NHS Ayrshire & Arran



Meeting: Ayrshire and Arran NHS Board

Meeting date: Monday 1 February 2021

Title: Rape and Sexual Assault Standards and West of Scotland

Forensic Model - Update

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1. Purpose

This is presented to the Board for:

Discussion

This paper relates to:

- Government policy/directive
- Legal requirement

This aligns to the following NHS Scotland quality ambition(s):

- Safe
- Effective
- Person Centred

2. Report summary

2.1 Situation

The Board is asked to receive and discuss this report describing progress made within NHS Ayrshire and Arran to ensure compliance with Healthcare Improvement Scotland (HIS) standards for the *Healthcare and Forensic Medical Services for People who have experienced Rape, Sexual Assault or Child Sexual Abuse* published in 2017.

This is further to the update report submitted to the Board on 30 March 2020.

2.2 Background

The NHS in Scotland is responsible for co-ordinating healthcare and forensic medical services for children, young people and adults following rape, sexual assault or child sexual abuse and meeting both health and support needs of survivors. NHS Boards received funding from Scottish Government from 2018 - 2021 to support development

of services with an aim to work towards the new Healthcare Improvement Scotland (HIS) standards and associated quality indicators.

The Chief Medical Officer established a taskforce in 2018 to improve services for victims of rape and sexual assault, with a vision to be delivered by 2022, of 'Consistent, person-centred, trauma-informed healthcare and forensic medical services and access to recovery, for anyone who has experienced rape or sexual assault in Scotland'.

The Forensic Medical Services (Victims of Sexual Offences) (Scotland) Bill, which will place direct statutory functions on NHS Boards to provide forensic medical services and healthcare support to victims of rape and sexual assault, including those who have chosen not to report the crime to the police, or are undecided, but wish to undergo an examination and access healthcare support, was passed unanimously by Parliament on 10 December 2020. It is scheduled for enactment in 2021.

In parallel with working towards the HIS Standards and Quality Indicators and in conjunction with the Taskforce vision, all Boards were tasked with achieving 10 "asks" from the former CMO to support the delivery of care for all victims.

An update was presented to the NHS Board on 30 March 2020 setting out the original CMO five Key Asks which were published in 2018, and the additional 5 'new CMO asks' published in 2019, and NHS Ayrshire and Arran's progress against these. Of these 10 asks, five were either fully compliant or were relevant to NHS Greater Glasgow and Clyde, who will provide the clinical workforce for forensic medical examinations. An update in relation to the remaining 5 asks is included in this report.

These are as follows:

- 1. Ensure timely delivery of the multi-agency objectives set out in the costed local improvement plans, including Board approved capital projects.
- 2. Develop the local (and where appropriate, regional) workforce model to ensure:
 - A female doctor and nurse chaperone are available 24/7, so that where a
 victim requests a choice of the sex of staff involved in their care, this can be
 met. (relevant to NHS GG&C who employ this team)
 - A Nurse Coordinator(s) is in post to ensure a smooth pathway of onward care and referral to other services.
 - Timely access to therapeutic and throughcare services.
- 3. Prepare for forthcoming legislation; the introduction of a national model for selfreferrals and the potential for an increase in demand for these services
- 4. Ensure there is readiness within local and regional delivery teams for compliance with agreed national documentation and data collection requirements.
- 5. Plan for service sustainability beyond the life of Scottish Government ring-fenced funding (end of 2020-21).

2.3 Assessment

Adult and Adolescent Service Model (CMO ask 1)

At the February 2020 West of Scotland (WOS) Programme Board meeting, NHS Board Chief Executives endorsed a hub and spoke model for a regional Sexual Assault Response Coordination (SARC) service across West of Scotland. The model supports a 'hub and spoke' co-ordinated service; with a local service provision, delivered as close as possible to the point of need and supported by a Centre of Expertise. The centre of expertise (hub) is the Archway (SARC) service in Glasgow, and the local provision (spoke) for Ayrshire & Arran is the new facility at The Willows, Biggart Hospital.

The Willows facility will provide an option for individuals who have experienced rape or sexual assault within the past 7 days to have a forensic examination locally. The examination will be provided by a peripatetic team who will travel from Archway in Glasgow. Aftercare and follow-up will be provided locally by a range of services including sexual health services, primary care and specialist third sector organisations, and this will be co-ordinated by a local Nurse Co-ordinator.

Workforce update – local coordinator and peripatetic workforce (CMO ask 2)

Over the past few months in NHS Ayrshire and Arran the interim Adult Support and Protection (ASP) Lead has worked alongside the Nurse Directorate Business Manager to provide oversight and leadership to the project management of The Willows. To provide consistency, this will continue for an initial period and the ASP Lead will include the role of service coordinator to get an understanding of the demand and requirements of the co-ordination role. The primary responsibilities of the coordinator will be to provide a central point of contact for external agencies, manage the clinical requirements of the service and have a key role in coordinating and signposting aftercare for service users.

A national test of change for the role of Nurse Sexual Offence Examiner commenced in September 2020 after a delayed start due to Covid-19. Successful recruitment into these posts by NHSGGC allows the 23 month pilot to be undertaken from November 2020. During the test, for the first time ever in Scotland, Nurse Sexual Offence Examiners will undertake forensic medical examinations for adult victims of rape or sexual assault and give evidence in court. The role is central to supporting the work to review and reshape the workforce and if successful could pave the way for a new multi-disciplinary workforce in Scotland.

In addition to the Nurse Sexual Offence Examiner posts, recruitment for speciality doctors in sexual assault and sexual assault service nurses is underway by NHSGGC with the aim of increasing workforce capacity sufficiently to meet requirements for the regional service delivery model.

To support the developing workforce, a new Advanced Forensic Practice course is being offered by Queen Margaret University, Edinburgh from January 2021. This will be the first course of its kind in Scotland and will be delivered in partnership with NHS Lothian, the Scottish judiciary, Police Scotland and The UK Association of Forensic Nurses (UKAFN). The Scottish Government announced funding for 20 places in October 2020.

Pathways development (CMO ask 3)

A number of national resources designed to support consistent implementation across Scotland to help Boards meet the HIS Standards have been developed. The launch of the resource package in November 2020 includes;

- A national clinical pathway for adults who present following a report of rape or sexual assault
- Supplementary guidance for wider healthcare professionals for the adult clinical pathway
- A standardised national healthcare assessment and forensic examination form (adults)
- Accompanying guidance on the completion of the forms
- The national clinical pathway for children and young people
- · A revised Children and young people pro-forma
- A National Dataset (all ages) designed by the Data and Intelligence Division of Public Health Scotland to support the performance management of NHS Boards against the National Standards and Quality Indicators

In addition a national Patient Information Leaflet has been developed in partnership with Rape Crisis Scotland that sets out what a person can expect if they require to undergo a forensic medical examination.

Locally, to test implementation of the adult clinical pathway, a facilitated workshop took place on 10 December 2020. This session ran as a tabletop exercise and included a wide range of services and agencies including Laboratories, Digital Services, Domestic Services, Scottish Women's Aid and Rape Crisis Scotland as well as colleagues from Archway and Police Scotland. The aim was to provide an opportunity to highlight any potential gaps or areas for improvement prior to opening. An evaluation and analysis of feedback is underway and a number of actions were agreed on the day.

Trauma informed and person centred care (CMO ask 3)

NHS Ayrshire and Arran is committed to ensuring that people who have experienced rape, sexual assault or child sexual abuse receive person-centred and trauma-informed care. To achieve this a small group convened to consider the way forward, linking into activities already ongoing across the organisation and tailor specific learning and support resources for staff. The resulting action plan outlines what needs to be done to achieve this goal and includes the development of staff briefings on the 5 principles of trauma informed care, promoting the NHS Education for Scotland trauma training materials and linking with Human Resources colleagues to discuss guidance for managers responding to staff who have experienced rape or sexual assault.

A short video is being produced by colleagues in the medical photography department which is intended to provide clarity and transparency in terms of the facility, to support those who may feel anxious or nervous to use the service.

Strong links and clear pathways with third sector organisations which provide specialist support are essential and already in place across Ayrshire. Research confirms that a victim-centred and trauma-informed response to sexual crime can reduce further trauma and have a positive effect on the long-term recovery of an individual, continued engagement in any criminal justice process, and better quality evidence to support any criminal proceedings. To further enhance this collaborative approach, a number of local third sector agencies are working jointly with NHS Ayrshire and Arran to develop local resources such as self-care packs and a single information booklet with the aim of avoiding numerous leaflets from a variety of organisations.

Self-referral (CMO ask 3)

A key component of the Forensic Services Bill is to improve local access to a forensic medical examination for those who have chosen not to report the crime to the police, or are undecided, but wish to undergo an examination and access healthcare support. A service level agreement has been in place between NHS Greater Glasgow and Clyde and NHS Ayrshire and Arran for some years and provides this option to Ayrshire residents. Until now the forensic examination has had to be carried out in Archway however planning is underway for this option to be available within The Willows once the workforce and pathways are in place.

There is a requirement on health boards providing forensic medical examination for people who self-refer, to do so in a suitable environment which meets the requirements of the Scottish Police Authority and the Crown Office and Procurator Fiscal Office. This is to ensure the integrity of evidence and a CMO Taskforce subgroup looking at Self-Referral has convened and will in due course provide detailed guidance to Health Boards on the Retention and Storage of biological samples, Decontamination and Environmental Monitoring Protocols and National guidance on Access to Services.

National Clinical IT system (CMO ask 4)

The National Clinical IT System 'Cellma' has been procured and the supplier Biomed will link with a number of national groups including the Quality Improvement subgroup, the IT Project Board and the Service User group. The target date for an initial test is February 2021 with full implementation expected by April 2021. Once live the National IT system will be the sole host of information for forensic medical examinations in Scotland. In NHS Ayrshire and Arran relevant staff will have access to the system and through time there may be opportunities to design local reports which are out with the national dataset and which could influence local collaborative working processes.

The national dataset designed by Public Health Scotland closely reflects the HIS Indicators. Data extracted from *Cellma* will provide a consistent and meaningful measurement supporting future improvement work overseen by the CMO Taskforce Quality Improvement subgroup.

Paediatric Forensic Examination within Ayrshire (CMO ask 2 and 3)

Within the West of Scotland Child sexual abuse examinations are jointly undertaken by a Paediatrician with special training and expertise in such examinations along with a Child Forensic Physician (CFP). There is ongoing provision of CFP through a regional rota for children and young people who have been sexually abused (Child Sexual Abuse/Rape). The service is available 9am to 9pm, seven days per week.

A Joint Paediatric-Forensic examination (JPFE) may also be needed for severe non-accidental injury in Children.

Paediatric forensic examinations within Ayrshire and Arran are currently conducted within the Paediatric Ward at University Hospital Crosshouse and they will continue to be for the foreseeable future. To comply with HIS standard 3 which is related to Facilities for Forensic examinations, NHS Ayrshire and Arran have commissioned Capital planning to reconstruct a new Paediatric Forensic area/ suite within Paediatric Ward 1B in University Crosshouse House. Work on this has been halted by the Covid-19 measures and is expected to start some time in 2021.

A West of Scotland Memorandum of Understanding (MoU) has been agreed and signed by NHS Ayrshire and Arran in May 2020. Its aim is to provide regional service cover when there is a need for urgent Child sexual abuse/ Child protection medicals where local cover is affected by clinical staff sickness or absence. This remains in place but has not yet resorted to.

In terms of the CMO taskforce Children and Young People (CYP) Regional Service model, discussions are ongoing in respect of medium-term planning for future services for Children victims of Sexual abuse.

2.3.1 Quality/patient care

The experiences of all individuals who access this service will be improved as there will be a choice to have forensic medical examination provided locally. In addition, this may encourage more individuals to come forward who may have been discouraged from doing so previously due to the travel required to Glasgow. The Access to Services subgroup are working closely with NHS 24 and NHS inform in order that a new national phone number and accessible online information will be available to promote self-referral later in 2021 and subsequently there may be an increase in individuals coming forward as a result.

2.3.2 Financial (CMO ask 5)

The Scottish Government made available £8.5m over three years (2018-19 to 2020-21) to develop the service models across Scotland.

Capital funding was also provided to enable the development of new facilities across the region:

- Lanarkshire (£60,000 capital monies) at Wishaw University Hospital.
- Ayrshire & Arran (£250,000 capital monies) at Biggart Hospital.
- Dumfries & Galloway (£170,000 capital monies) at Mountainhall Treatment Centre.
- Greater Glasgow & Clyde (£500,000 capital monies) at the William Street
 Clinic. It should be noted that Glasgow City HSCP also committed an additional
 £1.3m to enable the full building to be refurbished.

Additional funding was received from the CMO Taskforce in June 2019 for the purchase of two colposcopes. One for our paediatric cases and the other for The Willows.

In February 2020 Board WOS Chief Executives agreed to contribute a further £100,000 recurrently to support this regional model, on the understanding that there

would be ongoing discussion with Scottish Government endeavouring to secure recurring funding to support the service delivery model.

As per the initial agreement with all Boards across Scotland, the non-recurrent funding already provided was to assist with the transition of responsibilities, with the Boards then to ensure a plan was in place for future funding of the service from 2021 onwards. Agreement has been given by the local Strategic Planning Oversight Group (SPOG) that revenue costs will be split three ways between North, South and East Health and Social Care Partnerships beyond 2021.

2.3.3 Risk assessment/management

There is a CMO Taskforce level risk register and a local risk register in existence.

2.3.4 Equality and diversity, including health inequalities

An Equalities Impact Assessment was undertaken by the Rape and Sexual Assault Working Group in November 2019 and was approved in 17 January 2020.

Equality and diversity was a main consideration of the previously mentioned tabletop exercise. During discussions it was felt that it would be helpful to revisit the EQIA prior to the facility opening.

2.3.5 Other impacts

Best Value

The local provision of a forensic examination service supports the Board's commitment to safe, effective and person centred care and Best Value in all areas highlighted below:

- Vision and Leadership
- Effective Partnerships
- Use of resources

Compliance with Corporate Objectives

Deliver transformational change in the provision of health and social care through dramatic improvement and use of innovative approaches.

Protect and improve the health and wellbeing of the population and reduce inequalities, including through advocacy, prevention and anticipatory care.

Create compassionate partnerships between patients, their families and those delivering health and care services which respect individual needs and values; and result in the people using our services having a positive experience of care to get the outcome they expect.

2.3.6 Communication, involvement, engagement and consultation

The recent tabletop exercise to test the local adult police referral pathway was well attended by a range of stakeholders. Internal representation included addictions services, mental health and psychological services, trauma informed care, primary care GP services, Allied Health Professionals, Digital services and Acute services to name a few. External stakeholders were represented by colleagues from Scottish Women's Aid, Rape Crisis Scotland, Police Scotland, Moving on Ayrshire, Archway SARC and Scottish Police Authority.

The Rape and Sexual Assault Working Group includes external stakeholders including Police Scotland and Forensic Medical Examiners.

In addition, currently a Third Sector Pathways group and a Trauma Informed Planning group are developing and progressing relevant action plans.

The views of survivors with lived experience will be sought in relation to the design and content of a single local booklet which will provide self-care information and contact details for all support organisations and which is in the early stages of development. This builds on the previous involvement of service user groups in relation to the interior design and name of The Willows.

2.3.7 Route to the meeting

An earlier version of this paper was submitted to CMT on 1 December 2020

2.4 Recommendation

Discussion

3. List of appendices

Nil