

1 Wednesday, 9 January 2019

2 (10.00 am)

3 LADY SMITH: Good morning.

4 Mr Peoples, you have another witness for us,

5 I think; is that right?

6 MR PEOPLES: Yes, good morning. The next witness is

7 Alan Swift, who is a former employee of Barnardo's.

8 LADY SMITH: Thank you.

9 ALAN SWIFT (affirmed)

10 LADY SMITH: Please sit down and make yourself comfortable.

11 If you just make sure you do use that microphone, it's

12 really very helpful. Are you comfortable with me

13 calling you Alan --

14 A. I am, my Lady.

15 LADY SMITH: -- or do you prefer Mr Swift?

16 I'll now pass over to Mr Peoples and he'll explain

17 what happens next.

18 Questions from MR PEOPLES

19 MR PEOPLES: Good morning, Alan.

20 A. Good morning.

21 Q. Can I just, by way of introduction, explain that there's

22 a red folder on the desk in front of you and that

23 contains a copy of two statements that you've provided

24 in advance of today to the inquiry. It's there for your

25 use at any stage and the questions I'm going to ask will

1 to some extent be based on your statement.

2 I think you've got some other papers there and if  
3 they do assist you at any point to help with any  
4 questions that come up, then we have no objection to you  
5 referring to things that you may have brought with you.

6 Before I start, can I just, for the benefit of the  
7 transcript, give the reference numbers of the statements  
8 you've provided; these are the numbers we use to  
9 identify your statements.

10 The first statement which you provided is  
11 WIT.003.001.8019 -- I should say that your statements  
12 will also come up on the screen in front of you and you  
13 can certainly use that also if you find it more  
14 convenient.

15 You have also more recently, I think, provided  
16 a supplementary statement which I may ask you something  
17 about today and that is WIT.003.001.8665.

18 Can I ask you in relation to the first statement to  
19 turn to look at the red folder at this stage. If you  
20 could confirm that the red folder contains page 8033.  
21 Can you confirm that you have signed your statement on  
22 the final page?

23 A. That's correct, yes.

24 Q. I think it's correct to say that the supplementary  
25 statement is a shorter statement of two pages and

1           although you haven't, I think, signed that particular  
2           supplementary statement, can you confirm that's a true  
3           copy of the statement that you've provided to the  
4           inquiry?

5           A. Yes, that's a true copy.

6           Q. At this stage can I just ask you to confirm that  
7           you have no objection to the statements that you have  
8           provided being published as part of the evidence to this  
9           inquiry and that you believe the facts stated in those  
10          statements are true?

11          A. I have no objection and, yes, they're true.

12          Q. If I could begin by turning, I think, to the first page  
13          of your first statement, the signed statement, and ask  
14          you to confirm, without giving your full date of birth,  
15          that you were born in 1946?

16          A. I was, yes.

17          Q. On that page, at page 8019, page 1 of the first  
18          statement, you give us some information about your  
19          qualifications and work experience prior to joining  
20          Barnardo's in January of 1984.

21                 You hold, I think, various degrees; is that correct?

22          A. That is correct, yes.

23          Q. I don't need to take you to the details as we have them  
24          set out there and we have read them and can read them.  
25          Essentially, you have obtained qualifications relating

1 to social work and indeed your work experience has been  
2 in the field of social work and social services; is that  
3 correct?

4 A. That's correct. I did seven years as a lecturer in  
5 social work, so an academic and research background as  
6 well.

7 Q. I was going to say that although, generally speaking,  
8 you have experience in social work, you have done  
9 a number of different roles, one of which, I think, was  
10 that you worked in a local authority setting, as you  
11 tell us on page 8019, and, as you say, from I think 1977  
12 to 1984 you were a lecturer in social work at the  
13 University of Kent; is that correct?

14 A. Yes. My practice experience was in social services,  
15 basically as a practitioner, a senior practitioner, and  
16 for several years as a manager.

17 Q. So in the local authority setting, you had experience of  
18 being a fieldwork social worker as well as being in  
19 a managerial capacity running services for a local  
20 authority?

21 A. That's right. A lot of my background is in childcare  
22 social work, but I have experience across the board  
23 because we had something called "generic  
24 social workers", so for instance I was an authorised  
25 mental welfare officer and various other things.

1 Q. And I think although perhaps the system was a little bit  
2 different in England than Scotland --

3 A. That's right.

4 Q. -- because of different legislation, to some extent  
5 there is a similarity in that I think the path that  
6 Scotland went down in 1968 was to create a generic  
7 social work role under the Social Work (Scotland) Act,  
8 and I think that's a legislation you'll have some  
9 familiarity with now.

10 A. You were ahead of us.

11 Q. I think what you tell us -- in your supplementary  
12 statement, WIT.003.001.8665, you give us a bit more  
13 information, I think, at page 8665 about the time that  
14 you were a lecturer in social work between 1977 and  
15 1984, and you tell us that you taught a core course on  
16 social work with children.

17 A. That's right, yes.

18 Q. And indeed you give us information about various  
19 publications that you were involved with. So you've had  
20 quite an extensive experience in social work with  
21 children and I take it that would have obviously had  
22 a focus to some extent on children in residential care?

23 A. Not really.

24 Q. No?

25 A. No. The experience I have and the experience I brought

1 to Scotland was mostly fieldwork and that was one of the  
2 sort of interesting things -- I wanted to gain some  
3 experience of managing residential work, but that was,  
4 I think, what marked me out as different from my  
5 colleagues when I first joined Barnardo's in Scotland.

6 Q. Yes, I suppose you're in a sense coming here today, your  
7 experience, direct experience of residential social care  
8 was gained largely through your involvement with  
9 Barnardo's between 1984 and 1997?

10 A. That's correct, yes.

11 Q. Before that, when you were working in the public sector  
12 in England, would you have had some dealings with local  
13 authority establishments, residential establishments,  
14 for children, or was that not an area you had great  
15 involvement with?

16 A. I think the second part of your question, yes: I didn't  
17 have much involvement, no.

18 Q. So far as Barnardo's is concerned, as you say, you left  
19 the university, I think, in 1984, University of Kent,  
20 and then you moved to Scotland in January 1984 to take  
21 up the post of assistant divisional director in what  
22 I think is termed the Scottish division of Barnardo's.

23 A. Yes.

24 Q. And I think we've heard some evidence, and perhaps you  
25 can confirm, at that time, at any rate, there was

- 1           probably -- is it eight divisions across the UK,  
2           including a Scottish division?
- 3           A.   And a presence in Ireland as well.
- 4           Q.   These divisions would be headed up by a divisional  
5           director, the title may have changed from time to time,  
6           but essentially the person in charge was a director,  
7           a divisional director?
- 8           A.   That's it, yes.
- 9           Q.   And you were in a senior capacity within the Scottish  
10          division as assistant divisional director for a period  
11          of some 13 years?
- 12          A.   That's right, yes.
- 13          Q.   Just so that we've got some points of reference, I think  
14          for the first part of your time as an assistant  
15          divisional director, the divisional director would be  
16          John Rea?
- 17          A.   That's correct, yes.
- 18          Q.   We understand that Mr Rea left Barnardo's in 1991 or  
19          thereabouts and he was succeeded as director by  
20          Hugh Mackintosh, who would have been the director for  
21          the remainder of your period of employment?
- 22          A.   Yes, I worked to Hugh Mackintosh.
- 23          Q.   And I think before Hugh Mackintosh became the divisional  
24          director, he had been the deputy divisional director,  
25          I think.   Would that be his correct designation?

- 1 A. Yes.
- 2 Q. Was he essentially on the same level as you, albeit  
3 he had a title "deputy"?
- 4 A. Yes, when I first went to Barnardo's in Scotland, there  
5 were a small number of assistant directors in the  
6 management team. Hugh was the more senior of us, so he  
7 did have the title of deputy, yes.
- 8 Q. But essentially, were you doing the same sort of roles  
9 and functions?
- 10 A. Yes.
- 11 Q. On the second page of your first statement at page 8020,  
12 you tell us a little bit about the role and functions of  
13 an assistant divisional director. One of the functions  
14 that you mention is that you, in that capacity, had line  
15 management for certain projects, as I think is the term  
16 that's used.
- 17 A. Yes.
- 18 Q. That included two establishments that we've heard some  
19 evidence about in this inquiry, Craigerne and South  
20 Oswald Road.
- 21 A. That's right, yes.
- 22 Q. These became your line management responsibility from  
23 1984 on until these places closed in 1989 and 1990;  
24 is that correct?
- 25 A. Pretty much so. There was a period in the middle

1            somewhere -- I think it would be 1986 -- when I was off  
2            ill for about six months.

3            Q. But generally speaking in that period you would have  
4            the responsibility --

5            A. Broadly speaking, yes.

6            Q. You tell us, and you explain the reasons in your  
7            statement, your first statement, why these  
8            establishments closed. Craigerne closed, you tell us,  
9            in 1989. It was in the Borders?

10          A. Yes.

11          Q. And that South Oswald Road, in Edinburgh, closed in  
12          1990?

13          A. That's right, yes.

14          Q. You say that subsequently there was the development of  
15          another project called Blackford Brae and I think your  
16          statement explains what that project was all about.

17          A. Yes, it was born out of the two closures, if you like,  
18          yes.

19          LADY SMITH: And it used the same building in South Oswald  
20          Road, did it?

21          A. The South Oswald Road building, the main big building.

22          LADY SMITH: Number 91 as it then was?

23          A. Yes, we put a lot of capital into converting that into  
24          a school. So that became the community-based special  
25          school, if you like, and then for the residential

1 dimension I commissioned a house in Minto Street, a much  
2 smaller unit, which made more sense than the sort of  
3 12-person original South Oswald Road model.

4 So what had been the residential establishment  
5 became a special education provision with a principal  
6 and teachers.

7 LADY SMITH: Right. Thank you.

8 MR PEOPLES: Maybe I'll just take that from you. We have  
9 had some evidence from a former colleague who worked at  
10 Minto Street, a Mr Wilson. I think you'll know  
11 Sandy Wilson.

12 A. I do, yes.

13 Q. I think he also worked at South Oswald Road. We were  
14 told he was there for a time as well. I think he  
15 indicated that he moved to Minto Street in about 1989 or  
16 thereabouts. Would that be broadly speaking the time at  
17 which --

18 A. It may have been a little later than that.

19 Q. Okay. It's not material for present purposes. As  
20 you've told us, South Oswald Road was essentially  
21 a residential unit for children.

22 A. Yes.

23 Q. And prior to the creation of the Blackford Brae project,  
24 would children at South Oswald Road -- where would they  
25 have been educated?

- 1 A. Well, they attended either local schools or local  
2 specialist provision.
- 3 Q. So it wasn't a special school in that period?
- 4 A. Originally, no. No, it wasn't.
- 5 Q. Whereas Craigerne in the Borders was principally  
6 a residential special school?
- 7 A. It had been for quite a while when I took over  
8 management, yes.
- 9 Q. What you tell us, I think, and what you've just told  
10 her Ladyship, is that when Blackford Brae opened up,  
11 essentially on the same site, it was operating as  
12 a special school?
- 13 A. Yes.
- 14 Q. But not a special residential school?
- 15 A. That's correct.
- 16 Q. So it was taking day pupils?
- 17 A. Yes, it was a completely different model from the  
18 Craigerne set-up.
- 19 Q. But the part of the project that had some form of  
20 residential facility, was that based at Minto Street?
- 21 A. That's right, yes.
- 22 Q. Because in your statement, your first statement, on  
23 page 8021, page 3, I think you say that:
- 24 "The aim of this new project was to establish  
25 a community-based special school in Edinburgh, but the

1 project would also provide very flexible respite care in  
2 a separate small five to six-bed group home."

3 Was that Minto Street?

4 A. That's Minto Street, yes.

5 Q. When you say "respite care", you'll appreciate that our  
6 inquiry is concerned with more permanent care, where  
7 the -- it's not a matter of simply the child concerned  
8 spends time, a period of time, by way of respite, in  
9 another location. It's their main home, if you like.

10 A. Yes.

11 Q. Was Minto Street in that category or not for some  
12 children, in reality?

13 A. Not really. I should explain that we had a rejigging of  
14 assistant director portfolios. So as the Blackford Brae  
15 new project got underway, that transferred to, I think,  
16 Romy Langeland.

17 Q. Right.

18 A. So I wouldn't know in too much detail about how it --  
19 but the way it was envisaged was that we were moving the  
20 whole concept of children who had this type of need away  
21 from a long distance -- Peebles is some way from  
22 Edinburgh -- and trying to keep it in the community.  
23 The local authority were very keen. That was a model  
24 they liked to pursue and it appealed to us as well.

25 Q. Maybe we'll have to read Mr Wilson's evidence again

1           about Minto Street, but I think the impression may have  
2           been gained that at least some of the residents there in  
3           his time would be there for quite an appreciable period  
4           of time. Could that have been the case?

5           A. I have no way of knowing, but the way it was envisaged  
6           was we were trying to avoid the need for youngsters to  
7           go into any kind of lengthy care. We were trying to  
8           basically keep them on the island, and if there was  
9           a possibility of respite that took the sting out of the  
10          present situation so that there was a better chance of  
11          them going back home, basically, that was the idea  
12          anyway.

13          Q. You say the background to the closure of particularly  
14          Craigerne was more to do with a change in the approach  
15          of the local authorities who were placing children in  
16          institutions such as Craigerne. I think you said that  
17          there was an issue of expense and also an issue of  
18          distance between the residents' location at Craigerne  
19          and their community --

20          A. That's right.

21          Q. -- or family home.

22          A. Hugh Mackintosh and I were very careful to discuss with  
23          councillors education, social work, what the  
24          implications would be if you closed a unit like  
25          Craigerne. If you close it, you can't resurrect it, so

1           it's a big move. I have to say that there wasn't sort  
2           of universal agreement. Shall I sort of say something  
3           about that?

4           Q. If you want, yes.

5           A. Hugh and I met with councillors down at Craigerne and we  
6           gave them a very clear picture of what the school did  
7           and they were very well aware of what the costs were.  
8           And I think that their primary focus was the expense.  
9           We spoke with -- Hugh and I together spoke with the  
10          senior psychologists, educational psychologists back in  
11          Edinburgh. How shall I put this tactfully? The older  
12          ones felt that we really should keep the place open, but  
13          the younger ones that we were talking to felt that  
14          a different way forward was required. Social Work were  
15          very clear: they thought that Edinburgh children should  
16          be in Edinburgh.

17          Q. Whether in a residential unit in Edinburgh or in the  
18          community with support in the form of a special day  
19          school?

20          A. Or another option was --

21          Q. Foster care?

22          A. Foster care. We had very close links with  
23          Lothian Region with our family placement projects as  
24          well, so that was the way it was going. Basically,  
25          there was no way we were going to be able to sustain the

1 unit or the school if people didn't want to buy the  
2 product.

3 Q. So if the local authorities were looking to make  
4 alternative provision, Craigerne simply wouldn't be  
5 their port of call, it had to effectively close, would  
6 it?

7 A. It had to close. We wound it down over an 18-month  
8 period so that the youngsters who were being educated  
9 there could finish their primary education, which was an  
10 expensive option.

11 Q. South Oswald Road, just to follow this up, is slightly  
12 different because the distance issue doesn't come into  
13 play. Was South Oswald Road doing something not  
14 dissimilar to Craigerne, albeit it was catering for  
15 children with complex behavioural, social, emotional  
16 needs, like Craigerne?

17 A. In broad terms, yes.

18 Q. Except that the difference being that South Oswald Road  
19 wasn't an educational establishment, it was simply  
20 a place to house children with those needs?

21 A. It was, yes.

22 Q. Away from home?

23 A. Yes.

24 Q. And that they would be schooled in the community or in  
25 special schools in the community?

- 1 A. Correct, yes.
- 2 Q. But even that arrangement, it appears, was going out of  
3 fashion because you tell us South Oswald Road also  
4 closed and there was a different model created.
- 5 A. Yes.
- 6 Q. Which essentially was to create a day facility, a day  
7 school, special school?
- 8 A. That's right, yes.
- 9 Q. So was the trend towards trying to avoid placing -- was  
10 the local authority's policy so far as possible to avoid  
11 placing children with complex behavioural, emotional  
12 need in residential establishments, whether in the local  
13 authority area or elsewhere, if at all possible?
- 14 A. I think it's the last bit that matters, the "if at all  
15 possible". So it definitely became more possible, if  
16 you see what I mean: more children could be placed and  
17 we had a project called a special families project based  
18 in Edinburgh and we were able to offer what you might  
19 call enhanced fostering placements.
- 20 Q. I suppose it begs the question that if for a particular  
21 child with complex behavioural or emotional needs foster  
22 care wasn't the appropriate destination, staying in  
23 their home wasn't the appropriate destination, respite  
24 care wasn't the appropriate destination, where were the  
25 special residential units that Lothian could turn to if

1           they needed to find a place then, if Craigerne didn't  
2           exist any more and South Oswald Road didn't? Where  
3           would they go?

4           A. I'm not sure I know the answer to that. That's for the  
5           local authority, I guess.

6           LADY SMITH: Well, there came a stage that the local  
7           authority had its own institutions, didn't it?

8           A. It did have some, yes.

9           LADY SMITH: I can't remember when it began in this area,  
10          but perhaps we're looking at about that time.

11          A. Yes. I can't cast my mind back and pinpoint what they  
12          were.

13          MR PEOPLES: Because the need for that type of provision may  
14          not have disappeared, despite the thinking being try to  
15          avoid it if at all possible, therefore there must have  
16          been some sort of provision, alternative provision, that  
17          you could use that was effectively the same type of  
18          provision as Craigerne, albeit it might be local  
19          authority run?

20          A. That they could use, yes. We didn't provide  
21          a comprehensive service to Lothian.

22          Q. So you were responsible for these two places. We've  
23          heard some evidence about other establishments in  
24          Scotland run by Barnardo's and I just want to be clear.  
25          I think by the time you arrived on the scene with

1           Barnardo's, the unit or home at Glasclune had been  
2           closed.

3           A. I believe so.

4           Q. And I think around the time you arrived, I think the  
5           establishment at Tyneholm was about to or had closed or  
6           just closed. Would that be correct? I think the  
7           information I have is that --

8           A. I think that's probably right.

9           Q. -- it was closing around about 1985.

10          A. Was it? Right. I don't remember too clearly, but --  
11          yes, I don't remember it into the mid-80s.

12          Q. Anyway, you didn't have any direct managerial  
13          responsibility for either of those places at any time?

14          A. No. That's right.

15          Q. If I could just look at the two that you did have  
16          responsibility for, if I may.

17                 In the case of Craigerne, as I understand it, as  
18                 assistant divisional director, you would have had line  
19                 management responsibility between 1984 and 1989 --

20          A. Yes.

21          Q. -- for Craigerne until its closure. Dealing with  
22          a matter which is obviously relevant for our inquiry,  
23          am I correct in thinking that your statement discloses  
24          that during that period, between 1984 and 1989, you  
25          didn't become aware of any allegations or complaints by

1 or on behalf of residents about abuse or ill-treatment  
2 by staff employed at the school or of concerns about the  
3 conduct or behaviour of staff towards residents?

4 A. No. That's correct, I didn't become aware of anything.

5 Q. If I can just ask you really the same thing in relation  
6 to South Oswald Road. You had line management  
7 responsibility in the case of South Oswald Road between  
8 1984 and 1990?

9 A. Yes.

10 Q. And again, during that period, am I correct in  
11 understanding from your statement that you were not  
12 aware of any allegations or complaints by or on behalf  
13 of residents about abuse or ill-treatment by staff  
14 employed at South Oswald Road or of concerns about the  
15 conduct or behaviour of staff towards residents?

16 A. I wasn't aware of anything, no.

17 Q. But as I think we've perhaps already discussed, both of  
18 these establishments, albeit one was a school and the  
19 other was effectively a children's home, a residential  
20 home, both accommodated children with complex social  
21 behavioural and emotional needs; is that correct?

22 A. That is correct, yes.

23 Q. I suppose it would follow -- and I think we've had some  
24 evidence to this effect in any event -- such children  
25 would be liable, due to their problems, to exhibit

- 1           challenging behaviour?
- 2       A.   Yes.
- 3       Q.   Can I ask you this: were all staff at these
- 4           establishments qualified and/or specially trained to
- 5           deal with children with such problems, all staff?
- 6       A.   The level of qualifications in our residential projects
- 7           was -- there were not many qualified CQSWs. That's been
- 8           an issue, actually. There was some training, ongoing
- 9           training, but if I were to reflect backwards, I would
- 10          say it was patchy.
- 11       Q.   Okay. Because of the nature of the profile of the
- 12          children at these establishments and the fact that they
- 13          might from time to time exhibit challenging behaviour,
- 14          there might be occasions when some degree of restraint
- 15          would be considered appropriate.
- 16       A.   Yes.
- 17       Q.   Against that background, can I ask you this: were all
- 18          staff at both establishments specially trained in how
- 19          appropriately to use restraint when required, including
- 20          special training in appropriate restraint methods and
- 21          techniques?
- 22       A.   Again, my answer would honestly be that it was patchy.
- 23          There were training programmes, but looking back,
- 24          I would say it wasn't as methodical as you'd expect to
- 25          find in modern practice.

1 Q. And I think perhaps that maybe echoes something that we  
2 heard. We've had some evidence from a former project  
3 leader at South Oswald Road between 1985 and 1990, and  
4 I think you'll know who that is.

5 A. Yes.

6 Q. I don't need his name, by the way. He could not recall  
7 receiving training specifically geared either to --  
8 well, either geared towards caring appropriately for  
9 children with complex social behavioural and emotional  
10 problems, or indeed specific training being given in the  
11 use of restraint methods and techniques. That was his  
12 recollection, he couldn't recall that and maybe that  
13 confirms, I think, what you've told us a moment ago that  
14 all staff didn't necessarily receive special training.

15 A. Yes, but I don't want to say that there was no  
16 training --

17 Q. No.

18 A. -- because there was.

19 Q. You're saying there were training opportunities and  
20 people did get training, but what you're trying to say  
21 is you can't say that all staff were trained as  
22 a matter of fact in both of these areas?

23 A. No. If I could just sort of explain how the training  
24 was structured, and I think if I do that you'll see also  
25 where the holes and gaps are. We had a staff training

1 and development team based at headquarters. I think  
2 there were five members of that team. Each project had  
3 a staff development and training officer attached to  
4 them and in the case of, if we're talking about South  
5 Oswald Road, it was a woman called Margaret Jack, who  
6 had previous residential experience herself.

7 What would happen was that the project leader and  
8 I would get together with Margaret Jack and put together  
9 a training plan. So we would agree broadly the areas  
10 that should be covered in the course of the year.

11 I can't put my finger on a particular year's training  
12 plan, but I would be very surprised if it didn't deal  
13 with issues like how do you provide a service to  
14 children, how do you communicate with them, what's the  
15 nature of their special needs, how might you address  
16 them, and things like child protection procedures.  
17 Those I would expect to be part of a sort of ongoing  
18 plan.

19 We routinely allocated about 5% of every project,  
20 actually, but any project's budget into training. But  
21 whether that met the sort of agenda that you've just  
22 described, I think it would be patchy.

23 Additionally, staff got the opportunity to attend  
24 some outside courses, but one of my reflections about  
25 the provision of residential care is that it's

1           actually -- it seemed to me to be far more difficult to  
2           deliver training in a residential context than it did in  
3           our fieldwork programmes.

4           So for instance, if you wanted to do an away day,  
5           how do you do that? I actually managed to set it up  
6           once: we got volunteers from the new families and  
7           special families project, who in any case were familiar  
8           with a lot of these youngsters, and it enabled South  
9           Oswald Road staff to actually get away for a day and  
10          talk about how they functioned as a unit. But that was  
11          something that was quite difficult to do.

12          So I don't think that the training on the  
13          residential side of those two projects was of the same  
14          order or calibre as what we were doing in the fieldwork  
15          projects, and the fieldwork projects tended to be  
16          staffed by people with CQSWs so you had a common  
17          baseline to start from. Whereas because of recruitment  
18          and other issues with residential care, it was more of  
19          an uneven --

20        Q. In a sense you're telling us, I suppose, that a lot of  
21        the residential care staff may not have had  
22        qualifications in the first place and, to some extent,  
23        the training could, for the reasons you explained, be  
24        patchy in their case and in the case of the people who  
25        did have qualifications in the fieldwork social work

1 side, they perhaps had better training in reality and  
2 perhaps it was easier to deliver that training to them.

3 A. I think that's a fair point. Just drawing on experience  
4 when I was at the University of Kent, I was responsible  
5 for admissions, and it was not uncommon for a person  
6 joining the course to be seconded by their employer.  
7 I'm scratching my head to think of anybody that was  
8 seconded by Barnardo's for professional training,  
9 although ironically, when we closed Craigerne, we  
10 seconded John McFadden and John Cameron to professional  
11 training after the unit had closed.

12 Q. But not during its existence?

13 A. That's my point, yes.

14 Q. A bit late in the day perhaps, at least in the case of  
15 those who were at Craigerne?

16 A. Fair comment.

17 Q. Just in terms of the issue of restraint as well. I'll  
18 maybe just ask you a little bit more about that. One  
19 thing that the former project leader said, the one that  
20 I mentioned, was that there was, I think he recalled,  
21 discussion within the unit about whether staff were or  
22 might be exacerbating previous pre-care trauma by  
23 resorting to restraint. I think you'll understand why  
24 that discussion could take place.

25 A. Absolutely, yes.

1 Q. As assistant divisional director with responsibility for  
2 that unit, were you aware that such discussions within  
3 the unit were taking place among staff and were you  
4 aware of the concerns that they appeared to have been  
5 voicing and discussing?

6 A. I used to attend staff meetings there fairly regularly  
7 and would listen to the discussions, which were  
8 exchanges, as I saw it, between the staff as to how they  
9 might best help individual children.

10 Q. But did this attendance bring to your attention the  
11 tension or concern that they had about using restraint  
12 in the case of vulnerable children who were displaying  
13 challenging behaviour with complex needs?

14 A. Yes, it did, yes.

15 Q. With that knowledge, what, if any, steps were taken by  
16 the divisional management team to address that concern?  
17 Can you recall if any steps were taken?

18 A. No, I mean, I can only really refer back to the training  
19 plan. There are clearly holes in this whole strategy.

20 Q. Because I suppose if these concerns were being voiced,  
21 then that would be all the more reason to look at the  
22 issue quite closely and devise some general policy or  
23 strategy to address that concern; would that be fair  
24 comment?

25 A. I think it's fair comment, yes.

- 1 Q. You can't recall that happening in --
- 2 A. Not in the systematic way that you're implying, no.
- 3 Q. The other matter I would ask you about is that I think
- 4 we understand from the evidence of the project leader
- 5 that nothing was done to prepare all children for the
- 6 possibility that restraint might be used after their
- 7 admission to the establishments like South Oswald Road.
- 8 Was that something that you can confirm, that that
- 9 simply wouldn't have happened, they wouldn't have been
- 10 given prior education of the fact that restraint was
- 11 something that might be a fact of life?
- 12 A. I don't know, but I imagine that if that's what Jim
- 13 said, then that would be correct.
- 14 Q. I suppose my next question would be, if we accept that
- 15 what he said was accurate, and you've got no reason to
- 16 question it, I think you say, would that have been
- 17 a deliberate policy decision by the organisation or by
- 18 the division, and if so, why and by whom was that policy
- 19 decision taken? Is it possible to identify that that
- 20 was a policy position that was reached after considered
- 21 discussion?
- 22 A. I don't think it was. Since I prepared this statement,
- 23 I've had cause to reflect on quite a lot of things.
- 24 Last weekend, I Googled to see what current practice
- 25 looks like and I was quite shaken on a number of counts

1 to see that what would be practices described in some  
2 guidelines I looked at dated 2005, these were not the  
3 things that we were routinely doing and it seems  
4 obvious, looking back, that one should make youngsters  
5 aware that restraint may be part of what they would  
6 experience, and not only that, should it happen, they  
7 should have the opportunity to discuss afterwards what  
8 the impact has been and what the effect has been. So  
9 I think that was a gap.

10 Q. I take it you didn't see anything of that type of  
11 approach being adopted in your time, if restraint had  
12 been used? You might become it had been used but I take  
13 it there wasn't a practice of talking to the child or  
14 discussing it or even inviting them to comment on  
15 whether it was fair or appropriate?

16 A. I think that after the event, there was talking down,  
17 you know, sort of de-escalation, if you like, why this  
18 has happened and what that experience has been like.  
19 But the key bit is that they weren't aware beforehand.  
20 That seems to me to be the more important issue.

21 Q. I take your point. Can I just say this about the actual  
22 techniques themselves, because you did say that your  
23 recollection was that there would have been available  
24 training in relation to restraint. Would that training  
25 have included training in relation to recognised and

1 acceptable techniques and in what circumstances those  
2 should be used? Or was it as specific as that? Or are  
3 you not able to recall?

4 A. I'm trying to recall.

5 (Pause)

6 No, I can't really say. I'm aware of one particular  
7 technique that they used at South Oswald Road.

8 Q. Can you tell us what that was? I was going to say,  
9 putting it another way, can you remember what techniques  
10 you became aware were being used?

11 A. I saw it once. I don't know if that's the only  
12 technique that was used. I think that what happened was  
13 that you had a number of experienced and well regarded  
14 staff, who would take a lead in explaining and  
15 demonstrating, if you like, and, if you like, in-house  
16 training. The particular technique I saw -- there was  
17 a chap called Tom Gardiner, one of the highly regarded  
18 staff members. He was sitting on the floor with his  
19 back against the wall and he was holding -- it would be  
20 a primary age child by definition, like so (indicating).  
21 Not hard.

22 And between him and the child was a pillow or  
23 a cushion so that -- one of the standard things that  
24 happens is that staff are liable to get headbutted, that  
25 kind of thing. So I happened to go to the unit and this

1 was the sort of far end of that restraint experience.  
2 I could see that Tom was explaining gently and carefully  
3 that he was proposing to let go now.

4 So I have to say that at the time I was doing this  
5 job, I had three -- we had three children very close  
6 together ourselves, all of primary age, and you could  
7 ask yourself, would I be happy if --

8 Q. If your child lost control at school, would you be happy  
9 if a teacher used that particular technique on your  
10 child?

11 A. Yes. Or one of ours went chasing off up Arthur's Seat  
12 when we were new to Edinburgh. First of all, can I  
13 catch him, but secondly I'm going to grab him and I'm  
14 going to keep him safe. But I think in the context of  
15 those residential establishments, it's potentially very,  
16 very frightening if you're a primary age child.

17 Q. I think it was accepted by some of the staff when  
18 we were discussing this matter that -- and indeed this  
19 may have prompted the discussions that we've already  
20 talked about this morning -- that such action might,  
21 from the perspective of the child, be a terrifying  
22 experience --

23 A. Yes.

24 Q. -- given an adult, a child, the relative difference in  
25 age, the relative difference in power and control and so

1           forth.

2           A. Absolutely.

3           Q. And you can fully accept all of that?

4           A. I fully accept that and, as I say, when I read the stuff

5           on the web last weekend, I was really quite -- I felt

6           quite humbled by it, to be honest. I thought if we had

7           known more, if we'd been more aware 30 years ago, which

8           is what we're talking about, then we could have perhaps

9           done a better job.

10          Q. But you also were using just your own reaction as

11          a parent of children that were not dissimilar in age.

12          It appears that that memory has stuck with you and in

13          fact it did cause you at the time to have concerns, did

14          it?

15          A. It did. I mean, if I could just expand in the context

16          of Craigerne.

17          Q. Yes.

18          A. They employed restraint there. I think that they used

19          one model and that it was part of the culture. Staff

20          were very familiar with it, very well trained in it.

21          But nevertheless, I remember the first time I came

22          across it, asking myself, you know, is it ever

23          appropriate? Well, I concluded that if you want to keep

24          children safe, it is, but I asked -- Barnardo's had an

25          education adviser who went round all Barnardo's schools

1 and I asked him, what do you think of this, and I didn't  
2 get much of a straight answer, to be honest.

3 When I inherited these projects, I kind of assumed  
4 that the practice, because it was being managed by  
5 people who knew more than I did, that this was  
6 acceptable and normal. So I didn't get a straight  
7 answer from the education adviser based in Barkingside  
8 and I actually rang round various other schools and  
9 said, what do you do. They said, well -- some of them  
10 said, well, we have restraint techniques, we use  
11 restraint. One of them said, well, we're basically too  
12 scared to use anything like that, if the child is going  
13 to run off, we let them run off.

14 I thought this was really a strange state of affairs  
15 and I think if I had a criticism of Barnardo's as an  
16 organisation, we had three big volumes of procedure  
17 guides and these tended to allude to what you can't do,  
18 but what they need to tell you is what you can do and  
19 how you might acquire that sort of knowledge and skill.  
20 And back in the period that we're talking about now, my  
21 line management, that wasn't -- I don't think that was  
22 the case, really. Clearly, modern practice is  
23 completely different from that.

24 Q. Just remind, Tom Gardiner was based at?

25 A. He was based at South Oswald Road.

1 Q. So the Craigerne technique, the one that was used  
2 consistently, a particular technique, can you recall  
3 whether it was different from the one you've described?

4 A. Yes, it was.

5 Q. What did it involve?

6 A. It routinely involved two members of staff, very gently  
7 placing a child down, face down actually, and one would  
8 gently hold their hands and the other would be, not  
9 sitting on, but sort of astride, if you like, the thigh  
10 area. And together, they would just hold the child  
11 gently until the situation had been resolved.

12 I know that one of the opportunities that  
13 Sandy Wilson got for further training, if you like, was  
14 Craigerne used to offer training days to the range of  
15 residential special schools in Scotland, so they used to  
16 come to Craigerne to learn the technique, and I believe  
17 that Sandy also went and learned about the technique.  
18 Of course, the question then arises, you've got  
19 Tom Gardiner doing that (indicating) and Sandy Wilson  
20 perhaps using a different technique.

21 Q. I was going to say to you. It's interesting you raised  
22 that particular matter because Sandy Wilson, when he  
23 gave evidence, and he was the former deputy project  
24 leader at South Oswald Road, did tell the inquiry that  
25 there were occasions when a child would be held face

1 down on the floor by a member of staff, arms by their  
2 side, legs held if the child was kicking out, with  
3 pressure being applied, I think as he put it, mainly to  
4 the arms to keep them in position.

5 What he did say, though, was that it was usually one  
6 person that would do this restraining and exceptionally  
7 a staff member might call for assistance. So it doesn't  
8 sound as if it was quite the same method that you  
9 understood was being used at Craigerne.

10 A. I think the Craigerne model initially under Peter Norris  
11 -- I meant Peter Norris was there for 20-odd years --  
12 John McFadden was the head of care, they developed that  
13 model and routinised it, if you like, but I don't think  
14 you could say the same about South Oswald Road by the  
15 sound of it.

16 Q. But if you use your perhaps litmus test of the concerned  
17 parent whose child it was who was on the floor, had you  
18 seen that for yourself, what would your initial reaction  
19 have been?

20 A. To which?

21 Q. The one where the child is face down on the floor being  
22 restrained. Can you think back to how you might have  
23 reacted if you'd seen that?

24 A. Hand on heart, I was never comfortable with any concept  
25 of a child being restrained. So yes, my reaction --

- 1 Q. Would it have been any different to the reaction when  
2 you saw what Tom Gardiner did, do you think, looking  
3 back?
- 4 A. I suppose I felt just -- as a human being, I felt it's  
5 unfortunate we have to do these things.
- 6 Q. But I suppose you're saying, if it was my child or if  
7 I was that child, you could well understand how that  
8 experience might be perceived --
- 9 A. Absolutely I can, yes.
- 10 Q. -- by those witnessing that taking place?
- 11 A. Yes.
- 12 Q. And I suppose the danger is with the Craigerne  
13 technique, if you like, particularly if it was used by  
14 one person rather than two, is that you mentioned the  
15 word "gently". The difficulty is that what represents  
16 gently, what represents appropriate pressure, what  
17 represents excessive pressure, and in the heat of the  
18 moment it's maybe not easy to make fine judgements like  
19 that. And if you're the child that's on the floor, face  
20 down, you can perhaps see where I'm going in terms of --
- 21 A. There's no perhaps, I just agree with you.
- 22 LADY SMITH: The difference, I suppose, could be between the  
23 adult thinking they're being gentle, but from the  
24 child's perspective this is an adult --
- 25 A. Yes, a more powerful --

1 LADY SMITH: -- on top of them, preventing them from getting  
2 up by the use of force.

3 A. Effectively, yes.

4 LADY SMITH: It must have been terrifying.

5 A. Yes, I think so.

6 MR PEOPLES: So I take it, though, your direct experience of  
7 the Gardiner experience was seeing it in action on one  
8 occasion?

9 A. Yes.

10 Q. But you were aware from your connection with Craigerne  
11 as assistant divisional director what they did by way of  
12 restraint and you're able to describe what you  
13 understood was the way things were done?

14 A. Yes.

15 Q. Although you didn't necessarily see it in practice?

16 A. I think I probably saw it once. One of the things I did  
17 with Craigerne was, at Peter Norris' invitation, I spent  
18 two whole days there to get a feel of how the place  
19 operated. So I think I did see a restraint there. It  
20 didn't strike me as physical or distressing in any  
21 extreme sense.

22 Q. Can I turn to a different matter on which we had some  
23 evidence about South Oswald Road. We've heard some  
24 evidence from staff there -- I think it was  
25 Sandy Wilson -- and I think it was confirmed by the then

1 project leader in the 1980s that during the night-time  
2 shift, between about 10 at night and 7 in the morning,  
3 there was only one member of staff on duty who was  
4 awake. There was another member who was a sleeping duty  
5 member.

6 The point I might put to you just now is that,  
7 plainly, such an arrangement of one member of staff  
8 looking after a group of children, vulnerable children,  
9 at night carries an inherent risk that something might  
10 happen to a child during that time that shouldn't  
11 happen. Do you accept that's an inherent risk of that  
12 situation?

13 A. Again, when I compared last weekend what current  
14 practice would be with what was happening then, I think  
15 there are all kinds of things about risk management that  
16 we just weren't aware of or it wasn't sort of common  
17 practice or a common issue, and that's another hole  
18 in ... I think it's pretty obvious now, looking back,  
19 that there is an inherent risk in that.

20 I might tell you that the same pattern happened at  
21 Craigerne. They had one waking -- and each of the two  
22 houses had a sleep-in person, who would normally sort of  
23 come in at the end of the back shift.

24 Q. Were you aware at the time, so far as you can now  
25 recall -- and I appreciate it's a long time ago -- would

1           you be aware that that was the arrangement at night-time  
2           at Craigerne and South Oswald Road? Would that have  
3           been something that would have come to your knowledge?

4           A. Well, I would have known what the staff establishment  
5           was, so I would have seen one person employed as waking  
6           night staff.

7           Q. Did you see it from that point of view, from a risk  
8           perspective or a safety perspective or --

9           A. I don't think we were that smart back then.

10          Q. Maybe I'll put this way: would the concept of risk  
11          management, which we now see as quite a familiar concept  
12          in various settings, was that something that was really  
13          in any sense developed in your time as assistant  
14          divisional director?

15          A. I think there were elements of it, but I don't think  
16          people thought in terms of somebody who's on the staff  
17          being likely to be a perpetrator. That's just clearly  
18          misguided, but that's the way it was at the time.

19          Q. So it wouldn't be the first thought in your head?

20          A. No, it wouldn't, I'm afraid, no.

21          Q. I think the project leader, his recollection when  
22          I raised this matter with him, the one in the 1980s,  
23          believed it may have been decided upon, this idea of  
24          simply one person awake, at a higher level than the  
25          establishment. I don't know whether you're able to say

1 he is correct in thinking that, and if so, would it have  
2 been you or the divisional management team or  
3 headquarters in London that would have approved that  
4 form of arrangement? Can you help us on that?

5 A. Yes, I can to some extent. I inherited both South  
6 Oswald Road and Craigerne, so I inherited the staff  
7 establishments that came with them. I did later on ask  
8 questions about whether there were enough staff and that  
9 kind of thing. The waking night staff thing would have  
10 been agreed at divisional level when the project was set  
11 up or -- well, it would have to be when it was set up.  
12 And establishments would be guided by -- and this is yet  
13 another thing that Barnardo's would have a procedure  
14 guide on, how you calculate how many staff you need and  
15 people who set up the procedure guide, people with more  
16 experience of residential care than I had, would have  
17 said you need a waking member of night staff.

18 So that would be pretty standard, I would think,  
19 back then. But I was not myself involved. In theory  
20 I would have been --

21 Q. I'll come to talk about the staffing levels -- because  
22 you do tell us a little about residential school  
23 staffing. I'll maybe ask you about that in any event.

24 A. Sure.

25 Q. You're indicating it's probable that this type of

1 arrangement would have been an organisational policy or  
2 an arrangement that was approved at organisational  
3 level --

4 A. Yes, but --

5 Q. -- in the way you've described?

6 A. Barnardo's has a long history of residential provision,  
7 a lot of the senior managers -- certainly when I came to  
8 Barnardo's in Scotland, I think all the management team  
9 were from a residential past. I don't think any of them  
10 had done fieldwork, I doubt if any of them had actually  
11 worked for local authorities. So there was that kind of  
12 ethos, if you see what I mean, and there were procedure  
13 guides.

14 Q. One of the things that you did bring to bear when you  
15 came to Barnardo's was a wider experience, if you like,  
16 beyond residential care. In fact, it was the  
17 residential care component that was perhaps the gap in  
18 your CV if you like.

19 A. Yes.

20 Q. With that broader experience then, would that have  
21 caused you, if you had been starting the project, to  
22 look at things in a different way, if you'd had  
23 Craigerne as an initial project, for example? I'm just  
24 trying to test what advantage there may have been to  
25 have had experience in other settings, if you like, and

1 in other roles.

2 A. I think it's helpful to have had wider experience. It  
3 was certainly -- experience in residential was not  
4 something I had. But I think nevertheless, you can ask  
5 questions. There were certainly questions I did ask.  
6 When I inherited Craigerne, I remember having some  
7 quite -- let's say tasty meetings with both Peter Norris  
8 and John McFadden because if you think about it, here  
9 am I, you know, new to Scotland, new to residential, new  
10 to Barnardo's, he's been there 20-plus years, and he's  
11 been used to running the show, running a successful  
12 residential special school.

13 Basically, he's been paid about half as much again  
14 as I am and I'm not sure that he took kindly to the idea  
15 of having a line manager, because he was, you know --

16 Q. Do you think he was receptive to any suggestions or new  
17 ideas that you might have put on the table or was he too  
18 firmly embedded in his old habits?

19 A. I didn't find him particularly receptive, but I wouldn't  
20 want to say anything other than that Peter was a decent  
21 and capable head.

22 Q. It's not a criticism of him, but it is just to try and  
23 understand an attitude. If someone is in an  
24 organisation and things are done in a certain way for  
25 a long period of time, I suppose we might all be

1 potentially guilty that, "This is the way we've always  
2 done things, why do we need to change", and maybe we're  
3 too old for change or we think we know best. While that  
4 might not have -- was that in some ways perhaps the  
5 reality of that type of situation where you have someone  
6 such as Peter Norris -- and I'm not singling him out in  
7 particular -- that you get someone in that situation,  
8 you bring in someone who might be in a position to  
9 suggest change or improvements or different practices,  
10 but you're met with a resistance?

11 A. Yes. If I could just turn the spotlight on  
12 John McFadden, who was the head of care. I spent quite  
13 a bit of time initially about John so he could explain  
14 to me what the Craigerne model was. I remember one  
15 particularly frustrating conversation where basically,  
16 he explained that the model was based on the work of  
17 a chap called Fritz Riedel and John had certain views  
18 about youngsters and self-esteem.

19 I'd written a research thesis on self-esteem, so  
20 I said, "Well, John, I've paid you the courtesy of  
21 reading all the stuff that you put my way, could  
22 I suggest to you that there are some other models or  
23 ways of approaching the concept of self-esteem", but  
24 that fell on deaf ears, shall I say. They were  
25 established in a certain way of doing things, it seemed

1 to work pretty well, and certainly the education  
2 departments were happy about it and so on.

3 Q. So if one of your roles as assistant director was to  
4 have this close connection, liaison and discussion with  
5 the project leader at an establishment, and you in that  
6 scenario are putting forward certain suggestions or  
7 ideas or how change might be considered, you've said how  
8 you feel maybe -- what reaction you got in the case of  
9 Craigerne. To what extent were you brought in and  
10 supported by your more senior management or the  
11 headquarters to effect change if you thought it was  
12 necessary? How confident did you feel that if you had  
13 taken a stand with Peter Norris on a particular matter,  
14 the organisation would have backed you rather than  
15 backed Peter Norris? How confident are you, looking  
16 back?

17 A. I don't know. Marginal.

18 Q. They may have said, "He's been there a long time, he's  
19 well regarded"?

20 A. "The education adviser says it's a great place", that  
21 might have held some sway.

22 Q. So it might have been difficult if there had been an  
23 issue or a practice issue or a change, a material change  
24 to necessarily carry that through, even although you had  
25 in theory the authority to do so, I suppose? At least

- 1           you had a limited authority.
- 2           A. I had some. I had responsibility, if you like, and some  
3           authority, yes, but --
- 4           Q. Am I right in thinking -- sorry, I interrupted --  
5           because of the nature of the Barnardo's structure, such  
6           authority as you had would still have required you to go  
7           up a notch or maybe several notches to bring about  
8           a change that you were pushing for? Is that the nature  
9           of the organisation at the time?
- 10          A. We haven't really touched on this, but my experience of  
11          Barnardo's was that it was, at least initially, when  
12          I was there, a very -- there was a lot of central  
13          control. For reasons that I can understand to some  
14          extent, but ...
- 15          Q. You seem to have some reservations about a system that  
16          involves centralised control. Some would say there may  
17          be potential advantages, that you can achieve  
18          potentially consistency of care and treatment and  
19          standards and so forth. But what's your reservation,  
20          perhaps or what reservations did you have at the time  
21          perhaps of that particular model?
- 22          A. Right. If I could just go back and give a fuller answer  
23          to your previous question. There were certain issues  
24          that I was probably stronger on than some of my  
25          colleagues and certainly felt more confident about

1 putting forward. So for instance, questions about  
2 staffing levels. Staffing levels seemed to me to just  
3 have been set in stone for a long time and when  
4 Peter Norris made the case wearily to yet another  
5 divisional director, not expecting to get anywhere,  
6 I was able to effect some change, in other words  
7 increase the staffing levels, because Peter had put  
8 forward to me a very compelling case.

9 Similarly, another issue in provision of projects is  
10 the financial basis. So for instance, a unit like South  
11 Oswald Road, capacity of 12, you budget on 10, and the  
12 logic, if the occupancy started to fall, was, gracious,  
13 are we going to have to shed some staff? I thought that  
14 was a preposterous way forward, not least because the  
15 occupancy would probably rise up again.

16 So with the help of the finance assistant, the  
17 divisional director, we found a new way of organising  
18 the budget. We combined the Ravelrig budget with the  
19 South Oswald Road budget and introduced greater  
20 stability. I think I was fairly strong on that kind of  
21 thing but less confident because of my lack of previous  
22 residential management on some of the sort of practice  
23 things.

24 Q. So practice issues you might have been more diffident  
25 because you didn't have that prior experience and

1           although you maybe had concerns sometimes or you felt  
2           that maybe things ought to be considered, these were  
3           areas where you weren't as confident in being able to  
4           drive through?

5           A. I pressed the other ones more confidently, yes. Then  
6           we were talking about Barnardo's being centralised --

7           Q. Yes. I just want your thoughts on the merits or demerits  
8           of centralisation in the context of childcare provision,  
9           particularly residential childcare provision.

10          A. Yes. I can see why Barnardo's would want to -- for the  
11          reasons you've actually mentioned, reasons of  
12          consistency across the board and you're talking about  
13          eight divisions, a big geographical spread and all of  
14          rest of it, that they would want to look for  
15          consistency. But if you're trying to develop new work  
16          in partnership with local authorities, Scotland is  
17          a very different place from England and I discovered  
18          that rapidly -- and in many ways better.

19                 But the experience of the local authority would be  
20          that they would like to do business, they would like to  
21          have a negotiation, either with myself or Hugh and  
22          myself, when he was divisional director, about taking  
23          forward a new piece of work. They couldn't see, easily  
24          see, what the advantages were of having to refer  
25          everything -- it felt like everything -- down south. So

1 if you wanted to consider a new project, you could do  
2 all the negotiating in Scotland, but you still have to  
3 take it down there and get approval.

4 So there would be a whole bunch of experts down  
5 there, an education adviser, property services, HR  
6 people, a domestic adviser, and so on and so forth, and  
7 you sort of -- oh, and research. And you had to, if you  
8 like, run that gauntlet and I felt that we could have  
9 achieved a lot more, a lot quicker.

10 Q. If you're correct on that and you think to some extent  
11 the process there was rather torturous at times and  
12 impeded progress in new initiatives or projects that  
13 were of interest to local authorities, who I take it,  
14 obviously, were one of the big clients, if you like, of  
15 the services of Barnardo's.

16 A. They would come to us and say, would you be interested  
17 in developing something, and we would -- if it fitted in  
18 our sort of overall plan, we would say, yes, we could  
19 be.

20 Q. I see that, but do you think in some way that if we're  
21 bringing that back to what this inquiry is about, about  
22 the treatment of children and standard of care and  
23 whether children were well treated or not well treated,  
24 how far did that model or approach impact on that side  
25 of things?

- 1 A. On that dimension of it?
- 2 Q. Do you feel it in some way may have contributed to  
3 a state of affairs where childcare was not as good as it  
4 should have been or that abuse was not prevented when it  
5 could have been and things like that? Do you see the  
6 point I'm making? I want to see how far we take this  
7 point.
- 8 A. It's a difficult one to judge. My impression was that  
9 there were certain things that were, if you like, old  
10 hat. I'm not going to say they were being clung to,  
11 but ... There are certain things that are specific to  
12 the Scottish context and I don't know whether it was  
13 fully appreciated.
- 14 Q. Can you give us an example, if you can, maybe just to  
15 help us? You have spoken about the differences -- and  
16 obviously Barnardo's was operating across the UK and  
17 indeed elsewhere, whereas some of the other providers in  
18 Scotland were very much Scottish-based --
- 19 A. Yes.
- 20 Q. -- and operating under a Scottish regime, if you like.
- 21 A. Yes.
- 22 Q. Can you give us an example of the sort of thing that  
23 you have in mind where this created some difficulties?
- 24 A. I can't think of specific examples relating to  
25 residential. I can think of examples that relate to

1 other types of work, if that helps.

2 Q. Well, I suppose I don't want to take up too much time  
3 today with that unless I can relate it to the  
4 residential care establishments.

5 LADY SMITH: It might help me understand what you're getting  
6 at. Any short example?

7 A. Yes. Barnardo's was an adoption agency in Scotland.  
8 I was the agency decision maker. The law to some extent  
9 was different in Scotland from down south. Down south,  
10 they had to organise a subcommittee to meet some  
11 regulation or other, which meant that all the assistant  
12 directors had to come down to London for regular  
13 meetings. I spent a lot of time on the aeroplane for  
14 one reason and another. We had to go down to London and  
15 we'd be fulfilling an English regulation.

16 They wanted me to come because we have to be  
17 consistent and include everybody, don't we? So I'm sort  
18 of thinking, well, that's not actually the law where  
19 I am, and there are other things on which I could have  
20 been spending my time, really. So that was one example.

21 LADY SMITH: I suppose the way local authorities were  
22 working up here from the time you first came in the  
23 field of provision for children we now call looked-after  
24 children --

25 A. Yes.

1 LADY SMITH: -- would have been different from the way the  
2 local authorities south of the border worked, because  
3 our law had changed by the time you were there.

4 A. That's right, yes. So there's a tension if you want to  
5 run a national organisation, but some of the constituent  
6 parts have different ways of operating, and then it's  
7 how far you try to include all the divisions.

8 Another sort of broad example is that every year,  
9 there was a three-line whip for all 40 assistant  
10 divisional directors to attend an annual conference,  
11 where we all sort of got together and various sort of,  
12 shall I say, party lines were ... But you didn't always  
13 feel that they applied to each and every one of the  
14 divisions in the same way. Basically, the centre needed  
15 to relax some, and I think over time it probably did.

16 But the kind of operational problem I would have as  
17 an assistant divisional director would be, for instance,  
18 if human resources -- a personnel problem came up, you  
19 were supposed to discuss and debate it with them and  
20 then they told you what to do. Whereas my feeling was,  
21 I was the line manager there, dealing with a specific  
22 situation, and I've referred to one situation in my  
23 evidence to you. They would say, well, that's what you  
24 must do. And I would be saying, well, I don't think  
25 that's appropriate in the circumstances. And they would

1 say, well, you must do it. I'd say, hang on, are you an  
2 adviser or are you the decision maker? And I had a few  
3 uncomfortable conversations like that.

4 Eventually, we had an HR person in each of the  
5 divisions, which was the solution to what had previously  
6 been a tension. I don't know if I've explained that  
7 clearly.

8 LADY SMITH: That's helpful, I'm getting the picture.

9 Mr Peoples.

10 MR PEOPLES: Can I move to a different matter, staffing of  
11 residential care establishments. I will come back to  
12 staffing levels, if I may, but can I pick up a point  
13 that you make on page 8022, page 4 of your first  
14 statement, an observation you have about pay  
15 differentials in the 1980s.

16 A. Yes.

17 Q. You say that:

18 "Barnardo's had a range of residential and  
19 community-based projects. The residential projects  
20 tended to be bigger with more staff and arguably more  
21 demanding, 24-hour hands on responsibility for  
22 youngsters with complex needs, but the pay scale for  
23 residential project leaders was lower than for  
24 community-based project leaders. I doubt Barnardo's was  
25 different from other voluntary organisations but this

1 was not a policy that encouraged staff to stay in post  
2 for long, nor was it a policy that potentially attracted  
3 well qualified personnel."

4 Some might say -- and some might say it's still the  
5 case -- that people involved in residential care work  
6 are the poor relations in social work services because  
7 the staff are -- not historically have not had very  
8 attractive conditions, terms and conditions of service,  
9 pay and so forth, and it hasn't really reflected the  
10 value of the work that they do. Does the observation  
11 you make in some way confirm that?

12 A. What you have just said very much chimes with the way  
13 I saw it. It felt in some ways that residential  
14 establishments had lower status and that seemed to me to  
15 be quite wrong, because having come from a social  
16 services setting down south and run and managed teams,  
17 I think it's just a basic fact of life that your staff  
18 are your principal asset. That's the way that you make  
19 things happen, that's the way you get things done. So  
20 you need to get the best you can and hang on to them,  
21 and it seemed to me that our pay scales, our recruitment  
22 processes, our training and so on, perhaps disadvantaged  
23 someone who wanted to come into social work.

24 I think quite a number of people would have come in  
25 as a member of residential staff perhaps with ambitions

1 to -- I'll gain some experience, I'll apply for  
2 a social work course and then I'll be a fieldworker.  
3 There was that sense of things.

4 Q. In your time, between 1984 and 1997, or at least for  
5 part of that time, so far as staffing is concerned of  
6 residential care establishments, are you able to help me  
7 with whether there was a difficulty in that period in  
8 recruiting care staff to work in residential units?

9 A. There was some difficulty. I can't remember in either  
10 Craigerne or South Oswald Road being without. In other  
11 words, having a vacancy for a great period of time. But  
12 I can say that in contrast to the, if you like, the  
13 fieldwork projects, we'd have people queueing up,  
14 qualified people, and we had some good choice.

15 If you had a vacancy for a member of residential  
16 staff -- I can think of an example where Jim Glynn and  
17 I were wanting to recruit, and there weren't that many  
18 people coming forward. We were able in the end to make  
19 an appointment, but it felt it was a struggle.

20 Q. I think your former boss, John Rea, told us yesterday  
21 about, if I'm remembering correctly, the majority of the  
22 basic grade residential care staff may have come without  
23 qualifications, sometimes without very much experience  
24 at all. Was that a feature that you can recall? You  
25 took what you could get sometimes rather than what

- 1           ideally would be the suitable candidate with the  
2           appropriate experience, training and qualifications?
- 3       A.   I wouldn't put it --
- 4       Q.   Maybe I'm putting it too pejoratively.
- 5       A.   I wouldn't take anybody.
- 6       Q.   I don't mean you'd take anyone, but ultimately there's  
7           a limit.  You weren't necessarily insisting on qualified  
8           people coming to work with residential care  
9           qualifications, were you?
- 10      A.   No.  With field staff you would be talking about mostly  
11       graduates with CQSWs.  That was -- I was going to say  
12       that was the exception.  If I talk about South Oswald  
13       Road and Craigerne, it was rather a different experience  
14       at Craigerne.  They attracted quite a lot of CQSWs,  
15       a lot of graduates, and they tended to stay, and I think  
16       that's to the credit of Peter and John McFadden.
- 17                That had a different feel about it from South Oswald  
18       Road, where it was harder to recruit.  I'm just sort of  
19       running through my mind who had a CQSW.  Jim Glynn did,  
20       Sandy Wilson did.  Catherine Wilson did.  Katrina Walker  
21       did.  That's four out of that one.  Probably a dozen on  
22       the establishment.  And then after that, no.  And it was  
23       different to attract.
- 24      Q.   Was it difficult to retain in terms of -- was there  
25       quite a high turnover at least maybe at South Oswald

1 Road or some of the other establishments that Barnardo's  
2 were operating?

3 A. At Craigerne there wasn't a high turnover. At South  
4 Oswald Road, um ... I can remember there being three  
5 project leaders, actually. So oddly enough, that  
6 was ... Bob Horne, Keith Livie, then obviously  
7 Jim Glynn. I don't think there was a big turnover. It  
8 was in many ways a happy staff group at South Oswald  
9 Road.

10 Q. If you're singling out particularly Craigerne and  
11 perhaps to some extent South Oswald Road, you're not  
12 suggesting that was necessarily representative of the  
13 general question of staffing of residential units,  
14 because you seem to be accepting that it could be  
15 difficult to recruit basic grade residential care  
16 workers, front-line staff.

17 A. I don't have the details at my fingertips, but my  
18 instinct would be that the situation was much closer to  
19 what we've just described at South Oswald Road and that  
20 in some places it might have been even more difficult.

21 Q. If you were in the Health Service, you presumably  
22 wouldn't put someone into a ward who didn't have any  
23 qualifications to look after patients who needed to have  
24 treatment. Why on earth would you put someone in with  
25 a group of vulnerable children with complex needs who

1           have no qualifications or training?

2           A.   Mm.

3           Q.   Can you answer that?  Is there a justification for that?

4           A.   I don't know if there's a justification.  That's what we  
5           did, yes.

6           MR PEOPLES:  Staffing levels is something that you have  
7           discussed earlier and I just wanted to be clear -- maybe  
8           this is actually a time to have a break because it's  
9           a different topic.

10          LADY SMITH:  If you're going on to another chunk, let's do  
11          that.

12                 We'll take the morning break just now, Alan, and sit  
13          again in about 15 minutes or so.

14          (11.27 am)

15                                 (A short break)

16          (11.47 am)

17          LADY SMITH:  Yes, Mr Peoples.

18          MR PEOPLES:  Alan, if we could resume where we left off  
19          before the break.  I was turning to the issue of  
20          staffing levels.  It's something you deal with in your  
21          first statement.  If I can ask you to look at page 4 of  
22          the first statement at WIT.003.001.8022.  It's in  
23          section 3.

24                 We had already discussed the issue of pay.  You tell  
25          us that in relation to staffing levels --

1 A. Excuse me, should this be coming up on the screen?

2 LADY SMITH: Yes. Sometimes it's a bit slow.

3 (Pause)

4 MR PEOPLES: Yes, thank you very much.

5 You'll recall, I think, you helpfully gave us some  
6 information in your first statement about what is  
7 described as a special schools formula, which was  
8 related to, I think, determining appropriate staffing  
9 levels for residential schools. What you tell us is  
10 this formula that you mention was a long-established  
11 template in Barnardo's for determining staffing levels  
12 for such schools.

13 Just pausing there, was this a formula that would  
14 have been devised at headquarters through the structures  
15 that existed, the committee structures in London?

16 A. Yes, and it's to be found, believe it or not, in the  
17 procedure manual.

18 Q. Okay.

19 A. Like many things.

20 Q. And the idea was, is it, to find a general formula for  
21 determining -- for a particular type of establishment,  
22 a residential school -- how many staff would be required  
23 to provide the service at the particular establishment?

24 A. That's right. You go through a number of steps, for  
25 instance between this hour and that hour, how many care

- 1           staff do you need on, and then so on through the day.  
2           And then you multiply it up and you come up with the  
3           right number. But I think they were coming up with the  
4           wrong number.
- 5        Q. Historically, if you were able to help us in terms of  
6           the way the formula was applied, was it applied rigidly  
7           or flexibly? I think you're going to tell me this was  
8           an occasion where it was departed from. But leaving  
9           that aside for the moment, in general terms.
- 10       A. I don't know. My instinct would be that it was applied  
11           generally.
- 12       Q. To establishments that --
- 13       A. That were centre led, if you like.
- 14       Q. That fell within the scope of the formula?
- 15       A. That would be my guess, but I can't say with certainty.
- 16       Q. Do you know how long this formula was in being? You say  
17           it's long established. I just wonder how long  
18           established we're speaking of here.
- 19       A. I'm not sure, but from what Peter Norris said to me, it  
20           was that he had been fighting this battle with  
21           a succession of assistant directors and got nowhere. So  
22           it must have been in place for a while and Peter had  
23           been in place for a while too.
- 24       Q. So we're talking about well before 1984?
- 25       A. Oh yes.

1 Q. I think Peter Norris was at Craigerne in the 1960s, if  
2 I remember, from evidence we've already heard. Would  
3 that be correct?

4 A. Peter spent 23 years there and his successor,  
5 Mike Toman, arrived I think in 1986. So yes.

6 Q. He would have been there from the mid-1960s?

7 A. That would be about right.

8 Q. When you say this was perhaps a long-standing issue and  
9 a matter where there were some battles on the subject,  
10 can we take it from that that the battle concerned an  
11 attempt by Mr Norris, at least in the case of Craigerne,  
12 to have more staff than the formula provided?

13 A. Well, Peter made the point to me -- and I agreed with  
14 him -- that the formula was -- it had its drawbacks. So  
15 if all you do is tot up the number of hours, you might  
16 be able to make that work if your staff are on split  
17 shifts, in other words they come in for a few hours,  
18 then they go home, then they go back, and Peter didn't  
19 think that was a particularly good practice for all  
20 kinds of reasons. Practical and personal reasons.  
21 That's one thing.

22 But if you don't build into the formula a percentage  
23 for potential sickness or training or stuff like that --  
24 and Peter had a body of folk who would come in and  
25 cover -- if you don't build into your establishment and

1           therefore your budget that kind of coverage, then when  
2           the going gets tough, you find that senior staff get  
3           drawn into front-line roles and then they're not doing  
4           the job that we need them to do at the senior level.

5           So that was Peter's argument. Basically, I was  
6           fairly easily persuaded by it.

7           Q. If we take the example of sickness, which can't always  
8           be predicted, but no doubt it's a fact of life like  
9           death and taxes, obviously if you're trying to devise  
10          a formula that might accommodate that scenario, if you  
11          don't build that in, how did it operate in practice? If  
12          there was sickness and a need for some form of  
13          replacement cover, are you saying that generally  
14          speaking that cover or that replacement was found from  
15          within the existing staff membership or was it done by  
16          way of temporary workers or relief workers or agency  
17          staff or whatever?

18          A. I'm not entirely --

19          Q. I'm just trying to work out --

20          LADY SMITH: Under the formula, what happened if a member of  
21          staff was sick?

22          A. Right. Either one of the senior staff would drop down  
23          and cover or -- and Peter Norris was a fairly acute  
24          operator, he had a bank of people locally, qualified  
25          people, but people who were doing other things, that

1           could potentially come in. And then he would ring up  
2           and say, I've had to do this, you're going to have to  
3           find the money on an ad hoc basis. That's another way  
4           of doing it, but I prefer changing the formula so that  
5           you're doing the right thing to begin with.

6       MR PEOPLES: What would you have done in that situation to  
7           allow for the fact that sickness will happen and that  
8           you don't want to pull staff away from their usual job  
9           to act as cover for another post?

10       A. Peter would simply draw on somebody from his bank.

11       Q. I know what he did, but if you hadn't been applying the  
12           formula, what sort of arrangement, if you had more  
13           money, for example, because the formula was differently  
14           configured, what would have been the result in practice?  
15           Would there have simply been more permanent staff at the  
16           establishment?

17       A. Yes, you got more leeway, basically.

18       Q. But you'd have more permanent staff?

19       A. Yes, or you could explicitly use it for a bank.

20       Q. Or create a bank that's part of the recognised budget?

21       A. Yes. They had the ability to draw on the extra staff.

22       Q. And if you didn't have Peter Norris' approach of saying,  
23           regardless of the formula and regardless of how it  
24           works, I've got my own special arrangement, this pool of  
25           people I can draw on in an emergency, if you don't have

1           that and you have to take someone off their normal job,  
2           then you're one person down or if you've got a bout of  
3           sickness, you may be several people down, and that  
4           creates obvious problems, does it not?

5           A. It does, yes. It creates all sorts of tensions,  
6           difficulties and shortfalls, yes. So we enhanced his  
7           budget by about 10%, and again with the help of the  
8           assistant divisional director of finance, found a way of  
9           doing it. So I then applied the same approach to South  
10          Oswald Road, just to check, and they did seem to be  
11          adequately staffed.

12          Q. Going back to --

13          LADY SMITH: Sorry, was that 10% in terms of numbers of  
14          staff or 10% in terms of funding available?

15          A. 10% on the staffing budget.

16          LADY SMITH: Thank you. So that's the amount of money that  
17          was available?

18          A. That was made available, yes.

19          MR PEOPLES: So there was more money to make sure that they  
20          weren't short-staffed because we're using existing staff  
21          to cover for staff who were off sick?

22          A. Yes.

23          Q. So for that at least they would have the required level  
24          at all times or at least that was the theory?

25          A. Yes. One thing I discovered fairly rapidly is that the

1 provision of residential care, if you do it properly, is  
2 expensive.

3 Q. Just on the issue of budget, leaving aside the issue of  
4 sickness, did the formula in any way recognise that in  
5 an ideal world you want all your residential care  
6 workers to have qualifications and, if they have  
7 qualifications, they might expect to be paid more than  
8 people without qualifications?

9 A. Are you asking me specifically about Craigerne or in  
10 general?

11 Q. The formula. Did the formula assume, for example, that  
12 basic grade residential care workers for whom there was  
13 to be a budget allocated -- did it assume they would not  
14 have qualifications rather than assume that they did?  
15 Do you see the point I'm making?

16 A. I do see the point you're making and that's quite  
17 a question. I hadn't thought of that one. The point  
18 about the formula is that's how you arrive at how many  
19 people you need. But of course, then the question is  
20 you've got to pay them.

21 Q. I suppose it's a determination of how big the budget is.  
22 Is that linked in some way to the formula or is that  
23 a separate exercise?

24 A. It's a separate exercise and we know that the proportion  
25 of staff in residential units that were qualified is not

1 high. But yes, you're right. If you move to -- it's  
2 a point I was making earlier about residential care, if  
3 done properly, is going to be expensive. If you move  
4 towards a graduate model or a CQSW model, or all the  
5 rest of it, then by definition I guess you are going to  
6 find your costs going up.

7 Q. And you should therefore have a higher budget provision  
8 for the staff costs?

9 A. Yes. If you're going to do this seriously, you should,  
10 yes.

11 Q. It rather suggests, although it may be difficult to be  
12 precise about this, that budgets may well have been  
13 fixed in terms of money allocated on the assumption that  
14 certain members of staff would not be qualified.

15 A. You'd fix your budget in terms of what you had known  
16 about last year.

17 Q. If the going rate for an unqualified residential worker  
18 was £100 a week and a qualified was £150 a week, and you  
19 knew that the bulk of the staff were unqualified, you're  
20 not going to allocate £150 per head --

21 A. No.

22 Q. -- for the next year, are you?

23 A. No, you're not, no.

24 Q. And you are going to assume in the next year that you'll  
25 be employing staff of a similar status?

1 A. Well, you ought to be setting a budget that reflects the  
2 reality of what you've got and therefore if you do  
3 recruit more qualified people, then you ought to be  
4 prepared to up the budget. And then you've got to have  
5 a conversation with the people who are going to buy the  
6 service as to whether they're prepared to pay for it.

7 Q. But I think you've told us already that quite a lot  
8 of -- a high proportion of residential care workers in  
9 your time were not qualified.

10 A. As a general statement, yes. Craigerne --

11 Q. I follow that. It was more of an exception rather than  
12 the norm?

13 A. Yes, that's correct.

14 Q. I follow that.

15 Can I move to a related topic for a moment:  
16 recruitment of staff. I think you tell us a bit about  
17 that at page 8023 under section 6 of your first  
18 statement, page 5 of your statement. We have already  
19 heard some evidence from John Rea on this matter. There  
20 was reference in passing to what's called the  
21 grandfather principle. You do, I think, give us some  
22 detail of how that operated in practice. I think the  
23 basic idea is that ultimately the grandfather, who's not  
24 the direct line manager, will be involved in the  
25 appointment process for the particular post.

1 A. I've got nothing on my screen.

2 Q. If you want to look at your statement in the file --

3 LADY SMITH: In the red file at the front of the desk.

4 MR PEOPLES: It's at page 5.

5 A. It's okay, I've got it.

6 Q. I think perhaps the meat of the matter is on page 6 of

7 your statement, 8024.

8 LADY SMITH: Alan, I'd find it helpful if you'd explain to

9 me, looking back, how you experienced the grandfather

10 principle working. What did it involve?

11 A. Basically, if I'm the line manager, it's not my decision

12 about whether the person below me -- a potential

13 employee, it's not my decision whether he gets hired,

14 it's my boss' decision. So for instance, when the South

15 Oswald Road project leader post or the Craigerne head

16 post became available, I was the line manager, therefore

17 I wouldn't be making the final decision, Hugh Mackintosh

18 would or John Rea would. That was supposed to introduce

19 a different level of objectivity, if you like.

20 LADY SMITH: Put that way, you describe the grandfather in

21 this arrangement as the sole decision maker; is that

22 what happened?

23 A. That's the decision --

24 LADY SMITH: The decision as to whether to hire or not?

25 A. The decision taker. In practice I would have quite

1 a strong input into that and if you're talking about  
2 those very senior posts, certainly when we were talking  
3 about Peter Norris' replacement, Barnardo's had  
4 something that they called an assessment centre, where  
5 you had all kinds of different exercises, presentations,  
6 things like that. So there was a lot of evidence that  
7 you could draw on in reaching a decision.

8 LADY SMITH: But that's all to do with the information  
9 before the decision maker.

10 A. Yes.

11 LADY SMITH: I'm just trying to get a feel of how this  
12 worked. So it's somebody you are going to line manage  
13 who's being hired?

14 A. Yes.

15 LADY SMITH: And you've got a line manager?

16 A. Yes.

17 LADY SMITH: It was John Rea and then Hugh Mackintosh. What  
18 happened between the two of you?

19 A. We would have a conversation and it would be his  
20 decision.

21 LADY SMITH: What if you didn't like it?

22 A. I think it's hypothetical because it didn't happen, but  
23 I'm trying to ... I don't know the answer, really.  
24 I would make my case, but I would have to accept that my  
25 superior, if you like, has the right to make the final

1 decision.

2 LADY SMITH: This was essentially a panel of two if we look  
3 at it in panel terms?

4 A. It depends which posts we're talking about. If you're  
5 talking about those very senior posts -- and to some  
6 extent with project posts, certainly in the fieldwork  
7 projects, we would also include people who, if you like,  
8 were stakeholders, so that might be somebody from the  
9 local authority, and they would be there for the whole  
10 thing, so there would be some more input. But if your  
11 question is it's John Rea or Hugh Mackintosh, isn't it,  
12 the answer is yes. They had the right, if you like,  
13 yes.

14 LADY SMITH: Okay, thank you.

15 MR PEOPLES: Can I just, so that I'm absolutely clear here,  
16 leave aside the divisional director because presumably  
17 there's no grandfather in the division, so his  
18 appointment is going to be done in a different way with  
19 considerable, I suppose, input from headquarters --

20 A. Yes.

21 Q. -- or people from other divisions. The deputy director,  
22 was that actually a designated level or was it simply an  
23 assistant director was the post?

24 A. I believe it was assistant director and when Hugh was  
25 there, it was -- I believe it was a courtesy title.

- 1 Q. I see. Let's say the next level down is the assistant  
2 director's post. Then John Rea is not your grandfather  
3 in that situation. If you're applying --
- 4 A. Yes.
- 5 Q. -- who is the grandfather?
- 6 A. Well, what happened was I was asked to visit Barnardo's  
7 headquarters down at Barkingside, and Roger Singleton  
8 effectively gave me the once over.
- 9 Q. What was his position at that stage?
- 10 A. He was second-in-command, I think, to Mary Joynson but  
11 soon to take over as head.
- 12 Q. He was basically the UK director of childcare at that  
13 time?
- 14 A. Yes.
- 15 Q. Rather than head of the organisation, chief executive?
- 16 A. Yes.
- 17 Q. And when he was in that position, he was involved in  
18 your appointment?
- 19 A. He was. He came in and interviewed me. It wasn't  
20 a searching interview. I think it was basically --
- 21 Q. You'd already been interviewed?
- 22 A. Yes.
- 23 Q. By whom?
- 24 A. In Scotland I was interviewed by John and Hugh.
- 25 Q. So this was the second stage, but to some extent it

1 gives the impression that if they had been happy and  
2 were recommending your appointment, which no doubt they  
3 may have prepared a report before Roger saw you, then  
4 presumably to some extent he would have all that  
5 information in front of him before he met you? Because  
6 there would be some sort of reporting of the initial  
7 interview wouldn't there, you suppose?

8 A. That's another one I hadn't thought through. You've got  
9 to be right, yes.

10 Q. It seems to follow that that would be the natural way of  
11 doing things.

12 A. That would make sense, yes.

13 Q. Let's assume that did happen. Then you get this  
14 interview and then your appointment is decided and  
15 confirmed and you get a letter of appointment?

16 A. I'm offered the job, yes.

17 Q. Okay. That's the assistant director's job. If we go  
18 down another notch to the project leader in the Scottish  
19 division, the grandfather is John Rea?

20 A. Yes.

21 Q. Or Hugh Mackintosh when he took over?

22 A. Yes.

23 Q. So he is the decision maker?

24 A. Yes.

25 Q. But you have an input as an assistant if it's a project

- 1           you've got an involvement with?
- 2       A.   Yes.  And there may be input from a stakeholder like the
- 3           local authority who's paying for the service.
- 4       Q.   You said that was more for fieldwork projects rather
- 5           than residential care appointments?
- 6       A.   It tended to be yes.
- 7       Q.   If we go to the deputy project leader, the Sandy Wilson
- 8           post, you're the grandfather?
- 9       A.   Correct.
- 10      Q.   So John Rea doesn't generally speaking have an
- 11           involvement in the process of recruitment.  And then if
- 12           you have the project worker to take a notch further
- 13           down, let's leave aside that there might be various
- 14           positions within the establishment, but the project
- 15           worker, I suppose the grandfather is the project leader?
- 16      A.   Yes, except it was me.
- 17      Q.   So you were involved in the appointment of project
- 18           workers --
- 19      A.   Yes.
- 20      Q.   -- in practice?
- 21      A.   Yes.
- 22      Q.   Although you weren't strictly the grandfather?
- 23      A.   It seemed a good idea at the time.
- 24      Q.   Why?  Did you have no confidence in the project leaders'
- 25           ability to select staff?

1 A. No, because effectively, the management structure -- the  
2 bit where you saw Sandy as the depute, I preferred to be  
3 involved.

4 Q. I see. Because of a particular view about the qualities  
5 of the deputy, the particular deputy?

6 A. Sandy had great strengths in terms of work directly with  
7 children, but he struggled on the management front.

8 Q. Right. I think we heard a little bit of evidence about  
9 that when he gave evidence to us.

10 Just then understanding that's the process and how  
11 the principle operates, and you said the final decision  
12 rests with the grandfather, if you like, I'm just  
13 wanting to be clear on two matters.

14 The first is what degree of involvement in the  
15 decision-making process for appointments in the Scottish  
16 division did London have, not in terms of divisional  
17 director but if we look at a project leader, for  
18 example, the grandfather is John Rea, let's take it when  
19 he was still in post. He's involved in the process,  
20 he's interviewed with perhaps you and others, perhaps,  
21 I don't know, and he's satisfied that this appointment  
22 is a good one and should be made. Does he still, in  
23 order to complete the process, require to report his  
24 views and recommendations to London for final approval  
25 and endorsement through a committee or otherwise? Was

- 1           that the process are you aware of that?
- 2       A. I don't think so. I'm not aware of that.
- 3       Q. So you think he would have had the final say and simply
- 4           had to notify London?
- 5       A. Yes, he'd have to set up his salary, I suppose.
- 6       Q. And notify that he had made this appointment or was
- 7           going to offer this appointment?
- 8       A. Yes. I mean, some of these aspects would be carried out
- 9           by the HR function, but yes.
- 10      Q. Okay. The second point I wanted to just be clear about
- 11         is you said that -- and this is what you described as --
- 12         latterly Barnardo's included assessment centres and you
- 13         describe what that means, which is this testing overseen
- 14         by the human resources specialists from London. This
- 15         involved things such as psychometric testing and other
- 16         forms of testing and role playing and scenarios and
- 17         things like that?
- 18      A. Broadly speaking yes, that sort of thing.
- 19      Q. And this would be conducted in Edinburgh though?
- 20      A. Yes.
- 21      Q. But with the support of an HR specialist who came from
- 22         London?
- 23      A. Yes.
- 24      Q. And you say that that applied to more senior
- 25         appointments. I just want to know what was the cut-off

1 point in terms of seniority. Did the project leader  
2 have to, in your time, go through the assessment centre  
3 process?

4 A. Not when Jim was appointed.

5 Q. In 1985?

6 A. In 1985 we weren't doing it. When Mike Toman was  
7 appointed at Craigerne, we did.

8 Q. What date was that, did you say again?

9 A. 1986, I think.

10 Q. So early in your period of employment with Barnardo's  
11 what you called the assessment centre element of the  
12 process became established for certain posts?

13 A. I believe it would be about that time, yes.

14 Q. And one example of that applying was when the post of  
15 principal of Craigerne became vacant?

16 A. Yes, I remember that quite clearly.

17 Q. And that would be 1986 or thereabouts?

18 A. Yes, I think so, yes.

19 Q. And after that, would project leaders -- when Jim Glynn  
20 left in 1990, which I think was roughly when he left and  
21 had -- did he have to be replaced as project leader?

22 A. No. What happened was we were gearing up to recruiting  
23 for the new Blackford Brae. I remember that we  
24 appointed a new principal, in other words education,  
25 Ellen Crickley, and Ellen was also subjected to this

- 1 process.
- 2 Q. So it was for these appointments then after perhaps the  
3 mid-1980s, 1986 or thereabouts, the process of  
4 recruitment would include this extra element?
- 5 A. For that level, yes.
- 6 Q. But not for the level of basic grade residential care  
7 workers?
- 8 A. Not on the residential side, no.
- 9 Q. Or deputy project leaders?
- 10 A. No.
- 11 Q. They would go through the traditional methods of  
12 application, interview, references, police checks and  
13 the like, essentially?
- 14 A. Essentially. We might involve them in a group  
15 discussion or something like that.
- 16 Q. A what?
- 17 A. A group discussion or something like that.
- 18 Q. With whom?
- 19 A. So it would be me, the project leader, perhaps somebody  
20 from the local authority, something like that.
- 21 Q. Other members of staff at the project?
- 22 A. Possibly, but I don't think routinely.
- 23 Q. I take it residents, given their age, wouldn't have been  
24 involved in this process?
- 25 A. Not in those projects, which obviously are primary-age

1 children, but we had other projects in the division  
2 where service users were involved.

3 Q. Young persons under 18?

4 A. No, I think they tended more to be parents.

5 Q. We've already dealt with complaints and concerns.

6 You have told us what the position was with Craigerne  
7 and South Oswald Road between 1985 and 1990 in the case  
8 of those establishments and to your knowledge there were  
9 no complaints or concerns raised on behalf of -- by or  
10 on behalf of children.

11 Can I put this point to you: some might find that  
12 surprising, that there were no complaints. Do you find  
13 that surprising?

14 A. I do in hindsight, yes.

15 Q. It's almost too good to be true, in the sense that given  
16 the profile of the children that were being accommodated  
17 in these establishments, and the issues that could  
18 arise, that there would never be any form of complaint  
19 or any justifiable ground for complaint.

20 A. I think when you phrase it that way, looking back, it's  
21 surprising that there were no incidents that came to  
22 light, yes.

23 Q. Because I think John Rea made the point that in his  
24 15 years he could only think of a few complaints that  
25 came to his attention for all the establishments and he,

1 I think, looking back --

2 A. Really?

3 Q. -- was a little surprised about the low incidence of  
4 complaints being made.

5 A. I think that's absolutely fair. Again, when I read this  
6 (indicating) over the last weekend --

7 LADY SMITH: You're holding up a document called "Holding  
8 Safely". Can you give me the details of what that  
9 document is?

10 A. "A guide for residential childcare practitioners and  
11 managers about physically restraining children and young  
12 people."

13 It was published by the Scottish Institute for  
14 Residential Childcare in 2005. The intro says:

15 "There is a general absence of recent good practice  
16 guidance on the topic of physically restraining children  
17 and young people."

18 So in 2005, they were saying there's lack of  
19 evidence and it's hardly surprising that in 1985 there  
20 wasn't either. And then within this document, there are  
21 all kinds of, I think, helpful things that really update  
22 practice. And as I said earlier, it caused me to sort  
23 of take a second breath. There were things that could  
24 and maybe should have been better.

25 MR PEOPLES: I suppose, having regard to the document you

1 mentioned -- I'll use the acronym SIRCC and I think that  
2 became CELCIS or something, a specialist body or centre  
3 that had a particular interest in residential childcare.  
4 That was 2005. That's the one you mentioned earlier,  
5 the 2005 guidelines you had Googled?

6 A. That's what I Googled. I was literally 20-plus years  
7 out of practice, so I thought, well, before I come here  
8 today, let me see what appears to be current thinking or  
9 more recent thinking, and I was quite --

10 Q. But I suppose the point might be made if you'd Googled  
11 in 2004, you might have been just as much in the dark.

12 A. I don't know, possibly.

13 Q. This was published in 2005 and it said there was an  
14 absence of recent guidance on the matter.

15 A. Yes, okay.

16 Q. So you might have had some difficulty getting relevant  
17 up-to-date guidance from some sort of authoritative  
18 source --

19 A. Yes.

20 Q. -- had you done the search in 2004 even.

21 A. Yes.

22 LADY SMITH: Can I just understand what you're saying here?  
23 Because you were being asked about the absence of any  
24 recorded complaints or concerns. Is your point that if  
25 complaints and concerns about things that were happening

1 to children in residential care were known about, this  
2 2005 document would have been written rather differently  
3 because it would be drawing on reports it had unearthed?

4 A. I don't know that I'm saying anything more complicated  
5 than we didn't have a properly functioning complaints  
6 procedure.

7 LADY SMITH: All right. Okay.

8 A. And I can see straightaway, having read that, that  
9 that's a gap.

10 MR PEOPLES: You didn't have this external guidance that  
11 you were able to read?

12 A. No.

13 Q. And therefore if you were wanting some assistance from,  
14 not from the procedure manual, for example, but from  
15 something else, then that wouldn't have been available  
16 to you, or its equivalent, unless there was an  
17 equivalent in your time?

18 A. Yes, that's right.

19 Q. And if there was an equivalent, it's not something  
20 you were aware of?

21 A. No.

22 Q. I just want to explore the possibilities here: one  
23 possibility for the relatively low incidence of  
24 reporting of complaints -- and you weren't aware of any,  
25 but John Rea wasn't aware of very many -- might

1 of course be that children with a justifiable complaint  
2 didn't in fact complain for one reason and another.

3 A. Yes. A fair interpretation, I think, yes.

4 Q. I think we've had some evidence to the effect that it's  
5 recognised that vulnerable children who may wish to  
6 complain about the conduct of an adult, particularly one  
7 in a position of authority, might find that a difficult  
8 thing to do.

9 A. Yes.

10 Q. Would you have found any difficulty with that  
11 proposition in your time at Barnardo's?

12 A. No, I wouldn't.

13 Q. Did you recognise that difficulty at the time?

14 A. No.

15 Q. Because had you recognised that difficulty -- or did  
16 your colleagues recognise it in the division, do you  
17 think?

18 A. I don't think so.

19 Q. Had you and your colleagues recognised that difficulty,  
20 would that have been a reason, a very good reason, to  
21 see if you could take some positive steps to encourage  
22 children and young persons to complain if they had  
23 a basis or if they thought they had a basis for doing  
24 so?

25 A. Yes. Other people would probably be able to tell you

1 better than I, but I think Barnardo's did go that route.  
2 I think they did set up complaints procedures.

3 Q. I think you are correct that we'll hear some evidence  
4 that, probably by the time you took up your post, there  
5 was some degree of information in a booklet form that  
6 was given to children and what was described -- and  
7 I think Mr Mackintosh will tell us more about this -- as  
8 a card system, which could be used by children to report  
9 any concerns or problems that they felt they had.  
10 Although I should also add that Mr Mackintosh in his  
11 written statement suggests that it wasn't much used.

12 A. It doesn't ring any bells with me.

13 Q. You don't even recall it being a system that was in use?

14 A. I don't recall it. I can't say it wasn't there, but  
15 I don't recall it.

16 Q. And I think he also will tell us that at some point --  
17 and I think Mr Wilson touched on this with  
18 Minto Street -- there was a new system introduced of  
19 having independent visitors, who would visit  
20 establishments periodically to see what was happening,  
21 to speak to children, to prepare reports and so forth.  
22 Is that a system that you can recall?

23 A. I wasn't looking after the project at that point, and  
24 the other two projects we've been talking about had  
25 closed.

- 1 Q. But it wasn't a system that was in operation when the  
2 projects you were running were current?
- 3 A. No. There were other people that, at least  
4 theoretically, young people could turn to. They had  
5 their own local authority social worker and so on and so  
6 forth. But it wasn't a structured complaints system.
- 7 Q. I suppose we've asked the question of a number of  
8 witnesses: well, who could a child turn to? And  
9 of course, we invariably get the answer, well, there are  
10 a number of people that they could have turned to: the  
11 social worker internally, an external social worker,  
12 a teacher, some member of staff that they trusted or  
13 whatever. But I suppose the point I might make is that  
14 even if in theory these people were available, it  
15 doesn't appear that children were making use of their  
16 availability. I wonder why you think that was.
- 17 A. Possibly for the reasons you've already given:  
18 reluctance to speak out -- I mean, the people who are  
19 looking after you have more power than you do.
- 20 Q. Yes. Because I suppose -- and I think this is a point  
21 maybe made yesterday by Mr Rea -- one thing is that  
22 a child in that situation may feel -- and rightly  
23 feel -- that they're rather powerless in this  
24 relationship between themselves and the staff.
- 25 A. I think that's correct, yes.

1 Q. And they also may fear the unknown, in other words what  
2 will happen if they say something?

3 A. Repercussions, yes.

4 Q. Whether it will have repercussions for them or  
5 repercussions for their placement, future relationship  
6 with the staff or other people they have to come into  
7 contact with.

8 A. Yes.

9 Q. If you look at it from the child's perspective, how much  
10 were these considerations at the forefront of the mind  
11 of those who were running the organisation?

12 A. Less than they should have been.

13 Q. Returning to your first statement, Alan, just with that  
14 in mind, if I go to page 9, section 9.5, as regards  
15 Craigerne and South Oswald Road, in your written  
16 statement you express a level of confidence or  
17 confidence in various matters that there were sufficient  
18 staff, that they received proper training and support,  
19 there was good professional support for staff from the  
20 project leader, there were appropriate management and  
21 other systems in place at the unit, and more senior  
22 levels within the Scottish division, and that there was,  
23 to use your words:

24 "... a high level of scrutiny of practice and  
25 standards between 1985 and 1990."

1           In light of some of the considerations we've been  
2           discussing this morning and the evidence that the  
3           inquiry has heard, would you qualify that confidence  
4           now?

5       A.   Well, 9.5 would now start:

6           "I was confident at the time ..."

7           But I wouldn't make that same statement, having  
8           learned some of the things I have learned.

9       Q.   I think you say -- and I'm not sure it's in this  
10          passage -- at some point in that statement you were  
11          confident that children were treated fairly and well by  
12          staff.  It's page 8 at section 9.3.

13          Do we have to treat that statement with a degree of  
14          caution?  Because ultimately, are you in a position to  
15          go very far, based on your limited, to some extent,  
16          experience of what was happening on a day-to-day basis  
17          at the establishments you had responsibility for?  I'm  
18          not criticising you; I'm just saying as a matter of  
19          reality, you weren't there all the time.

20       A.   I was about to make a similar point.  I think that part  
21          of my role was the effort to do some quality assurance,  
22          which in my position you do by sampling.  But when you  
23          do that kind of sampling, it's a snapshot, and you don't  
24          even know if it's an accurate snapshot.  It's a bit like  
25          rolling out the red carpet when royalty is coming.  You

1 don't know. So there are limitations, yes, because of  
2 that.

3 Q. Can I take you to the final page of your first statement  
4 at 8033, page 15, and additional comment 3. As you say  
5 there:

6 "The fact that this inquiry is taking place [to use  
7 your words] reflects an uncomfortable reality that  
8 children in care settings have been abused when they  
9 should have received proper and appropriate care."

10 So that's something that you acknowledge?

11 A. Absolutely.

12 Q. "Those who have said they were abused in care ..."

13 And I think you can take it there are many people  
14 that have said that now.

15 A. Yes.

16 Q. And I'm not confining this to Barnardo's, by the way.  
17 They are entitled, I assume you'd accept, to know why  
18 the care system into which they were placed, generally,  
19 without any say in the matter on their part, failed  
20 them, even if for others the care experience was  
21 a positive one with a positive outcome. So they are  
22 entitled, are they not, to some answers?

23 A. They are entitled to answers, yes.

24 Q. Therefore, if they have that entitlement, and having  
25 regard to some of the things you've reflected on, are

1           you able to offer any thoughts or reflections that may  
2           assist them and us in understanding why that did happen,  
3           why the system failed them? I know it's a big question.  
4           But your views would be appreciated.

5           A. When I was employed by Barnardo's, my general sense of  
6           the organisation was of an organisation that was trying  
7           its level best to provide services. It's now clear that  
8           some of that provision was inadequate or some of the  
9           practice was inadequate.

10           I do believe that some of the practice was of its  
11           time. In other words, that was the way it was then and  
12           that was considered good enough. It's clear from  
13           current knowledge and looking back that it wasn't. It  
14           wasn't good enough.

15           I think there are things you can do with systems and  
16           procedures that can give a false sense of security. In  
17           other words, if it's written down in a procedure manual,  
18           it's covered. I've said several times that the  
19           Barnardo's manuals were huge, they seemed to try to  
20           cover everything. Just because it's written down in  
21           a procedure manual doesn't mean that the practice is  
22           good. I think we at that time fell short, partly  
23           because we didn't understand, weren't aware, missed  
24           things.

25           Q. Left gaps and holes, as you've said?

1 A. Yes, left gaps and holes.

2 Q. And quite obvious ones, no doubt. Although you may say  
3 that you saw some of these things through your  
4 comparison with the 2005 document. But they were quite  
5 obvious holes and gaps, were they not? It didn't need  
6 a 2019 mind to think them up as being weaknesses surely?

7 A. It shouldn't have, no.

8 Q. It's not like the discovery of DNA or something like  
9 that.

10 A. No.

11 MR PEOPLES: Well, I think these are all the questions that  
12 I have for you today, Alan. I'd just like to thank you  
13 very much for coming and thank you for considering the  
14 various matters that we have touched on today with some  
15 care and thought. Thank you very much.

16 A. Thank you.

17 LADY SMITH: Just before I check whether there are any  
18 outstanding applications for questions, Alan, I was  
19 interested in what you provided to us in your additional  
20 information statement at page 8666.

21 I'm sure you'll remember what you wrote there and  
22 are familiar with it. Without in any way asking you to  
23 go into every point in detail, as you get now to the end  
24 of your evidence here, are there any of the answers,  
25 some more comfortable than others, that you have to

1           these questions that you were posing that you would like  
2           to share?

3           A. I think there are various things that are related to  
4           management that interested and concerned me. First of  
5           all, you have to be clear what a project is there for,  
6           and you have to have clear aims and objectives, you need  
7           to know who your target group is because then you need  
8           to recruit the staff that are going to be able to  
9           address those situations.

10                 So I think, from my academic past, I was used to  
11           that kind of thing because I'd done research for the  
12           Home Office on delinquency. I think developing that  
13           kind of clarity repays the effort. But then you have to  
14           translate it into something more solid. So if you want  
15           to set up a project or if you have a project, how can  
16           you be sure that the staffing levels you have, the kind  
17           of staff you have, how you recruit them, how you pay  
18           them, what kind of career opportunities that offers --  
19           I mean, those are questions that matter.

20                 I think an extra bit that I possibly brought to  
21           Barnardo's is the whole question of addressing the  
22           budgeting and funding of projects. As we've alluded to  
23           earlier, if you're going to provide these services,  
24           they're going to cost a lot of money, actually, if  
25           you're going to do it properly. And I don't know how

1 far anybody was really addressing that as fully as  
2 perhaps they could. So I tried to do my bit on that  
3 score.

4 LADY SMITH: I can see that. If I can put it this way.  
5 When considering a project's purpose, should you  
6 always -- I don't mean you personally, Barnardo's --  
7 have been asking themselves whether we can, through this  
8 project, enhance these children's lives beyond where  
9 they are at the moment and, if we're not confident that  
10 we can, we shouldn't be doing it?

11 A. Well, I think that's right. If I can draw on a previous  
12 experience in a different world, I did a piece of  
13 evaluative research for the Home Office on an  
14 alternative to custody in the Medway towns. One of the  
15 key questions is: can you attract the target group?  
16 Because what's going to happen is that target group is  
17 going to get diluted or stuff like that.

18 Anyway, the bottom line was part of the research and  
19 findings was that it wasn't being used for the  
20 established purpose. So a colleague and I went to the  
21 Kent Probation Service and we said, look, it's not doing  
22 what it was set up to do, so you either soldier on like  
23 that or you close it. And they closed it, which was the  
24 right, brave thing to do.

25 I think if you're in the business of providing care,



1 MR PEOPLES: He'll be here tomorrow and we won't be sitting  
2 on Friday.

3 LADY SMITH: Are we expecting Mr Mackintosh to take the  
4 whole day tomorrow, just to give people some guidance?

5 MR PEOPLES: Hard to say. I don't want to make promises  
6 I can't keep. I'd probably not want to give any  
7 estimate at this stage.

8 LADY SMITH: We'll just start at 10.00 and see how it goes.  
9 Thank you very much.

10 (12.40 pm)

11 (The inquiry adjourned until 10.00 am  
12 on Thursday 10 January 2019)

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ALAN SWIFT (affirmed) .....1

Questions from MR PEOPLES .....1

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