The following are examples of infrastructure or engineering improvements recognised by iRAP:

- rumble strips on the inside of bends;
- centre hatching to separate vehicles moving in opposite directions;
- the removal of obstacles close to the carriageway, replace them (with frangible alternatives) or protect them with safety barriers;
- remote footways;
- anti-skid surfacing on bends; and
- replace T-junctions and crossroads on major routes with roundabouts.

These measures result in more "readable" and forgiving roads that reduce human error and cushion crash impacts.

Highways England have now committed to 90% of travel on England's strategic road network to be at three stars or above, as assessed by the iRAP Process, by the end of 2020. Transport Scotland are also considering the introduction of a similar star rating system on Scotland's trunk roads.

There will be a need for greater financial investment in road safety when implementing the "safe system" approach. This may appear unaffordable but will be required if significant



Damage following collision with a conventional signpost

further accident reductions are to be achieved. Should these accident reductions be forthcoming then there will be very significant financial savings due to the financial costs associated with each road accident (see Appendix 2). The Department for Transport noted that the UK economy as a whole would receive “a 10-year stream of benefits that can be valued at £111 billion” from the implementation of Vision Zero. Studies have also shown that there is a benefit to cost ratio of 3:1 from implementing the type of engineering improvement listed above, meaning that for every £1 spent on these types of treatment, £3 or more is returned to the wider economy in accident savings

It should be noted that although the Scottish Government has moved the national strategy towards the “safe system” approach the legislation on road safety remains the same. Therefore, the Council in its role as roads authority still has a duty to “carry out studies into accidents” and “must, in the light of those studies, take such measures as appear to the authority to be appropriate to prevent such accidents.” This means that the Council must retain its current “Accident Investigation and Prevention” budget. The additional funding required for infrastructure improvements, identified through the “safe system” approach, would require a different funding source. Depending on the nature of the works this may be available through the Council’s Gateway Process for capital funding. Some safety improvements could also, in the past, have been funded through revenue budgets. However, in the current economic climate these budgets have remained stagnant or been reduced in the drive for efficiency savings. Therefore, there is little if any scope to do other than essential maintenance with these budgets.

A number of these budgets, such as road markings and traffic signs, are at least in part used for the provision of road safety projects. Therefore, without additional funding the allocation of these revenue budgets may have to be skewed more towards safety. For example, a “policy” that faded warning signs are replaced but faded direction signs are not.

The Cost of Road Accidents

Each accident has an impact on the community and is often nothing short of devastating. The loss of any life is one too many and the cost to the community in those terms is simply immeasurable.

In addition to that, road accidents cost the country millions of pounds each year. The Department of Transport publishes valuations each year of accident and casualty costs. These are intended for use in the cost-benefit analysis of the prevention of road casualties and accidents in safety improvements and other road schemes.

These include monetary values for:

- Human cost – pain, suffering, grief, loss of enjoyment of life etc.;
- Economic costs – loss of output due to injury and medical costs;
- Cost of damage to vehicle and property; and
- Police and insurance administration.

The table below shows the cost per casualty type for the annual averages in Shetland from 2004-08, with the current accident costs applied. As can be seen, the cumulative total is substantial. These costs affect every individual, and are not restricted solely to those who directly suffer grief and financial hardship as the result of being involved in a car crash.

| Severity of Casualty | Cost per Casualty (£) | 2004-08 Average Annual Casualties | Total Cost (£) |
|---|-----------------------|-----------------------------------|-------------------|
| Fatal Casualties | 2,145,354 | 2 | 4,290,708 |
| Serious Casualties | 275,995 | 8 | 2,207,960 |
| Slight Casualties | 28,765 | 41 | 1,179,365 |
| TOTAL Cost of Injury Accidents to Shetland (Annual Average) | | | £7,678,033 |

⁴ Claes Tingvall and Narelle Haworth (1999). Vision Zero - An ethical approach to safety and mobility. Monash University Accident Research Centre.

A consultation on fireworks in Scotland: Your experiences, your ideas, your views

February 2019



Scottish Government
Riaghaltas na h-Alba
gov.scot

Ministerial Foreword

Many people in Scotland enjoy attending firework displays in a safe and responsible manner. Many of us will have attended and enjoyed fireworks at celebratory events – from locally organised displays in and around bonfire night through to the annual displays at the Edinburgh Festival and Tattoo.



However, ensuring fireworks are used safely and handled with care is essential to ensure they do not cause harm, distress, or serious injury. Every year, the hard work of our emergency services to tackle dangerous and anti-social behaviour associated with fireworks helps to reduce the number of incidents, particularly around bonfire night. However, every year there are still a number of concerning reports.

I would like to hear your views on how you use and enjoy fireworks, and the impact fireworks have on you and your community. I would like to hear your views and ideas on what action we can take to ensure fireworks continue to be enjoyed safely and responsibly.

Communities that are enabled to work together, alongside local partners, to identify issues and contribute to solutions are more likely to identify effective and sustainable ways forward that work for their local area. I would like to hear your thoughts and ideas about how we can make the most of the knowledge and experiences within our communities to support the safe and responsible use of fireworks.

While the sale of fireworks is an issue only the UK Government at Westminster can change, I will use the outcomes of this consultation to inform ongoing discussions about what changes are needed.

I very much welcome your views, thoughts and ideas and encourage you to get involved in this conversation.



Ash Denham
Minister for Community Safety

Introduction

What this consultation is about

The Scottish Government is gathering information and views on the use and regulation of fireworks in Scotland. We want to hear your experiences and what you think about the way fireworks are currently used.

Fireworks are traditionally associated with festivities which celebrate events that are important to different communities across Scotland. These can include cultural events such as celebrating the new year; religious events such as the Hindu community celebrating Diwali; or family events such as celebrating a wedding or birthday. These events will often bring communities together and can be important in helping us to maintain our ties and friendships with people from our own community and those outside our community. Fireworks can bring colour and excitement to the special occasions that are important to us.

However, fireworks are potentially dangerous and need to be used safely and handled with care to avoid serious injury. For some, the noise made by setting off fireworks can be a nuisance, and the disturbance can cause distress to both people and animals.

While much of the current legislation on fireworks is reserved to Westminster the consultation will help to identify gaps, issues or unintended consequences with the current regulatory framework. We would like to hear any views you have on whether the regulations on the use of fireworks needs to be improved. (The term “regulations” means the laws which set out what people can and cannot do with fireworks.)

How do I get involved?

This consultation was launched on Sunday 3 February and will run until Monday 13 May 2019. You can submit a response at any time before the closing date. To give us your views, please click here <https://consult.gov.scot/safer-communities/fireworks>.

There are no restrictions on who can respond to the consultation. We would like to hear all experiences and views, both positive and negative, so that we can better understand both the importance and the impact of fireworks to different communities.

During the consultation we are running a series of public events across Scotland to allow anyone with an interest to come along and share views. You can find a list of events and details of how to book on our website (<https://consult.gov.scot/safer-communities/fireworks>). Both the written responses to the consultation and the views expressed at the consultation events will be used to inform any future actions.

Am I restricted to answering the questions in the consultation?

No, there are free text boxes in the consultation document which allow you to tell us anything that you believe is important. You do not need to answer all the questions - you can choose to only answer those questions you feel are relevant to you.

Part One: How are fireworks used in Scotland?

Fireworks are often associated with celebration and events that bring communities, friends and families together. These events can be formally organised by the local authority, a local community council or organised community group, but can also be set off in private spaces such as people's back gardens. Some of these celebrations are outlined here:

Diwali – celebrated in Autumn, it is one of the most significant festivals in the Indian culture and is celebrated by multiple religions including Hindus, Sikhs and Jains. Large, public firework displays are held which celebrate one of the Diwali legends, Rama and his wife Sita.

New Year – many countries around the world mark the beginning of a New Year on January 1st with fireworks displays widely at both large organised events and smaller home gatherings.

Bonfire night – or “Guy Fawkes night” marks the anniversary of the thwarting of the gunpowder plot on 5th November 1605. Fireworks have traditionally been used to celebrate this event for many years in the UK, both at large, organised public events and smaller home gatherings.

Festival fireworks – in the last 50 years, large, organised displays, often accompanied by music, have become popular to mark the start or finish of large public events, including the Edinburgh Festival and Tattoo.

Weddings – in recent years firework displays have become increasingly popular to mark the end of wedding celebrations, with some venues now offering a display as part of a package deal.

When fireworks are not used safely or with respect to the wider community they can cause a nuisance, distress and injury. There have been incidents of fireworks being used dangerously or causing harm, including isolated incidents of disorder and attacks on emergency service workers linked to fireworks; and a small number of incidents where members of the public have been injured by fireworks.

We would like to hear from you about how you currently use and enjoy fireworks.

In this document the word “use” means that you are actively involved in buying and setting off fireworks, and the word “enjoy” means that you watch fireworks as a spectator but do not buy or set off fireworks yourself.

Question 1. What is the main way you typically enjoy and experience fireworks?

- Attend a small private event with friends/family that is hosted by you or someone else
- Attend a locally organised event such as an event run by your community council or local organisations with less than 500 people attending
- Attend large public organised events with more than 500 people attending
- Do not attend firework events
- Other (please provide details).

Question 2. Would you say that fireworks form an important part of celebration events for you?

- Yes
- No.

Question 3. Have you been affected by fireworks being used in an irresponsible or unsafe way?

- Yes (please provide details)
- No.

Part Two: Legislation and Regulation

Legislation regulates the sale and use of fireworks. There are controls on who can sell fireworks, which types are available to the public, who can buy and possess fireworks, how they must be stored, and where and when fireworks may be used.

Fireworks in Scotland are controlled by legislation covering areas such as consumer protection and explosives; environmental law; and animal welfare law.

Further detail on the controls and legislation surrounding fireworks sale and use is provided in the accompanying technical annex, which can be accessed at <https://consult.gov.scot/safer-communities/fireworks>.

Sale of Fireworks

Legislation on the sale and storage of fireworks is reserved to the UK Government. This means that the UK Government at Westminster is the only body that can change or pass laws on those issues. For most of the year fireworks can only be sold by licenced traders. Licencing the sale of fireworks is done by local authorities, and traders have to meet very strict criteria to receive a licence.

In the run up to New Year, Chinese New Year and Diwali, and for the three weeks before Bonfire Night, traders registered with their local authority to store fireworks do not require a specific sales licence. Instead they are required to register with the relevant local authority. Local authorities have no powers to refuse registration at these times.

It is illegal to sell outdoor fireworks to anyone who is less than 18 years old. It is illegal to sell indoor fireworks (such as sparklers) to anyone who is less than 16 years old.

Fireworks which make a noise of over 120 decibels when they are set off, or fireworks that require specialist knowledge to use safely, cannot be sold to the general public at any time. Fireworks associated with antisocial behaviour such as bangers, air bombs and jumping jacks are also banned at all times.

Legislation governing the sale of fireworks is reserved to the UK government, but we would like to hear your views on what you would like to see in Scotland:

Question 4. Do you think there should be more controls over the sale of fireworks?

- Yes (please tell us what controls you would like to see in place)
- No (please tell us why you do not feel more controls are needed).

Question 5: What are your views on banning the sale of fireworks to the public in Scotland?

- Yes, I would welcome a ban on the sale of fireworks (please tell us why you would welcome a ban)
- No, I would not welcome a ban on the sale of fireworks (please tell us why you would not welcome a ban)
- Unsure.

Use of Fireworks

Legislation covering the use of fireworks in Scotland is devolved to the Scottish Parliament. This means that the Scottish Parliament can change or pass laws in relation to those issues as they apply to Scotland.

Restrictions are placed on when fireworks can be used. During most of the year fireworks can only be used between 7am and 11pm. On the 5 November fireworks can be used until midnight, and on the nights of Chinese New Year, Diwali and New Year's Eve fireworks can be used until 1am.

It is for each local authority to decide if it wishes to licence public firework displays under its Public Entertainment Licencing regime.

It is a criminal offence for anyone to throw, cast or fire any fireworks in or into any road or public place and this is enforced by Police Scotland.

Legislation governing the use of fireworks is the responsibility of the Scottish Government. We would like to hear your views on the current regulations around the use of fireworks:

Question 6. Do you think there should be more controls on how fireworks can be used in Scotland?

- Yes (please tell us what controls you would like to see in place)
- No (please tell us why not).

Part Three: Prevention and Community Involvement

Partnership Working and Prevention

Across Scotland, local partnerships which often include the local authority, Police Scotland, Scottish Fire and Rescue Service, Trading Standards and other community safety partners work together to ensure people and communities can enjoy fireworks safely. This happens particularly for large organised events and in preparation for bonfire night when fireworks are most likely to be used in our communities.

Depending on local circumstances, a range of approaches are often in place to prevent fireworks being misused and to target those who might be likely to misuse fireworks in and around bonfire night. This includes:

- Sharing intelligence among local partners about areas of high risk to prevent anti-social behaviour and increase public safety.
- Prevention and education activities to promote fire safety to the general public and school pupils; information packs to local groups planning to hold firework displays; inspections of premises who store and sell fireworks; and removing material that could be used for bonfires.

Question 7. What do you think could be done by national and local partners to further prevent the misuse of fireworks?

Community Involvement

Enabling people to be involved in influencing decisions that affect their local community is important, and this equally applies to the issue of fireworks. Communities that are enabled to work together effectively, and in partnership with local partners, have the potential to identify more effective and sustainable solutions.

We are interested in your views about what more could be done to enable and encourage communities to be more involved in preventing fireworks being used inappropriately and to ensure they are enjoyed safely.

Question 8. What ways do you think communities could be involved in supporting the safe use of fireworks?

Local Examples of Practice. We would like to hear any examples of how your community is involved in organising or promoting the safe and responsible use of fireworks.

Communication and Awareness Raising

National safety campaigns are run every year to encourage the safe use of fireworks.

The Scottish Fire and Rescue Service (SFRS), for example, run an annual campaign which aims to reduce rubbish and refuse fires, fires in derelict buildings, and fires set off deliberately because of anti-social behaviour. This is often supported by local partnerships who arrange amnesty days to collect bulk items that could be used for bonfires.

In 2018, SFRS developed and hosted a dedicated national webpage listing organised fireworks events across the country which were open to the public so that they could attend these and enjoy a firework display in safety - <https://www.firescotland.gov.uk/your-safety/fireworks-safety.aspx>

Question 9. What do you think could be done to raise awareness of the risks of fireworks misuse among the public?

Part Four: Animal Welfare

Legislation governing animal welfare is devolved to the Scottish Parliament. The Animal Health and Welfare (Scotland) Act 2006 protects and promotes the welfare of animals, and created a number of criminal offences to help protect animals from mistreatment. These offences cover a range of animal welfare issues, some of which carry a maximum penalty of up to 12 months imprisonment and/or a fine of up to £20,000.

These penalties can be applied to the offence of causing “unnecessary suffering” to an animal. This offence may be committed by anyone who knowingly causes unnecessary suffering to an animal, by either doing or not doing something, whether they are the keeper/owner of the animal or not.

Question 10. Do you think that there should be more controls to make sure animals are not caused unnecessary suffering because of the use of fireworks?

- Yes (please tell us what controls you would like to see in place)
- No (please tell us why you do not feel more controls are needed).

Local Examples of Practice. We would like to hear any examples of how you or your community acts to reduce the impact of fireworks on animals.

Responding to this Consultation

We are inviting responses to this consultation by Monday 13 May 2019.

Please respond to this consultation using the Scottish Government's consultation hub, Citizen Space (<http://consult.gov.scot>). Access and respond to this consultation online at <https://consult.gov.scot/safer-communities/fireworks>. You can save and return to your responses while the consultation is still open. Please ensure that consultation responses are submitted before the closing date of Monday 13 May 2019.

If you are unable to respond using our consultation hub, please complete the Respondent Information Form to:

Building Safer Communities Team
Scottish Government
1 West
St Andrew's House
Edinburgh, EH1 3DG

Handling your response

If you respond using the consultation hub, you will be directed to the About You page before submitting your response. Please indicate how you wish your response to be handled and, in particular, whether you are content for your response to be published. If you ask for your response not to be published, we will regard it as confidential, and we will treat it accordingly.

All respondents should be aware that the Scottish Government is subject to the provisions of the Freedom of Information (Scotland) Act 2002 and would therefore have to consider any request made to it under the Act for information relating to responses made to this consultation exercise.

If you are unable to respond via Citizen Space, please complete and return the Respondent Information Form included in this document.

To find out how we handle your personal data, please see our privacy policy: <https://beta.gov.scot/privacy/>

Next Steps in the Process

Where respondents have given permission for their response to be made public, and after we have checked that they contain no potentially defamatory material, responses will be made available to the public at

<http://consult.gov.scot>. If you use the consultation hub to respond, you will receive a copy of your response via email.

Following the closing date, all responses will be analysed and considered along with any other available evidence to help us. Responses will be published where we have been given permission to do so. An analysis report will also be made available.

Comments and Complaints

If you have any comments about how this consultation exercise has been conducted, please send them to the contact address above or at FireworksConsultation@gov.scot.

Scottish Government Consultation Process

Consultation is an essential part of the policymaking process. It gives us the opportunity to consider your opinion and expertise on a proposed area of work.

You can find all our consultations online: <http://consult.gov.scot>. Each consultation details the issues under consideration, as well as a way for you to give us your views, either online, by email or by post.

Responses will be analysed and used as part of the decision making process, along with a range of other available information and evidence. We will publish a report of this analysis for every consultation. Depending on the nature of the consultation exercise the responses received may:

- indicate the need for policy development or review
- inform the development of a particular policy
- help decisions to be made between alternative policy proposals
- be used to finalise legislation before it is implemented.

While details of particular circumstances described in a response to a consultation exercise may usefully inform the policy process, consultation exercises cannot address individual concerns and comments, which should be directed to the relevant public body.

RESPONDENT INFORMATION FORM

Please Note this form **must** be completed and returned with your response. To find out how we handle your personal data, please see our privacy policy: <https://beta.gov.scot/privacy/>

Are you responding as an individual or an organisation?

- ☐ Individual
☐ Organisation

Full name or organisation's name

Phone number

Address

Postcode

Email

The Scottish Government would like your permission to publish your consultation response. Please indicate your publishing preference:

- ☐ Publish response with name
☐ Publish response only (without name)
☐ Do not publish response

Information for organisations:

The option 'Publish response only (without name)' is available for individual respondents only. If this option is selected, the organisation name will still be published.

If you choose the option 'Do not publish response', your organisation name may still be listed as having responded to the consultation in, for example, the analysis report.

We will share your response internally with other Scottish Government policy teams who may be addressing the issues you discuss. They may wish to contact you again in the future, but we require your permission to do so. Are you content for Scottish Government to contact you again in relation to this consultation exercise?

- ☐ Yes
☐ No



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