



REPORT TO: HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD –
10 DECEMBER 2025

REPORT ON: PROTECTING PEOPLE COMMITTEE ANNUAL REPORT 2024/25

REPORT BY: CHIEF OFFICER

REPORT NO: DIJB76-2025

1.0 PURPOSE OF REPORT

To present to the Integration Joint Board the annual report published by the Protecting People Committees for the period 2024/25.

2.0 RECOMMENDATIONS

It is recommended that the Integration Joint Board (IJB):

- 2.1 Note the content of the annual report for the Dundee Protecting People Committees (attached as appendix 1).
- 2.2 Note the progress made in developing an effective partnership response to the needs of at-risk children and adults during 2024/25 (section 4.2).
- 2.3 Note the challenges and priority areas for action identified across the annual reports for focus during 2025/26 and beyond (section 4.3).

3.0 FINANCIAL IMPLICATIONS

None.

4.0 MAIN TEXT

4.1 Background

- 4.1.1 All agencies, professional bodies and services that deliver child and / or adult services or otherwise work with members of the public have a responsibility to recognise and actively consider potential risks to the safety and wellbeing of the people they come into contact with. Dundee City Council therefore has a vital role to play in local arrangements, both at an operational and strategic level, in relation to child protection, adult support and protection, violence against women, alcohol and drugs, and suicide prevention.

- 4.1.2 During 2024/25 the Alcohol and Drug Partnership, Adults at Risk Committee and Children at Risk Committee had overall strategic responsibility for the continuous improvement of protecting people policy and practice in the local area. These partnerships consist of representatives from a range of backgrounds including the police, health services, local authority, health and social care, prison service, fire and rescue service, community planning and the third sector.
- 4.1.3 Requirements relating to the production and publication of annual reports vary, having been set out in legislation and national guidance for each specific group. Current arrangements can be summarised as follows:
- Dundee Alcohol and Drug Partnership (ADP) – no requirement to publish an annual report, although an annual return is made to the Scottish Government (on a template set by them), however the Partnership in consultation with Dundee Chief Officers Group agreed a public facing annual report should be published.
 - Dundee Children at Risk Committee (CARC) – no requirement to publish an annual report, however most Committees across Scotland which incorporate responsibilities in relation to child protection do so, including Dundee.
 - Dundee Adults at Risk Committee (AARC) – Section 46 of the Adult Support and Protection (Scotland) Act 2007 requires the Independent Convenor to prepare a Biennial Report outlining the activities of the Adult Protection Committee (which is now incorporated within the overall AARC) and progress made in protecting adults at-risk of harm. Please note that 2024/25 is not a biennial reporting year.

National guidance also sets out the requirement for each MAPPA Strategic Oversight Group to publish an annual report by a specified deadline every year. However, given the Tayside wide remit of the MAPPA Strategic Oversight Group a separate report continues to be produced and published by them aligned to the deadline set nationally by the Scottish Government.

During 2024/25, the Community Justice Partnership also became part of the multi-agency protecting people governance arrangements overseen by the Dundee Chief Officer Group. For 2024/25 a separate report is also continuing to be produced for the Community Justice Partnership to meet their statutory reporting requirements but officers will explore how this can be incorporated within the integrated protecting people report in future years.

The reports for MAPPA and the Community Justice Partnership will be submitted to Committee early in 2026.

- 4.1.4 This is the third year that the ADP, CARC and AARC have published a single integrated report rather than individual committee reports. This integrated report focused on multi-agency activity led by the committees, further detail regarding developments in individual services will be included within their own annual performance reports (for example, the Chief Social Work Officer Annual Report and Dundee Integration Joint Board Annual Report). The production of a single report has supported the best use of available resources and has been well received by both partner agencies and the public. Taking onboard feedback from 2023/24, the structure of the report has been further updated this year to focus on a single, accessible summary report suitable for both organisational stakeholders and members of the public.
- 4.1.5 Following endorsement from the Chief Officers Group the Protecting People Annual Report 2024/2025 was published on 03 November 2025.

4.2 Areas of Progress

4.2.1 During 2024/25 noteworthy progress has been made in improving services and supports in a range of areas that are relevant across all the Protecting People Committees. This includes:

- Through a restructuring of the multi-agency committees, including the establishment of new Children at Risk and Adult at Risk Committees responsible for suicide prevention and violence against women alongside child and adult protection, joint working has improved, and stronger linkages are being made across the workforce, services and strategic and governance structures.
- Protecting People branding has been refreshed and a website, with landing page was re-launched at the beginning of 2025/26.
- The focus on suicide prevention activity has been significantly enhanced, including through the appointment of a full-time Suicide Prevention Co-ordinator and publication of a two-year delivery plan, Creating Hope Together in Dundee.
- The new Dundee and Angus Joint Learning Review Guidance, that takes a multi-agency systems approach to learning and improvement, was implemented resulting in an increase in reviews undertaken and subsequent improvement activity.

4.2.2 With individual committee remits there have also been some significant positive developments throughout the year, including:

Alcohol and Drug Partnership

- There has been continued progress with the implementation of the Medication Assisted Treatment (MAT) Standards. The most recent benchmarking report confirms that improvements to service provision in Dundee have been achieved, with Dundee scoring green for all standards (please note MAT 10 was not included in the most recent national benchmarking report).
- The Dundee Alcohol Pathway was reviewed with improvements made to ensure easier and quicker access to services and supports. Work is continuing to support the delivery of Alcohol Brief Interventions and related staff learning and development opportunities.
- An A&E pathway was developed to respond to near-fatal overdoses and increase the distribution of Naloxone. This has resulted in increased engagement with people who historically have not benefitted from specialist substance use services.

Adults at Risk Committee

- A multi-agency adult support and protection case file audit and staff survey evidenced improvements in the completion and quality of chronologies and risk assessments for adults at risk of harm.
- Considerable progress has been made in the redesign of pathways for responding to adults at risk of harm. Work has been led by operational staff to establish a multi-agency safeguarding hub and Team Around the Adult / Lead Professional model to

better meet the needs of vulnerable adults who do not meet thresholds for statutory intervention.

- The Adult Support and Protection Learning Framework has been launched, Tayside Multi-agency Protocol for Honour-based Abuse has been published, and an e-learning module on chronologies developed in partnership with Perth & Kinross has received national recognition.

Children at Risk Committee

- A multi-agency audit focused on the quality of assessments and risk management was completed, the findings of which were very positive. Services continue to focus on the quality of assessments, chronologies and plans.
- The 16 Days of Action Against Gender-Based Violence included work to gather the views of primary school pupils on gender roles, norms and prevention of gender-based violence. This work is now informing the development of Dundee's Violence Against Women and Girls Prevention Framework.
- The Bairns Hoose Model Pathfinder celebrated their first year of work, including key successes in relation to improved co-ordination of forensic medical examination for children and the delivery of a wider range of multi-agency training.

4.3 Challenges and Future Priorities

- 4.3.1 All of the Protecting People Committees have experienced and responded to a challenging landscape over the last reporting year. There continues to be a need to carefully prioritise available resources against key priorities to accelerate continued improvements in services. This has been a particular challenge during 2024/25 as partners have supported significant changes to the strategic and governance structure whilst also continuing to progress improvement work.

A significant increase in the volume of referrals for learning reviews, associated with the implementation of revised national guidance that changed the threshold for referral, has also presented resource challenges across all partner agencies; work is ongoing to amend local guidance and arrangements to ensure a proportionate approach to reviews and that capacity is prioritised to support improvement activity.

Legislative and policy changes have also been a feature during 2024/25, with implications for workforce communication and learning and development. Achieving a communications strategy that reaches all parts of the workforce in an accessible way and supports their engagement with improvement activity continues to be a challenge due to the scale and diversity of workforce roles / needs. As part of the new committee structure a dedicated Communications Sub-group is proactively addressing these ongoing challenges.

- 4.3.2 Moving into 2024/25 the Protecting People Committees are now working to deliver priorities set out within a recently agreed Strategic Plan and supporting delivery plans for committee sub-groups and for the ADP. However, some shared areas of focus include:

- Developing a clear public communication strategy and engagement plan across all protecting people areas.

- Continuing to strengthen learning opportunities and communication across the protecting people workforce.
- Development of a single integrated protecting people dataset to minimise duplication and improves effectiveness of data and intelligence analysis.
- Finalising the protecting people quality assurance framework.
- Co-ordinating meaningful, trauma-informed and consistent engagement and participation across all protecting people areas.
- Continuing to implement the ADP Prevention Framework and develop the Violence Against Women and Girls Prevention Framework (supported by funding from the Scottish Government).

5.0 POLICY IMPLICATIONS

- 5.1 This report has been subject to the Pre-IIA Screening Tool and does not make any recommendations for change to strategy, policy, procedures, services or funding and so has not been subject to an Integrated Impact Assessment. An appropriate senior manager has reviewed and agreed with this assessment.

6.0 RISK ASSESSMENT

- 6.1 A risk assessment has not been provided as this report is being provided to the Integration Joint Board for information only.

7.0 CONSULTATIONS

- 7.1 Members of the Chief Officers (Public Protection) Strategic Group, members of the Dundee Children at Risk Committee, members of the Dundee Adults at Risk Committee, Dundee City Council Leadership Team, the Chief Social Work Officer and the Clerk have been consulted in the preparation of this report.

8.0 DIRECTIONS

The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in sections 26 to 28 of the Public Bodies (Joint Working)(Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Dundee City Council and NHS Tayside.

Direction Required to Dundee City Council, NHS Tayside or Both	Direction to:	
	1. No Direction Required	X
	2. Dundee City Council	
	3. NHS Tayside	
	4. Dundee City Council and NHS Tayside	

9.0 BACKGROUND PAPERS

None.

DAVE BERRY
CHIEF OFFICER

DATE: 12 NOVEMBER
2025

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Protecting People Annual Report 2024-2025

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Foreword

As the Committee/Partnership Chairs and Independent Violence Against Women and Girls Advisor, we are pleased to share this year's Protecting People Annual Report, covering the period from April 2024 to March 2025. Building on the success of last year's summary report, we've continued with a single, integrated publication that brings together key updates, achievements, challenges, and future priorities from across our partnerships.

2024-25 marked a significant transition in how we work together to keep people safe. We introduced a new strategic governance model, moving away from the traditional 'care group' structure to a more integrated, cross-cutting approach. This led to the creation of two new Committees: The Adults at Risk Committee and The Children at Risk Committee. These Committees now bring together work previously carried out by the Adult Support and Protection Committee, Child Protection Committee, Violence Against Women Partnership, and Suicide Prevention portfolio, reflecting our commitment to addressing risk and vulnerability in a more joined-up way.

While the Community Justice Partnership and Alcohol and Drugs Partnership remain separate for now, plans are in place to integrate them into the new structure by 2026-27. This shift is already strengthening multi-agency collaboration and helping us respond more holistically to the needs of individuals and families. One example is the newly established Learning Review Group, which is beginning to explore whole-family dynamics through both adult and child learning reviews.

Alongside this structural change, a wide range of work has been delivered. A major milestone was the launch of the Dundee and Angus Joint Learning Review Guidance, which promotes a multi-agency approach to learning and improvement. We also strengthened our focus on suicide prevention with the appointment of a dedicated Suicide Prevention Co-ordinator and the publication of a two-year delivery plan. Work was also undertaken to improve transparency and accessibility by refreshing our branding and developing a new Protecting People website. The landing page will go live at the start of 2025-26, with the full site launching later in the year.

In addition to the cross-cutting work, each of the new Committees has made significant progress in their individual areas:

Adults at Risk Committee (AARC):

- Led a joint multi-agency audit and staff survey focused on Adult Support and Protection.
- Made strong progress in redesigning the system to support a new Adults at Risk Pathway, aimed at improving how we respond to concerns.
- Developed and launched a new Adult Support and Protection Learning Framework to support training and development across the multi-agency workforce.
- Introduced the Tayside Harmful Practice Protocol, providing clearer guidance for professionals working with adults at risk.

Children at Risk Committee (CARC):

- Delivered a multi-agency audit to strengthen child protection practices.
- Continued to develop the Young People's Intelligence Briefing, helping partners better understand emerging risks and trends.
- Created and agreed a new policy approach for supporting 16-17 year olds, ensuring a more streamlined and consistent response to concerns.
- Completed Year One of the Bairns Hoose Pathfinder Programme, which included coordinating forensic medicals for children and delivering a wide range of training for staff across agencies.

Alcohol and Drugs Partnership (ADP):

- Ongoing implementation of the Medication Assisted Treatment (MAT) Standards is helping ensure consistent, high-quality care across services.
- The Dundee Alcohol Pathway was reviewed and is currently undergoing a process of being updated to make it easier and quicker for people to access the help they need.
- Services have expanded to better support individuals affected by cocaine and other non-opioid drug use, improving access and outcomes.
- A Tayside Near-Fatal Overdose Review Group was created, which brings partners together to learn from serious incidents and improve prevention.
- The Multi-Agency Consultation Hub (MACH) continued to provide rapid joint assessments and referrals for people experiencing both substance use and mental health challenges.

While there have been many achievements this year, the Protecting People Committees recognise that challenges remain. The strategic transition to a new governance structure, while essential, made it difficult at times to maintain momentum in ongoing work. The introduction of the new Learning Review Guidance also led to a rise in multi-agency reviews, which placed pressure on meeting statutory timelines and delivering associated improvements.

Embedding lived experience meaningfully at a strategic level continues to be a challenge. The Committees are committed to ensuring that this work is trauma-informed, inclusive, and avoids tokenism. Limited public sector funding and workforce pressures often mean that resources are directed toward crisis response, this hinders the Committee's ability to focus on preventative work.

To address these challenges, the Committees will focus on several key areas in 2025-26:

- **Listening to lived experience:** Strengthening how we gather the voices of people we support, ensuring their insights shape strategic decisions, service delivery, and operational processes.
- **Prevention-focused approaches:** Increasing efforts to understand and prevent harm before it occurs, rather than responding only in times of crisis.
- **Improved communication:** Enhancing how information is shared across the workforce to support the success of the strategic transition and ensure all partners are informed and engaged.
- **Driving improvement:** Continuing to implement recommendations from the most recent Adult Support and Protection Inspection, Child Protection Inspection, and Learning Reviews, with a focus on better outcomes for children, young people, adults, and families in Dundee.

We would like to extend our sincere thanks to all members of the Protecting People Committees for their ongoing dedication, and to the many staff across agencies who work tirelessly every day to protect and support the people of Dundee.



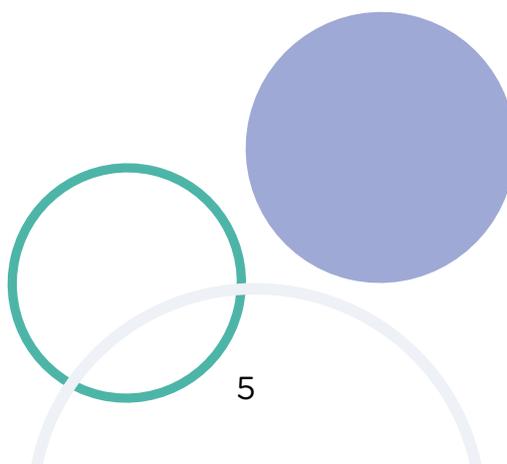
Elaine Torrance
Chair of Adults at Risk
Committee and Children at
Risk Committee.



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1. Dundee Public Protection at a Glance



Dundee is Scotland's fourth largest city and has the second highest population density.



Dundee's population is estimated to be 153,000.



Dundee is the **fifth most deprived local authority in Scotland**, with 36.6% of its population living in the 20% most deprived areas.



There are 73,280 males in Dundee.
Life expectancy: 74.6 years.



There are 77,110 females in Dundee.
Life expectancy: 79.2 years.



Estimated that 43% of children aged 0-15 live within the **20% most deprived data zones**.



71% of those aged 16-64 years in Dundee City are **economically active**.



In the 2020-24 period, **Dundee had the second highest rate of suicide** of all Scottish Local Authority areas at 19.9 per 100,000.



528 sexual crimes recorded by Police Scotland. A rate of 35 per 100,000 population.



Dundee City has the largest number of domestic abuse incidents recorded by police per 10,000 population of all local authorities at 183 incidents compared to the Scotland average of 116 incidents.



92 child protection orders issued in 2024-25.



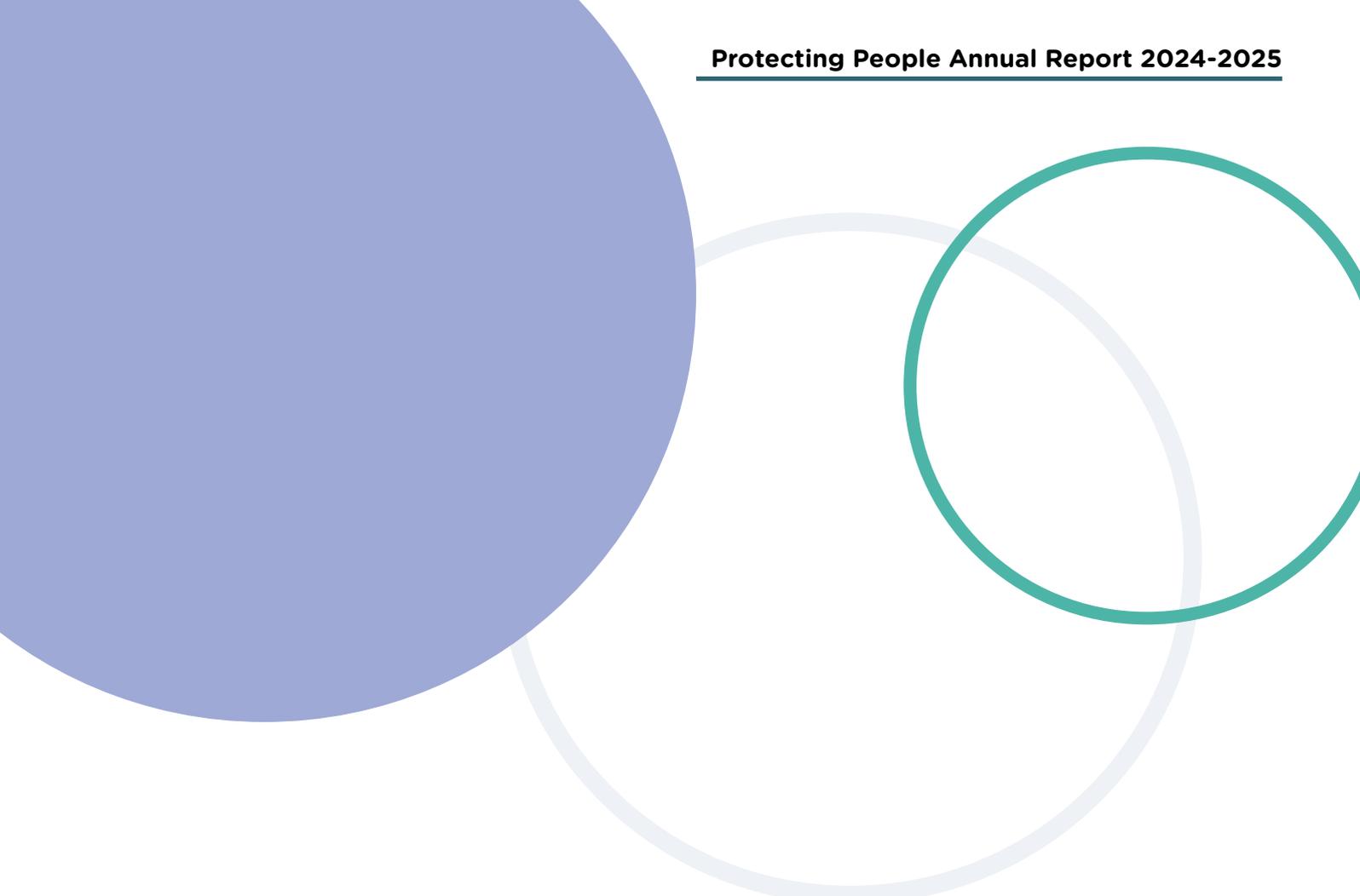
42 drug-related death notifications in 2024, a decrease of 2.3% from 2023.



35 alcohol-specific deaths in 2024, a decrease of 2.8% from 2023.



Dundee City has the highest imprisonment rate of local authorities in 2024 at 3.7 per 1,000 population.



2. Protecting People in Dundee

“Dundee’s future lies with its people. They deserve the best this city can give them. We will provide the protection they need, when they need it, to keep them safe from harm.”

2.1 What is Protecting People?

Protecting People (PP) is the term that we use in Dundee to describe the work undertaken to protect children, young people and adults from abuse, neglect and harm.

Our approach to PP includes:

- Child protection
- Adult support and protection
- Addressing violence against women and girls
- Addressing alcohol and drug use
- Suicide prevention
- The management of sexual and violent offenders (Multi-Agency Public Protection Arrangements)

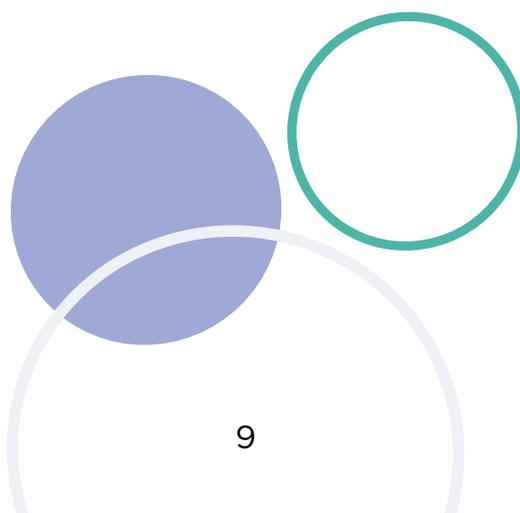
Protecting People is a shared responsibility. Across Dundee, agencies from the public sector (including Dundee City Council, NHS Tayside, Police Scotland, and the Scottish Fire and Rescue Service), the third sector (voluntary and community organisations), and the independent sector (social care providers) are working together to:

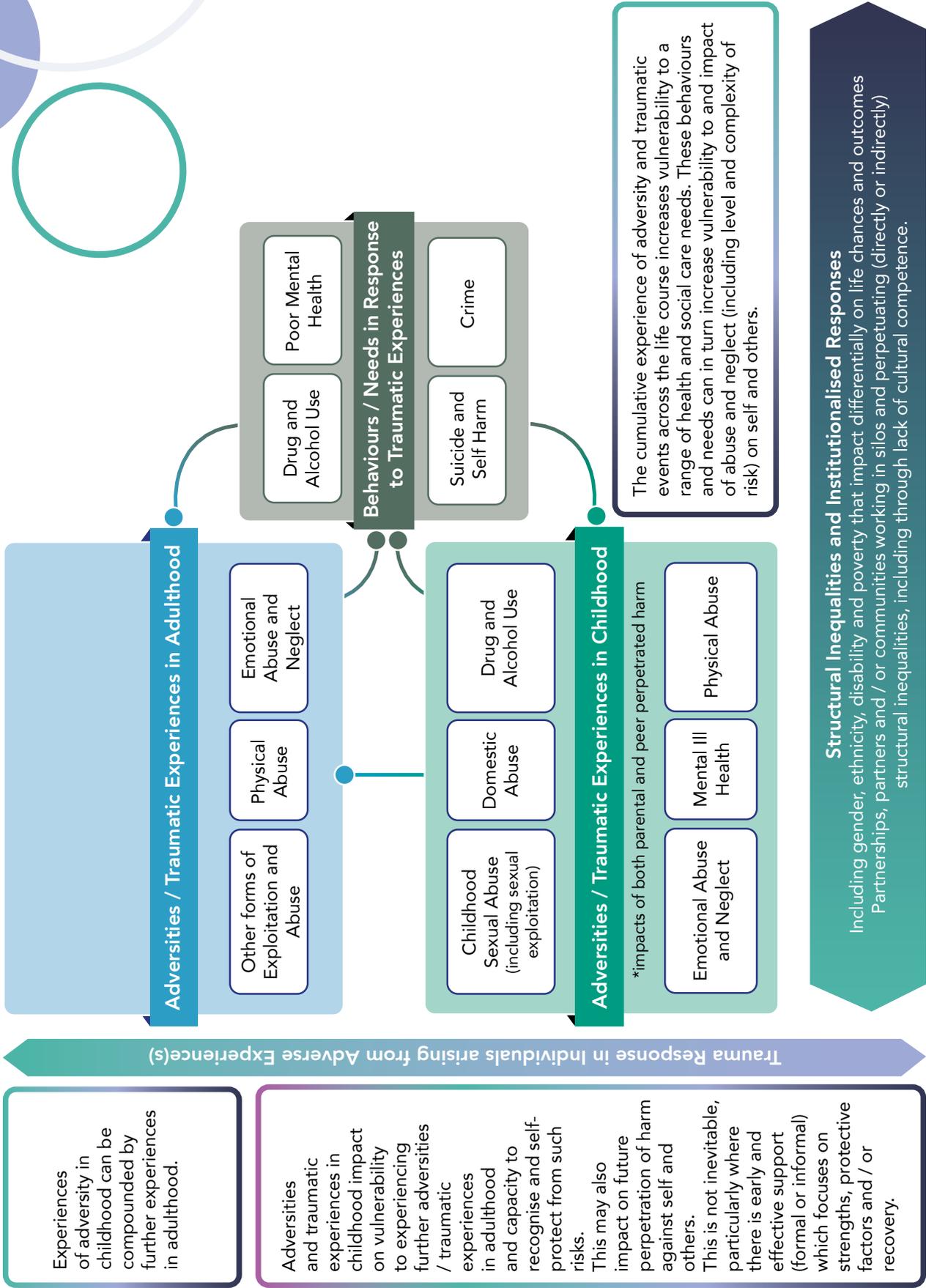
- Improve arrangements for identifying and supporting people who have been harmed or are at risk of harm. This includes involving people who have experiences harm and who have been supported through public protection services in helping to improve services and supports;
- Raise awareness of PP issues across communities, including signs that people might be at risk of harm and how to report this;
- Work together with communities to help prevent harm happening in the first place;
- Support the workforce who deliver PP service, including through learning and development activities; and
- Monitor data and other types of information about the impact services and supports have on vulnerable people so that services can learn from what is good and work together to change to things that need to be improved.

This collaborative approach extends beyond Dundee. Services also work together across Tayside and with national organisations to share learning, resources, and best practice, helping to build a stronger, more connected system of support for vulnerable people.

2.2 Why Have a Protecting People Approach?

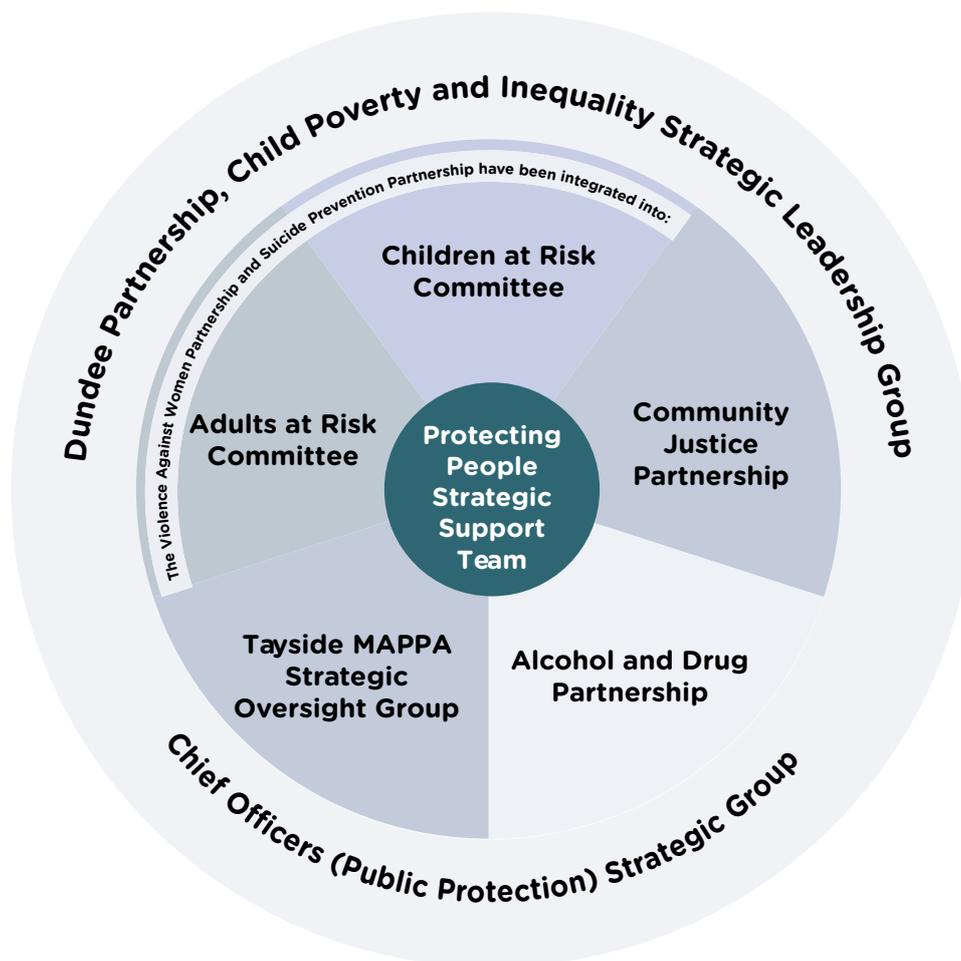
In Dundee an integrated PP approach informs all our work to protect people at risk of harm. We know that many people in Dundee have multiple, complex and changing needs which typically arise from experiences of abuse, neglect and trauma through their lives. The graphic below describes the interconnected nature of PP work and how experiences of trauma can impact life experiences and outcomes.





2.3 What are the Protecting People Committees?

The Protecting People Committees are where different organisations come together to lead, plan, and review how Dundee protects people from harm. These groups have a strategic focus, meaning they look at the bigger picture, identifying key themes, sharing good practice, and spotting gaps where improvements are needed. While the Committees work across agencies to strengthen collaboration, each individual service also has its own internal systems to make sure their responses to protecting people are effective and of high quality. Together, the Committees help ensure that Dundee’s approach to protecting people is joined-up, informed by evidence, and focused on making a real difference in people’s lives.



Each of the Committees is led by an Independent Chair. This is someone who does not work for local agencies and has significant knowledge, skills and experience in specific areas of PP, as well as experience of leading services, change and improvement. They have an important role in supporting and leading improvement work, as well as challenging local agencies where they think improvement is needed.

The wider membership of the Committees is made up of representatives from the public, third and independent sectors. As well as senior officers, some Committees have community representatives who have experience of harm and PP services (either themselves or as a family member). The Committees are supported by a number of sub-groups that cover all protection people areas of harm where staff who work in protection services contribute to developing good practice and planning and implementing improvements.

2.4 Protecting People Transition

In 2024–2025, Protecting People underwent a major transformation, adopting a new strategic governance structure. This shift moved away from the traditional ‘care group’ approach and introduced a more integrated structure designed to better reflect the complex and interconnected nature of risk and harm.

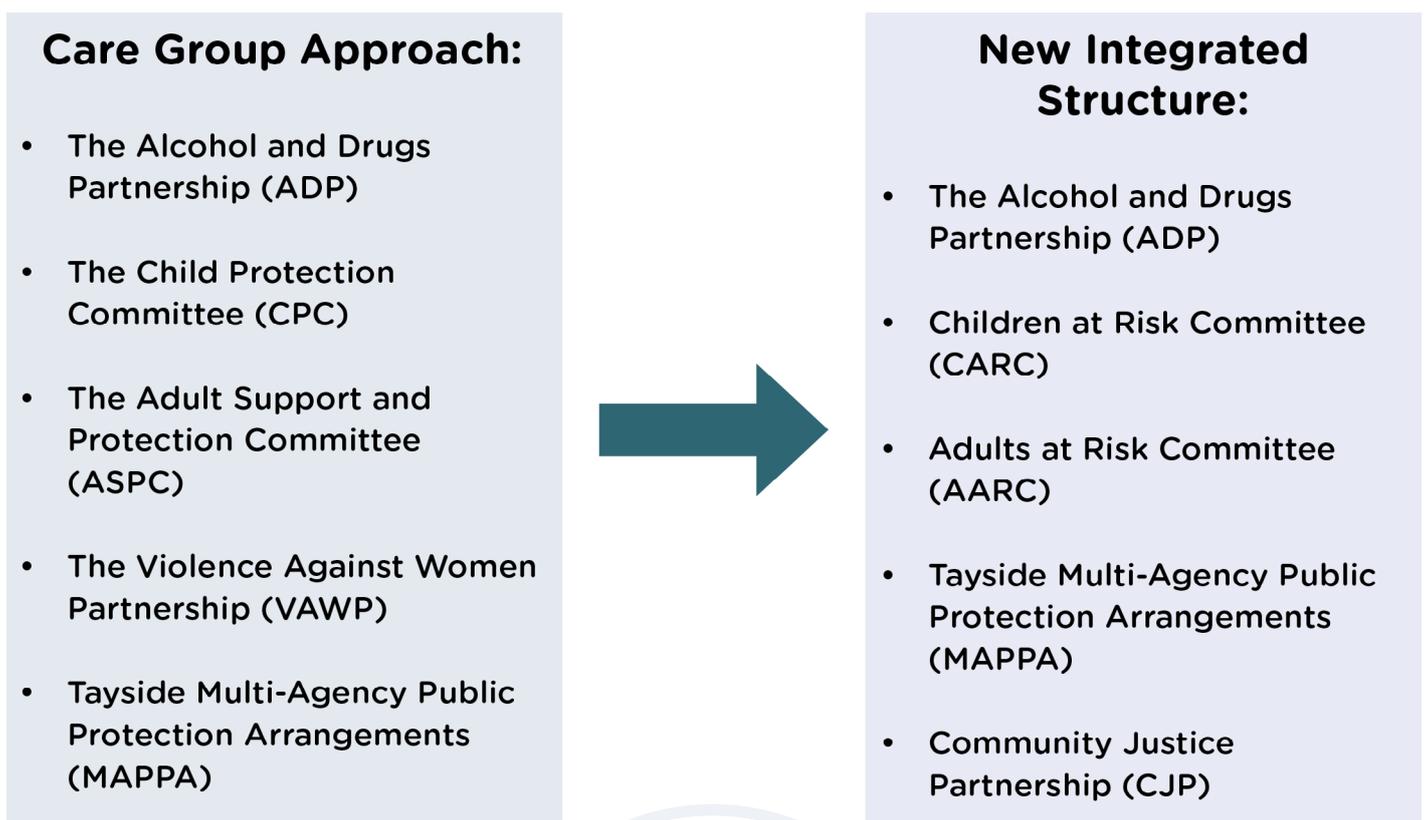
As part of this change, two new Committees were established:

- Adults at Risk Committee (AARC)
- Children at Risk Committee (CARC)

These Committees now bring together work previously carried out by the Adult Support and Protection Committee, Child Protection Committee, Violence Against Women Partnership (VAWP), and Suicide Prevention portfolio. By integrating these areas, the Committees are better positioned to respond to risk and vulnerability in a more joined-up and holistic way.

The Community Justice Partnership has also come under the Protecting People Chief Officers Group (COG) governance structure. While both the Community Justice and Alcohol and Drugs Partnerships remain separate for now, plans are in place to integrate them into the new committee structure by 2026–27.

To ensure that Violence Against Women and Girls (VAWG) remains a key focus, the former Independent Chair of the VAWP now acts as an Independent VAWG Advisor to both AARC and CARC. This role helps ensure that VAWG issues are fully embedded within the work of both Committees and remain central to strategic planning and improvement.



Key reasons for adopting this new structure were to:

Reduce duplication: with one set of cross-cutting sub-groups being created, this allows the same conversation to happen once and in a collective manner, ultimately increasing capacity of those attending meetings.

Reduce siloed working: by adopting even more of a cross-cutting approach, this allows a more holistic approach to addressing the needs of vulnerable people and families.

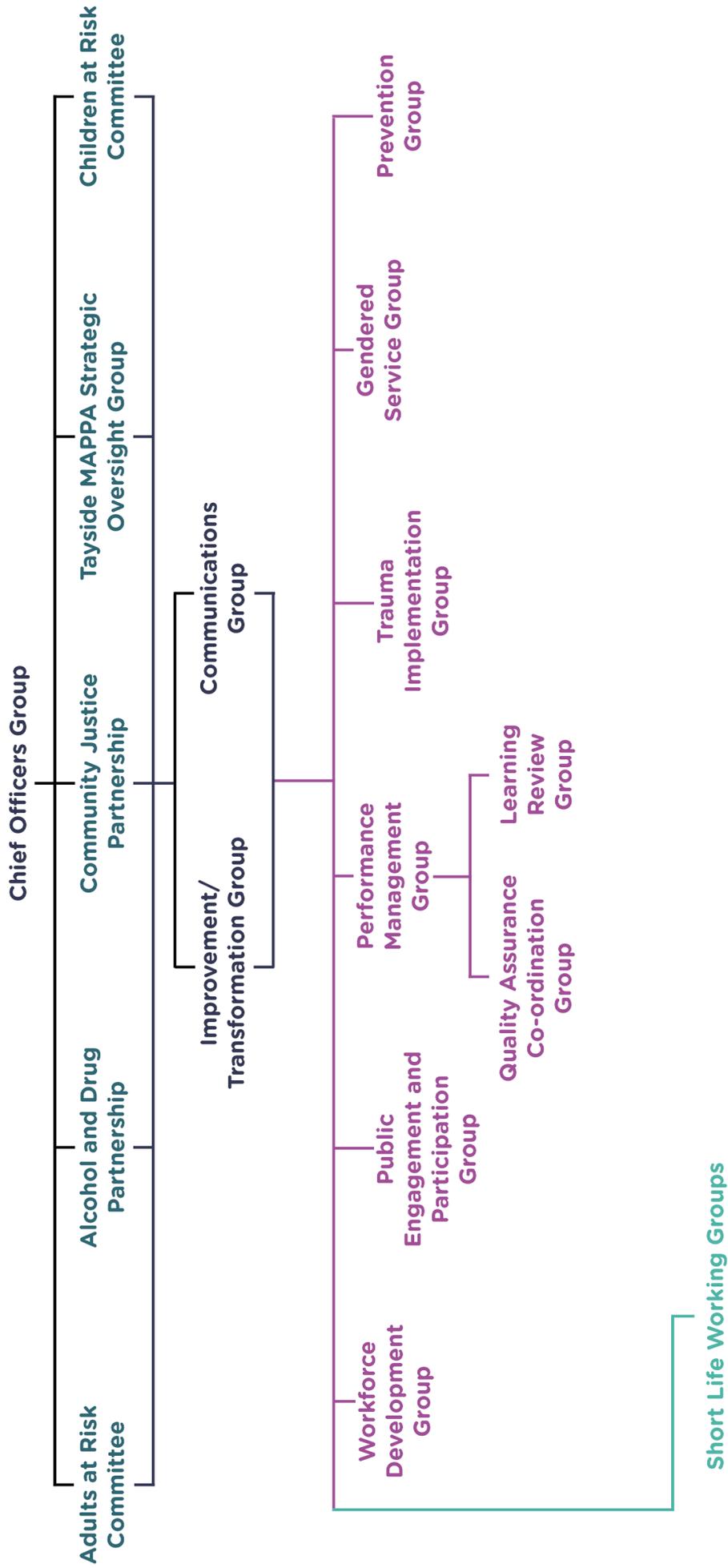
Adopt learning from the pandemic: during COVID-19, partners worked closely to understand cross-cutting risks and became more effective at recognising that people we are striving to support did not fit into one category and their complex lives and needs were the focus of more than one public protection area/Committee. By adopting this learning, we want to continue to develop working in a more holistic, whole family, trauma-informed way within the new structure.

Effectively use resources: The public protection workforce are operating in pressurised times in terms of the resources available and the Protecting People structure needs to be as effective and efficient as possible to meet local demands. Having a large complex structure meant many members of the workforce were attending multiple meetings, adding pressure and straining capacity, ultimately impacting partners ability to participate fully. Through the transition the aim is for the new structure to be more effective.

Beneath the Committee Structure is a set of sub-groups, each sub-group will cover child protection, adult protection, violence against women and girls, community justice, suicide prevention and alcohol and drugs. The sub-groups are as follows:

- Improvement and Transformation
- Workforce Development
- Public Engagement and Participation
- Performance Management (data and information)
- Quality Assurance Co-Ordination
- Learning Reviews
- Trauma Informed Practice Implementation
- Gendered Services
- Prevention
- Communications

There will also be an option to establish short-life working groups as necessary for specific, time-limited pieces of work.



3. Key Achievements in 2024-25

3.1 Cross-Cutting

Through the Transition, joint working was improved and stronger linkages between the workforce, services and Committees have been made.

Work was undertaken to refresh the Protecting People branding and website, with the landing page to be launched at the beginning of 2025-26.

Enhanced focus on suicide prevention through recruitment of a full-time Suicide Prevention Co-ordinator and publication of a two-year delivery plan, **Creating Hope Together in Dundee**.

The new Dundee and Angus Joint Learning Review Guidance that takes a multi-agency systems approach to learning and improvement was implemented, resulting in an increase in referrals and learning and improvement activity.

3.2 Adults at Risk Committee (AARC)

A Joint Multi-Agency Adult Support and Protection Audit and staff survey was carried out, highlighting the improvement of quality and quantity of chronologies and risk assessments.

Significant progress has been made on the ongoing system redesign for the development and implementation of a new Adults at Risk Pathway. The work is establishing a Multi-Agency Safeguarding Hub, Team Around the Adult/Lead Professional Model, and redesign of the **Health & Social Care Partnership Front Door Model**. This is to ensure the needs of vulnerable adults, who do not meet statutory intervention thresholds, are addressed.

The new **Adult Support and Protection Code of Practice** was integrated into the Health and Social Care Partnership Adult Support and Protection Procedures, Council Officer Training, and second worker training, drawing attention to the impact of trauma.

Developed and launched a new Adult Support and Protection Learning Framework for the multi-agency workforce.

Launched the new **Tayside Multi-Agency Protocol for Honour-Based Abuse**.

Developed and launched an e-learning on chronologies in partnership with Perth and Kinross to support practice improvement, which is now available nationally due to recognition of its quality.

Developed a new Adult Support and Protection dataset that encompass the new national minimum dataset developed in the previous year.

Large Scale Investigation procedures were updated to align with national guidance and launched.

3.3 Children at Risk Committee (CARC)

The CARC carried out a multi-agency audit in October 2024, which focussed on investigating whether appropriate assessments were being carried out and if risks are managed effectively. Findings were generally positive with areas for improvement being identified and shared with the workforce.

There has been ongoing development of the Young People's Intelligence Briefing that is informed work to address the online harms faced by young people.

During **16 Days of Action Against Gender-Based Violence** the views of primary school pupils were gathered regarding gender roles, norms and views on how to address GBV. This work highlighted the importance of primary prevention and will link to future work of the development of the Dundee VAWG Prevention Framework in 2025-26.

The CARC produced and agreed a new policy approach to 16/17-year-olds in order to ensure a streamlined response to concerns for this age group.

Following the successful regional multi-agency joint bid in 2023 to Scottish Government to become a Tayside Pathfinder site for the **Bairns Hoose Model** of Child Protection, 2024-25 marked Year one of the three-year pathfinder programme. Key successes including coordination of forensic medicals for children by the Child Protection team and a range of training for multi-agency staff.

A review of partnership services for young people in Dundee has been ongoing including work to develop a co-located multi-disciplinary team. It is anticipated that work will be completed, and teams will occupy the intended premise from autumn 2025. The model will also involve collaboration with The Corner for sexual health services and Employability colleagues to promote positive destinations for vulnerable young people on leaving school.

3.4 Alcohol and Drug Partnership (ADP)

The implementation of the **Medication Assisted Treatment (MAT) Standards** continued to be a key aspect of work undertaken by the Dundee ADP, with **significant improvements** to all Standards being made.

The Dundee Alcohol Pathway was reviewed with improvements introduced to ensure easier and quicker access to services. There will be a continued focus on the provision of **Alcohol Brief Interventions** and upskilling a range of frontline staff to deliver these interventions to the general public.

Acknowledging the increase in non-opioid substance use, cocaine brief interventions were introduced to support faster identification of individual needs.

At a Tayside level, a Tayside Near-Fatal Overdose Review Group was established, which brings partners together to learn from serious incidents and improve prevention.

An A&E pathway was developed to respond to near-fatal overdoses and increase provision of naloxone. This resulted in engagement with individuals who historically did not benefit from the specialist substance use services.

The Multi-Agency Consolation Hub (MACH) continued to provide quick joint assessment and referral for those affected by substance use and mental health. MACH also benefits from multi-agency co-ordination, led by the Dundee Drug and Alcohol Recovery Service (DDARS) Psychology Service.

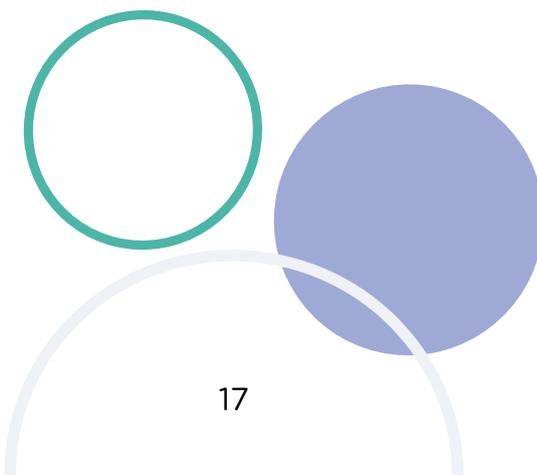
The provision of Independent Advocators has been increased to support individuals navigate and access services, specifically those accessing MAT. Independent Advocators also support people in their recovery journey and participation in lived experience work.

The Dundee Recovery Network continued to develop, with more individuals with lived and living experience inputting to local community recovery projects. This included input from family members and carers.

Work with Scottish Families has continued to implement the Whole Family Approach in Dundee. Frontline staff received training to ensure they are skilled at supporting family members and to provide them opportunities to remain engaged in their loved ones recovery journeys.

The ADP has extended its focus on prevention work by supporting the Planet Youth project, the Hot Chocolate Trust's action learning research and funding the employment of a Graduate Trainee to assist with the implementation of the **Dundee Alcohol and Drug Prevention Framework**.

Collaborated with partners through the Year of Kindness role to build kindness, compassion and hope and address stigma experienced by people who use substances. The Year officially began in January 2025 and will involve community events and shifting a focus towards improving staff wellbeing within the sector.



4. Key Priorities for 2025-26

4.1 Cross-Cutting Priorities

Embed Protecting People principles and values throughout all work conducted and across the multi-agency workforce.

Develop a clear public communication strategy and engagement plan across all Protecting People areas.

Continue to strengthen learning opportunities and communication across the Protecting People workforce.

Development of one collective Protecting People dataset to minimise duplication and improve effectiveness of data and intelligence to identify key priorities.

Finalise the development of a new Protecting People Quality Assurance Framework.

Fully implement the Dundee and Angus Learning Review Protocol including the tools and templates for the process.

Co-ordinate meaningful, trauma-informed and ongoing engagement and participation across all Protecting People areas.

Continue work on leadership and culture including targeted leadership sessions, and launch the Trauma Informed Leadership Pledge.

Continue to implement the Dundee Alcohol and Drug Prevention Framework and support the development of the Violence Against Women and Girls Evidenced-based Prevention Framework.

Development of the new interim Protecting People Integrated Strategy and Delivery Plan and continued development of the new strategic structure.

4.2 Adults at Risk Committee (AARC)

Finalise the development and implementation of the new multi-agency pathway for adults at risk of harm including co-location for screening.

Apply the gendered lens to understand and address the barriers men experience in accessing support in relation to their mental health.

Continue to develop sustainable and collaborative approach to VAW funding locally and nationally.

Whilst significant progress has been made, the Committee will continue to implement the recommendations and subsequent action plan from the Ms. L Significant Case Review and the Joint ASP Multi-agency Inspection.

4.3 Children at Risk Committee (CARC)

Finalise new arrangements for a co-located multi-disciplinary team, Care and Risk Management (CARM) procedure and implementation of Contextual Safeguarding.

Increase local work focussing on young people's experiences of gender-based violence (GBV) within their own intimate relationships and the online harm associated with these issues.

Improved support to children and young people with mental health or emotional wellbeing issues.

Preliminary Learning Review activity highlights that neglect will be a key focus.

4.4 Alcohol and Drug Partnership (ADP)

Complete and implement recommendations from the Female Drug Death Deep Dive, and the Workforce Wellbeing Survey.

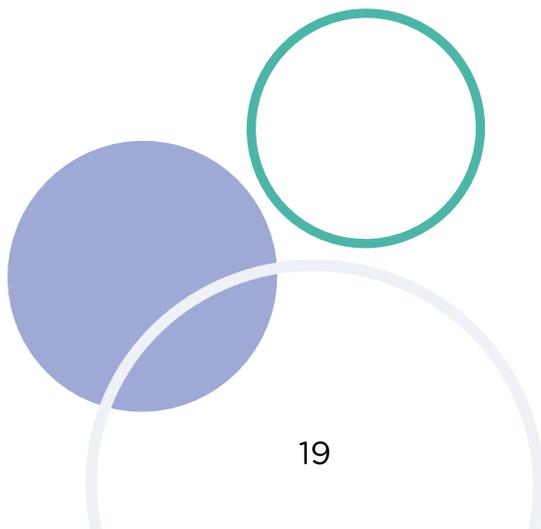
Continue the progress that has been made with the implementation of all Medication Assisted Treatment (MAT) Standards with a specific focus on implementing the **Human Rights Approach**, and expand the MAT Standards include alcohol and all drugs.

Following the launch of the Charter of Rights in 2024, work to progress this locally will be a key feature for 2025/26.

The ADP will undertake a review of all its funding allocation, initially to develop a better view of the current gaps, areas of duplication and highlight opportunities for more partnership working.

Embed the residential and community rehabilitation pathway within mainstream service provision.

Complete the Safer Consumption Facility feasibility study (with Dundee University) and identify an approach for Dundee.



5. Key Challenges in 2024-25

5.1 Key Challenges for the Adults and Children at Risk Committees

Keeping essential work progressing across the Protecting People Committees whilst facilitating the strategic transition, which will continue into 2025-26, has stretched both operational and strategic multi-agency workforce.

Volume of Learning Reviews. Since the launch of the new Dundee and Angus Learning Review Guidance in April 2024, there has been a notable increase in the volume of referrals for Multi-Agency Public Protection Learning Reviews. This surge reflects a positive shift in the culture of learning and continuous improvement across services. However, it has also presented challenges in meeting statutory timescales and progressing associated improvement work. Recognising the importance of maintaining both quality and timeliness, consideration will be given in 2025-26 to increasing capacity and resources to support the delivery of the learning review process. This will help ensure that learning is translated into meaningful action while meeting statutory expectations.

Improving communication and engagement. One size does not fit all, different audiences have different needs and preferences. Within the resources available it can be challenging to meet everyone's need and there often must be a process of prioritisation. Committees will continue to be proactive in their approach to communications and work collaboratively to maintain enhanced communication and design capacity required.

Continue embedding lived experience. The commitment to embedding lived experience within the Protecting People Committees remains a priority. It is important that we continue to embed and expand this work but ensure that all lived experience work is trauma-informed, meaningful, and not tokenistic. Looking ahead, the establishment of the Engagement and Participation Group under the new strategic structure offers a renewed opportunity to further embed lived experience meaningfully.

Increasing focus on prevention and early intervention. This continues to be a challenge, impacted by the restrained public sector financial landscape that strains capacity within frontline and strategic teams. It does not always allow for a prevention focus to be at the forefront, with resources being assigned to crisis-driven responses.

The public sector continues to face very challenging financial landscape. This has impacted a range of Protecting People services and supports, particularly those delivered in the third sector. Protecting People Committees have focused on taking positive action to mitigate risks associated with financial challenges where possible. This includes the continued work of the ADP Commissioning Group and the VAWP Funding Group.

Changing landscape in legislation across the children and adult sector. Examples of this are the Children (Scotland) Care and Justice (Act) 2024, The UNCRC being enshrined in Scottish legislation, and the updated Code of Practice within the Adult Support and Protection Act (2007).

5.2 Alcohol and Drug Partnership (ADP)

The uncertain financial future remains a key challenge for the ADP. All the funding linked to the delivery of the National Mission is guaranteed only until end March 2026. With the 2026 Scottish Elections, it is also unclear what will be the key national priorities going forward and what funding will be provided to support priorities. The Dundee ADP also have several key provisions that are only supported by short-term funding.

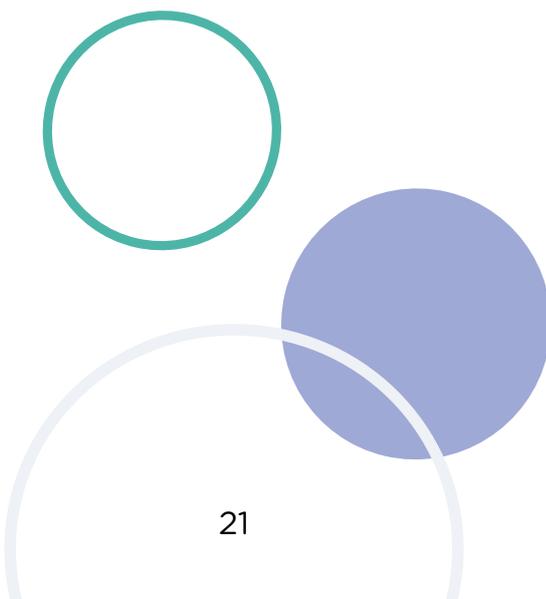
The prevalence and changing nature of drug use, and new substances being used, require frontline services to change and adjust on a regular basis. Staff require support, training, and upskilling to help them provide effective treatment and care.

Maintaining the delivery of all ten MAT Standards for the longer term will remain a challenge. This includes the future requirement to extend the implementation of the MAT Standards to all drugs and alcohol.

Implementation of the Human Rights Approach will continue to be a key priority and the challenge will be to ensure frontline staff receive training and support to implement this approach.

There is more progress to be made on the implementation of the Family Focused Approach, both in terms of providing support to families affected, and including them in their loved ones recovery journeys. This will require additional planning and resources.

Shifting resources to prevention and early intervention is a challenge for the ADP, as the impact of substance use and the need for quick effective interventions to support individuals remains high.



6. Data

6.1 Adults at Risk Committee (AARC)

4,480 ASP referrals in the year 2024-25 (an increase of 7% on the previous year) of which 90% were screened out before any inquiry or investigation.



The reasons why ASP referrals are screened out are:

41%

Existing Support Services have been Informed of the Concern and Will Manage Appropriately

22%

Other Outcomes/Decisions

8%

Adult Support and Protection Procedures Already in Place

There were 68 ASP investigations (33% decrease) and 58 Initial Case Conferences were held (35% decrease).

The highest type of harm recorded for inquiries (with and without investigation) was Welfare Concerns for adults under 65 years of age (32%) and Financial Harm (12%).



Age groups most at risk



40-64 years is split roughly equally for men and women.



25-39 has four times as many women as men (72% to 27%).

The highest types of harm recorded for ASP investigations are:

34% Welfare Concerns

9% Financial Harm

9% Psychological/ Emotional Harm

62% women

37% men

66% of harm occurs in the adult's own home.



There are twice as many women than men (62% to 37%) that have an inquiry (with or without investigation).

6.2 Children at Risk Committee (CARC)

107 Children and Young People subjected to Initial and Pre-birth Child Protection meetings.

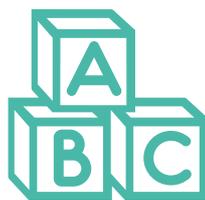
92 Children and young people **added** to Child Protection Register in 2024-25.



2,729 Police CP Concern reports.

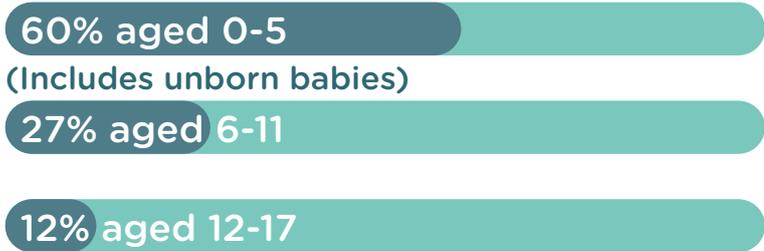
478 Initial Referral Discussions

106 Children **removed** from the Child Protection Register in 2024-25.

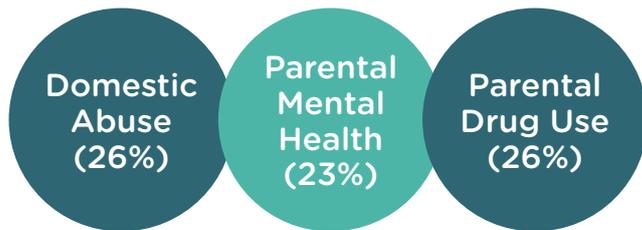


At the end of 2024-25, there were **50 children and young** on the Child Protection Register.

Age of children and young people at registration:



Most frequently recorded concerns:



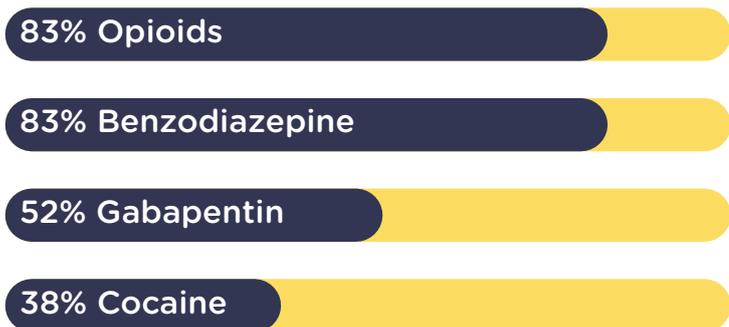
6.3 Alcohol and Drug Partnership (ADP)

Dundee had **42 drug-related deaths** in 2024 reported by the National Records of Scotland. Decrease of 9% from previous year.

Dundee had the **second highest drug death rate** of all council areas at 35.6 per 100,000. (Scotland 22.5 per 100,000)

 The **highest age group for drug deaths was that of ages 45 to 54**, and the majority of deaths were that of men (64%).

Drugs implicated in cause of death:

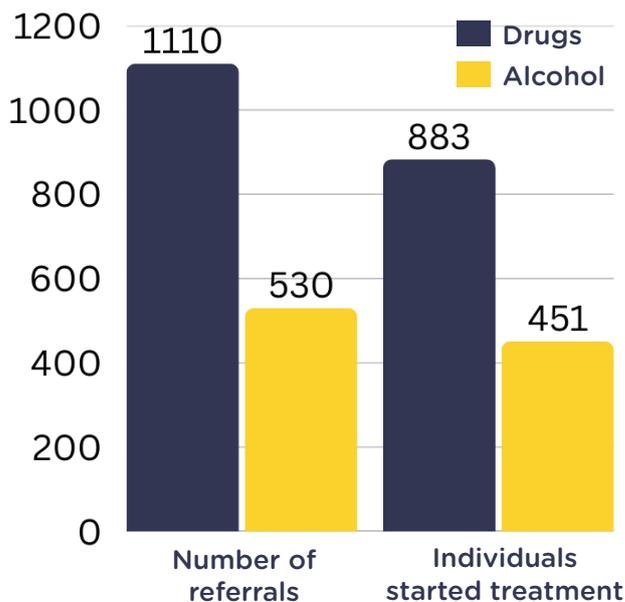


There were **36 alcohol specific deaths in 2023**, this is the fourth highest figure in Scotland when adjusted for age.



There were **251 Non-fatal overdoses (NFODs)** in 2024.

1,430 Naloxone kits were distributed.



There were **576 drug-related hospital stays for 405 patients in 2023-24** and early data suggest this is likely to be similar in 2024/25.



There were **1,062 alcohol-related hospital stays for 669 patients in 2023-24** and early data suggests this is likely to increase for 2024/25.

6.4 Violence Against Women and Girls (VAWG)

 **2,658**
 Referrals to VAWG specialist services (9% increase from 2023/24).

Ages of those referred to VAWG Specialist Services:



Referrals were predominantly made to services by Police.



528 Sexual crimes recorded by Police Scotland.

A rate of 35 per 100k population.

2,766 domestic abuse incidents recorded by Police.

Increase of 6% on last year.



68%

68% of children added to the Child Protection Register in 2024-25 had domestic abuse recorded as one of the contributing factors.

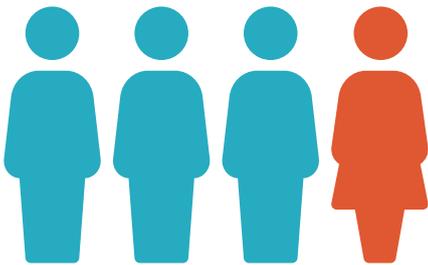
115 refuge requests to Dundee Women's Aid.

All services consistently reported **high levels of complexity within the cases referred**, particularly in relation to **mental health, housing issues, substance use and financial difficulties.**

331 MARAC referrals.

6.5 Suicide Prevention

Based on the most recent National Records of Scotland report, in 2024:



25 people died by probable suicide in Dundee (a decrease of five from 2023). Of these deaths, **76% were male.**



The rate of probable suicide mortality was **over twice as common** in the **most deprived SIMD** quintile compared to the least deprived.



The **most common age groups of death by probable suicide** were **25-44** and **45-64 years.**

