

1 Thursday, 16 January 2025

2 (10.00 am)

3 LADY SMITH: Good morning, and welcome back to our final
4 chapter of Phase 8 of our case study hearings.

5 As promised yesterday, I understand we have
6 a witness in person ready to give evidence here, is that
7 right, Mr Peoples?

8 MR PEOPLES: Yes, good morning, my Lady.

9 Yes, the first witness is an applicant who will be
10 known today as 'Danielle'.

11 LADY SMITH: Thank you.

12 'Danielle' (affirmed)

13 LADY SMITH: 'Danielle', thank you for coming along this
14 morning to assist us with your evidence here at the
15 Inquiry.

16 I do, of course, already have your written evidence
17 and I see you've found it, it is in that red folder in
18 front of you. It will be there available for you if you
19 want to look at it at all as you're going through your
20 evidence and answering the questions that we have for
21 you.

22 It will also come up on the screen in front of you.
23 You see that screen on the desk? We can put parts of it
24 up there as we're looking at it. Some people find that
25 quite helpful.

1 'Danielle', quite separately from all those
2 practicalities, could I just say, I do understand that
3 what you've agreed to do isn't easy. It's really quite
4 difficult to come into a public space and talk about
5 yourself and your own life and particularly things that
6 happened a long time ago when you were a child and some
7 of which, I can see from your statement, were very
8 distressing and may surprise you at catching your
9 emotions as you're giving evidence.

10 If at any time you want a break or a pause or just
11 to stop, that's fine, just tell me. Because the last
12 thing I want is you sitting there bottling it up and
13 feeling you can't cope but there's nothing you can do
14 about it. We can. We'll do what we can to help.

15 If it works for you, it will work for me, I promise,
16 whatever it is.

17 A. Thanks.

18 LADY SMITH: If you're ready, I'll hand over to Mr Peoples
19 and he'll take it from there.

20 Mr Peoples.

21 MR PEOPLES: My Lady.

22 Questions from Mr Peoples

23 MR PEOPLES: Good morning, 'Danielle'.

24 A. Good morning.

25 Q. Can I begin by giving a reference for your statement.

1 It's our reference. You don't need to worry about it,
2 but it's just for the record. I'll give that just now,
3 it's WIT.001.003.0632.

4 'Danielle', if I could ask you to look at the red
5 folder and turn to the final page of your statement,
6 page 45. Can you confirm that you have signed your
7 statement and also dated it, and you say at the final
8 paragraph:

9 'I have no objection to my witness statement being
10 published as part of the evidence to the Inquiry.
11 I believe the facts stated in this witness statement are
12 true.'

13 A. Yes.

14 Q. I don't know if you want to use the hard copy
15 statement -- because I propose to go through parts of it
16 now -- or the screen, but it's very much up to you.

17 A. Erm, possibly the screen, 'cause it's easier for my
18 eyes.

19 Q. That's absolutely fine.

20 If I could start by going back to the beginning of
21 the statement you have provided to the Inquiry. Can you
22 just confirm, and I don't need the precise date, that
23 you were born in the year 1965?

24 A. Yes.

25 Q. You have a section in your statement dealing with life

1 before your first care setting. I would just like to
2 pick up some of what you tell us there so we get
3 a context for your time in care, in various settings.

4 You tell us in that section that begins at
5 paragraph 2 that your parents both worked?

6 A. Yeah.

7 Q. You have an older sister?

8 A. Yes.

9 Q. And you had a younger brother, who I think unfortunately
10 is now deceased?

11 A. Yes.

12 Q. Am I right in thinking, from what you tell us in
13 paragraph 2, that you have a younger stepbrother?

14 A. Yes, three months younger.

15 Q. I think, as you tell us, and I don't want to go into too
16 much detail on this, but that was a result, I think, of
17 your father having an affair around the time that you
18 were born?

19 A. Erm, yeah, well, just -- well, whilst my mother was
20 pregnant, yeah.

21 Q. Yes, and expecting you?

22 A. Yes.

23 Q. You tell us in this section of your statement at
24 paragraph 2 that you and your mum never really bonded,
25 and I think you believe perhaps in part this was because

1 you were born around the time of your dad's affair, you
2 think that may be part of the reason?

3 A. Erm, I think so. It's part of the reason, yes, but
4 whilst I blamed myself, my sister also blames herself
5 because it was her babysitter, so it's quite -- it's
6 still quite (inaudible).

7 Q. You tell us in your statement and I think in paragraph 4
8 there might be a little confusion at paragraph 4, that
9 it says you moved to Edinburgh. I'll take from you,
10 I think you grew up in the Borders, is that correct?

11 A. Yes, I was born in Edinburgh, stayed here until I was, I
12 think, 2 and then I moved to Kelso with my family.

13 Q. Right. In fact you only went to Edinburgh, I think,
14 some time later and we can come to that in due course?

15 A. Yes.

16 Q. If I just focus on your time in the Borders growing up
17 there. You tell us at paragraph 5, 'Danielle', that you
18 grew up in quite a poor household, so there wasn't a lot
19 of money and you tell us that that was the situation.

20 You also say that your maternal granny lived with
21 the family; is that right?

22 A. Yes, she came to live with the family when I must have
23 been about -- well, I was still very young, I remember.

24 Q. Indeed, you tell us that she actually became the main
25 carer, your parents were working, and that you had

1 a very difficult relationship with her, is that the
2 situation?

3 A. Yeah, absolutely, uh-huh.

4 Q. I'll try and summarise what I think you're telling us,
5 but correct me if I get it wrong. You tell us in this
6 section of your statement, 'Danielle', that she kept you
7 apart or separate from your sister and brother for much
8 of the time that you were in the family home and you
9 were left on your own, usually upstairs?

10 A. Yeah, absolutely.

11 Q. You say matters went a stage further, because there
12 would be times when your granny would put salt in your
13 food, such as a jammy piece, you mention at paragraph 8,
14 and also in your tea or milk, drinks that you were
15 given, that was something she did?

16 A. That was the only meal I got.

17 Q. But she was putting salt in these things --

18 A. Yeah, uh-huh.

19 Q. -- which doesn't on the face of it seem a very --

20 A. Yes, she was vindictive. She would do other things as
21 well.

22 Q. I think you describe her as someone that, towards you at
23 least, was quite aggressive and that you never really
24 hit it off; is that fair to say?

25 A. That's true.

1 Q. I think there's a sense here that she tended to favour
2 your little brother, is that right?

3 A. I would say she favoured my sister.

4 Q. And your sister too?

5 A. Yeah.

6 Q. As you put it at paragraph 11, for you, you considered
7 it a bullying and emotional time. Would that be just
8 summing up?

9 A. Absolutely, yeah.

10 Q. Now, you tell us a bit more about your granny and your
11 mum from paragraph 12 onwards. Again, I'll just try and
12 pick out the main points of your evidence.

13 You say your mum and your granny didn't have much
14 time for you when you were growing up and in fact they
15 didn't like you; that's the way you saw it?

16 A. Yeah, that was the way I saw it as a child, but now as
17 an adult, and with reflection on my own journey through
18 life, I think that my mother -- the statement that
19 I wrote there, they didn't like me, that was when I was
20 a child. Erm, I think that my mother didn't just know
21 how to deal with my granny. My granny was too
22 overwhelming.

23 Q. So that's how you thought as a child, but reflecting,
24 you feel that a large part of the problem was your mum
25 couldn't really deal with her own mum?

1 A. That's right.

2 Q. Who was living in the same household?

3 A. Yeah, she needed help.

4 Q. I think you say that one of the difficulties was that

5 your mum, perhaps for the reasons you've just given,

6 started drinking, I think to excess, when your granny

7 came to live with the family; that's what happened?

8 A. Yeah, it got increasingly worse, yes.

9 Q. Indeed, you say that you, as a child, witnessed a lot of

10 domestic violence on the part of your mother towards

11 your father. Now, can I take it that that was usually

12 when she was drunk?

13 A. Aye, yes, absolutely.

14 Q. You tell us that your granny, the one that you, I think,

15 still believe was quite a vindictive person, didn't like

16 you being anywhere near or close to your father, is that

17 right?

18 A. No, she tried to isolate me.

19 Q. She would have known about what happened with your

20 father and the affair, would she?

21 A. Mm-hmm, yeah. And also there was other factors such as

22 she kept on saying too things to my mum that I was just

23 like her and things like that, which didn't make sense

24 to me, even as a small child. I knew that that wasn't

25 right.

1 Q. I think, however, although she didn't like you being
2 close to your father and near to him when he came home
3 from work or at other times, I think, from what you tell
4 us, he was really the person you wanted to spend time
5 with, is that correct?

6 A. Yeah, yeah. I was a daddy's girl, or I thought I was,
7 yeah.

8 Q. You tell us that when your dad went out to work, your
9 granny, maternal granny, put you out of the house and
10 left you to wander about on your own, initially near
11 your home?

12 A. Mm-hmm. Yeah, I was safer outside.

13 Q. You were still very young at this stage?

14 A. Oh, yeah, absolutely.

15 Q. You tell us then from about paragraph 16 onwards, about
16 the consequences of this leaving you on your own to
17 wander outside.

18 You say that you think by about the age of 4, before
19 you were at school, you were wandering further afield
20 and as, I think you put it there at that section, this
21 led you into abusive situations, is that right?

22 A. Yeah.

23 Q. In particular, you tell us in that section of your
24 statement, that you were regularly indecently assaulted
25 by three men in the locality at various locations?

1 A. Uh-huh, yeah.

2 Q. We can read the detail and I'm not proposing to take you
3 through the detail of that.

4 A. That's fine, I'm okay with that.

5 Q. We can clearly see it was serious sexual assault?

6 A. Mm-hmm. Yeah, it was.

7 Q. By older men?

8 A. Mm-hmm.

9 Q. You were preschool age?

10 A. Mm-hmm, and they knew me and they passed me around.

11 Q. These were people that lived in the same area?

12 A. Mm-hmm. Yeah, they were all council workers.

13 Q. You tell us in that section, between paragraph 16 and
14 24, that neighbours began to notice that there was
15 something wrong because, as you tell us, you would stand
16 outside your house at times and self-harm and you say
17 you would punch yourself in the face [REDACTED]
18 [REDACTED] and these were the sort of
19 things you were doing?

20 A. Yes.

21 Q. You tell us that your abusers, the men you have
22 described, told you at the time that they knew and were
23 friendly with your family, knew where you lived and this
24 was something that made you, I think, very anxious, is
25 that right?

1 A. It was almost -- I don't know, it was like -- it was
2 definitely coercion and definitely manipulation, because
3 it was drip, drip, drip, you know, it was constant so
4 ... And they did know my family, so I believed anyway.

5 Q. You say you were anxious and I think you were anxious
6 that they might say something to your mum and dad, is
7 that right?

8 A. Yeah.

9 Q. That was one reason for your anxiety. But perhaps there
10 was another reason, and correct me if I'm wrong, is that
11 if you said anything to them, your family, I think you
12 had a concern perhaps that you wouldn't be believed, is
13 that right?

14 A. I was going to get the blame. I was going to get the
15 blame and it was going to be really difficult for my
16 little brother.

17 Q. So moving on in your statement, 'Danielle', you tell us
18 there came a time when you were still quite young, this
19 is at paragraph 27, when you saw a child psychologist on
20 a few occasions. I think this was mainly before you
21 started primary school; is that right?

22 A. Erm, I saw her right up -- I started when I was about 5.
23 I finished when I was about 7, I saw her last.

24 Q. You were seeing her before you went to school and you
25 saw her at times after you went to school?

1 A. Yes, uh-huh, yes.

2 Q. Also, I think you tell us at paragraph 28, that after
3 maybe about six months at your school, a teacher was
4 very concerned about you and called the Social Work
5 Department?

6 A. Mm-hmm, yeah.

7 Q. I think it was partly to do with obviously you looked
8 malnourished?

9 A. I was almost begging for food, you know, that's what it
10 felt like. Well, with hindsight, you know, sort of
11 scuffing my shoes outside the canteen, the school
12 canteen and, yeah, and my clothes were, you know, they
13 were dirty and they were unfit and, it was -- yeah,
14 I see there, there was one time I'd stolen a sweet and
15 she was going to spank my bum and I thought that if she
16 done that, she would have seen everything.

17 Q. She would have seen marks?

18 A. She would have seen, I thought what -- it was visible,
19 you know, so ...

20 Q. Evidence of the abuse you had been suffering?

21 A. Yes, uh-huh, yes.

22 Q. Effectively, she saw a child that she considered was
23 badly neglected --

24 A. Yes.

25 Q. -- in her home environment?

1 A. Yes.

2 Q. She called in the Social Work Department?

3 A. Yes.

4 Q. I think the upshot of that was that you were given
5 a social worker at that time and you appeared before
6 a Children's Panel?

7 A. Yeah, yeah.

8 Q. I think at the panel, you tell us that around
9 paragraph 30, I think it is, and 31, you tell us that
10 you told the panel that life at home was terrible and
11 they made a place of safety order at that time and you
12 were sent to a local children's home. You tell us about
13 that home between paragraphs 35 and 95.

14 That's how you got into a care setting for the first
15 time; is that right?

16 A. Yeah, it was under a place of safety order, yeah.

17 Q. Now, as you appreciate, we're not dealing, in this
18 particular set of hearings, with the type of place that
19 you were in at that point, but I think to understand
20 your journey, I'm going to try and pick out some things
21 that you tell us in summary so that we understand how
22 things progressed for you.

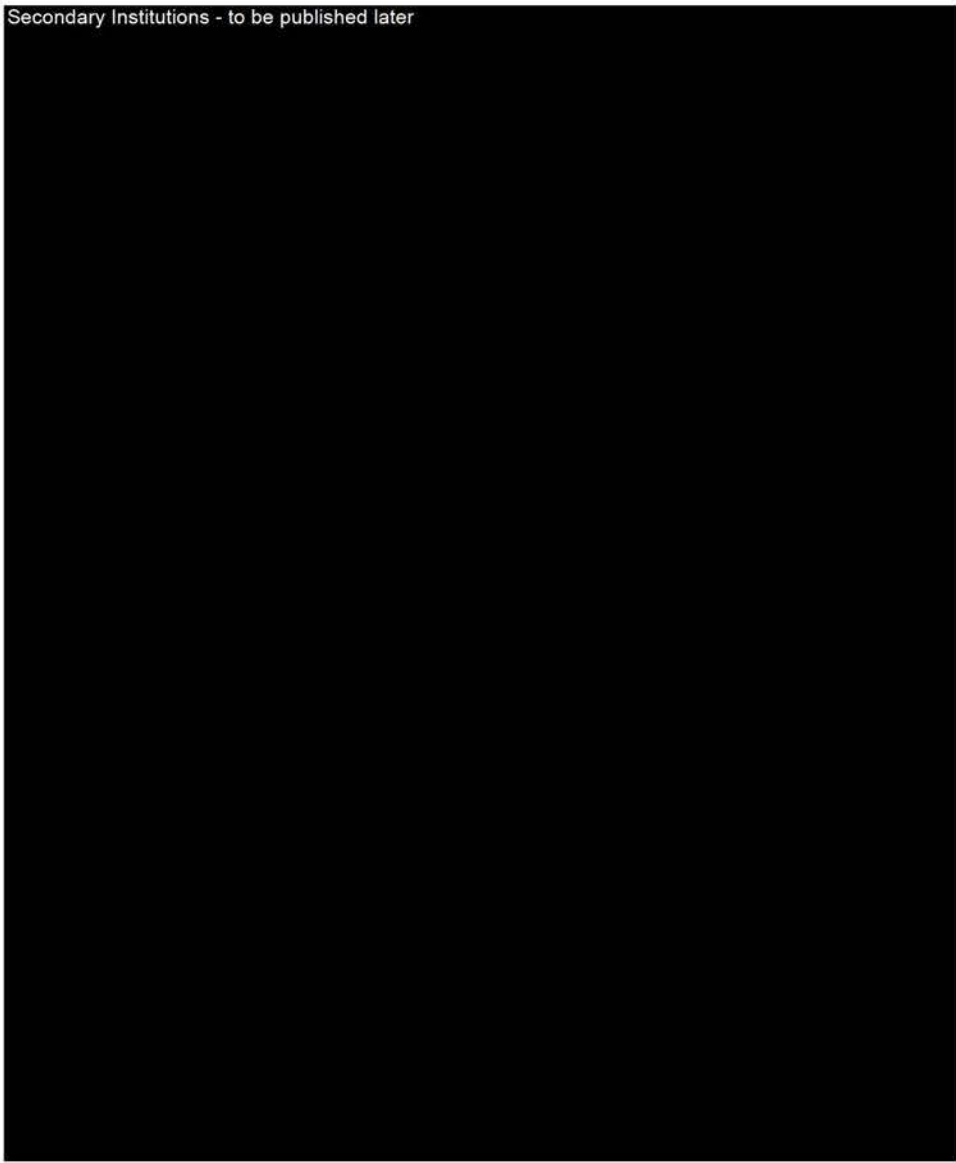
23 I'm not going to go through the section in detail,
24 but again, correct me if I get anything wrong, or I miss
25 out something that you consider was particularly

1 important.

2 The first point is that you are a child who had
3 already been seriously sexually assaulted before you
4 went into care?

5 A. Yes.

6 Secondary Institutions - to be published later



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2 Q. You were there between, what ages roughly?

3 A. I must have been about 1971 and I left in 1982, I think.

4 Q. You would be between about 6 and --

5 A. No, I was younger than that. No, I was younger than
6 that, 'cause I remember going to school from there, so
7 about 5 or 6, yeah, in between 5 and 6.

8 Q. I don't need to worry too much about precise dates, but
9 you were there a long time?

10 A. Yes, a long time.

11 Q. Were you there as a teenager?

12 A. Yes.

13 Q. Were you there when, for example, you started secondary
14 school, high school?

15 A. Yes.

16 Q. Not for the whole of your high school?

17 A. No, not for the whole of it, I was -- yes.

18 Q. You were there for some of it?

19 A. Yes.

20 Q. We can at least get the general picture, that you were
21 there for much of your primary years, primary school
22 years, and some of your secondary school years?

23 A. Uh-huh, yes.

24 Q. Occasionally I think you had one spell of about
25 six months when you were at home, back at home?

1 A. Yes.

2 Q. But that didn't really work out, did it?

3 A. No, no, that was awful.

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15 Q. Moving on, 'Danielle', in your statement, you have
16 a section again which I'm not going to deal with in
17 great detail today, but it's a section dealing with your
18 time in foster care. I think you were -- it's between
19 paragraphs 96 and 118 of the statement, if we can have
20 that. Yes.

21 This was a foster family in the Borders. You
22 describe this particular period as a period of pure
23 hell. I'll just try and pick out some of the things you
24 say in the statement, but if I miss out other things
25 that might have caused you to describe it as pure hell,

1 please tell me.

2 One of the things you say in this section is that
3 you felt you were treated differently in the sense of
4 perhaps less favourably than the foster family's own
5 daughter, who I think was a little bit younger than you,
6 but not much?

7 A. Yeah.

8 Q. Indeed, you instance an occasion at 106 when your dad
9 had bought you a new pair of jeans for your birthday and
10 the daughter of the foster family took them from you for
11 herself, is that --

12 A. No, she didn't, erm --

13 Q. No? All right.

14 A. -- what had happened was that I had been really excited
15 and I told her that my dad was getting me them, erm, and
16 for my dad it was quite a lot of money, to buy a pair of
17 black corduroy jeans, and when I went home to the foster
18 care placement, erm, that night, returning from my
19 visit, the step daughter brought out -- the step
20 daughter, sorry, the foster daughter, brought out a pair
21 of black corduroy jeans before I could even show them
22 mine --

23 Q. Show them your present.

24 A. -- and my father, you know, worked hard to get them,
25 whereas, you know, that was her sorta -- do you know, it

1 was just like --

2 Q. She bested you, as it were?

3 A. It was manipulation. She knew that I was getting the

4 present, so she wanted to get one over. You know, she

5 was very jealous.

6 Q. Another problem for you at this time was while you were

7 in foster care, because of its location, I think, you

8 had to move to a different high school, is that right?

9 A. Yes.

10 Q. You did find that difficult, I think, because other

11 children would be asking questions, as children do,

12 where you're from and so forth and your background and

13 I think you tell us at 108 that you found -- you didn't

14 really want to say you were in foster care for a start

15 and that you had previously been in a children's home,

16 is that how it was?

17 A. Er, I didn't want to let anybody know. It was

18 embarrassing.

19 Q. You found it embarrassing at the time?

20 A. Yeah, because there was such a stigma and I'd already

21 faced it at Kelso, it's like running the gauntlet.

22 Q. We were in the days when it was a stigma to say you'd

23 been in care?

24 A. Uh-huh.

25 Q. Either foster care or residential care?

1 A. Absolutely.

2 Q. You did feel awkward if you were asked questions about
3 where you were from?

4 A. Yes. Yes, I had no answers.

5 Q. Now, I've taken that from your section on foster care,
6 but I'm not sure, is there anything else that
7 contributed to making this a period of pure hell? Is
8 there something else you would like to say about that
9 period that made you feel the way that you've described
10 in your statement? Were there other things that
11 happened?

12 A. I think the main thing for me was the fact that the
13 family were actually quite well off and quite well-to-do
14 and it made me feel as if I was staying in the granny's
15 guest room. Erm, I wasn't allowed to use all the
16 furniture in there. Just the bottom two drawers of the
17 dresser, erm, so the social status was very different.
18 What they considered as lunch, I would have considered
19 as a major treat that would of fed our family for quite
20 a few days.

21 And there was -- and also, the daughter being so
22 much younger was -- it made me think that they should
23 never place older children with troubles into, you know,
24 a family that's already got one child, biological, who
25 is younger.

1 Q. So from your perspective, it seemed like pure hell. Second
2 Secondary Institutions - to be published later
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5 A. Secondary Institutions - to be published later I didn't have any friends
6 either. Secondary Institutions - to be published later
7 Secondary Institutions - to be published later
8 Secondary Institutions - to be published later in the foster placement, even, you know, the
9 village that we were in, they owned the biggest house in
10 the whole village and it was like: what are they doing
11 this for, they obviously don't need the money? So
12 what's going on? It was one of they ones.
13 Q. Now, after this period in foster care, which you think
14 was around maybe six months, you went back to the
15 children's home that you'd previously been in and you
16 tell us a little bit about that return at 119, going
17 through to 122, I think it is.
18 Secondary Institutions - to be published later
19 Secondary Institutions - to be published later Can I just read a passage that you tell us
20 in the statement. It's blanked out in the screen, but
21 I'll read you what's said there. You say --
22 LADY SMITH: What number is this paragraph?
23 MR PEOPLES: 122.
24 LADY SMITH: 122. Thank you.
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11 Q. Then you go on to tell us about a time in your life
12 where you tell us, as you put it, when you're aged 14 or
13 about 14, you joined, you say, Who Cares? and that you
14 would attend meetings and, indeed, when you were 15,
15 I think, you had a [REDACTED] role at these meetings and
16 that you attended occasions when you'd speak to people
17 about self-harming and substance abuse with the aim
18 being that by speaking to these people, you would try to
19 divert them away from the same type of behaviour as you
20 had experience of, is that what was going on?

21 A. Yeah, and I still do that.

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so I wanted to get involved and to have my voice heard.

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Can I go back to -- you were talking about number

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222 there.

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Q. 122.

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A. There was two very important points that I really wanted

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to make there but --

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is no record of my childhood in my NHS records --

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Q. Yes, I think you tell us later on about records, that

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they haven't been able to provide you with records of

25

this time.

1 A. Uh-huh.

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10 Q. Going back to Who Cares? then, 'Danielle', it was kind

11 of a mixed blessing, because you tell us:

12 'On the one hand, Who Cares? was very good for me in

13 developing some self-worth and self-confidence but on

14 the other hand, it was bad for me because I was dealing

15 with similar issues that I had faced day in and day

16 out.'

17 So you are trying to help people, but at the same

18 time, it maybe wasn't always helping you?

19 A. I found that, erm -- I think because I lived so far away

20 and I was in, er, you know, I was so far away removed

21 from everybody, I just felt so -- you know, I was

22 banging my head against a brick wall all the time.

23 I still do that. That's how I help myself. The only

24 way I can seem to help myself is by helping other

25 people.

1 Q. But at that time, I think, you were giving out the
2 message but you weren't able to --
3 A. Absolutely.
4 Q. -- apply the message to yourself?
5 A. Absolutely, yes.
6 Q. That was a difficulty?
7 A. Uh-huh, yes.
8 Q. I think that was a difficulty that caused you, as you
9 tell us at 124, to -- there came a time, I think, that
10 you went to see a doctor in Glasgow about your
11 continuing abuse, is that right, a psychologist?
12 A. That's right, yes.
13 Q. By then, I think, you tell us that you were effectively
14 a chronic substance abuser at that point?
15 A. Mm-hmm, yeah, absolutely, yeah.
16 Q. You say that the psychologist you saw, at 125, explained
17 to you that you were doing this to escape reality, but
18 she was concerned that you were doing this on your own?
19 A. Yes, I was.
20 Q. Indeed, rather curiously, she said, well, if you do it,
21 do it in the company of other people, it sounds
22 a strange piece of advice?
23 A. Yeah, I know, but because there was so much fear about
24 people's throats freezing up and also because I was
25 doing it next to the burn and sitting in a tree and then

1 once you're under the influence, you really don't know
2 where you are or what you're doing. Erm, I mean,
3 I can't remember being under the influence of it at all,
4 so, yeah, I must admit there's probably a lot of risk
5 taking, that's what she meant, it would be better if
6 somebody --

7 Q. Yes, if you are going to take a risk, have someone
8 around that might be able to help you if something
9 untoward was likely to happen?

10 A. Yeah.

11 Q. Now, the one thing you say that she didn't do, and maybe
12 this was quite an important omission, is she didn't
13 address any problems specifically about why you were
14 abusing substances.

15 I suppose if you don't address the underlying cause,
16 you have got less chance of dealing with the problem?

17 A. Absolutely. I mean, I have to say that, I mean, my
18 child abuse has never really been talked about until the
19 Child Abuse Inquiry started. That is the only input and
20 it's all happened since then that the input from PTSD
21 and all these different services.

22 Q. I think you do tell us that certainly at this time when
23 you saw the psychologist about substance abuse and you
24 say there wasn't any addressing of the problems, you
25 weren't disclosing the sexual abuse at that stage

1 though, were you?

2 A. No, no, it was still a secret, it was a big secret.

3 Q. I suppose if you had said something to the psychologist

4 at that stage, and I appreciate it's maybe quite

5 difficult as a teenager to have said anything like that,

6 that might have caused her to take other action?

7 A. There was a lot of missed opportunities.

8 Q. Okay. I think the upshot of it was that after you saw

9 this psychologist, you did go back to the home you had

10 been in for a time, but your substance abuse continued.

11 I think a decision was then taken that you would go to

12 Howdenhall Assessment Centre in Edinburgh and be locked

13 up there for your own safety?

14 A. Yeah, they just wanted me to stop.

15 Q. They felt that the only way that that might happen is if

16 you were in a locked environment?

17 A. Yes.

18 Q. But that, of course, would mean that you were getting

19 uprooted from your Borders town to Edinburgh, to the

20 Liberton area?

21 A. Yeah, but, I mean, that wasn't anything new, you know.

22 That wasn't anything new, 'cause we did move around

23 quite a lot. Or it felt as if we moved around. I mean,

24 maybe the place didn't move, but the sorta the systems

25 did, the people did, so, yeah.

1 Q. I think we know from that period lots of children were
2 often placed some distance from their locality?
3 A. Yeah, absolutely, mm-hmm.
4 Q. The other possibility is of course that where you were
5 based as a family didn't have the sort of facility like
6 Howdenhall, a locked unit or assessment unit of that
7 kind. That could be the reason?
8 A. That's absolutely, correct, yeah.
9 Q. These sort of places didn't exist in every part of
10 Scotland or in every region?
11 A. That's right. There was people from all over there,
12 yeah.
13 Q. In Howdenhall?
14 A. Mm-hmm.
15 Q. Can I just ask, when you went there, was there anyone
16 that you knew when you got there or were you just --
17 A. No, I didn't know anybody.
18 Q. You didn't know anyone?
19 A. No.
20 Q. You tell us about Howdenhall between paragraphs 126 and
21 137, so I'm going to take you to some of that, if I may.
22 First of all, at paragraph 127, that, you tell us,
23 is where you started self-harming, is that right?
24 A. Yes, uh-huh.
25 Q. Just to put some context on when you were there, you

1 recall that you -- I'm not sure 'celebrate' is the right
2 word, you had your 16th birthday there. Indeed, you
3 tell us it wasn't recognised so they didn't make it
4 a special occasion, is that right?

5 A. Erm, I don't think any of my birthdays were recognised.
6 It's a very painful time.

7 Q. If I just read what you say afterwards, and you might
8 want to comment on how it was for you, but you say in
9 your statement:

10 'I was in Howdenhall for quite a few months.
11 I wasn't allowed out at all. I had no visitors or
12 sweeties or toiletries or luxuries. Everybody else got
13 visits and presents. I got nothing. I didn't even get
14 cigarettes to smoke. I think they just forgot I was
15 there. I was the only person from care in there. They
16 didn't have any understanding of my background. The
17 others were in for skipping school mostly or committing
18 small offences. It was mixed boys and girls. The other
19 children had their parents coming to visit them and they
20 were getting pocket money and sweeties.'

21 That's how it was for you?

22 A. Mm-hmm, yeah, and for a child, that's a big, big thing.

23 Q. Can you just try and describe the feelings you had
24 against that sort of experience?

25 A. Erm, I also had my first big fight -- my only big fight

1 in Howdenhall, er, which is something that did change me
2 forever. That was I was constantly getting bullied by
3 the other girls, who would gang up on me, erm, and
4 I had -- it was just an awful thing to experience.

5 Q. Did you feel very much on your own?

6 A. Oh, yeah, very isolated and even amongst this group of
7 girls who were there for, you know, erm, different
8 reasons, but, you know, under the same, you know,
9 building as I, they themselves used to gang up and even
10 the staff treated me differently.

11 Q. Did you feel that the staff ever tried to support you?

12 A. I don't think they knew how to. I really don't think --
13 I think I was, er, too mixed up and too confused for
14 them to even start the process.

15 Q. Do you think they had the skills --

16 A. No.

17 Q. -- to deal with you?

18 A. No, no, not at all.

19 Q. Did they know how you were being treated by some of the
20 other residents, do you think they did know?

21 A. Yeah, very much so, because you were all kept in the
22 same small little room.

23 Q. You do tell us about this fight, at 128, and you say --
24 you have told us about how -- we know a bit about
25 Howdenhall, so you can assume that we know what type of

1 place it was. It was secure, locked.

2 Were you in a single room --

3 A. In --

4 Q. -- in Howdenhall?

5 A. In Howdenhall?

6 Q. Or a dorm?

7 A. I was in a dorm and then if you got pinned down, you

8 were put into a single room.

9 Q. So you didn't have a single bedroom, if I could put it

10 that way?

11 A. No, no.

12 Q. So you shared?

13 A. Uh-huh. Yeah, I've never had a single bedroom in care.

14 Q. Were the people in your dorm the same age or different

15 ages?

16 A. About the same age roughly, yeah.

17 Q. I take it they were all girls?

18 A. Yes.

19 Q. Although there were boys in the unit?

20 A. Yes.

21 Q. Were some of the girls in the dorm the bullies you've

22 spoken about --

23 A. Yeah, absolutely.

24 Q. -- or were they in other places?

25 A. No, yeah, no, they were in the dorm, you know, it was

1 the same girls that were in the dorm that was in the
2 television room, that was in the, you know, the day
3 room, that was in the schools.

4 Q. The bullying that you've described would happen both in
5 the dorm and elsewhere?

6 A. Uh-huh. It was consistent, it was never ending.

7 Q. You tell us you were badly bullied by girls and you feel
8 the staff let it happen. You talk about the big fight,
9 the one big fight that you had, you tell us, with one of
10 the girls.

11 You tell us the background to that fight was that
12 this particular girl kept on saying to you that nobody
13 wanted you and that you didn't get any sweeties or
14 visitors and that you were just a lump of trash?

15 A. She was like the main ringleader, as I saw it. She was
16 like -- there was a group -- they were kind -- I was sat
17 down and they were kinda all standing. She was like the
18 one that kept on stepping forward with the most hurtful
19 comments, so I knew that if -- you know, she was the one
20 to go for.

21 Q. So she was winding you up with these sort of comments
22 frequently?

23 A. Uh-huh, oh, uh-huh.

24 Q. On this occasion, you reacted by having a fight with
25 her?

1 A. Yeah, I had to. I had no other option.

2 Q. I think you say that one day there was a group of the
3 girls, including this particular girl, having
4 a cigarette and that she was laughing and teasing you.
5 In fact, because you didn't have a cigarette as well?

6 A. Mm-hmm.

7 Q. And that a fight started with her?

8 A. Mm.

9 Q. You say that you attacked her with a book?

10 A. Yes.

11 Q. Was that your only means --

12 A. It was the only thing I had. I mean, you know, we
13 were -- every -- even, you know, to the smallest minute
14 detail was having to be signed in and out. Safety was
15 apparently meant to be the main paramount.

16 Q. The result was, as you tell us, you were pinned down by
17 staff, restrained, and taken up to what you call 'a
18 cell' by staff. Now, this wasn't your room?

19 A. No, no.

20 Q. This was a cell?

21 A. This was a purpose-built cell.

22 LADY SMITH: 'Danielle', I'm interested in your use of the
23 expression 'pinned down'. Is that something that was
24 said in Howdenhall or is it something that you have
25 learnt about later?

1 A. It was something I learnt about later, after doing some
2 reading when I was a bit older and doing some back
3 reflecting reading, er, and it talks about 'the Pindown
4 years' and it was an actual practice that was
5 acceptable, you know, erm, and they done it at that
6 time. But now it's quickly realised that it wasn't
7 proper to restrain people and do what they were doing to
8 young people, but, you know, the damage by that time had
9 been done.

10 LADY SMITH: That was my next question. When you are
11 talking about 'pindown', you are talking about
12 a particular way of restraining a child?

13 A. Yeah, uh-huh.

14 LADY SMITH: Thank you.

15 MR PEOPLES: Yes, I was going to ask you about that, because
16 you do tell us a bit about how it was done. The Pindown
17 inquiries were in the early 1990s, I think. It was down
18 south, there was quite prominent inquiries and it was
19 called 'pindown', was the name given to the type of
20 restraint.

21 A. I've also done interviews in [REDACTED] for
22 that.

23 Q. About these?

24 A. Yes.

25 Q. About this particular method of control?

1 A. Uh-huh, yes.

2 Q. Just to be clear, when you say 'pinned down', do you
3 mean put to the floor?

4 A. Oh, yeah, absolutely. I mean, you could have sometimes
5 up to five staff sitting on you and it didn't matter
6 whether it was male or female, you know.

7 Q. Was this a prone type of restraint?

8 A. It was something that was --

9 Q. Face down?

10 A. Yes, well done -- er, sorry, er, face down, the back --
11 a knee in between your back shoulder blades, get your
12 arms down to your side and try and pin you down that way
13 and also to either cross your legs and sit on them or --
14 well, maybe not sit on them, but put weight on them and
15 sometimes it would include people actually physically
16 holding you down. Some used excessive restraint.

17 Q. Yeah, so pindown was a combination of putting you to the
18 floor but then using pressure and weight and that's
19 probably why it's called pindown, you were held down
20 using weight of knees or people sitting on some part of
21 your body, whether your legs, arms or back, it was that
22 sort of type of technique that was being used at that
23 time?

24 A. It was like a rugby tackle or whatever and then --

25 Q. To get you down?

1 A. To get down to the floor. Usually they would take two
2 staff at least to do it. Erm, they used to have alarm
3 buttons as well if they needed more staff and, er, after
4 they'd done it, they would march you up to the cell or
5 wherever and you would be removed, you'd be taken into
6 a single room. All your -- everything would be removed,
7 the drawers, if there was any drawers or any cupboards
8 that had any clothes in them, everything would be
9 removed out of the room. You were left in a vest and
10 underwear, no socks, no shoes, no clothes, and that was
11 it, erm, and somebody would sit outside the door, if you
12 were, you know, lucky to have the door open.

13 Q. The people who were doing the pinning down in the way
14 you've described, you speak about usually a number of
15 staff would be involved. Generally speaking, what sort
16 of numbers are we talking about at this time?

17 A. I would say at least three.

18 Q. At least?

19 A. At least three.

20 Q. Could be more?

21 A. Usually there was more, yeah. There was one lady in
22 particular, and I don't know if it was just me, but she
23 seemed to have a right, erm, liking to pin me down, you
24 know, and every time she did it, she wanted more and
25 more people. She was the toughest one.

1 Q. So this pindown wasn't just by a group of male staff.
2 It was males and females?
3 A. Because it was usually instigated by a female staff,
4 'cause it was in the female dorms, as far as I was
5 concerned, it would be mainly female staff. But if it
6 called for male staff, then they would be there, 'cause
7 they pressed a button and 'boof', they would all come.
8 Q. This particular fight and the pindown that followed,
9 I didn't ask you, and I maybe should have done, where
10 were you when the fight started and the pinning down
11 took place?
12 A. I was in the day room.
13 Q. In the day room?
14 A. Yeah.
15 Q. So pindown could happen in the day room or communal
16 areas, it could happen in the dorm?
17 A. Anywhere.
18 Q. Anywhere?
19 A. Uh-huh. Even if you're having a shower.
20 Q. Can you give us an idea, a general idea, of what sort of
21 things would result in pindown to you or other
22 residents?
23 A. It could be something quite as simple as using the wrong
24 language, the wrong body language, something that you
25 maybe weren't even aware of. For me, I was on hunger

1 strike quite often, so, erm, if I refused food, they
2 would refuse me services, so to speak. So it was wide
3 and varied, depending on the person, and --

4 Q. Because it's sometimes said, certainly in modern times,
5 that you shouldn't use physical intervention, or
6 'restraint', as it was sometimes known, unless the
7 person is presenting a danger to themselves or to other
8 persons. Now, are you describing situations where
9 pindown occurred where it wasn't that situation, where
10 you weren't presenting a danger to yourself or others,
11 you simply were pinned down because you had done
12 something wrong?

13 A. Absolutely, absolutely, yes.

14 Q. You say that on these occasions, when this pindown took
15 place, including on this occasion you have described,
16 you were taken to what you describe as a cell that was
17 in the upstairs part of the unit, is that right?

18 A. Yes.

19 Q. You tell us a bit about that at 129. You say it was
20 a small room with a raised wooden ledge for the bed.
21 You spent a lot of time in the cell. Do you mean you
22 had a lot of occasions when you were put in the cell or
23 did you spend --

24 A. A bit of both, a bit of both, I mean, I did go to the
25 cell quite a lot, but also when I was in the cell, it

1 would be for days and days and the thing wasn't made of
2 wood, it was made of concrete.

3 Q. Right, okay, and you tell us in fact that that was
4 actually a place where -- that was the place where you
5 first self-harmed within Howdenhall, is that right?

6 A. Yeah, which took a bit o' effort in doing so.

7 Q. What did you do on that occasion?

8 A. Erm, I -- after the sort of -- er, the night staff had
9 came on, I sneaked, erm, because -- that's when you got
10 your mattress and your blankets was at night, erm, so
11 I sneaked under the spyhole, because it was a proper
12 cell door and it had the spyhole, so I sorta lowered
13 myself down and crept along the floor. It sounds really
14 manipulative, but it is true, then I went into the
15 [REDACTED]
16 [REDACTED]
17 [REDACTED]

18 [REDACTED] you know, so I had to -- it took me quite
19 a few attempts, [REDACTED]
20 [REDACTED] erm, I hurt all my fingers in doing so, [REDACTED]
21 [REDACTED] I managed to sneak
22 round and I found it. I'd never self-harmed before in
23 my life. I didn't even really know what I was doing, do
24 you know, I didn't know. It sounds crazy to say, but
25 I didn't.

1 Then I -- it took me quite a while, as I say. I got
2 the [REDACTED] and I went back and I just
3 (indicating) [REDACTED] --
4 Q. You are gesturing to your hand, was it just your hand?
5 A. My arms, anywhere.
6 Q. So you are using this [REDACTED] as
7 a weapon --
8 A. Uh-huh, yes.
9 Q. -- to self-harm --
10 A. Yes, to myself, to myself --
11 Q. Yes, yes. You did this when you were alone and couldn't
12 be observed because of the position you had taken within
13 the cell, you have described how you got to a place
14 which couldn't be observed from the spyhole?
15 A. Yeah, I waited until the nighttime so's I got my blanket
16 and then I was able to sort of disguise the fact that
17 I had snuck out and along underneath the spyhole.
18 Q. When the staff did discover what you'd done, what did
19 they do?
20 A. Er, punish me even more.
21 Q. What do you mean, did they --
22 A. I think I was immediately removed into another room and
23 all the fittings, et cetera, was taken out and again
24 placed back in the cell after it was --
25 Q. So was any attempt though to try and understand why you

1 had done it and give you some kind of either counselling
2 or referral to someone to --

3 A. No, well, I think perhaps that might have been when they
4 made the referral to the YPU actually, 'cause there was
5 a referral made to Dr Robert Wrate.

6 Q. So something might have been done?

7 A. Yeah, I think there might have been a --

8 Q. Okay.

9 A. I have never really --

10 Q. But their immediate reaction was to take you out of the
11 place where you had managed to find a weapon, to put you
12 into another similar room that had nothing that you
13 could use --

14 A. Uh-huh, with the door open -- with the door open and
15 somebody -- well, sitting watching me.

16 LADY SMITH: When you say a referral to the YPU, that would
17 have been to a psychiatrist, was it?

18 A. Yes.

19 LADY SMITH: Which hospital?

20 A. The Royal Edinburgh Hospital.

21 LADY SMITH: Royal Edinburgh. Thank you.

22 A. Morningside.

23 MR PEOPLES: Yes, you tell us about that later on and we'll
24 come to that. But that was the place that they would
25 refer for any psychiatric input at the time?

1 A. I don't know.

2 Q. Well, you were referred there --

3 A. Yes, I was referred there.

4 Q. In a sense, was there more than one cell or more than
5 one room of this type that you that could be put in?

6 A. There was only one cell, as such, that was -- that had
7 the door and the spy holes and the adjoining toilet with
8 the flusher by the next room. There was only one cell
9 like that, as far as I'm aware. Probably one on the
10 male side as well ...

11 Q. But if they had to use another room in a similar way,
12 did you not tell me that what they would do is remove
13 any moveable items?

14 A. That's where they used to take you, yeah, if you
15 didn't -- if it didn't deem to be, you know, bad enough
16 to be in the cell, you could go directly to that room --

17 Q. And they would take things out?

18 A. Yes, like anything that was there. And I think it was
19 more -- as well as a punitive thing, it was a symbolic
20 thing, you know, it was -- 'cause quite often there
21 wasn't anything even in these drawers, do you know, but
22 it was the symbolism that they really seemed to relish
23 in, the fact that 'we're taking this away from you'.

24 Q. Also, I suppose if you were there for a period of days,
25 which I think you tell us you were on occasions, there

1 was nothing for you to do?

2 A. No, no. There was nothing. And because, erm,

3 I wasn't -- I've never been great with food as a result

4 of things that happened to me and I still struggle wi'

5 it, erm, even to this day I've recently been put on

6 Ensures, but, yeah, it's been a problem that stemmed fae

7 there and I think --

8 Q. But when I say 'nothing', I mean obviously they would

9 have offered you meals --

10 A. Yeah, that's the only thing --

11 Q. But you ate them in the cell --

12 A. That's the only thing, that was the only interaction

13 that I got was, you know, the meal times and --

14 Q. But at other times you were just left in the cell --

15 A. Oh, yeah.

16 Q. -- which had an observation spyhole, you would be

17 checked from time to time --

18 A. Yeah.

19 Q. -- but otherwise you were left to your own devices --

20 A. Yeah, that's right.

21 Q. -- with nothing to do?

22 A. Yes.

23 Q. All day?

24 A. All day.

25 Q. Did you get any exercise outwith the cell?

1 A. No, not at the time I was there --

2 Q. At that time.

3 A. -- it was short term, it wasn't ... you weren't there

4 for weeks and weeks --

5 Q. No, but --

6 A. -- it was like, you know days --

7 Q. -- in three days you weren't allowed out --

8 A. -- but, no, there wasn't any --

9 Q. -- to stretch --

10 A. -- exercise. But to be totally fair, you didn't get any

11 exercise even when you were in the main building either

12 in those days.

13 Q. Because you were locked in the building?

14 A. Yes.

15 Q. I didn't ask you this, but the dorm, was it locked at

16 night?

17 A. Erm, no, it wasn't locked at night, but the door was

18 closed and there was regular patrols.

19 Q. The dorm itself wasn't, so if you wanted to go to the

20 toilet when you were in the dorm, how did you achieve

21 that?

22 A. You'd have to get one of the staff members to escort

23 you. You'd need -- everybody was -- there was no free

24 movement in that place at all. Everybody was escorted

25 either by one member of staff or two members of staff.

1 Q. Was there a way that you could alert them that you
2 needed the toilet, a buzzer or a bell or anything --
3 A. I can't remember. I know there was a buzzer system, but
4 I can't remember if -- I think you must've had to press
5 the buzzer --
6 Q. Something?
7 A. -- because you had to alert somebody, yeah.
8 Q. Tell me if you can't answer this, but was there any sort
9 of arrangement where if there was a buzzer or a bell,
10 and you had to press it to alert the staff to come and
11 open the door and let you out, was there anything in the
12 form of an alarm that would go off if you tried to go
13 out without pressing the buzzer?
14 A. Yes, uh-huh.
15 Q. Was there a system like that --
16 A. Yeah, absolutely.
17 Q. -- that if you crossed the threshold of the door --
18 A. Yeah.
19 Q. -- without pressing the buzzer --
20 A. Uh-huh, I mean, I think a lot o' it, they relied on
21 staff like patrolling and sitting around, erm, whilst we
22 were in the bed, you know sleeping --
23 Q. I think in some places they had arrangements --
24 A. Yeah, they had like alarm systems to alert people where
25 if there was --

1 Q. I mean, I think they do that now in care homes for
2 people that don't know what they are doing --
3 A. They do it in psychiatric hospitals --
4 Q. In psychiatric hospitals.
5 A. -- as well, yes.
6 (Pause)
7 LADY SMITH: Can you take care not to be speaking at the
8 same time, Mr Peoples.
9 A. Sorry.
10 LADY SMITH: It's not your fault, 'Danielle', it's very
11 easily done, but it makes it hard for the stenographers.
12 MR PEOPLES: It is my fault entirely.
13 LADY SMITH: We were talking about the alarm systems that
14 would alert people. I think you were telling me about
15 that, 'Danielle'. These were alarm systems in the
16 building?
17 A. Yeah, but there was a kinda code that -- between the
18 girls that if you pressed the alarm, that you were
19 a grass, so, erm, it was not the thing to do. It was
20 better to avoid pressing the alarm.
21 LADY SMITH: You say if you did that, you would be regarded
22 as a grass?
23 A. Yeah.
24 LADY SMITH: Well, why? Why are you being regarded as
25 a grass if you pressed the alarm?

1 A. That was from the other girls. It was like a code of
2 conduct between us, because sometimes if there was
3 planning getting made or, erm, behaviours getting
4 discussed or bullying getting done, er, and somebody
5 pressed the buzzer to alert staff to the room, then
6 everybody would be in trouble. So, yeah, it was a bit
7 of a no-no.

8 LADY SMITH: Oh, I see, so it wasn't that every time
9 an alarm was pressed, it would be grassing, but it might
10 be, depending on the circumstances.

11 A. Yes, yes. Depending on the circumstances, yes, and it
12 was that that was the girls' perspective. It wasn't the
13 staff's perspective. That was amongst us.

14 LADY SMITH: Thank you.

15 MR PEOPLES: Could that be a situation where, when a group
16 of girls were in a dorm there might be exchanges,
17 including bullying exchanges, and if you were to attempt
18 to press a buzzer on these occasions, you would be seen
19 or perceived to be a grass and that would not be good?

20 A. No, that wouldn't be good at all.

21 Q. Because bullying would take place in the dorm?

22 A. Yeah, and if you did press the buzzer then it would get
23 a lot more, you know, it would be harder for you.

24 Q. Now, just moving on, at paragraph 130, you tell us that
25 after this fight, when you were taken to the cell, you

1 were sobbing your heart out uncontrollably?

2 A. Yeah, uh-huh. Actually, I remember that lady quite

3 well. I can actually see it. Erm, I put -- at that

4 time, I hadn't been stripped off and I had [REDACTED] and

5 I kept on [REDACTED]

6 [REDACTED], erm, and she said that she wouldn't leave me in

7 that state, and so I was able to reassure her to the

8 sense that it got her out of the room and that was my

9 main objective. I just wanted to -- I wanted help, but

10 at the same time I wanted to be on my own.

11 Q. You told us how you self-harmed on that occasion, but

12 I take it that, at least at that point in your stay in

13 Howdenhall, you hadn't acquired any kind of history of

14 self-harming in Howdenhall that would have caused them

15 or should have caused them to take some further action?

16 A. I hadn't even known about self-harm. I didn't even

17 really know what I was doing to be totally honest or why

18 I was doing it at that point.

19 Q. Although you do say in your statement, and just ask you

20 to maybe comment on just why you put it this way, you

21 say:

22 'That was the only way [the self-harming that is]

23 that I could let my feelings [I think] be known.'

24 What were you trying to say?

25 A. I think I was that angry and I couldn't -- nobody was

1 listening to me and I was angry and I didn't know what
2 to do. I was like that with frustration, so that was
3 what I had to do and I don't know where it come from.
4 But sadly it became a coping mechanism for me for many,
5 many years, erm, because I did get a relief from it and
6 that was the worst thing that could happen.

7 Q. You got a relief, and you say it was a coping mechanism,
8 but it sounds to me that it was also a communication
9 mechanism?

10 A. Yes, it was very much so, but, erm, it was never
11 listened to. It was never questioned.

12 Q. You tell us that this pinning down happened quite a lot
13 and we have covered that, I think, in your evidence
14 earlier this morning and what would happen, how staff
15 would hold you or pin you down, using knees and sitting
16 on you to ensure that you didn't move.

17 During these pindowns, did you ever suffer any
18 injuries?

19 A. Erm, yeah, just the normal, the bruises and scrapes on
20 my face, you know. If you were in the place, they would
21 have a carpet like this sort of style carpet, the tiles,
22 and they were quite aggressive on your skin. Whereas if
23 you were in the dining room, or whatever, it was
24 linoleum, so it was more a red sorta mark, so ...

25 Q. If I go back to the first occasion that you went to the

1 cell, you weren't taken there having exhibited signs of
2 self-harming?

3 A. I'd never self-harmed ever before.

4 I need to go to the toilet, sorry.

5 MR PEOPLES: No, by all means.

6 A. Thanks.

7 LADY SMITH: We'll have a break just now and you just let us
8 know when you are ready to come back.

9 Thank you.

10 (11.08 am)

11 (A short break)

12 (11.10 am)

13 LADY SMITH: Welcome back, 'Danielle'. Is it okay if we
14 carry on?

15 A. Yes.

16 LADY SMITH: Thank you.

17 Mr Peoples.

18 MR PEOPLES: My Lady.

19 Can I just ask a couple more things about the
20 pindown situation. One thing you tell us at 131, and
21 you describe what happened, pressing the knee and
22 applying pressure by sitting on your body.

23 You say at one point that somebody pressing a knee
24 into your back took the wind out of your sails, so it
25 did have an impact?

1 A. Mm-hmm, yeah, it was sore, very sore.

2 Q. Did you have any difficulty breathing on these
3 occasions?

4 A. Quite often, yeah. It was excessive force from some of
5 them.

6 Q. So you felt that the force used was excessive or
7 disproportionate?

8 A. Yes.

9 Q. Were you the sort of person that would struggle?

10 A. Yes, very much so.

11 Q. Even if you were a person who struggled, you still feel
12 that they were heavy handed or overly physical?

13 A. I think if you struggled, that's when they got really
14 bad, yeah.

15 Q. I think you told us before the break that on the first
16 occasion, you weren't going there because you had been
17 self-harmed and were put into some place where you
18 couldn't harm yourself further, you went there because
19 of a fight?

20 A. Mm-hmm.

21 Q. If that was the reason you got there, what was the need
22 to take your clothing away?

23 A. I really don't know. I have no idea. Erm, I had no --
24 to me this was a new concept. I didn't understand any
25 of the rules or the regulations.

1 Q. This hadn't happened to you in previous places?

2 A. No, not to that way, no.

3 Q. On the face of it, if you weren't seen as a self-harming

4 risk on that occasion, it doesn't seem as if there's any

5 particularly good reason why you should be deprived of

6 your clothing?

7 A. No, absolutely not.

8 Q. Now --

9 A. I think it was symbolic.

10 Q. Can you just help us a little?

11 A. Well, for me, the removing of my clothes, it was like --

12 I mean, they weren't even your own clothes anyway at

13 Howdenhall, you know, it was -- when they did open the

14 cupboard, you know, it had blue jeans and blue

15 sweatshirts and blue T-shirts, navy blue they were, and

16 everybody, all the girls had to -- first come first

17 served, so to speak, so you tried to get the best

18 fitting jeans and the best fitting top, et cetera. So

19 there was no need to remove the clothing, no.

20 Q. Do you think the staff were trying to convey a message

21 to you?

22 A. Oh, yeah, very much so. As I say, with regard to when

23 they took you into the other room, even if you didn't go

24 straight to the cell, they would take the furniture, any

25 furnishings out.

1 Erm, again, as I say, there was no need for the
2 furnishings to be in there in the first instance, so
3 taking them out was almost like a, 'This is what we're
4 doing to you. This is your punishment'. It was a clear
5 message to you and everybody else, I suppose, but also,
6 erm, for me it just felt total humiliation. It was like
7 a way to really make you suffer and degregate you and
8 make you feel so small and nothing.

9 Q. I think we can understand that there could be occasions,
10 if someone was a self-harm risk, that they might take
11 away items that they could use to self-harm?

12 A. Erm, I would assume that would be the case, yeah,
13 regarding to [REDACTED] incident, but I don't know what
14 I would be able to do with [REDACTED] or [REDACTED] or
15 [REDACTED] for that instance.

16 Q. I'm not suggesting --

17 A. Yeah, I know, I'm just saying that it didn't -- that
18 doesn't, you know, there's no rhyme or reason for that,
19 in my eyes.

20 Q. If they thought you were a risk, you could see that
21 there might be a reason to take away items -- not
22 everything, but to take away items that might be used to
23 self-harm, but this wasn't the situation that put you in
24 the cell the first time?

25 A. No.

1 Q. Okay, now, you tell us in your statement that although
2 it was secure, you did manage on one occasion, I think,
3 to run away, is that right?

4 A. I did, yes. There was another lass in the dormitory and
5 she was banging a chair against -- it was unbreakable
6 glass. Erm, so I just scooted in. I still had my
7 clothes on. I hadn't taken my clothes off to get ready
8 to go to the showers, so, erm, I scooted in with her.
9 I knew what she was doing, even, you know, without any
10 planning. So I went in and before I knew it, even
11 though I'd been quite well behaved for a while, er,
12 I just started -- 'cause the chair actually came back
13 and hit her, so I went in and we managed to board up the
14 door to a reasonable fashion. The buzzer did go off,
15 but we had managed to break the window by that time, so
16 we both climbed out the window, then we had to go up
17 onto the dining room roof, yeah, and then along that
18 flat roof and then down a -- shimmy down a drain pipe.
19 So it look a lot o' effort, but, yeah, we managed to ...
20 two of us managed to escape that night.

21 Q. Not for very long?

22 A. Not for very long at all, no.

23 Q. You were taken back?

24 A. Yes.

25 Q. Were you put in the cell?

1 A. No. When I was taken back, erm, a senior official came
2 to see me in a room, which -- where they had already
3 removed all the furnishings and removed my clothes from
4 me as well and I was wearing my -- just my T-shirt and
5 a pair of pants and one of the senior staff came in and
6 it was a male. He was actually really nice. He was
7 a very friendly, approachable person, erm, and he was
8 just trying to understand. He said, 'I'm trying to
9 understand'. But I only ever saw him one time and that
10 was then and even then, it was only for about five
11 minutes and I never saw him again.

12 So that was -- yeah.

13 Q. Did you, at that stage, disclose to him what was going
14 on at Howdenhall, the bullying or, indeed, any sexual
15 abuse you'd had prior to going to Howdenhall?

16 A. I told him that I was really unhappy and that I didn't
17 want to live and that I just had had enough. I just
18 wanted to die, just take me away, you know, erm, and
19 he -- yeah, I think they were really struggling at that
20 point to know what to do with me, because I was, you
21 know, at the age for leaving care and I think they were
22 really, really struggling.

23 Q. Was it around that time, not necessarily exactly, but
24 was it around that time that there was a referral to the
25 Young Persons' Unit at the Royal Edinburgh?

1 A. I was asked, erm, to have an interview with
2 a Dr Robert Wrate, I didn't know anything about the YPU
3 or what it was and I'd had no offer of a placement or
4 anything, erm, and I had an interview with this guy,
5 this psychiatrist from the YPU.

6 Q. Before I ask you about that, which you tell us about,
7 before I leave the Howdenhall section of your statement,
8 you tell us at 135 about a particular member of staff,
9 female member of staff, who you say was a dirty old
10 pervert and that she was touchy-feely and when you
11 showered, you were lined up naked in the showers and
12 that if she was on duty, she would wash you, she would
13 touch your buttocks and breasts. She'd rub soap into
14 them and you say that the way she did this led you to
15 use the expression or the words you have used?

16 A. Mm-hmm.

17 Q. Was there any reason why you, at age 16, needed
18 assistance to shower?

19 A. Absolutely not, but this woman, erm -- I wasn't the only
20 person that she'd done that. She done that with quite
21 a few of the girls. Erm, yeah, it was -- I mean, it was
22 almost as if she knew that what girls that would keep
23 a secret and what girls wouldn't keep a secret. It was
24 just really sleazy.

25 Q. Did she pick the girls that she'd do it to?

1 A. Well, it felt like that, yeah, it felt like as if
2 I'd been victimised again.

3 Q. You say you were terrified of her, because I think you
4 say she was also a bully and at one time asked you if
5 you wanted a square go?

6 A. Uh-huh.

7 Q. She was a big woman and you were presumably a lot
8 smaller, even although you were 16, you weren't a big
9 person, was that right?

10 A. Yes, absolutely.

11 Q. Why would she invite a person in her care who was aged
12 16 to have a square go?

13 A. I don't think I'd quite reached 16 whilst I was there,
14 to be fair. I think I reached 16 when I was in the YPU.
15 Er, I was more 15 when I was there, but she -- I don't
16 know why she had this nature. It was just in her
17 nature. She was a bully. She was just -- she was in
18 the job for all the wrong reasons. I think she wanted
19 to have control.

20 Q. What sort of age was this woman?

21 A. It was in, er, the 1980s.

22 Q. No, no, what age was she?

23 A. What age was she? Sorry. I would say -- it's hard to
24 say now, but I would say about 36, about that age,
25 mid-30s.

1 Q. Now, as you have told us, there came a time when you
2 were seen by a doctor who was based at the Young Peoples
3 Unit at the Royal Edinburgh Hospital, but he came to see
4 you at the assessment centre initially, is that right?
5 A. Mm-hmm, yes.
6 Q. You start to tell us the history from there at 136 and
7 say that he came and did ask you questions about your
8 childhood, but at that point you didn't tell him about
9 the sexual abuse that you've told us about today, is
10 that right?
11 A. That's right, yeah.
12 Q. You did tell him about the substance abuse and the fact
13 that you didn't want to be in a children's home?
14 A. I think that that was all he was interested in, was the
15 substance abuse, and all I was interested in was going
16 to live with my granny in Edinburgh.
17 Q. You did, I think, say to him, as you tell us in your
18 statement, that you were reaching the point where you
19 were leaving the care system because of your age and
20 that you felt scared and you didn't have any idea what
21 was going to happen to you and, indeed, you were
22 thinking that you might die. Is that because of your
23 substance abuse?
24 A. Erm, it was because of that Secondary Institutions - to be published later
25 Secondary Institutions - to be published later

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10 Q. I think at paragraph 137, while you didn't tell them
11 about the sexual abuse, you did say, according to what
12 you tell us in the statement, you did say that everybody
13 you had met in your life, I think you mean largely
14 adults at that point, is it, had been manipulative,
15 nasty and abusive towards you. You say, I think, maybe
16 this is at least a compliment, that he was the only
17 person up to that point that was really asking you
18 questions about how you had been treated?

19 A. Yeah, he -- sorry.

20 Q. I think the upshot was that he asked you if you wanted
21 or would like to come and stay at the Young Persons'
22 Unit for a while and to see if that would give you some
23 sort of help; is that right?

24 A. That's right, yes.

25 Q. You talked about the substance abuse and I didn't ask

1 you this. You went to Howdenhall because it was to take
2 you away from the environment that you had been abusing
3 substances, both in care and in the community, but
4 within Howdenhall, were you still abusing substances?
5 A. No, there was -- you didn't get access to anything like
6 that, no.
7 Q. And you weren't getting out then?
8 A. No.
9 Q. To the community?
10 A. No, it was a locked-up place altogether.
11 Q. At this stage in your life, because of what you had told
12 the doctor, he felt it would be a good idea that you
13 spend time in the Young Persons' Unit and that's what
14 you did, is that not right?
15 A. Yes, the psychiatric unit.
16 Q. You stayed there, I think you tell us, between 139 and
17 141, it's blacked out, but you tell us that I think you
18 stayed there for around about maybe eight months, so it
19 was a lengthy spell?
20 A. Yeah. I would stay there Monday to Friday and then on
21 a Friday night, I would get the bus from St James's,
22 from the bus station in Edinburgh, back to the
23 children's home. Then I'd stay at the children's home
24 for the weekend, then I'd go back to the Royal Edinburgh
25 on a Sunday, because it only was open from 9 o'clock to

1 5 o'clock, it was a family-based therapy centre.

2 Q. So you were going back to this home you'd been in?

3 A. Yes.

4 Q. The first one you ever went into, you went back to that

5 one at the weekends?

6 A. Yes, yes.

7 Q. You tell us that while you were in the Young Persons'

8 Unit, you got a job?

9 A. Yeah.

10 Q. I'm not going into the detail, but you got a job there

11 and I think your hope was that you would be able to,

12 I think, support your granny, who lived in Edinburgh.

13 Now, to be absolutely clear, this is your paternal

14 granny, not your maternal granny?

15 A. This is my lovely granny, yeah. I loved her.

16 Q. She stayed in Edinburgh and she had said to you that

17 when you left the care setting, you could come and live

18 with her, so that was what you wanted to do?

19 A. Yes.

20 Q. As you put it at 140, for some reason in their wisdom,

21 the powers that be decided that they would place you in

22 some sort of accommodation in the Borders, is that

23 right, a small flat?

24 A. It was in [REDACTED]

25 [REDACTED]

1 Q. Was it ever explained to you why you couldn't go to live
2 with your paternal granny in Edinburgh?

3 A. No, because, I mean, even though I had a job and
4 I wanted to go on and do further education, they just
5 said, no, you have to go back to your own flat in
6 [REDACTED] -- well, somewhere in the Borders.

7 Q. They wouldn't know at this time that while you were in
8 the Borders, you had been seriously sexually assaulted
9 by men in the community?

10 A. No, but they would have known that my behaviour was
11 bizarre.

12 Q. When you lived there?

13 A. Yes.

14 Q. So they had that history?

15 A. Yes.

16 Q. But they still decided to put you back into the
17 situation --

18 A. Yes.

19 Q. -- that you had been in, in earlier years?

20 A. Yes. I was going back every weekend as well.

21 Q. I think for a time, when you were in the Borders, you
22 were still under some form of place of safety order; is
23 that right?

24 A. Yes.

25 Q. That did end after you moved from the Young Persons'

1 Unit to the Borders, is that right, it did end at some
2 point?

3 A. When I left, I left care from the Young People's Unit.
4 Erm, I left there on a Friday night and that was me.
5 I went straight into my own flat from there.

6 MR PEOPLES: Okay. So now, when we go to the section --
7 I'm conscious of the time. I don't know whether we
8 can carry on a little bit and then --

9 LADY SMITH: How long do you think.

10 MR PEOPLES: I'm not going to finish before our usual break.
11 I think I would like to have a little --

12 LADY SMITH: Let's have a pause.
13 'Danielle', we usually take a break at about this
14 time of the morning and get a breather and a cup of tea
15 or coffee or whatever. Would that help you if we did
16 that just now, would it work okay?

17 A. Yes, that's fine, yeah.

18 LADY SMITH: Let's do that.
19 (11.30 am)
20 (A short break)
21 (11.45 am)

22 LADY SMITH: 'Danielle', welcome back. I hope that break
23 was of some help to you. If you're ready, we'll carry
24 on with your questions.

25 A. Yes.

1 LADY SMITH: Thank you.

2 Mr Peoples.

3 MR PEOPLES: My Lady.

4 'Danielle', I'm going to now move on, as I said

5 before the break, to life after care and pick out some

6 of the things about what happened after you left the

7 Young Persons' Unit.

8 I think we established the decision was taken to

9 place you in accommodation in the Borders. I'll just

10 take it up from 142 and onwards and pick out some

11 matters, I think, so that we understand your journey

12 from that point onwards.

13 I think you really feel that, in providing

14 accommodation, you really got nothing in the way of

15 furnishings to assist your transition to independent

16 living. You say at 143, and I'll just read this out:

17 'On reflection, I consider they didn't expect me to

18 live very long because of the way they treated me and

19 the lack of human value they put on me. I had the

20 feeling that they expected me to die from drugs or

21 something.'

22 Was that the way it looked to you because you were

23 getting nothing other than --

24 A. That's the way I felt, but, erm, I have to say that

25 I did read my social work notes briefly, for a short

1 time I did have access to them, and it did state on my
2 social work notes that they expected me to die within
3 six month of leaving care.

4 Q. If I put the situation this way: you have told us about
5 your abusive experiences at home and then in the care
6 settings, the various care settings. Then you come out
7 when you're around 16 and you move to the Borders to
8 accommodation and independent living.

9 Again, this bit is blacked out at 144 and I'm not
10 wanting to go into too much detail here, Secondary Institutions - to be

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21 Q. You tell us in this section of your statement about life
22 in the Borders in this flat and how difficult it was for
23 you, but I think on a positive note, you started to try
24 and put your life together because -- and you say that
25 you found work and also you looked after your younger

1 brother, because I think he was beginning to follow
2 a sort of rocky road at that point, is that right?

3 A. My mother's drinking was getting again -- it was getting
4 too much for him to -- he was at risk of getting put
5 into residential school in case of -- erm, for skipping
6 school, so it was agreed that [REDACTED] came and be my --
7 I'd have kinship care for [REDACTED].

8 Q. Am I right in understanding, from what you say at this
9 part of your statement, that you were in the Borders,
10 [REDACTED] Secondary Institutions - to be published later [REDACTED] You were
11 trying to look after your brother, you were holding down
12 a job, and were you also getting some form of
13 psychiatric input?

14 A. Yes, I was also attending the YPU at Royal Edinburgh
15 Hospital for outpatient appointments with
16 Dr Robert Wrate and Ann Clatherall, the nurse.

17 Q. That was the general picture of life at that stage?

18 A. Yes.

19 Q. You then say at 152 that when you were discharged,
20 I think, from the mental health section of the YPU --
21 were you actually under some formal order that required
22 you to receive treatment there?

23 A. Quite often, yes.

24 Q. You were sectioned at times?

25 A. Yes, quite often I'd be sectioned and then they would

1 inject me, I think, with Triperidol, or something like
2 that, and take me to ward 10, which was the adult locked
3 ward in the main hospital, and I'd stay there and then
4 the psychiatrist would come and get me out on Saturday
5 morning and put me on the bus to [REDACTED].
6 Q. That happened on a number of occasions in your teens?
7 A. Yes, yes, it was very scary.
8 Q. Then, as you say, you decided to do something with your
9 life and, indeed, did you relocate to Glasgow?
10 A. I did. Thanks to Who Cares?, I found kinda found
11 a sorta route out, if you like. I got very much
12 involved with Who Cares? again and kinda doubled down on
13 my efforts at work, because I had the responsibility of
14 [REDACTED], so that gave me the ability to do as much
15 overtime that I could, 'cause he was at afterschool
16 clubs, et cetera, so that allowed me to get promotion,
17 which allowed me to eventually -- it took me six years
18 to go down to further education, but I eventually got
19 there.
20 Q. At 153, you tell us you did work with Who Cares? for
21 a number of years and you say you loved it and you'd
22 obviously had this prior connection with Who Cares? when
23 you were younger. You say your job involved looking
24 after young people who were in care to get their rights
25 and responsibilities heard and acted upon and you say

1 that as well as working, you were then trying to obtain
2 qualifications and that you enrolled at Anniesland night
3 college and you did Highers and then you went to
4 Strathclyde University night school and did social
5 sciences and you were at Strathclyde for two years at
6 night school twice a week. You say this was all
7 an enjoyable experience and that then you went to the
8 University of Glasgow for five years as a full-time
9 student?

10 A. Yes.

11 Q. You basically paid your own way to do this?

12 A. Yeah, I was a mature student.

13 Q. It was all through your efforts?

14 A. Yes, my hard work and my own efforts.

15 Q. You say you obtained a masters in social sciences and
16 you completed coursework for the diploma in social work,
17 but didn't get the certificate itself, because,
18 unfortunately, there was an episode, a downturn in your
19 mental health, and you had another period of inpatient
20 treatment at a local hospital, is that right?

21 A. Yes, it was a really bad, bad time.

22 Q. Again, taking this short, but it's important to
23 understand that you continued to work in the same area
24 with vulnerable young people and you worked in Dundee
25 for a while, you tell us, in a project involving young

1 people at risk of custody. You helped to set up a group
2 to help people who were at risk of detention and
3 custody, that was a national group, albeit based in
4 Fife.

5 You say, again, this was work you enjoyed and found
6 rewarding and you say at paragraph 155, you enjoyed it,
7 you say you did it because:

8 'I had never had my own voice listened to. I wanted
9 to make sure that other people's voices were getting
10 heard.'

11 So that was motivation?

12 A. That's still my motivation, now, yes, with everything
13 I do.

14 Q. Again, for a time, you were one of a number of
15 children's rights officers in Scotland, which is
16 a relatively new type of post?

17 A. Yes, mm-hmm.

18 Q. Would that be a post that was created by local
19 authorities?

20 A. Yes, I think it was created by local authorities. At
21 those times, there was a lot fewer local authorities
22 with much bigger districts, erm, and like the Who Cares?
23 model, it was people who had an input from all different
24 authorities and it was to sort of enhance the voice of
25 young people facing the care system just now, which is

1 still an issue.

2 Q. It was like an advocacy service, wasn't it?

3 A. Yes.

4 Q. Children's rights officers, and we can see this from

5 more modern times, would visit establishments, speak to

6 young children. They could tell them about their

7 problems and if there were complaints or other matters

8 of concern, the children's rights officer would take the

9 matter up and were seen very much as an independent

10 person, albeit they might be employed by the local

11 authority, is that the broad idea?

12 A. Absolutely, yes.

13 Q. You also say that you worked for a centre for

14 residential child care based in Glasgow for a time and

15 you had to investigate particular places and indeed one

16 of your tasks involved having to close down a unit,

17 which was, I think, a matter of concern, is that right?

18 A. Yes.

19 Q. Then I don't know whether the situation remains, are you

20 still with the partner you have told us about?

21 A. No, I don't have anybody.

22 Q. At this stage?

23 A. Nobody.

24 Q. But there was a time, I think, when you did have

25 a partner for a lengthy period of time, you have told us

1 about?

2 A. I've had two or three long-term relationships, but

3 they've never been any good.

4 Q. Okay. Now, going to impact, your section on impact, can

5 I perhaps just read this out what you tell us at 158:

6 'I cannot understand through all the care system

7 that nobody ever talked to me to see what I wanted. All

8 these things were happening to me and had happened to me

9 and nobody asked me one question about why or how, or

10 even if they did, I think I might have been too scared

11 to tell them. Nobody developed a relationship with me.

12 There was no trust building. You didn't build up

13 a relationship with your social worker in those days,

14 because they were so far removed.'

15 Does that really capture really how things were?

16 A. Yes, and I would say that in many ways it's still the

17 case as it is now, yeah.

18 Q. You still think that that --

19 A. Yes. I think it's improved a vast amount, but I still

20 think it's a major issue. I'm still involved with

21 Who Cares? and it's still a bone of contention.

22 Q. Can you help me just a little bit more on that one.

23 What do you see as the continuing issue or problem?

24 A. I think for young people they're still feeling quite

25 isolated, especially when they're leaving care.

1 The lockdown for instance, everybody might have
2 found that quite a difficult time for themselves, but
3 actually it was quite rewarding for me, because that was
4 when I really -- I got a computer from Future Pathways
5 and I opened up, er, lots of different avenues. I got
6 involved with different groups doing a variety of
7 different projects and not all working wi' young
8 care-experienced people, also working wi' older
9 care-experienced people, working with people who are
10 actually mental health problems, mental health recovery
11 was a big focus that I'm still very interested on,
12 I facilitated a group that was called [REDACTED],
13 so I've been involved in a few productions of plays
14 et cetera wi' young carers, who actually provide care
15 for a sibling or a parent.

16 So I think my desire to give is also how I help
17 myself again. It is a very yin and yangy world for me,
18 but it's also quite stressful and frustrating.

19 Q. A lot of work you have done obviously is with young
20 people that are from disadvantaged backgrounds or
21 difficult backgrounds, some in residential care, but
22 also some in the community, is that right?

23 A. Yes.

24 Q. You say that, going back to your own childhood, that
25 because of your experiences, that there were

1 consequences, continuing ones, including the difficulty
2 of establishing and maintaining meaningful relationships
3 and a lack of trust of other adults. That was
4 a consequence, and I think is it still with you today?
5 A. Yeah, it's a major problem.
6 Q. Another consequence, but this was maybe because of the
7 lack of throughcare/aftercare, that you left care with
8 no life skills, I think, you say you couldn't cook?
9 A. Yeah, I mean, you know, I often laugh at this, but, do
10 you know, we had a big industrial kitchen, but not one
11 o' us could boil an egg. We werenae allowed in the
12 kitchen. We had a sewing room, but we don't know how to
13 thread a needle.
14 You know what I mean, there are so many
15 opportunities that they had and there was no life skills
16 that were offered to anybody anyway.
17 Q. Am I right in thinking that some of these things that
18 were impacted on you have at least been addressed by the
19 modern care system, that people do get prepared for life
20 after care, that there are efforts made to build
21 relationships, to create relationships of trust and to
22 enable someone to, I think, feel safe, protected and
23 nurtured, is that the approach, the modern approach?
24 A. There is no doubt that it's really, really changed and
25 that is the modern approach, definitely.

1 However, when young people leave care, they often
2 leave the care of that local authority, et cetera, which
3 in itself is quite a major problem and I have a real
4 concern about those young people falling through
5 a safety net.

6 Q. You say, and I wonder if this is a reflection of the
7 past, but hopefully not the present, if I take you to
8 166 of your statement, you make the following statement:

9 'Society can't deal with you for whatever reason so
10 they shove you in hospital, dope you up with drugs and
11 expect you to come out the other end. You don't come
12 out the other end all right. I still have
13 a psychiatrist but I haven't had any hospital admissions
14 since around 2013.'

15 You haven't been an inpatient since 2011, is that
16 still the position?

17 A. Yes.

18 Q. Does that sum up really how things were, as far as
19 you're concerned, that really society put you somewhere
20 and really forgot about you?

21 A. I think for me it was call -- it was -- and I still
22 maintain this, it's called the chemical cosh, the
23 chemical cosh to quieten you down, you know, so
24 Largactil, Depixol, Paraldehyde ...

25 Q. You tell us that you rekindled relationships with your

1 sister and her family. Is that still the position, are
2 you still in touch?

3 A. Er, it's very, very bad. It's very fragmented at the
4 moment because Christmas is just such a difficult time
5 for care-experienced people. Erm, I just feel
6 devastated and hurt by the whole thing and, no, me and
7 my sister don't have a good and meaningful relationship.

8 Q. At 170, you tell us about your younger brother and
9 sadly, I think, he had cancer and died and I think
10 that's been something else you've had to deal with, but
11 I think you did get back in touch before his death, is
12 that right?

13 A. Thankfully I did, yes.

14 Q. You say at 171:

15 'My journey has been difficult. I've had very
16 little help or support to get me into work and to have
17 a career. I did that myself because I didn't want other
18 people going through what I had been through. My
19 ability to develop as a young woman was really
20 diminished.'

21 As I have already explained, you made considerable
22 efforts to educate yourself, to have a career and to do
23 something meaningful and you have done that with
24 vulnerable young people in care and in the community, is
25 that right?

1 A. Absolutely correct, but to me it doesn't mean anything
2 anymore, because when I was again sectioned, I lost my
3 job, then I lost my house, then I lost my car, then
4 I lost everything again and again, I was put under the
5 chemical cosh and been a revolving door patient in and
6 out of hospital ever since. I think that that is still
7 happening. In fact, even though I can't say --
8 I wouldn't interfere with somebody's mental health so
9 I couldn't ever say to anybody directly, but I still
10 believe that it is happening with young people's mental
11 health, yes.

12 Q. They still have similar experiences?

13 A. Yes, absolutely, I speak to quite a few of them.

14 Q. Despite all these consequences, when you had to have
15 inpatient treatment, you continued, did you, to bounce
16 back and get involved with the young people in the
17 projects that you've described, is that right?

18 A. To me the very essence of a survivor is about the
19 ability to bounce back. But I've lost so many people
20 and I think that grief is -- for us it's more -- for us
21 survivors that are left, it's a big thing, because when
22 you lose a brother or a sister, it's bad. It happens to
23 us time and time and time again and whether you know
24 that person or not, their loss brings up so many other
25 losses.

1 Erm, I had a panic attack the last time I was in
2 Edinburgh because my friend, we had a blood sister pact,
3 when we did try and commit suicide, she was found -- no
4 she wasn't found and I was found, that led to me being
5 in Leverndale again.

6 So there's a whole lot of loss and distress there
7 and also, erm, since that -- his partner committed
8 suicide also, his daughter committed suicide as well and
9 his daughter's mother, so there has been a backlash.

10 Q. You also tell us about reporting abuse. Now, we know
11 from your evidence earlier today that you didn't say
12 anything about sexual abuse for a very long time.
13 Indeed, you tell us at 172 to 173 that it was only over
14 a lengthy period of time that you spoke to
15 a psychologist and, after a considerable period, you did
16 finally report what had happened to you as a child,
17 particularly the sexual abuse, you were able to disclose
18 at that point.

19 You tell us you were around 40 years of age at that
20 time?

21 A. Yeah. He was actually a head psychiatrist. He was --
22 I'm now starting -- I've just started PTSD treatment,
23 which has just not long since been diagnosed and
24 I'm getting medicated for it and I'm really feeling
25 a lot better.

1 Q. Now?

2 A. Yeah, yeah, although it's really quite stressful to go
3 through that big huge medication change at this stage at
4 on the age of my life and my journey. So that is what
5 I'm all about now, is to help make it easier for young
6 people to come through that journey with less scarring,
7 let visible scarring.

8 Q. 'Danielle', you tell us about records and I think you
9 have attempted to get records of your time in various
10 places, as a child. I think that's been a difficult
11 exercise.

12 Indeed, when you tried to obtain records from
13 Borders Council, you were told in 2003, I think you tell
14 us at 175, that they told you they were unable to trace
15 case files relating to you when you were in the care of
16 that local authority. They explained that in fact
17 before 1995, there was no legal requirement to retain
18 these sort of files and that they would have
19 a destruction date and that, I think they were
20 suggesting, that was maybe the explanation for not
21 having them, is that what you were told?

22 A. That's what I was told, but that in fact actually made
23 me really think that they had destroyed them, because
24 I did have two letters that I'd kept through all those
25 changes of addresses, all those times I've been

1 homeless, all the times I've been in and out of
2 hospital. I kept onto two letters and that was the one
3 from the director of social workers, saying that their
4 lawyer was going to -- had advised them that I couldn't
5 get a copy of my files, but that I could get access via
6 Joan Mutrie, at my psychiatrist's office, at
7 a prearranged time.

8 I did have access to them briefly, but I never
9 actually got a physical copy and I was reassured --
10 I was told to feel reassured because they had a further
11 25 years put onto their destruction date, so they were
12 to be held for a further 25 years and I had that in
13 black and white.

14 LADY SMITH: That 25 years would have taken you up to 2019,
15 I think, given the date of the letter?

16 A. Well, I think it would -- 25 years on top of the
17 statutory time that was -- so I'm not quite sure what
18 the timescale would have been.

19 LADY SMITH: I thought from what you said, with the date of
20 the letter explaining that being December 1994, and
21 saying that they would retain the files for another
22 25 years, then if you add 25 to 1994, that takes you to
23 2019.

24 A. Yeah.

25 LADY SMITH: But then, when you tried to get them again, you

1 were told, according to paragraph 175, in 2003 that
2 they'd been destroyed.

3 A. Yes.

4 LADY SMITH: It could be, I'm not making an excuse,
5 I'm trying to get my head round what's happened here;
6 before 1996, it was Borders Regional Council and then
7 there was local government reorganisation again, around
8 1996, and so it's a different council. It's not
9 an excuse at all --

10 A. The Borders Regional Council has not changed. It's
11 a much smaller authority. It's not like Strathclyde,
12 which is broken up into Dumbarton et cetera.

13 LADY SMITH: I don't mean to interrupt you, 'Danielle',
14 I get that. But the legal organisation changed, you
15 see, in the mid-1990s.

16 A. Oh sorry, yes.

17 LADY SMITH: And it could be, I'm not saying it's an excuse,
18 that they lost sight of the fact that they'd been
19 assuring people that records would be kept and there
20 were new people and they got rid of them.

21 I don't know whether Mr Peoples can help with
22 anything we've discovered about that.

23 MR PEOPLES: I'm not sure that we do have anything.

24 We can check if there's anything --

25 LADY SMITH: I think we should.

1 MR PEOPLES: -- but just so we're clear, there was a change,
2 as Lady Smith says, in 1996, local government
3 reorganisation, Borders Regional Council disappeared and
4 Borders Council became a unitary authority. Certainly
5 there is the possibility that they should have inherited
6 records, but records either were destroyed or in some
7 way misplaced or whatever, and I think that's not
8 an uncommon scenario, in my experience, that that did
9 happen. Not necessarily to this type of record but to
10 some records in general.

11 So that might be, but can I just be clear then, you
12 have, at least in the past, maybe briefly seen some
13 records, but then coming forward, when you tried to get
14 your whole records, you were told that, 'We can't find
15 them'.

16 So you've not had a chance to see your full
17 children's records?

18 A. No, I have.

19 Q. You have?

20 A. Yes, Joan Mutrie has brought them to Dr McKane's office
21 on two occasions from the Borders Regional Council. She
22 came up to Glasgow and met me and we went to Dr McKane's
23 office to see and she physically held them in her hands
24 whilst I read them.

25 Q. 'Danielle', is that since 2003?

1 A. No, no, that was a long time ago.

2 Q. Oh right, so that was what I think I was trying to
3 establish. You did see some records --

4 A. Sorry, yes, yes.

5 Q. -- but after 2003, you haven't seen records and you were
6 told that they've gone?

7 A. Yes.

8 Q. I think I'm being advised that we may have something,
9 which might --

10 LADY SMITH: We can check.

11 MR PEOPLES: We can check for you and obviously we're
12 interested to see any records that relate to you,
13 because certainly you are being told in 2003 that
14 Scottish Borders Council couldn't find anything.

15 A. I've since tried other places, Birthlink. I have tried
16 Penumbra. I've tried other places. I've tried all with
17 just nothing.

18 Q. You will appreciate that if you were trying to get
19 records of your time in the Young Persons' Unit, that
20 that would be an NHS request rather than --

21 A. I have got them. I have got them.

22 Q. If I can just move on, if I may, to lessons learned.
23 You say at 177 that young people should just be able
24 to, I think, leave care with their life story. I think
25 you suggest it would be better to do some sort of modern

1 technology to achieve that but certainly the point
2 you're making is you shouldn't leave care without
3 a history of care and childhood?

4 A. That's right, and also the beauty about it being on
5 a dongle is that when young people do leave care it's
6 often, you know, they can go back -- try and go back to
7 the bosom of their family and quite often when that
8 doesn't work, they can get quite resentful and tear up
9 records theirselves. I've done that myself on
10 occasions, tore up information.

11 And, erm, yeah, doing it electronically means
12 that -- and I would also like to see a care card, where
13 it's the card that follows the child around, or the
14 young person rather, to say that they were in care and
15 that they don't have to go back to that local authority
16 to get any help that they might need or assistance that
17 they might need. They can actually have this card,
18 like, almost like a driving licence, because it is
19 a life-long experience.

20 Q. That may be like if you were in NHS and you had records
21 that if you move to a different part of the country, the
22 records can be accessed if you have a unique number and
23 you should be able to get records even if you change
24 location.

25 You want something similar for people that may have

1 had experience of the care system, that at any point
2 they can be able to trace those and access them wherever
3 they're located, is that the general idea?

4 A. I think now, with all the things that I've been through
5 in reaching this age and getting here and getting this
6 far, I think what I really would like is to make sure
7 that other young people don't feel the same when they
8 get to this age, that they have children and a family to
9 fall back on and that they're not isolated and alone any
10 more.

11 But also I would like to see more commitment given
12 to special characteristics, 'cause being care
13 experienced is a thing that does last forever and it
14 follows you around, I was going to say like a bad smell,
15 but it is like a bad smell, because it doesn't matter
16 how much we try and influence change and try and get
17 people to see that being care experienced doesn't
18 necessarily have to mean, you know, a negative life
19 consequence, you know. It can have good, rewarding
20 parts about it for individuals, which needs to be
21 further enhanced. And I'd like to see more social work
22 students being actually affiliated to working,
23 particularly with this group of people, because I think
24 that being a social work student would be able to help
25 them blossom and also help that young person and their

1 family hopefully blossom as well.

2 I'd like to see much more effort getting put into
3 care leavers' experiences.

4 Q. I think you say that -- I'll just take this short --
5 that one thing that you felt was lacking when you left
6 care, was obviously the continuing support and
7 investment in the children as they leave care. I think
8 you'll know now that there is legislation that imposes
9 some sort of continuing duty or power to assist young
10 people leaving care until their mid-20s, so there has
11 been progress in that direction and I think more
12 preparation for children leaving a care setting. So
13 I think you would agree with that?

14 A. Yes, absolutely, but then again, I met a 17-year-old at
15 Christmas time and I was really, really worried about
16 him, because I really felt like this young man was
17 saying cheerio to me and it was horrible, because I met
18 him at a Christmas dinner, a charity dinner Christmas
19 dinner, erm, for people who don't have anybody to go and
20 share some time together and I met him there. I've met
21 him on many occasions.

22 And now that he's left care, he's living in a place
23 that he knows nobody. He's in Glasgow, but he doesn't
24 know anybody where he's living. He's not got anything
25 in his house. He's lonely. It's so sad. He's

1 isolated. His money hasn't been sorted out. He's got
2 no financial help. I mean, he's getting his rent paid
3 for him but, you know, that's not putting food in his
4 fridge or the heating on.

5 Q. Yes, you don't want --

6 A. There's still a lot of people falling through the net
7 and I'd like to see a more cohesion, more collaborated
8 approach to joining up a care person's experience and
9 journey in care.

10 Q. I do think if I just take you to the end of your
11 statement, you at least feel -- maybe that this Inquiry
12 should have happened a lot earlier, but you at least
13 feel that that's a positive step and that this is able
14 to provide learning about the past and it's learning
15 that people should build on and use to make a better
16 future for the young people in care today and in the
17 future. Is that what you feel?

18 A. Absolutely. I think that this whole process has been
19 absolutely fantastic. I've actually thanked
20 Nicola Sturgeon in person and she gave me a cuddle. It
21 was the most amazing experience. But the other thing is
22 that I was listening to Keir Starmer the other day --
23 and I'm certainly not bringing politics or anything into
24 this, but I just want to reflect on what he said, when
25 he was coming back -- he said it was something like,

1 'All you really need is ...', he was explaining that he
2 has his own problems with, you know, the NHS et cetera,
3 so he was talking about: all you need is family, peace
4 and happiness or something like that -- or family, love
5 and happiness, and that's all I want. That's all we
6 want and that's all we can't get. We're not allowed
7 that and he's right, he's right, money doesnae buy
8 things, he's absolutely correct, so it doesnae matter
9 how much redress we're given or anything like that, it's
10 no going to buy back our childhoods or our experiences.

11 But what hurts me even more is the fact that
12 I'm here, nearly 60-year-old, and I'm getting psychology
13 help now and PTSD treatment now, which is making me --
14 it's better in the long run and I know that and I feel
15 that and I do believe that for me I'm getting
16 comfortable with being uncomfortable, that's where
17 I'm at now with the MS and everything, which is just
18 like came on the back o' it.

19 But I mean, we've lost so many people since this
20 process has started. I personally can rhyme off five
21 people, five people, that I know personally since this.
22 So I think it is absolutely brilliant, but I think that
23 it's just the start of what could be something really
24 adventurous for Scotland to show the world.

25 MR PEOPLES: Well, I have finished all my questions for you,

1 'Danielle' and I think you have maybe articulated some
2 of the things you want to happen and things that need to
3 be addressed now and going forward.

4 Is there anything we haven't covered that you need
5 to say at this stage or -- I hope you feel we have
6 covered the areas you would like to speak about today,
7 including your past?

8 A. I just want to say thank you to everybody for listening
9 and for, you know, eventually giving us a voice. But it
10 is very difficult, you know. We were told to keep these
11 secrets and we were told that we werenae to do this and
12 we werenae to do that and now we're being told, 'Hey,
13 listen, let's talk', do you know, 'Come on, let's talk,
14 talk to us'.

15 It is very difficult for people to put the lid back
16 on, so to speak, of a can of worms. Sometimes when you
17 drop your computer off at night and that's it, you know
18 you go home, but, you know, then you've got to think
19 about us twiddling our thumbs and ruminating and
20 thinking, 'I wonder if I'll get into tomorrow', do you
21 know, and even if I do, what's the point, you know?

22 It's a really difficult situation to try and
23 comprehend, but I'm grateful to anybody that can try and
24 empathise, because we've got great workers in our field
25 and the likes o' Lady Smith and that, we really have

1 some fantastic people that are doing it for the right
2 reasons.

3 I've read a lot of the reports, et cetera. Erm,
4 I do believe that The Promise is on the right track.
5 We're doing great things. What we need to do is follow
6 them through with actual legislation where we can
7 encourage social work students especially to have
8 a flourishing role, in helping them flourish and helping
9 young people with care experience and their families,
10 because it is all about -- it's integration. It's all
11 about integration. Not just within society, but being
12 part o' their family as well, whether that's extended
13 family, siblings, whatever.

14 MR PEOPLES: Thank you very much and on a personal level,
15 I do hope that the future -- I wish you very much every
16 success and help and I hope in the future that you will
17 get at least a more positive experience than you had in
18 childhood and that you prosper from now on.

19 A. Thank you.

20 MR PEOPLES: Thank you very much.

21 LADY SMITH: 'Danielle', let me add my thanks to you. You
22 have been so generous and brave in being able to share
23 the pain of your past, the horrors of your past, very
24 personal difficulties that you've had and the horrible
25 moments.

1 I'm also really impressed at what you have told me
2 about managing to get yourself educated and it's clear
3 from the way you speak and think that you are
4 an educated woman. It's also clear that you have been
5 doing your best to put that to good use to help other
6 people as well.

7 I hope, during your ongoing difficult moments, and
8 I know they will carry on, you are able to say to
9 yourself: you're doing good and you are helping other
10 people and that that keeps you going.

11 Good luck with the new treatment. It sounds as
12 though there is reason to be hopeful. I know that there
13 is no magic wand or total cure-all, but it does sound
14 like you're on the right path.

15 A. Thank you. That means a lot. Thanks.

16 LADY SMITH: Off you go and have a restful time for the rest
17 of today. You have really earned it.

18 A. Thanks everybody. Thank you.

19 (The witness withdrew)

20 MR PEOPLES: My Lady, I think that there is a move to
21 read-ins now.

22 I'll perhaps pass over to one or the other at this
23 stage for some read-in evidence.

24 LADY SMITH: Ms Forbes, whenever you're ready.

25 MS FORBES: My Lady.

1 'Alex' (read)

2 MS FORBES: The next statement, my Lady, is from

3 an applicant who is anonymous and is known as 'Alex'.

4 Her statement reference number is WIT.001.002.2864.

5 My Lady, 'Alex' tells us she was born in 1967 and

6 talks about her life before going into care between

7 paragraphs 2 and 32 of her statement.

8 She talks about being with her parents initially.

9 She says they married when they were very young. She

10 says had an older sister who was only a year and four

11 months older than her and then they had her and they all

12 lived in Edinburgh together.

13 Her parents were still very young when they got

14 divorced at 22, and she says she was about 4 or 5 at the

15 time and she and her sister lived with their mum.

16 However, she tells us at paragraph 4, that her mum

17 died from bowel cancer just before her 7th birthday and

18 she tells us that her mum's dying words were not to let

19 her dad get them.

20 They stayed with their maternal grandparents for

21 a while, but then their dad did come to get them and he

22 was living with someone else by this time.

23 'Alex' explains she didn't want to live with her dad

24 but her sister was going so she went too and they moved

25 there to stay with him in February 1974. She describes

1 it as being the worst decision of her life.

2 She says she had an horrific childhood from the age
3 of 7 until she was about 13 or 14. She describes her
4 dad as a drinker and a gambler and she says that his
5 partner pretended they were married, but they weren't
6 because her dad was Catholic and couldn't marry again.

7 It was a very dysfunctional family life she
8 describes in the following paragraphs. She says they
9 lived in a one bedroom flat. There were other children
10 who came along but then lived with other people.

11 She says that she and her sister slept in a box room
12 with no windows. There was no bath or shower in the
13 flat and they had to go to the local baths to wash.
14 There was no toilet roll or cleanliness in the flat and
15 they went from being very well dressed and clean
16 children with their own mum to being very neglected.

17 She describes having an addiction to food and
18 comfort eating and being morbidly obese as a child and
19 it was her job after school to go around places to get
20 food from the shop and the bakers and that people would
21 give her food because they were pitied. They knew her
22 dad was an alcoholic and was always in the pub.

23 She then talks about the fact that there was sexual
24 abuse by a member of the family towards her sister and
25 she was present when that took place, but they didn't

1 tell anyone about that. She describes becoming the
2 carer of her family at the age of about 7 or 8 and she
3 says they were living in chaos and crisis and there was
4 no structure to their lives.

5 Her dad's partner had started drinking too and she
6 said that her dad was abusive towards his partner. He
7 was also abusive towards her, physically abusive, and
8 she says that he used to batter her a lot and even broke
9 her nose once.

10 She went on to high school and she describes having
11 issues with dental problems, having gum boils and
12 abscesses, and she says when they got checked at school,
13 the teachers could see the neglect and smell them.
14 Teachers were aware that they were neglected and had
15 seen her bruises. She says that the dinner ladies gave
16 them dinners, even though they didn't qualify for free
17 school dinners, and they just knew the situation and
18 could tell by the look of them what was going on.

19 She says that they used to get sent to stay with her
20 dad's partner's brother at the weekends and again she
21 talks about there being sexual abuse towards her sister
22 whilst they were there.

23 She talks about a subsequent investigation by the
24 police later and she tells us about that in the
25 following paragraphs.

1 At paragraph 22, 'Alex' tells us that her
2 relationship with her dad's partner was very poor.
3 There was physical abuse from her and she says that she
4 would actually stand up to her, but there were gold
5 sovereign rings, she describes them being always in and
6 out of the pawn shop with them, and she says her dad's
7 partner used to batter her with these rings and she
8 would also get her dad to batter her when he came in
9 from the pub.

10 Her childhood she describes being surrounded by
11 drink and she says that her dad's partner treated them
12 differently from her own children.

13 At paragraph 26, 'Alex' describes that one time her
14 father had physically assaulted her and broken her nose.
15 She was at high school and she says she couldn't take
16 the fear and that life anymore and she describes taking
17 an overdose. She was about 12 or 13. Her guidance
18 teacher called an ambulance and she was taken to
19 hospital and had to get her stomach pumped.

20 She describes being in hospital with nice, fresh
21 clean sheets and that felt great and she disclosed
22 a little bit of what was going on to a psychiatrist
23 there.

24 She says that around the same time, her dad had
25 thrown her out onto the streets and she was walking the

1 streets and the police picked her up. She was taken to
2 her gran's, but then her uncle on her mum's side, who
3 was married to her mum's sister, got child protection
4 involved. This was because 'Alex' tells us that she
5 kept running away and was taking overdoses and that's
6 when social work got involved.

7 She didn't tell them exactly what had gone on out of
8 loyalty to her dad, but she told them she didn't want to
9 go back there. She moved in with her gran and she says
10 that it was like she'd come out of a cave and her gran
11 and her aunt and uncle wanted to dress her up and clean
12 her up, but she says she couldn't cope with the new
13 environment and became really withdrawn, cut all her
14 hair off, and she was still taking overdoses and
15 self-harming at that time and was very broken and
16 confused.

17 Then the social work referred her to part of the
18 house which was part of the Sick Kids Hospital and she
19 tells us about that from paragraph 33 onwards.

20 Secondary Institutions - to be published later
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1 Secondary Institutions - to be published later

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3 Secondary Institutions - to be published later

she was put back to

4 stay with her dad. She says nobody spoke to her or
5 asked her if she wanted to go back to her dad's house,
6 that's at paragraph 56.

7 Then she talks about life back at home from
8 paragraph 57. Her dad's partner tried to physically
9 assault her again and she assaulted her back, but felt
10 terrible after she had done that. She didn't want to go
11 back to that life and she lasted about a week at her
12 dad's house.

13 She went to stay with her mum's sister and her
14 uncle. However, she tells us about her time there in
15 the following paragraphs and she says that again, she
16 was put on a diet and started stealing food. She said
17 they thought food was the problem, but it was the
18 symptom -- that's at paragraph 62 -- and she had
19 difficult living with her cousins and sharing their
20 bedroom and she couldn't settle there.

21 So that arrangement only lasted for five months and
22 then she went to stay with her dad's brother for
23 a couple of weeks.

24 She ended up in hospital again, she thinks due to
25 self-harming, and then she went into temporary care in

1 another placement, this was an emergency placement, at
2 a children's home, in Haddington.

3 She tells us about that from paragraph 66 onwards.
4 She was admitted there, we know from her records, my
5 Lady, on [REDACTED] 1982, when she was aged 15 years, and
6 she was there three-and-a-half months, from the records
7 that we have.

8 Secondary Institutions - to be published later
9 [REDACTED]
10 [REDACTED]
11 [REDACTED]
12 [REDACTED]
13 [REDACTED]
14 [REDACTED]

15 after she had been there a few months, it was decided
16 she would be put into Howdenhall centre, because she
17 couldn't be managed.

18 She then tells us about Howdenhall from
19 paragraph 87. We know again from her records, my Lady,
20 that she was there from [REDACTED] 1982, so she was
21 aged 15 when she went there, and she was there until
22 [REDACTED] 1983 and she had turned 16 by that point.

23 She tells us that Howdenhall was very clinical and
24 had no carpets. She was met by Mr and Mrs MTQ-SPO [REDACTED]
25 [REDACTED], and she was told to call them 'ma' and

1 'pa'.

2 She talks about being given blue trousers and
3 a sweatshirt to wear, like in a prison, and she says it
4 was difficult for them to get one to fit her because she
5 was so big, so she wore her own clothes.

6 She describes being shown around Howdenhall by one
7 of the staff and shown a dormitory where you would sleep
8 and the cell where you would be kept if you kicked off.
9 She says at paragraph 89:

10 'It was a room with a heavy lock. There was no
11 toilet and I think a small window that was covered with
12 mesh. I was told that that was where I would be put if
13 I didn't do what I was supposed to, because I was there
14 to behave. It was shown to me as part of the tour to
15 frighten me. All the doors were locked behind you.'

16 She talks about it being mixed at Howdenhall, with
17 boys and girls in separate wings, and tells us that they
18 were aged between 12 or 13 to 16 or 17. They slept in
19 dormitories, two to a room, and she says that there were
20 iron beds with washable mattresses, like in hospitals.

21 At night, at paragraph 93, she says the landing door
22 would be locked, but you could get out of your room to
23 go to the toilet:

24 'There would be somebody on the landing at night to
25 monitor us.'

1 She says, in relation to staff, that if you got sent
2 to Mr and Mrs MTQ-SPO office for doing anything wrong,
3 you got put on report, but she says they very seldom saw
4 them and every unit had a unit leader who would be in
5 charge of that wing and they would have about four
6 workers in the wing, who they would be in charge of.

7 She tells us at paragraph 97 she got to know the
8 staff there quite well. There were no barriers with the
9 staff and they were quite open with the residents about
10 their personal lives.

11 She then goes on to tell us about the daily routine
12 from paragraph 98. She said there were chores to do,
13 which would be cleaning the dormitories, the landing and
14 the toilets and they were rotated weekly and you would
15 be marked down if you didn't do your chores and got
16 money taken off your pocket money. There was a tuck
17 shop they could spend their money a few times a week and
18 she thinks you could smoke in there, because people used
19 to buy cigarettes.

20 She describes going to breakfast in the main dining
21 room, which was like a big prison hall. She talks about
22 the food and saying it was set up like school dinners
23 and then, after breakfast, there would be a choice of
24 whether to go to school or not. School was a class in
25 the building.

1 At paragraph 102, 'Alex' says:

2 'There was just one class and you didn't have to go
3 to it. You would be taught some English or history or
4 whatever class was on in the centre that day. Not much
5 importance was put on schooling. I was about
6 15-and-a-half years old and was coming to the end of my
7 educational years.

8 'There were two rooms where you could hang out if
9 you didn't want to go to class. One was the dining
10 room, which had a table tennis table in it, and the
11 other room had a television in it.'

12 She says in relation to lunches, they weren't too
13 fussed if you didn't eat your food:

14 'In the afternoon there was an option of going to
15 class again and in the evening there were some crafts
16 things you could do or watch the TV and bedtime was
17 about 8.00.'

18 There were baths in the morning or at night if they
19 wanted them and they could go in on their own and lock
20 the door.

21 She talks about there being visiting times from
22 paragraph 109, people could come and see you like in
23 a prison and they would sit in the dining room area
24 during visiting times and it wasn't heavily monitored.

25 She talks about sharing a room with a girl at

1 paragraph 111, who she names, and she says:

2 'She told me her uncle smuggled some drugs into the
3 centre for her during visiting time.'

4 She says the girl was in for drug misuse and she
5 goes on:

6 'She took an adverse effect to whatever it was her
7 uncle had brought her, I think it was heroin,
8 an ambulance took her away to get treated for whatever
9 it was.'

10 She talks about having her 16th birthday in there,
11 but doesn't remember it.

12 Then she tells us about some things that she's put
13 under the heading of 'Abuse at Howdenhall', this is from
14 paragraph 118. She says:

15 'The staff hit the children if they were out of
16 order. That was quite normal. That could be for
17 answering back or not doing what you were told. They
18 would always threaten to put you in the cells for a day
19 or a couple of days. They were the bosses and we knew
20 that.'

21 She talks about a particular member of staff who had
22 a disabled son, and she says she took a shine to that
23 member of staff.

24 At paragraph 119, she says:

25 'I must have done something one day and she slapped

1 me. It was a really forceful slap and I didn't know
2 what I had done. I remember it because it was hurtful
3 that she had physically assaulted me when I liked her.
4 I got hit and I saw other people getting hit.

5 'They used quite heavy restraint when people kicked
6 off in there. It was much more brutal force [REDACTED]
7 [REDACTED]

8 The women would call the men over to help them restrain
9 people. If you still didn't calm down, then you'd be
10 put in the cells. You'd be isolated from everyone in
11 there.

12 'The team leader of the unit could make the decision
13 to put you in the cells, it didn't have to be Mr and
14 Mrs [REDACTED] I never got put in the cells but I saw
15 other people being taken there.'

16 Then she describes there being a boy with
17 a particular nickname that she gives us, and she says at
18 paragraph 122:

19 'He really kicked off one day in the dining room and
20 it took six members of staff to restrain him. There was
21 an alarm that the staff could press if they really
22 needed assistance and then people would come to help.
23 The staff had no barriers when they spoke to us.'

24 Then she talks about a member of staff with the
25 disabled son, and talking about that and she says:

1 'I don't think that's something that the staff
2 should have been telling us about. The staff used to
3 speak to us a lot about their own lives. They would
4 tell us what they were doing at Christmas with their
5 families. It was quite hurtful for us to hear about it.
6 'Maybe sharing stories about their family life was
7 their way of showing affection. There were never any
8 hugs or anything. I think I must have had affection for
9 [HSG] is the name that she gives us, the member of
10 staff] which is why I was so hurt when she hit me.
11 I felt that I had built a bond with her. Maybe it was
12 just because her name was [HSG].'
13 Then she says that that was a similar name to her
14 mum's.
15 She then talks about leaving Howdenhall and she says
16 that she was there for about seven or eight months,
17 I think we know from the records --
18 LADY SMITH: It's actually three, isn't it?
19 MS FORBES: My Lady, yes, but it might have seemed longer at
20 the time.
21 She felt that she had become institutionalised and
22 she says she felt safe in there being away from the
23 outside world and it was a locked unit and she got used
24 to that and she didn't want to leave. She was 16, she
25 hadn't sat any exams, had no qualifications, and she had

1 a choice to go to a hostel that she had visited a few
2 times and she says that she then -- the way she
3 describes it is she was kicked out of Howdenhall around
4 the [REDACTED] time, but she was frightened to go back
5 into the world after that.

6 Then she tells us about her time at the hostel from
7 paragraph 130 onwards. [REDACTED] Secondary Institutions - to be published later

8 [REDACTED] Secondary Institutions - to be published later
9 [REDACTED]
10 [REDACTED]
11 [REDACTED]
12 [REDACTED]
13 [REDACTED]
14 [REDACTED]
15 [REDACTED]
16 [REDACTED]
17 [REDACTED]
18 [REDACTED]
19 [REDACTED]
20 [REDACTED]
21 [REDACTED]
22 [REDACTED]
23 [REDACTED]
24 [REDACTED]
25 [REDACTED]

1 Secondary Institutions - to be published later

2 She then talks about leaving that hostel and she
3 said she went to stay with a family for a couple of
4 months, but it was difficult to adapt to a house with
5 rules because she had to be back home for meal times and
6 things.

7 Secondary Institutions - to be published later

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11
12
13 She talks about life after being in care from
14 paragraph 178 and she tells us about a psychiatric
15 admission she had when she was about 18, which led to
16 her being in hospital.

17 She talks about being put into supported
18 accommodation through Link Housing after leaving the
19 hostel and the hospital, and she stayed there until she
20 was 21 years old.

21 She tells us that she got into trouble with the
22 police when she was about 20. She was caught and
23 prosecuted for that and she says that she was involved
24 with a guy who was just out of prison when she was 22
25 and fell pregnant.

1 She talks about her struggle with her weight and
2 being put on various different drugs for that. She has
3 had abusive relationships with alcoholics, but she says
4 that when she was 24, she lost seven stone on her own
5 and over the next few years she got down to about 15
6 stone.

7 She trained in college to be a nursery nurse when
8 she was about 25. She worked as a nanny and did
9 domestic jobs, did some childminding and then bought her
10 own place.

11 She then met her ex-husband and they got married and
12 she had a son. She got pregnant at 29.

13 She talks about struggles she's had with postnatal
14 depression and her mental health and her physical health
15 as well in the following paragraphs and says she took
16 the decision after she got divorced to get her stomach
17 stapled. That was severe surgery and she managed to get
18 down to a reasonable weight.

19 She met someone else and had a daughter, but they
20 didn't stay together and she talks about her struggles
21 about getting access to her daughter and she even went
22 to university and studied for a diploma in law to help
23 her understand court proceedings. She goes on to tell
24 us about her struggles with that.

25 I'm not going to read all that out, my Lady, because

1 she does tell us about it there in detail [REDACTED]

2 [REDACTED]

3 In relation to impact, she talks about that from
4 paragraph 201. She says she carried a lot of shame from
5 the time she lived with her dad and his partner and she
6 talks about her compulsive eating as a child and her
7 weight problem and obesity.

8 At paragraph 204, she tells us:

9 'I think my time in Howdenhall gave me a fake
10 outlook on life. It was a locked-down place and
11 I didn't go out in seven or eight months. I felt safe
12 in there not integrating into society. I probably felt
13 safe seeing the abuse, because it was normalised.'

14 She then goes on to say that she had struggles
15 bonding with her son when she first had him and she
16 previously told us about the postnatal depression she
17 suffered from.

18 She states that she doesn't like labels like
19 'survivor' and 'victim', because she's not, she is
20 a person and she makes that point.

21 At paragraph 215, she says that she stayed in three
22 completely different care environments:

23 'I went from a place where there was force and kids
24 were being restrained [that refers to Howdenhall,
25 I think, my Lady] [REDACTED]

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1 Secondary Instit A child needs consistency.'

2 My Lady, she tells us about some other information

3 and about some possible improvements, she thinks, and

4 for the system, that staff should be vetted for the job,

5 that people who have lived dysfunctional lives should be

6 involved on panels when decisions are made about policy

7 change and people with knowledge and lived experience of

8 abuse should be consulted.

9 My Lady, she has made the usual declaration and she

10 has signed her statement, it's dated 7 December 2018.

11 LADY SMITH: Thank you very much indeed.

12 MS FORBES: My Lady, Mr Sheldon has a statement, but I think

13 it might take longer than 10 minutes.

14 LADY SMITH: I think we'll stop now for the lunch break and

15 I'll sit again at 2 o'clock.

16 Thank you.

17 (12.51 pm)

18 (The luncheon adjournment)

19 (2.00 pm)

20 LADY SMITH: Good afternoon.

21 Ms Forbes, would you like to introduce the next

22 witness?

23 MS FORBES: Yes, thank you, my Lady.

24 The next witness is a witness who is anonymous and

25 is known as 'Chris'.

1 LADY SMITH: Thank you.

2 'Chris' (affirmed)

3 LADY SMITH: 'Chris', thank you for coming along this
4 afternoon to provide oral evidence to us here at the
5 Inquiry, in addition to the written statement that you
6 have already given to me.

7 It's rich in detail and I'm really grateful to you
8 for that. It's been very helpful to be able to read it
9 in advance, but, as you probably understand, there's
10 some aspects that we'd like to explore in a bit more
11 detail with you in person.

12 A. Yes, my Lady.

13 LADY SMITH: 'Chris', I know doing what you're doing, being
14 a witness in a public inquiry about things that happened
15 in your own working life, some of them quite a while
16 ago, is not easy and you've probably felt quite anxious
17 as you've approached this. I get that.

18 If at any time you want a breather, just let me
19 know. That's not a problem. Or if we're going too fast
20 or not explaining things properly, that's our fault, not
21 yours, so you just tell us that.

22 If it works for you, it works for me and my
23 objective is to make the whole giving of evidence as
24 comfortable for you as it can be, so you can give the
25 best evidence you're able to do. Does that make sense?

1 A. It does, yes.

2 LADY SMITH: Thank you.

3 If you're ready I'll hand over to Ms Forbes and
4 she'll take it from there.

5 A. Thank you.

6 MS FORBES: Thank you, my Lady.

7 Questions from Ms Forbes

8 MS FORBES: Good afternoon, 'Chris'. Your statement that
9 you provided to the Inquiry is in the red folder in
10 front of you and it is going to be brought up on the
11 screen, as well.

12 We give that statement a reference number, and it's
13 not something for you to be concerned about, but I'm
14 just going to read it in so that we have a record of it
15 in the transcript, it's WIT.001.002.4393.

16 Your statement, 'Chris', is 25 pages long and if
17 I can get you just to go to the last page of your
18 statement, and at the last page there is a paragraph
19 near the end, where there is a declaration. This is
20 paragraph 149. It says:

21 'I have no objection to my witness statement being
22 published as part of the evidence to the Inquiry.
23 I believe the facts stated in this witness statement are
24 true.'

25 You have signed that and it's dated 1 March 2019; is

1 that right?

2 A. That's correct.

3 Q. Is that still the position?

4 A. Yes, that was my position.

5 Q. You can go back to the beginning of your statement, if

6 you want, 'Chris', or put it to one side, it's up to

7 you.

8 I'll just start really by getting some background

9 about you. I think you tell us you were born in 1968?

10 A. I was.

11 Q. From paragraph 3, you tell us about your qualifications

12 and experience, and you say that originally you trained

13 as a teacher and I think you qualified in 1991, is that

14 right?

15 A. Yes.

16 Q. That was as a home economics teacher?

17 A. It was. Yes.

18 Q. You tell us you worked in the Borders teaching and then

19 you moved into more social work sort of orientated work

20 and that was in the community; is that right?

21 A. That's correct.

22 Q. You were working with adults who had learning

23 disabilities or difficulties?

24 A. Yes, that's correct.

25 Q. Then you tell us you ran a money advice and debt

1 counselling project for a while?

2 A. Yes, that was for Scottish Borders Council.

3 Q. That, I think you say, that had some funding which

4 lasted for about four years?

5 A. Yes, that's correct.

6 Q. But it was coming to an end, so you had to look for

7 something else?

8 A. Yes, that's correct.

9 Q. I think you say you saw an advert for residential care

10 officers in Edinburgh, and that's something that piqued

11 your interest?

12 A. It did, yes.

13 Q. You say that you thought that that married up with what

14 you'd been doing, it was working with young people, but

15 with a more social work vein, a combination of social

16 work and teaching?

17 A. Yes, that's correct, I had always hummed and hawed

18 between social work and teaching, so that seemed to be

19 a good fit.

20 Q. You go on to tell us you applied for the post and you

21 were accepted and you point out that at that time, you

22 didn't have any specific formal childcare or social work

23 qualifications, but because you were a qualified teacher

24 already, you were essentially deemed to be able to do

25 the role, qualify for the role of residential care

1 officer?

2 A. Yes, that's correct.

3 Q. I think you say that because of that, your training for

4 you, with your experience, was only a four-day

5 recruitment process?

6 A. Yes, there wasn't -- I think at that time everybody

7 going into that role had to complete the recruitment

8 process.

9 Q. You tell us a little bit about that. You say that that

10 involved role play, written exercises, videos and

11 discussions and you think that it was really designed to

12 work out where people's values were and to let people

13 know what would be expected of them in the role?

14 A. Yes, I understood it to be -- you know, it was quite

15 an intensive recruitment process.

16 Q. I think we know from some of the information you've

17 provided us, that that took place at a recruitment

18 centre, is that right?

19 A. It was called a recruitment centre. I can't remember

20 where mine was. I know a few years later -- I think it

21 was possibly held at the Festival Theatre, the council

22 would hire somewhere for the four days.

23 Q. Okay, so it wasn't like a specially purpose-built

24 place --

25 A. No, no, it wasn't.

1 Q. You describe though, 'Chris', that at that time you
2 couldn't just go straight into the role, a permanent
3 position, you had to work as a locum first and you were
4 given some shifts, you say, at Northfield Young Peoples
5 Centre and a few shifts at Moredun?

6 A. That's correct.

7 Q. They were both in Edinburgh and then you were offered
8 two weeks at St Katharine's secure unit?

9 A. Yes, that's correct.

10 Q. You did that those two weeks and you say that went okay?

11 A. Yes, it was quite a positive experience and the
12 consistency was good of having two actual weeks. It's
13 quite difficult when you're not -- when you're starting
14 as a locum and you might only have one or two shifts one
15 week and you need -- you've got responsibilities.

16 Q. Those first two weeks at St Katharine's, how did you
17 feel about it? Did you like working there in those
18 first two weeks?

19 A. I think at the time I wasn't -- in the first few weeks,
20 yes, I would say I enjoyed working there, which was why
21 I subsequently took a longer contract.

22 Q. I think you tell us, 'Chris', they offered you
23 a six-month contract, still as a locum but at least it
24 was for a set period of time?

25 A. Yes, they did.

1 Q. And you accepted that?

2 A. I did.

3 Q. You tell us that the contract you got was from

4 September 1999 to February 2000. I think we know you

5 probably started 28 August, and it was to finish on

6 28 February, does that sound right?

7 A. That sounds right, yes.

8 Q. You then go on, 'Chris', to tell us about

9 St Katharine's, so I'm going to move on to your time

10 there now.

11 I think we have heard that at that time there was

12 St Katharine's and there was also Howdenhall, was that

13 a place you were aware of as well?

14 A. Yes, that's -- there was two secure centres in Edinburgh

15 at the time and that's what they were.

16 Q. Were they beside one another?

17 A. Er, geographically, yes, they're quite close together.

18 Practices were, I believe, very different between them

19 but they were very -- I don't think they're even a mile

20 apart.

21 Q. St Katharine's was where you were to be working. Did

22 you ever work at Howdenhall?

23 A. No.

24 Q. Did anyone from Howdenhall come to work at

25 St Katharine's when you were there?

1 A. Periodically somebody from Howdenhall would come to
2 St Katharine's, if there were staffing issues.

3 Q. So there was some movement between the two different
4 places or units?

5 A. Yes.

6 Q. But you just stayed at St Katharine's during that
7 period?

8 A. Yes, I was purely based at St Katharine's in the secure
9 part.

10 Q. So there was a secure part, I think you tell us. I
11 think you were put into the Guthrie unit; is that right?

12 A. Yes.

13 Q. That was within the main building?

14 A. Yes, so it was a complex, so there was a large building
15 which was the Guthrie unit and there were two smaller
16 buildings, so the Guthrie building was the secure part
17 of the campus and the two other buildings were -- they
18 weren't secure.

19 Q. So they were open?

20 A. They were open units, yes.

21 Q. You say that within that main building, along with the
22 secure part, was the education wing and office space as
23 well?

24 A. Yes.

25 Q. You tell us about staff there at paragraph 8 and you say

1 that there was a man who was there [REDACTED]. You
2 describe him as being SNR [REDACTED] of St Katharine's
3 complex. Who was that?
4 A. LUZ [REDACTED].
5 Q. Was he called SNR [REDACTED]?
6 A. Yes.
7 Q. So that was his title?
8 A. Yes, I believe so.
9 Q. You say then there was a group of senior staff who
10 oversaw the running of the unit so was he at [REDACTED]
11 [REDACTED], if you like?
12 A. Yes.
13 Q. [REDACTED], were there different types of managers
14 with different titles?
15 A. There were certainly -- at that time -- I'm trying to
16 remember if they were called that though, purely 'cause
17 I subsequently worked in residential childcare, but
18 people who were assistant unit managers.
19 Q. Is it assistant unit managers or was there an acronym?
20 A. So there were AUMs.
21 Q. AUMs. So would there be LUZ [REDACTED] and [REDACTED]
22 [REDACTED] there would be AUMs?
23 A. Yes.
24 Q. Do you remember how many AUMs there were?
25 A. No, I'm afraid I don't.

1 Q. You're starting there as a locum residential care
2 officer and I think you tell us, you had a supervisor or
3 a line manager, who was called KEI [REDACTED] ?
4 A. Yes, that's correct.
5 Q. So was he somebody who was directly senior to you, one
6 up, if you like, or were there other people in between?
7 A. No, I believe he was one up from where I was.
8 Q. You say supervisor, he wasn't an assistant unit manager?
9 A. Sorry, I'm not -- I couldn't be 100 per cent sure to
10 answer that.
11 LADY SMITH: 'Chris', don't worry. I do appreciate this was
12 a long time ago, but I have got your evidence on your
13 memory of the broad structure and that's maybe all that
14 matters at this stage.
15 MS FORBES: 'Chris', you mention Carol Mentiplay. She was
16 someone that you came into contact with at the
17 recruitment centre; is that right?
18 A. Yes, that's correct.
19 Q. I think you tell us that to be able to qualify as a sort
20 of permanent, or the way you put it is proper RCO,
21 residential care officer, you had to fulfil a number of
22 competencies?
23 A. Yes, that's correct.
24 Q. Were those competencies things that you thought you had
25 to complete during the six-month period?

1 A. Yes, that's correct.

2 Q. Was that with a view then to getting a permanent
3 position?

4 A. Yes.

5 Q. In relation to that, I think you go on to tell us that
6 Carol Mentiplay became your assessor in relation to
7 those competencies?

8 A. Yes, that's correct.

9 Q. So whilst you had your supervisor, KEI [REDACTED], you
10 also had Carol Mentiplay playing a different role, if
11 you like, as an assessor?

12 A. Yes.

13 Q. I think to be able to complete your competency
14 paperwork, you would need to meet with both of those
15 individuals at various times, or you were supposed to,
16 is that right?

17 A. Yes, that's correct.

18 Q. You do tell us that you have given to the Inquiry
19 documentation that relates to those competencies that
20 you filled out at the time, so contemporaneous
21 records --

22 A. Yes.

23 Q. -- of your progress in the unit during the time you were
24 there. That was from 1999 into 2000; is that right?

25 A. Yes.

1 Q. You tell us a little bit more about the competency forms
2 at paragraph 11 and you say that it was your
3 responsibility to write these up and really to find
4 evidence to complete the various competencies to show
5 that your performance was essentially satisfactory?

6 A. Yes, that's correct.

7 Q. You say that you did manage to complete them all while
8 you were there, so I think you say that you met with
9 Carol Mentiplay as part of that to discuss your
10 performance.

11 We have mentioned you were also supposed to meet
12 with your supervisor, KEI [REDACTED]. Was that
13 something that you had any difficulty in doing?

14 A. I would say it probably didn't happen as frequently as
15 policy would have suggested or procedures would have
16 suggested that it should.

17 Q. So if we can have a look just briefly at some of the
18 documents you have provided us. Now, this is going to
19 be an extract of the documents you have provided us.
20 The reference is WIT-3-0000005793, page 1.

21 We can see at the top that this is a recruitment and
22 development centre for residential child care, so it's
23 a document that seems to come from there and it's
24 an agreement and the RCO is redacted out there, but it
25 relates to you and it says the unit is St Katharine's,

1 the supervisor, KEI [REDACTED], the assessor,
2 Carol Mentiplay.

3 If we go further down the page we can see
4 'Supervision arrangements', and we can see: RCO and
5 supervisor, so that would be you and KEI [REDACTED],
6 every three weeks where possible; RCO and assessor:
7 every three weeks; and then RCO, supervisor and
8 assessor: every six weeks.

9 It does say 'where possible' in relation to RCO and
10 supervisor, but this was the sort of agreement, was it,
11 about how often you, and the supervisor, and the
12 assessor should be meeting?

13 A. Yes.

14 Q. Are you saying, 'Chris', that it didn't happen every
15 three weeks with KEI [REDACTED]?

16 A. Yes, I am.

17 Q. Was there ever a time when there was you,
18 KEI [REDACTED], and Carol Mentiplay meeting, which was
19 supposed to be every six weeks?

20 A. I couldn't swear to how often we met, but I would say it
21 definitely wasn't every six weeks. I think there
22 probably was at least one occasion.

23 Q. That just gives us an idea of what the agreement was
24 supposed to be. I think then, just to have a look so we
25 can see some of the competencies, if we go to the next

1 page, page 2, I think we can see again this relates to
2 you, even though it's redacted, 'Chris', and the date is
3 October 1999. This seems to be a SWOT analysis we call
4 it, so strengths, weaknesses, opportunities and threats,
5 is that what that stands for?

6 A. I'm not sure what that stand for, but that sounds like
7 it may stand for that.

8 LADY SMITH: I think it normally does, 'Chris'.

9 A. I haven't looked at these since I gave them to you, so
10 it was some time ago since I gave them to you, but I do
11 remember it now looking at it, yes.

12 MS FORBES: We see underneath there's four boxes and the
13 first one, top left says 'Strengths', the top right says
14 'Weaknesses', the bottom left says 'Opportunities' and
15 the bottom right says 'Threats', so that's maybe giving
16 us a little clue. That's where I assumed the acronym
17 came from there.

18 Is this part of your competency paperwork, your
19 professional development plan that you had to complete,
20 and I think it says 'complete with assistance of
21 colleagues', just at the top of the boxes. So you and
22 a colleague, or colleagues, would have to complete this
23 together at various periods throughout your time, is
24 that right?

25 A. That's correct.

1 Q. Was this something that you filled in along with someone
2 else or did someone else fill it in for you?

3 A. No, somebody else has filled this in for me. That's
4 definitely not my writing.

5 Q. If we go to the bottom of the page, we can see there's
6 a redacted block there and it says 'Vicky', I think you
7 mentioned a Vicky in your statement. That's somebody
8 else who worked in the unit who was a residential care
9 officer?

10 A. Yes, that's correct.

11 Q. That would be a colleague that you would sit down and
12 they would fill this in for you, but in discussion with
13 you, is that what would happen?

14 A. My memory is that that is something that we were asked
15 to do, to get feedback from our colleagues about how --
16 in that phase, how they thought we were performing and
17 that that's something that she filled in for me, that
18 could be then used and would have been discussed with
19 Carol Mentiplay.

20 Q. Just to understand, in case I have this wrong, is this
21 something that in this instance, Vicky fills in on her
22 own without you and then gives it to you to see and
23 discuss with Carol Mentiplay, or is this something that
24 you discuss with her and she fills it in with you?

25 A. No, she didn't fill this in -- this wasn't filled in

1 with me.

2 Q. This is something she filled in and then you get to see
3 it at some point after that?

4 A. Yes.

5 Q. In this she has set out some strengths. If we can just
6 look halfway up the page again, so this is quite early
7 on, October 1999, you would only have been in the post
8 there from August, the end of August, is that right?

9 A. Yes, that would be right.

10 Q. I think she says under 'Strengths':

11 'Common sense. Good judgment. Professional
12 attitude. Doesn't avoid conflict. Good communicator.
13 Relating well with kids. Follows procedure.
14 Confident.'

15 Besides 'follows procedures' she has a little
16 asterisk, and then we look over to the right-hand column
17 it says 'Weaknesses' and again we see this little
18 asterisk and she says:

19 'Strict adherence to policy at times, can be
20 inflexible.'

21 I think that's something you perhaps tell us about
22 in your statement later that was mentioned to you by
23 KEI [REDACTED] and maybe even a report by LUZ [REDACTED], is
24 that right?

25 A. Yes, that's correct.

1 Q. So this is something that she's noting down about you at
2 that time and did you know what she meant by that?

3 A. I think, as you mentioned earlier, I didn't have formal
4 training as a residential childcare officer, so one of
5 the first things that I did do was to appraise myself of
6 any policies and procedures that I could find as a way
7 of guiding what was expected and how I should be
8 performing the role.

9 So I think that is what she was referring to, that
10 that is something that I would then do, if I had seen
11 that something was in a policy that should be carried
12 out a certain way. I guess, for example, room checks,
13 that they should be carried out, if somebody was in
14 a room on their own, every 20 minutes say, or -- then
15 I would be wanting to make sure that that happened and
16 I would be pushing for that to happen, when it didn't
17 happen. So I think that is what she would be referring
18 to and what KEI and LUZ would have referred to also.

19 Q. I'm not going to go through all of these but it's just
20 to get an idea of some of the things that were being
21 said, because they raised their head again a little
22 later.

23 If we go to the third page. This page is another
24 one of these forms, these professional development
25 plans, but this one isn't dated. Whilst it relates to

1 you at the top, it doesn't have at the bottom a name for
2 someone who's filled it out. I don't know if you
3 recognise the handwriting or not, but certainly there's
4 nobody's name on this one.

5 A. No, I don't recognise the handwriting, sorry.

6 Q. Again, certainly this is something that's supposed to
7 relate to you. Again, if we look at strengths, it says:
8 'Enthusiasm. Follows up ideas about [I think it
9 says] young people. Willingness to engage with young
10 people. Joins in with the team. Diligent.'

11 There are five things numbered there.

12 Then over to the sections on weaknesses, it says:
13 'Occasionally unsure about decision-making [but then
14 in brackets says] (because she is new?).'

15 Then it says:
16 'Too reliant on black and white rules [and then in
17 brackets] (because she is new) ...'

18 LADY SMITH: And there's a question mark.

19 MS FORBES: I'm not sure if that's a question mark or
20 another bracket.

21 LADY SMITH: I think that's a question mark.

22 MS FORBES: It might be, my Lady, because it would make
23 sense.

24 Then there is a little plus underneath and it says:
25 'Poor guidance.'

1 It seems to be noting there perhaps poor guidance as
2 factoring in.

3 Then it says:

4 'Handling of restraint needs to be properly briefed
5 [I think that says and then it says] Level of
6 intervention with young people.'

7 But it doesn't give any more information. So
8 I think this is a place where, again we'll see this
9 later on, but this term 'black and white rules'. It
10 seems to be pointed out here that you're going by the
11 letter of whatever the rules are. Do you agree that's
12 what that seems to be pointing out at the time?

13 A. Yes.

14 LADY SMITH: Just going back to this comment of 'poor
15 guidance', I find that puzzling, given the role you were
16 in. Was it part of your responsibilities to give
17 guidance to anybody else?

18 A. No. It was not. It was not, Lady Smith.

19 LADY SMITH: If it wasn't part of your responsibilities, it
20 reads as though that could only refer to somebody else
21 giving you poor guidance, do you see what I mean?

22 A. Yes, I think that -- so, having looked at this now,
23 I would say this was written either by IDJ or
24 by KEL, because the shift -- we worked on a set
25 shift and I would have asked the people that I worked

1 with. I'm not sure which of the two gentlemen, which
2 one it was, but it was by one of those. Erm, I would
3 say he was referring to supervision within
4 St Katharine's.

5 MS FORBES: So perhaps what this is reflecting is that
6 whilst this point is being made again about the rules,
7 you are new to the role and it's being pointed out poor
8 guidance may play a factor in this as well, it seems to
9 be reflected anyway.

10 LADY SMITH: Yes. Poor guidance given to you, the quality
11 of the guidance given to you was poor.

12 A. Yes, it was.

13 MS FORBES: It also seems to be noting that there may be
14 an issue about restraint and it's been pointed out that
15 you need to be properly briefed on this. I think you do
16 tell us in your statement, 'Chris', that you weren't
17 trained in restraint at this time, is that right?

18 A. That's correct.

19 Q. We'll come back to that. I just wanted to look at some
20 of these notes because you made them at the time before
21 we go back to your statement.

22 Sorry, I think there maybe is an author at the
23 bottom of this. I'm very sorry, I didn't think there
24 was, but there is, and I think that is IDJ who
25 has noted that. Was he another residential care

1 officer?

2 A. IDJ [REDACTED] was a residential care officer, who was also
3 a qualified social worker. Some staff -- most staff
4 didn't have formal qualifications, who were working as
5 residential care officers, however, IDJ [REDACTED] was
6 a qualified social worker.

7 Q. Just to briefly go over to the next page then --

8 LADY SMITH: Just before you do that, can we go up just
9 a little. Stop there, 'Threats':
10 'Too soon to tell!'
11 What do you make of that, 'Chris'?

12 A. I can only think that he was suggesting that he was
13 hoping I would become less concrete or less -- adhere
14 less to the rules and perhaps become more like other
15 people who worked there, and that it was maybe too early
16 on and that it was only a few months into me actually
17 being there.

18 LADY SMITH: Or, even in fairness to you, it's just too soon
19 to make that assessment?

20 A. Yes.

21 LADY SMITH: Over on the 'Opportunities', we seem to have:
22 'Appears to understand the systemic nature of our
23 young people's difficulties. Healthy suspicion.
24 Willingness to discuss own practice. Knowledge of
25 education (teaching). Aware of own shortcomings and

1 others.'

2 These seem to read as positives, would you agree?

3 A. Yes. Yes, I agree.

4 LADY SMITH: Ms Forbes.

5 MS FORBES: Thank you, my Lady.

6 I don't know if you would agree that that assessment

7 at that time was quite a balanced assessment, it seems,

8 of where you were at that stage. Any of the weaknesses

9 seemed to be qualified by the fact that you were new and

10 you hadn't been properly briefed and there is question

11 of whether you had the adequate guidance?

12 A. Yes.

13 Q. Just going over to the next page then, 'Chris', this is

14 page 4, I think on this page there isn't an author, but

15 I'll just check if there is an author at the bottom.

16 We don't know who filled this one in, but again there's

17 no date on this one either.

18 A. I perhaps shouldn't own up, but that's my writing.

19 Q. Oh, it is your writing. Okay, so this was one that you

20 filled in and so would there be times then that you

21 would fill this in as well as colleagues?

22 A. I think, if I'm remembering correctly, this was

23 an exercise as part -- that I was filling in to then

24 have to be able to evidence discussing with my

25 colleagues what my practice was in working with other

1 people, as part of the competencies that you were
2 required to demonstrate.

3 Q. I think then, if this was you, you have put some things
4 in strengths and things that I think we have seen in
5 some of the earlier --

6 LADY SMITH: Ms Forbes, can we capture a date for that? The
7 end date isn't there, but is there a start date for the
8 period?

9 MS FORBES: Unfortunately, I don't think this document has
10 a date at all on it, my Lady.

11 LADY SMITH: Right. Okay.

12 MS FORBES: So I think a few of them are missing dates.

13 Can you remember, 'Chris', roughly when you filled
14 this in? Would it have been --

15 A. If I'm remembering correctly, I think these were all
16 filled in at the same time. I think it was an exercise
17 that was carried out at one point.

18 Q. Does that mean then you had to fill one in and other
19 colleagues had to fill one in as well?

20 A. Yes.

21 Q. The first one we looked at was October 1999, so it might
22 be, if that's the position, that they were all filled in
23 at the same time then?

24 A. Yes.

25 Q. So that would be you in the job for maybe a month or

1 two?

2 A. Certainly on that full-time basis. I moved to Edinburgh
3 at the beginning -- the end of May/beginning of June, so
4 I had some locum experience but not actual
5 St Katharine's experience.

6 Q. So when you're doing your own self-assessment at this
7 time, you're pointing out some of your strengths and you
8 have got willingness to learn, previous experience in
9 education and then you've got:

10 'Myself, standing my ground, flexibility, ability to
11 communicate effectively.'

12 Then you seem to have put in the 'Weaknesses'
13 section then:

14 'Lack of knowledge.'

15 With an arrow down to:

16 '... in particular restraints.'

17 We have talked about that. You weren't trained in
18 restraints, is that right?

19 A. That's correct.

20 Q. You are also mentioning newness to post?

21 A. Yes.

22 Q. In that, did you mean St Katharine's or a combination of
23 St Katharine's as a post and the role of residential
24 care officer?

25 A. I think I would say both. I was still very new. The

1 locum work tended to be more work where you would go and
2 you were almost extra and that you would be asked to
3 carry out specific tasks or you might be asked to take
4 children to the cinema or you might be asked to oversee
5 something. Whereas once I was at St Katharine's, there
6 was -- it was a wider role and because you were there
7 consistently, you took a bigger role in the actual care
8 of the children and the oversight of what was happening.

9 Q. Just to complete this part, 'Chris', this document, in
10 the opportunities you have pointed out:

11 'The opportunities are there for teamwork [in
12 brackets you put] (different people, different skills
13 equals better practice).'

14 You are recognising that, is that right?

15 A. Yes, that's correct.

16 Q. You have put:

17 'Educational input and activity input.'

18 What did you mean by 'educational input'?

19 A. I think that would refer to any support with the things
20 that were happening educationally, there was
21 an education unit within and there was an expectation
22 that the young people would take part in education.

23 Q. Did that mean you thought that you might get to have
24 some input into the education side of things at
25 St Katharine's?

1 A. No, I think that was very much informal as part of the
2 residential care officer role.

3 Q. Looking then to 'Threats', I think you say:
4 'Expectations placed on myself by others [then you
5 put in brackets] (false).'

6 Do you mean false expectations?

7 A. I think I was possibly holding myself to too high
8 an esteem and I would still, sitting here today with
9 everything that you've seen, the things that I witnessed
10 are things that I wish I hadn't witnessed and hadn't
11 been a part of and I think I possibly took some of that
12 on myself, and I shouldn't -- I would say I perhaps
13 shouldn't have taken that on myself, but the very fact
14 that I was there and, I suppose, ineffectual in being
15 able to stop some of the behaviours that I saw and being
16 unable to, I would say, effectively care for the
17 children in a way without -- and supporting them, so
18 that they weren't therefore then, say, experiencing --
19 you have mentioned restraints already.

20 LADY SMITH: When the word 'expectations' is used there, is
21 it being used in the sense of an expectation, a wish,
22 a hope, that you could have done or you could do
23 something to improve matters where you saw that they
24 needed improved, in your view?

25 A. Yes. I believe I tried to do that and I did that to the

1 best of my ability. However, I continued to do that the
2 whole time I was there and when I left, I believe things
3 were very similar to when I started.

4 LADY SMITH: I suppose a shorthand could be, some would say,
5 well, is that not capturing a naive belief that you
6 would be able to make things better, you yourself?

7 A. Yes. I would agree and that was 25 years ago, before
8 I commenced social work training. So I think I would
9 view it differently now. I would view it very
10 differently, having completed a different form of
11 training, to how I was able to view it then.

12 LADY SMITH: Thank you.

13 Ms Forbes.

14 MS FORBES: My Lady, thank you.

15 'Chris', we'll come back to some of the other
16 documents you provided shortly, but I'll just for moment
17 go back to your statement, if that's okay.

18 We were looking at the point where you were talking
19 about the competency forms and then I think you go on to
20 tell us, at paragraph 12, that if there was ever
21 an incident, or something happened in the unit and
22 an alarm was pulled, it was something that would be
23 registered on the computer system?

24 A. Yes, that's correct.

25 Q. That would normally be for an incident within the

1 Guthrie unit, but it could be for any of the three
2 buildings?

3 A. Yes.

4 Q. So if an alarm was pulled in one of the open buildings,
5 open units, then you could hear that in Guthrie as well?

6 A. Yes, it was an alert on the computer system and the
7 computer -- I don't know why I'm pointing at that, it
8 wasn't this one -- computer was based in the staff
9 office, the small staff office. There were other
10 offices, but there was a small staff office in that
11 area.

12 Q. So that would tell staff where to go, because they would
13 need assistance?

14 A. Yes, it would alert people and I'm saying 'pull', we had
15 an alarm system so if something happened, whether it was
16 perhaps harm to another young person or whether it was
17 something towards a member of staff, we had alarms where
18 you could pull either, you could either pull something
19 or that could be on a tilt, so that if you had fallen
20 over, it would go off to alert people to come to your
21 assistance.

22 Q. Staff in different buildings could respond to such
23 an alarm, so they could come from a different building?

24 A. Yes, staff would come from another building to assist.

25 Q. You tell us, 'Chris', that while you were there, there

1 was a rota and you were on a particular team and there
2 were two or three day teams and then a night staff team?

3 A. Yes, that's correct.

4 Q. But the night staff tended to be the same people,
5 because they were people who wanted to work the
6 nightshift?

7 A. Yes, I suppose also because I was in Guthrie, so you
8 were seeing this -- generally you were seeing the same
9 people come in.

10 Q. The day staff would have earlies or lates, to cover the
11 full day, before the nightshift came in?

12 A. Yes, that's correct.

13 Q. Then you say there was also alternate long and short
14 weekends, so that was again because children are living
15 there, so it has to be covered all the time?

16 A. Yes, yes, that's correct.

17 Q. You tell us a little bit about handovers, 'Chris'. We
18 have that there and you say that, depending on the time
19 of day, the handover may be more thorough than others,
20 depending on the timing of it, and you explain that, is
21 that right?

22 A. That's correct.

23 Q. You say the day staff had a better idea really about
24 what had been going on with the children, and so there
25 was a more thorough handover in the afternoon for the

1 late shift?

2 A. Yes.

3 Q. The evening handover was just a simplified version of

4 the afternoon one, and you explain that during the

5 nightshift, the staff were awake, but there would be

6 an additional residential care officer who would sleep

7 but be available sort of on call, if anything happened?

8 A. Yes, that's correct.

9 Q. You tell us then, over the page, 'Chris', at

10 paragraph 16, that the team you worked on had two males

11 and two females, so there was you and Vicky, who we have

12 spoken about, and there was two males, KEL [REDACTED] and

13 IDJ [REDACTED]?

14 A. Yes, that's correct.

15 Q. In addition to that, would there be anyone above them

16 working in the unit?

17 A. Oh, I'm not sure how to answer that. Generally, in that

18 part of the unit, the four of us would be working as

19 a team. There would also be somebody at

20 KEI [REDACTED]'s level, so that more supervisory level

21 would be in the building and would often be in the unit

22 so ...

23 For my team that would often be either KEI [REDACTED] or,

24 erm, KEH [REDACTED].

25 Q. You mention KEH [REDACTED]; he was somebody who was

1 a supervisor?

2 A. Yes.

3 Q. So he might be there as well in addition to the four of
4 you; is that right?

5 A. Yes, or we'd come in more frequently, say, than other
6 staff. There were other staff who may be in another
7 building who might also come in. People did come and
8 go.

9 Q. What about LUZ ? Would he work a set shift or did
10 it vary?

11 A. If I'm recalling properly, LUZ worked more
12 a standard 9.00 till 5.00.

13 Q. When you were on shift, would you see him often out and
14 about?

15 A. Periodically.

16 Q. Did he have a particular office within the building that
17 he used?

18 A. Yes, sorry. Yes, he had his own office.

19 Q. You say 'periodically'; would that be daily when you
20 were on shift you would see him, if you were on a day
21 shift, or did it depend?

22 A. No, I would say it wasn't that regular. You could
23 certainly go and see him and young people could ask to
24 go and see him, if they wanted to.

25 Q. In terms of being out and mixing with staff and the

1 young people, was that something that you saw him doing
2 regularly?

3 A. He wasn't consistently in Guthrie unit. There was
4 a certain young person, when I started there, that he
5 often -- he would often take that child to -- young
6 person, sorry, to his office. Other than that --
7 sometimes he would take young people to his office.

8 Q. You tell us about the numbers of residents at the time
9 you were there in St Katharine's in the unit. You say
10 there was about six to eight residents, mixture of boys
11 and girls, and the ages were between 13 and 16, is that
12 right?

13 A. That's correct.

14 Q. They were there for a variety of reasons, but they were
15 there and it was a secure unit so there had to be
16 a secure order?

17 A. Yes, there needed to be a secure order.

18 Q. You were under the impression that was from the
19 children's hearing?

20 A. Yes, the young person had to present a risk of serious
21 harm to themselves or others.

22 Q. You describe, 'Chris', during this time that the
23 children or young people had individual rooms, which
24 could be locked. These were en suite, although the
25 bathroom area within the room could also be locked?

1 A. That's correct.

2 Q. When you say it could be locked, do you mean from the
3 inside or was this from somewhere central?

4 A. I don't recall it being central. Staff could lock that
5 door though.

6 Q. Staff could lock the door?

7 A. Yes, to prevent the young person from going into the
8 bathroom.

9 Q. Did that happen?

10 A. Yes.

11 Q. What reasons would that happen for?

12 A. Erm, it could be that the young person had threatened to
13 harm themselves, or it could be that the young person
14 had threatened, say, to flood the room. It may happen
15 that -- there was a toilet and a sink and sometimes we
16 did have a flood, which then would cause -- so that
17 could happen. It could just be because somebody felt
18 that that's what they wanted to do.

19 Q. So that was a sort of safety feature, if you like, to
20 perhaps prevent damage or prevent harm?

21 A. Yes.

22 Q. You tell us, 'Chris', that if you were on early duties,
23 part of your role would be getting the children up and
24 making sure they got ready and came for breakfast. You
25 tell us that would be about 8 o'clock, possibly later at

1 then weekends.

2 Then you go on to describe that within the secure

3 unit, you could only open one door at a time, so I think

4 you describe it if one door was open in the main

5 corridor, you can't open the door at the other end?

6 A. Yes, that's correct.

7 Q. So you are describing a system whereby you open one door

8 and it's closed and locked behind you before you can

9 then open another door?

10 A. Yes, that's correct.

11 Q. Is that, again, because of the secure nature of the

12 unit?

13 A. Yes.

14 Q. So it's been sort of described like a prison for young

15 people?

16 A. Yes, certainly -- well, it is a secure unit so, yes,

17 that's probably a relevant description.

18 Q. You give us a little bit more description and we have

19 that there in paragraphs 20 and 21 about the layout.

20 You say that there was a main area where there were some

21 solid fixed benches where you sat at meal times. Was

22 this like a dining hall?

23 A. It was a -- not really. If it was in here then there

24 would be some fixed tables and chairs over there and

25 then three on this side -- it was a partition wall,

1 which had glass so that the staff could see in, which
2 then had a TV and sofas and I actually forgot --
3 remembered when I re-read this, that there was also
4 another supply room that was rarely used off that area,
5 so it was one large area with different areas within it.
6 Q. That was where residents had meals?
7 A. So, yes, that was where residents had meals.
8 Q. I think you say there was access to the kitchen behind
9 that, there was a TV room off that main area and there
10 were sofas in there and that room was never locked.
11 That was in the TV room area, was it?
12 A. Yes.
13 Q. Generally speaking, you say you are describing two
14 communal areas, one with the benches and one with the TV
15 and the sofas?
16 A. Yes, yes.
17 Q. You tell us, 'Chris', that in your opinion the food was
18 actually all right, you say it was good?
19 A. It was. We didn't have any -- I think they struggled to
20 keep permanent staff and we had different locum cooks or
21 chefs.
22 Q. You tell us that the children might not want to be there
23 for breakfast, but they would be and you say there
24 wasn't really an option?
25 A. Yes, that's correct.

1 Q. So was that a requirement, that they had to be there for
2 breakfast?

3 A. Yes, that's correct.

4 Q. You tell us about what would happen if they didn't come
5 willingly in the next paragraph. You mention staff
6 doing something to the children's rooms. What was that?

7 A. If the young person wouldn't get up, it was very common
8 practice for members of staff to take their duvet off
9 them, to take the sheets off them. If the child
10 remained on the bed and continued to refuse to come,
11 they would take the mattress out of the room.

12 If that continued, it's possible that everything
13 would be taken out of that room and perhaps that the
14 toilet door may be locked.

15 Q. That's for not going to breakfast?

16 A. Yes, or not getting up.

17 Q. Was it a similar situation at other meal times or was
18 breakfast different?

19 A. Whilst children had their own rooms, primarily they
20 didn't go in and out of these rooms of their own. These
21 rooms were through a locked door. So primarily children
22 were within that area and -- I hadn't thought of this,
23 if you had refused to sit at the table or something
24 happened, then at dinner time, that may have led to
25 a restraint or it may lead to you being placed in your

1 room and items being taken out of your room.

2 Q. So you are describing a situation where you can't stay
3 in your room in the morning when it's time to get up; is
4 that right?

5 A. Yes.

6 Q. But if you don't comply at some point during the day,
7 you might be taken back to the room and locked in?

8 A. Yes, you may.

9 Q. From what you're saying, 'Chris', it was expected that
10 children, once they were up and out of the room, that
11 they would be in other parts of the unit. They wouldn't
12 be in their room?

13 A. Yes, that's correct.

14 Q. I think you go on to tell us in the next page, 'Chris',
15 at paragraph 24, that you primarily worked with the two
16 males that you have mentioned, KEL [REDACTED] and
17 IDJ [REDACTED], and you say that they would occasionally
18 take duvets or a mattress off the children's beds in the
19 mornings to tell them to get up and get ready, so they
20 did that?

21 A. Yes.

22 Q. You say an official reason for doing that may be because
23 someone was behaving in a way that somebody didn't like
24 and it was being done as a punishment, so that was one
25 of the things that could happen as a punishment?

1 A. Yes.

2 Q. You say, on occasion, it may have been a safety
3 precaution if someone had been threatening suicide. You
4 say on that occasion, everything was removed to prevent
5 them from harming themselves?

6 A. Yes, everything would be removed.

7 Q. You comment about that, you say in your opinion it was
8 just sheer bloody mindedness by the male staff?

9 A. Yes, and I read that and slightly regretted saying that,
10 but, erm, yes. I think what I mean by that is that that
11 was to do with power and control by those people.

12 Q. Is it fair to say it was a practice that you didn't
13 like?

14 A. No, I did not like that practice.

15 Q. I think you go on to tell us that even if it was for
16 reasons for safety to do with threatening suicide, you
17 didn't think that was acceptable?

18 A. No. No, there are other ways to de-escalate a situation
19 or perhaps stay with that young person rather than
20 taking everything away and leaving the young person
21 locked on their own in a room.

22 Q. But separate from that, if it was just being done to get
23 them up in the morning, that was something that you very
24 much didn't approve of?

25 A. Aye, that's correct.

1 Q. You describe the culture, 'Chris', in paragraph 27 and
2 how did you see the culture at the Guthrie unit?

3 A. I think it was very macho, it was very male oriented.
4 It was very much about people being in control and
5 having control. It felt more about the staff and their
6 needs and what they wanted rather than the needs of the
7 children and what the children needed and my view is
8 that we were there for the children's needs, not to meet
9 our own needs.

10 Q. You make a comment that women weren't really thought
11 that highly of within the unit?

12 A. Yes.

13 Q. Why do you say that?

14 A. I think if there was a situation where there was
15 a restraint, women may be told to step back and not be
16 involved if there was -- the men felt that they knew
17 best and that they knew how things should be carried out
18 and what things should be happening and shouldn't be
19 happening and would often tell you what you needed to
20 do. So it didn't feel very equal in that. It didn't
21 feel like ...

22 Q. I think we'll see, when we go back to look at the notes
23 shortly that you have provided us with, that this is
24 something that's mentioned in the documents that you
25 have, is that right? The fact that women would be used

1 for other things in the unit and sent away and men were
2 the ones who would be involved in things like restraint?

3 A. Yes, that would be correct.

4 Q. I think you go on to say in one of the documents that
5 women would be used for taking the residents out and for
6 activities, but men would be told to stay back in the
7 unit, just in case someone was going to kick off?

8 A. Yes. I forgot that's in there. But, yes, that
9 absolutely happened. That was actually -- that was the
10 usual -- I would say that was the usual practice.

11 Q. Even if there was a full complement of staff, if they
12 felt there wasn't enough men in that complement, I think
13 you say in one of the documents that they would get
14 extra male staff in to make sure they had enough men to
15 carry out restraints?

16 A. Yes, that's correct.

17 Q. We might come back to that just shortly, 'Chris', but
18 I think you go on in your statement to tell us about the
19 chores that the children had and you say that really
20 involved hoovering and tidying their rooms. They had
21 education during the week and that was within the
22 education wing with separate teaching staff.

23 You say that meant education was in theory
24 available, but I think you had a view about the standard
25 of education that was provided. What was that?

1 A. I think, having come from that background, I was
2 surprised at the very kind of limited nature of the
3 education. I was surprised the views that residential
4 care officers had about that, about whether -- whether
5 it was something that was valuable to children. It's
6 something I've always thought is valuable to children.
7 It was also something which could -- yes, it
8 certainly wasn't what I would have expected to find in
9 that type of unit.

10 Q. Was it in essence quite basic?

11 A. Yes.

12 Q. Did it really only cover the basic subjects, like
13 English and maths, at quite a low level?

14 A. I'm aware there's a few reasons for that in that some of
15 the young people wouldn't necessarily have had a lot of
16 education. I wasn't convinced that it particularly
17 targeted the young people or was person centred or kind
18 of met them where they were, so, it was often, yes,
19 quite basic.

20 Q. Did you see, whilst you were there, any residents go out
21 to school from the secure unit?

22 A. No, I did not.

23 Q. Were you aware of any qualifications being offered, any
24 formal qualifications?

25 A. No, I was not.

1 Q. You go on to tell us, 'Chris', there was a central
2 outdoor open area at the education wing, where people
3 could go to smoke. You say that children were allowed
4 to have cigarettes and to smoke. I take it you mean
5 under 16?

6 A. Yes.

7 Q. There would be smoking breaks for children in that area
8 of the unit?

9 A. Yes. So I know I describe the building, but the way the
10 building is built, there's an internal area of the
11 building that could be accessed, so from Guthrie, or
12 from education or from -- because it was secure so, yes,
13 children -- young people would be taken there to smoke
14 so ...

15 Q. A sort of internal courtyard?

16 A. Yes.

17 Q. You say that children did have some leisure time, but
18 essentially their day was breakfast, education, back to
19 the unit for lunch, then back to education in the
20 afternoon, then a little bit of downtime and they had
21 their cigarette breaks, if they smoked?

22 A. Yes.

23 Q. Going forward to paragraph 31, you say after education
24 in the evening, they could watch TV, rent DVDs or videos
25 and there was also a gym. There could be family visits

1 and different things happening. You talk about clothes
2 shopping and different things like that, is that right?
3 A. Yes, that's correct.
4 Q. You talk about every child is supposed to have a care
5 plan, which was child specific?
6 A. Yes.
7 Q. I think we'll come to it a little bit later, but I think
8 you do say that before an inspection, whilst you were
9 there, there was an issue about whether or not each
10 child had a care plan, is that right?
11 A. Yes, that's correct.
12 Q. We'll come to see that not all of them did; is that
13 correct?
14 A. That's correct.
15 Q. You tell us that the children had an allowance, some
16 pocket money, and you make the point that some of the
17 young people you thought saw it as an entitlement and
18 some of the staff perhaps thought it wasn't deserved.
19 So was this used then, this pocket money, as
20 a punishment at times?
21 A. Yes, it could be used as a punishment if there was
22 a feeling that somebody had not behaved in the way they
23 should have done that week, or if something specific had
24 happened, the young person would then be told that they
25 were not getting that money. So whilst it's their

1 money, legally it was their money, they would be told
2 that they weren't getting it or they would be told that
3 they weren't -- they wouldn't be allowed to go out and
4 spend it or they wouldn't be allowed to get, say,
5 a member of staff to spend it for them.

6 So it was used as a punishment and sometimes as
7 an instigator for a restraint or physical altercation.

8 Q. 'Chris', I think you say at paragraph 34, that could
9 then be used by the staff member to provoke a toy fight
10 incident and tell them they weren't getting their pocket
11 money?

12 A. Yes.

13 Q. Is that something you saw?

14 A. Yes, I saw that on more than once -- on frequent
15 occasions, I saw that.

16 Q. The decision would be taken that the child wasn't
17 getting the pocket money, they would be told about that,
18 and then you say that would then provoke something from
19 the child or from the young person?

20 A. Yes, due to the way that it was raised by the member of
21 staff.

22 Q. You describe it as a 'toy fight', is that what it was?

23 A. That's what it was called. That's what certainly these
24 things are called and, well, some people may believe
25 that that's an appropriate way to work with children.

1 It's not something I had ever seen as a teacher and it's
2 not something I've seen since I worked there. I don't
3 see it as appropriate and I think some of it -- in my
4 opinion, some of it would meet the criteria for
5 an assault. It's violence, it was primarily violence
6 that I witnessed.

7 Q. You are using the term 'toy fight', but you don't see it
8 as that in this context that you're describing?

9 A. No, it was causing physical harm, is what I would say.
10 When I talked about abuse, I think sometimes people
11 think abuse is purely sexual, I would say the abuse that
12 I saw, I would class that as physical abuse of young
13 people.

14 LADY SMITH: Ms Forbes, it's just after 3.00 pm.

15 'Chris', I usually take a short break at this point
16 in the afternoon, would that work for you if we did that
17 just now?

18 A. Yes, thank you.

19 LADY SMITH: Let's do that.

20 (3.02 pm)

21 (A short break)

22 (3.12 pm)

23 MS FORBES: 'Chris', before we broke there for the break, we
24 were talking about pocket money being used as
25 a punishment and you were saying that that could be used

1 by a staff member to provoke a toy fight.

2 You have explained that you didn't see them as toy
3 fights, and we'll come on a little bit later to see you
4 have certain views about the issue of toy fighting, but
5 what was it that you saw happen? How would it develop
6 from the pocket money being refused or withheld to some
7 kind of physical altercation?

8 A. You would see somebody saying to a young person, maybe
9 holding up the envelope that the pocket money had been
10 put in by business support people, to say, 'Oh, you're
11 not getting this today. You're not getting out'.

12 Making a joke of it and making fun of the young
13 person for not getting it. Then that -- then the member
14 of staff often perhaps pushing the young person or
15 poking the young person until such time as there was
16 a reaction from that, from the young person, and then
17 the member of staff's reaction would increase.

18 Q. You say 'reaction', was this physical reaction?

19 A. Yes.

20 Q. So there was physical --

21 A. So I'm saying pushing or kinda poking somebody in the
22 arm or pushing them around the head.

23 Q. Then what would the young person do?

24 A. They would respond to that. Sometimes they might try to
25 take the envelope from the person's hand. The person

1 would then hold it out of reach. That would then lead
2 to a further physical altercation, which could
3 subsequently end up becoming more out of control.

4 And as that continued, then other members of staff
5 would come and you could often end up with a restraint
6 where you would have, say, four adult men, perhaps more.
7 The young person would struggle because they were --
8 I would say, because they were afraid, and it was never
9 an easy situation, and that could lead to physical harm
10 of the young person, carpet burns were very frequent and
11 a horrible thing to see, if you see somebody's face
12 where it's -- where the whole of their face -- it wasn't
13 unusual to come in to see a different carpet burn on
14 somebody's face or their arm.

15 Q. You say it could lead to a restraint and that could
16 involve multiple members of staff. What type of
17 restraint did you see?

18 A. Primarily -- so at the time I wasn't -- at the time what
19 should have been followed was what they call CALM,
20 sorry, I can't remember what that does stand for, it
21 does stand for something, erm, which is a methodology
22 when it comes to restraint within -- there's lots of
23 different types. Maybe standing next to somebody to
24 help support them, maybe sitting down, maybe holding the
25 person as you sit down.

1 The last port of call in that training -- Secondary Instit
2 Secondary Institutions - to be published later
3 Secondary Institutions - to be published later -- the last
4 thing that should happen is what they call a prone
5 restraint, on the floor, with the person's face on the
6 carpet.

7 Q. That's the last thing that should happen?

8 A. That should have been the last position. However, in
9 St Katharine's, in my experience, I would say at least
10 90 per cent of the time that was the first port of call,
11 not the last port of call.

12 Q. So subsequently you were trained in CALM, but at this
13 time that we're talking about, you hadn't had that
14 training?

15 A. No.

16 Q. Your understanding of it, having been trained, is that
17 restraint is to be used as a last resort, is that right?

18 A. Yes.

19 Q. Then there are various different types of restraint that
20 can be used and from what you're describing, 'Chris',
21 the prone, face-down restraint was the very last resort
22 to go to?

23 A. Yes, that should have been a last resort. I would say
24 I rarely saw that used in the five years I worked in
25 residential childcare after St Katharine's -- four or

1 five, I'm not -- years I worked.

2 LADY SMITH: Are you saying you rarely saw restraint in that

3 period, in the four- or five-year period.

4 A. No, I did see restraints being used, but they were

5 different. There is a restraint where you can hold

6 someone -- a person like this (indicating) to make sure

7 that they're secure. There's a restraint where you

8 can --

9 MS FORBES: I think you are indicating, 'Chris', holding

10 them with your arm round --

11 A. So there's a holding with your arm round, there might be

12 a holding, say, in a seated position, on a sofa.

13 There's a holding in a seated position on the floor.

14 But an actual face-down prone restraint was the

15 difference and that type of restraint carries

16 an increased risk. It can lead to positional

17 asphyxiation. Physical harm is more likely to the

18 person and to the staff.

19 Q. So just to be clear, 'Chris', you are saying that that

20 was the type of restraint that you saw being used most

21 often at St Katharine's when you were there?

22 A. Yes.

23 Q. You say that that was being used as the first resort

24 instead of any of the lesser restraint techniques?

25 A. Yes.

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11 Q. Something like pocket money being withheld as
12 a punishment, you say, could lead to that and did lead
13 to that on occasions?

14 A. Yes, I think that was seen as an opportunity, perhaps,
15 by some people to instigate that type of -- to instigate
16 the type of situation where that would then become
17 almost inevitable.

18 Q. You say 'opportunity', 'Chris'; from what you saw, was
19 the impression you got that some staff members wanted
20 restraints to happen?

21 A. I -- yes. I think perhaps it was seen as a form of
22 entertainment. It was often joked about by members of
23 staff. You would hear people, when you came in,
24 saying -- or if you had been to the shop, saying things
25 like, 'Oh, you missed a really good restraint'.

1 Now -- yeah, how can there be that? So it would be
2 discussed with a kind of zest by people.

3 Q. We might come to this again in your documents again
4 shortly, Chris, this question of restraint, but you go
5 on to tell us that there were social workers allocated
6 from outwith the unit to each child, erm, but you say
7 you can't remember how often they would be involved and
8 there was also a children's rights officer who would
9 come to visit the unit on occasion, a child could see
10 them, or ask to see them, is that right?

11 A. That's correct.

12 Q. Somebody couldn't just turn up to visit. They'd have to
13 be arranged and social work managed that?

14 A. Erm, yes. You couldn't just turn up to visit. When
15 I said that social work managed that, there would have
16 been at some point a discussion. There would be
17 an arrangement theoretically in a care plan that certain
18 people were or were not permitted to visit, although
19 even though that could be -- that may have been decided
20 that somebody was permitted to visit, if the residential
21 care staff decided that they didn't want that visit to
22 go ahead, then that visit wouldn't go ahead.

23 Q. I think you tell us at paragraph 36 residential staff
24 always had the final word, so they could say no?

25 A. Yes.

1 Q. Do you mean they could say no to a social worker
2 visiting the child from outwith the unit?
3 A. Yes, they could have said no to that.
4 Q. And why would they do that?
5 A. I'm afraid I can't come up with a good reason for them
6 doing that.
7 Q. You were aware of that happening?
8 A. Yes.
9 Q. You do then go on to say, this is at the next page,
10 'Chris', that SNR [REDACTED] wasn't keen from anybody
11 from outwith the centre involved in anything inside the
12 unit. When you say SNR [REDACTED], who do you mean by
13 that?
14 A. LUZ [REDACTED] and, er -- primarily LUZ [REDACTED], but I would
15 say that was also fed through the kind of SNR [REDACTED]
16 SNR [REDACTED], so the people who were like directly
17 supervising residential care officers.
18 Q. How did you become aware of that fact?
19 A. Residential care officers talked about that. However,
20 when I -- prior to raising any concerns with LUZ [REDACTED]
21 about what I was experiencing there, I raised them with
22 KEI [REDACTED] and I raised them with other managers,
23 who very much said to keep my own counsel and not raise
24 them and to ignore what I was concerned about.
25 Erm, sorry, I've lost my -- could you ask me that

1 again?

2 Q. I think I was asking you -- you were telling us that

3 SNR , LUZ you mentioned, wasn't keen on

4 anyone from outwith the unit being involved in anything

5 inside the unit and I was asking how did you become

6 aware of that?

7 A. So there was the general conversation. LUZ also

8 told me that himself when I did raise some concerns with

9 him. I had a meeting with him on one occasion with

10 Carol Mentiplay. After that meeting, he then asked to

11 speak to me and told me how displeased he was that I had

12 invited Carol to that meeting and that I was talking to

13 her and that he felt everything should be kept within

14 the unit, which at the time was quite difficult, from my

15 perspective, because I had competencies to complete,

16 which required that engagement with Carol.

17 Q. I think we'll come to see that there was a meeting that

18 you had with LUZ where you brought

19 Carol Mentiplay along, because you discussed some of the

20 issues and concerns you had with her. You brought her

21 along to the meeting with LUZ and are you saying

22 there was a meeting after that that you had with LUZ on

23 your own, when he said he wasn't happy about you doing

24 that?

25 A. Yes, that's correct.

1 Q. Did he give a reason why he didn't want Carol Mentiplay
2 involved?

3 A. He said he didn't want external people involved, it
4 should only be people within the unit.

5 Q. Did he give a reason for that?

6 A. No, other than saying that that's what he wanted.

7 Q. Just before we look at how you came to be involved in
8 that meeting, you go on in your statement, 'Chris',
9 first to tell us that you had concern about children
10 smoking and being given cigarettes. That was, you say,
11 a gift and potentially a grooming tool, and you're
12 talking there about full packets of cigarettes --

13 A. Yes.

14 Q. -- that would be given to children. Is that by members
15 of staff?

16 A. Yes, that was by members of staff.

17 Q. So that's a concern that you had at the time?

18 A. Yes, that was a concern that I had.

19 Q. I think you have already mentioned this in your
20 evidence, 'Chris', you talked about one child, you say,
21 or one young person who used to go to LUZ [REDACTED]'s room
22 frequently when you first started. You mention at
23 paragraph 39 of your statement. You name this boy and
24 you say that this boy was then called 'LUZ [REDACTED]'s
25 golden child'?

1 A. Yes, that's correct.

2 Q. Who called the child 'LUZ [REDACTED]'s golden child'?

3 A. The residential care officers that were on my team and
4 other residential care officers who came in and out of
5 the -- out of our kind of remit.

6 Q. You tell us that he would go to LUZ [REDACTED]'s office.
7 LUZ [REDACTED] would take him out of the centre as well. So
8 out of the unit?

9 A. Yes.

10 Q. Do you know where they went?

11 A. No.

12 Q. He would also give him cigarettes?

13 A. Yes.

14 Q. Was this something you saw happening yourself or is this
15 something you heard about?

16 A. No, I saw that. That was happening when I was first
17 there. That young person was there, so I was aware of
18 that happening when I was there.

19 Q. You say you weren't aware of anything untoward in
20 relation to that, but you felt that that was
21 inappropriate?

22 A. Yes. I felt it was inappropriate as part of the
23 recruitment centre -- actually, as part of the
24 recruitment centre, one of the tasks there was a video
25 where they presented something to you and said what

1 would you do in this situation and what were the
2 concerns. That was the type of thing. What would you
3 do if some you saw someone randomly out with a child and
4 that was that you would question that, because you would
5 perhaps wonder why. There may be a reason. They could
6 be taking them clothes shopping and that's okay, but ...

7 LADY SMITH: Was that in the context of being taught about
8 appropriate boundaries?

9 A. I think through -- the recruitment centre, it was about
10 them more assessing what your boundaries were, to
11 identify people who were best suited for the job, and my
12 understanding would be that, yeah, it's not appropriate
13 to do those things and that it wouldn't be -- I would
14 not have taken a child out just because I wanted to or
15 purchased cigarettes for them from my own money.

16 MS FORBES: I think you go on to tell us, 'Chris', that
17 other staff, who you name, talked about LUZ
18 taking children to his own house. That's something you
19 never saw, but it was spoken about within the team?

20 A. Yes, that was spoken about within the team but you are
21 correct, I did not see that myself and there wasn't
22 a young person there who told me that.

23 Q. But you say that the training that you received, you say
24 that you know from that, it's not a good idea. Was that
25 something that was specifically mentioned in the

1 training?

2 A. I think it was again part of the exercises and part of

3 the role plays that were about looking at your

4 suitability for the role.

5 Q. But in doing that, in this role play exercise, was there

6 any feedback given about what the right or wrong

7 approach was?

8 A. Yes, there was feedback given.

9 Q. Was your understanding that that wasn't something that

10 was supported?

11 A. Yes, it would be my understanding and it's not -- it

12 would be equally -- I worked as a teacher previously.

13 As a teacher I wouldn't be taking young people home.

14 Q. I think you say that you raised concerns with

15 LUZ [REDACTED], prior to submitting anything formal, because

16 we'll go on just shortly to see that there was a process

17 you ended up going through in relation to concerns that

18 you had, but I think what you say at paragraph 41 is

19 a summary of a conversation you had with LUZ [REDACTED].

20 Was this the one that you had on your own with him,

21 after a meeting with Carol Mentiplay?

22 A. I'm going to have say, looking at this, I'm not sure if

23 Carol Mentiplay was in that meeting or not.

24 Q. Certainly you were there, LUZ [REDACTED] was there?

25 A. Yes.

1 Q. You say that you raised some concerns with him in that
2 meeting. What you tell us is that he very much said he
3 thought anything within the context of the relationship
4 was appropriate, even sexual behaviour. He was talking
5 about sexual attraction being okay between a child and
6 a member of staff?

7 A. Yes, that's correct.

8 Q. So you recall him saying that, do you?

9 A. Yes, I do.

10 Q. Was there any context given to these comments by him?

11 A. I think it was part of the concerns that I was raising,
12 about the things you have already talked about, whether
13 it be cigarettes or toy fighting. I didn't see any
14 policies that suggested that that was something that was
15 appropriate. However, it was something that LUZ said
16 to me.

17 Q. This is sexual attraction between a child and a member
18 of staff.

19 A. Yes.

20 Q. So he's not saying between a member of staff and
21 a child. He's saying between a child and a member of
22 staff or is that --

23 A. Sorry, no, that should read between.

24 Q. Between either?

25 A. Between a member of staff and the child, so a member of

1 staff having sexual feelings towards a child.

2 Q. You've mentioned even sexual behaviour there?

3 A. Yes.

4 Q. Were you quite shocked by that?

5 A. I was quite shocked by that and I am still quite shocked

6 by that.

7 Q. What did you say when he told you that?

8 A. I would have said that I didn't agree with that.

9 Q. Can you remember saying something to him?

10 A. I don't remember the specific words that I said, but

11 I do recall saying that that wasn't my understanding and

12 that's not -- to me that isn't something that's

13 appropriate.

14 Q. You tell us about the occasion when you went to see him

15 with Carol Mentiplay and you say he wasn't interested in

16 what you had to say. This was about concerns about

17 staff massaging children. I think you tell us at

18 paragraph 42 there was a time when staff were engaging

19 in massage with children's shoulders?

20 A. Yes. It was very common for a few months.

21 Q. Sorry, I missed that last part?

22 A. Sorry. It was very common that staff were doing that

23 for a period of a few months.

24 Q. There was a period of time whilst you were there when

25 that was going on?

1 A. Yes.

2 Q. You say sometimes it was at the request of the child,
3 but sometimes it was without even asking their
4 permission?

5 A. Yes, that's correct.

6 Q. I think you have provided us with notes and we will look
7 at them briefly shortly in relation to that. These are
8 notes you made at the time, is that right, about the
9 concerns you had about children being massaged?

10 A. Yes.

11 Q. It's fair to say that you thought that that was
12 completely inappropriate; is that right?

13 A. That's correct.

14 Q. That you weren't trained to carry out massage for one?

15 A. Yes.

16 Q. But that, I think we'll see from the notes that you
17 took, that you were of the view that the boundaries
18 between staff and a young person meant that that wasn't
19 behaviour that was appropriate?

20 A. Yes, it wasn't.

21 Q. It wasn't something that you would be comfortable doing?

22 A. No, it wasn't something that I did.

23 Q. You name two individuals at paragraph 43 who you say
24 both massaged children without being asked, you say that
25 was KEL [REDACTED] and KEH [REDACTED]?

1 A. That's correct.

2 Q. You say that apart from this issue about massage being
3 raised with LUZ, did you also raise it at
4 meetings as well?

5 A. Yes, I raised that, er, because I was new and because
6 I was fulfilling the competencies, one of them was to
7 bring things up at team meetings. Erm, so I did raise
8 this at a team meeting.

9 Q. Were you told, when you did that, that there would be
10 consequences for you?

11 A. Yes. I was told on a number of occasions when I worked
12 there that there would be consequences, either that
13 I would never work in social work or that I wasn't good
14 enough to be a social worker.

15 Q. So you are raising concerns with other members of staff,
16 but they're not being taken on board?

17 A. No, they were not.

18 Q. Indeed, they're saying if you raised concerns like that,
19 then you're not going to have a future in the career
20 that you've chosen?

21 A. That's correct.

22 Q. I think you go on to tell us that LUZ spoke to
23 you, you mention this, that he wasn't happy about you
24 bringing Carol Mentiplay to a meeting, because she was
25 somebody who was outwith the unit.

1 You say that you wrote up these concerns, and we
2 have the documents.

3 You go on to tell us that LUZ wrote up
4 a report on your competencies and that's something you
5 have given us too. In it, he described you as being
6 concrete?

7 A. Yes.

8 Q. You explain that you took from that he meant you
9 followed the procedures that were in place?

10 A. Yes, that's correct.

11 Q. You tell us that the way you put it is:

12 'I followed the procedures that were in place and
13 not wanting to physically abuse children, but that is
14 what I witnessed in that unit. Children were being
15 physically and emotionally abused and not treated with
16 dignity or respect. In my opinion, that unit wasn't
17 a safe place for a child to be.'

18 A. Yes, that's correct.

19 Q. Is that how you saw it at the time?

20 A. Yes.

21 Q. Is that how you still see it?

22 A. That's still how I see it.

23 Q. I think you go on to say that LUZ stated that you
24 sometimes had a critical approach to colleagues'
25 practice and that you had taken some non-contextualised

1 concerns beyond the individual with who they are located
2 and beyond established line management channels.

3 I think he's referencing the fact you were raising
4 concerns about other colleagues' practices?

5 A. Yes, he would be.

6 Q. He saw that as a negative thing?

7 A. Yes.

8 Q. And that you then had gone and spoken to Carol Mentiplay
9 about it, who was your assessor?

10 A. Yes, that's correct.

11 Q. And then he saw that as you going beyond the line
12 management route, the proper line management channel?

13 A. Yes, that's correct.

14 Q. At paragraph 49, you say that he goes on to say that you
15 repeated your approach, '... despite being appraised of
16 appropriate ways to raise practice issues'.

17 Is this him telling you that you really should be
18 bringing these matters to the members of staff involved
19 or KEI [REDACTED], your supervisor?

20 A. Or -- primarily not raising these concerns and ignoring
21 them, as I was told on a variety of occasions by people
22 that they weren't concerns.

23 Q. I think you mention that there were complaint forms for
24 young people to use but they weren't readily available
25 and staff seemed hesitant to hand them out?

1 A. Yes, that's correct.

2 Q. You mention this children's rights officer, but you say
3 that children wouldn't report things?

4 A. That's correct.

5 Q. What was your impression as to why that was?

6 A. When I first started, I -- and I still think the idea of
7 a children's rights officer was a great thing, because
8 somebody was coming in from outside and it gave the
9 young people an opportunity.

10 However, it quite quickly transpired that because --
11 to address these, the children's rights officer then had
12 to speak to the staff and then the staff then minimised
13 these complaints, to say they weren't complaints. They
14 were toy fighting or it was a -- I want to use the word
15 'justified', that's maybe the wrong word, it was due to
16 a justified CALM restraint.

17 Q. You tell us in some of the documents we have that things
18 would be explained away?

19 A. Yes.

20 Q. And residents who raised an issue would be talked round
21 as to what had actually happened?

22 A. Yes. They would be given an alternative version of
23 events to believe and potentially the things that you
24 have mentioned earlier could occur until such time as
25 they believed that alternative version of events. So

1 somebody being locked in a room with nothing in it.

2 Q. You go on to tell us about disciplining and you say that

3 if there was a situation where a young person genuinely

4 misbehaved and it was a minor nature, then the first

5 course of action would be to verbally address it, but if

6 it was more serious then pocket money could be taken

7 away or things might be taken out of their rooms?

8 A. Yes.

9 Q. Things like outings to the cinema might be withdrawn?

10 A. They could, yes.

11 Q. But you say that, depending on the nature of what the

12 young person had done, it could always lead to

13 a physical restraint?

14 A. Yes, that's correct.

15 Q. In relation to recording restraints, you say that you

16 think they were supposed to be recorded and certainly

17 physical assaults on staff were meant to be recorded,

18 but you mention that sometimes they were ripped up,

19 those records were ripped up?

20 A. Yes, that's correct.

21 Q. Did you see that happen?

22 A. I did, yes. Reports -- it was a form and you wrote on

23 the form and it produced, say, four other forms, in

24 those days, it's a long time ago, and SNR [REDACTED], who

25 was KEH [REDACTED], didn't like what I had written so he

1 ripped the form up and threw it in the bin.

2 Q. What was the write-up about? Was it about a physical

3 assault on you by a resident or something else?

4 A. There were a few physical assaults on myself by

5 residents. I wouldn't like to swear to it 100 per cent,

6 but I think that's what it was about.

7 Q. You say KEH was the person that did this. Was

8 this on one occasion or more than one occasion?

9 A. I would say that happened more than once.

10 Q. Just him or was there anyone else that you saw doing

11 that?

12 A. I think primarily that was him. Documents could also

13 disappear.

14 Q. You say 'disappear', so a document that you'd filled in

15 about something and knew existed would not be there then

16 when you went to find it?

17 A. Yes.

18 Q. Did you know what had happened to it?

19 A. No.

20 Q. Did you have any suspicion about what had happened to

21 it?

22 A. I don't know who disappeared them, but they did

23 disappear and nobody took any responsibility for that.

24 Q. I think you say that sometimes things weren't recorded

25 at all?

1 A. Yes, that's correct.

2 Q. You go on to tell us about some running away and you
3 tell us about that at paragraph 54 and in particular
4 about one boy. Obviously it was a secure unit, but
5 there were times when a child could be outwith the unit
6 visiting family and abscond. Or you could be out with
7 them, for example, to spend their pocket money and you
8 go on to tell us about that.

9 But within the unit, it was secure, like a prison,
10 so it was very rare to abscond from the actual unit?

11 A. It was very rare to be able to abscond. There was only
12 that one occasion where somebody did manage to do that.

13 Q. You say that the punishment for that, at paragraph 56,
14 was usually they were put in their room for an extended
15 period of time on their return to the unit?

16 A. Yes.

17 Q. You say extended period of time, how long are you
18 talking about?

19 A. I think that would depend, anything from about two days
20 to a week.

21 Q. So it could be as long as a week?

22 A. Yes.

23 Q. Would that mean they were confined to their room?

24 A. Yes.

25 Q. Would they have meals in there?

1 A. Yes, food would be taken to them.

2 Q. What about education?

3 A. No, not necessarily, no.

4 Q. What about TV?

5 A. Mm. No, there was no TVs in the room.

6 Q. So they wouldn't be let out at any point to go to the TV

7 room?

8 A. No, not necessarily. I mean, it may be that initially

9 there was nothing, it maybe after, say, three days that

10 you would then maybe be allowed to partially reintegrate

11 with other people.

12 Q. What if they smoked? Would they get smoke breaks?

13 A. Sometimes. It would depend on the staff.

14 Q. But that would have to be outside in the courtyard?

15 A. It would be individual, yes.

16 Q. So you weren't allowed to smoke in the room or anything?

17 A. No.

18 Q. You tell us in relation to bed wetting, 'Chris', the way

19 you put it is:

20 'Bed wetting was dealt with unkindly.'

21 You say that the toilets were available in rooms,

22 but you say some of the night staff weren't particularly

23 nice people and there was occasions when you went in to

24 a room in the morning and there were no sheets and this

25 child was sleeping on the floor with no bedding in the

1 room?

2 A. Yes, and that would be why. The people themselves were
3 personable enough, but I think leaving a child without
4 any bedding for that reason, erm, and sleeping on
5 a concrete floor is inappropriate. It's abusive -- to
6 me that is something that's abusive.

7 Q. So did that mean that there was still a mattress in
8 there or had that been removed?

9 A. The mattress may well have been removed. You would
10 often come in to find people's belongings in the
11 corridor, because all the rooms went -- the bedrooms
12 went off one of the two corridors. There was also
13 a cupboard outside the rooms, so sometimes people's
14 belongings would have been put into that cupboard, but
15 often the bedding was outwith the room.

16 Q. You tell us a little bit, 'Chris', about inspections and
17 you say that they were never ad hoc whilst you were
18 there. They knew that people were coming and as
19 a result of that, things would be tidied up.

20 You talk about one particular occasion that you
21 recall at paragraph 60, where you say that prior to the
22 inspection, it became apparent that only two of the six
23 young people at the unit at St Katharine's had care
24 plans, and so a member of staff then had to fill in the
25 four outstanding care plans the day before the

1 inspection?

2 A. Yes, that's correct.

3 Q. I think we'll see, when we look at the documents, that

4 there was a comment made about that, about they'd got

5 away with it?

6 A. Yes.

7 Q. You say at paragraph 61 that much of the information had

8 to be made up and it was all just done last minute, just

9 the day before the inspection when it had been realised?

10 A. Yes, that's correct.

11 Q. There seems to be a lack of record keeping or oversight

12 at that time in relation to the records that were kept?

13 A. Yes, but also a lack in the care, because if you don't

14 have a care plan then you can't be following a care plan

15 and actually attempting to address the specific needs

16 that those children have.

17 Q. You go on then to tell us about abuse at St Katharine's.

18 It might be that this is a point where we could go to

19 the process -- the documents that you have given us to

20 show the process that you followed to raise concerns,

21 because I think they are reflected in those.

22 These are contemporaneous documents that you have

23 given us. Again, the reference for that is

24 WIT-3-0000005793.

25 I think first of all if we can look at page 6 of

1 that document. I think this is something that you
2 created. It's undated, but it's a document, I think,
3 you created for discussion, perhaps, or after discussion
4 with Carol Mentiplay, about concerns you had about young
5 people being massaged, is that right?

6 A. Yes, that's correct.

7 Q. In this document, you set out the issue about young
8 people being massaged by members of staff over clothes,
9 and you set out the pros and cons of that. Then you
10 reason it through in bullet point form and you say:

11 'Some key points from these discussions are below:
12 'The young person gets a lot out of the massage.
13 'It may be helpful for behaviour management.
14 'It's quite a normal interaction.
15 'You wouldn't massage your friends like that, so why
16 the young people?
17 'What do staff get out of it?
18 'Whose needs are being met?
19 'We're not trained to massage.
20 'Actions could be misinterpreted and lead to
21 allegations of abuse.
22 'I do/don't feel comfortable with it.'
23 Then you have come to the conclusion after that
24 where you have said:
25 'I have decided that it would exceed my professional

1 boundaries to be involved in massage with the young
2 people. The key reasons for this are.
3 '1, I don't feel comfortable with the idea.
4 '2, I'm not trained to massage.
5 '3, I question whether the setting is normal for
6 massage.'
7 A. Yes, that's correct.
8 Q. Was this, in discussion with Carol Mentiplay, a scenario
9 that had been identified as one that you could use for
10 the purpose of your competencies to highlight that you
11 had raised an issue or seen an issue, that you had
12 thought it through and reasoned it out and come to
13 a view about it?
14 A. Yes.
15 Q. You have evidenced it there.
16 I think we'll see from the document we're going to
17 go to in a minute that you raised this with LUZ ?
18 A. Yes.
19 Q. Do you know whether you wrote up this document before
20 you raised it with LUZ or after?
21 A. I think this was before.
22 Q. I think then if we can go to page 8 of this document,
23 I think we see that this at the top says:
24 'Assessor or supervisor's statement.'
25 If we go down to the bottom, I think we can see --

1 it's redacted, but it's Carol Mentiplay's signature that
2 is there. It seems that this is something that
3 Carol Mentiplay has produced as a result of her assessor
4 role with you, does that seem right?

5 A. Yes, that's correct.

6 Q. The date at the top says 2/00, so it seems to be
7 February 2000, but we don't have an actual date?

8 A. Yes.

9 Q. Do you know when that happened? Was that before or
10 after your meeting with LUZ [REDACTED] ?

11 A. I am not sure.

12 Q. I think the first paragraph talks about her discussing
13 with you examples of practice relating to maintaining
14 professional boundaries.

15 At paragraph 2 it says:

16 'We had a further discussion about toy fighting and
17 'Chris' used the time to explore some of her feelings
18 about it. While she can see why there are some
19 arguments which support physical play with young people,
20 she had been involved in an incident which had made her
21 look at the practice again and try to analyse the
22 potential difficulties with power and abuse. 'Chris'
23 had been involved in a day spent with the residents.
24 This had included a number of incidents where staff had
25 engaged in toy fighting with the young person.'

1 She goes on to outline that this was a boy who was
2 six foot two, had a problem with anger and aggression,
3 and there was some argument that toy fighting helped him
4 to release this in a controlled and positive way, but
5 there was concern about the appropriateness and the
6 differing abilities of staff to be able to control him.

7 She then outlines a situation that you had told her
8 about, where you had been trying to get him into his
9 room and he tried to toy fight with you, and because of
10 his size and strength, you felt that wasn't appropriate
11 and he was actually physically hurting you and whilst
12 you managed to get him into his room and control the
13 situation, you had to be quite forceful in getting him
14 to stop.

15 I think she then goes on to record that your view
16 was that there had been mixed messages given by staff,
17 because they were telling him that physical fighting
18 with staff was okay, but then when things went too far,
19 he was being blamed for failing to differentiate between
20 when it was acceptable and when it was not, and he was
21 a young person who had little perception of his own
22 strength and had little consistency of learning or
23 appropriate boundaries.

24 So is that a discussion you recall having with
25 Carol Mentiplay about that particular young person?

1 A. Yes.

2 Q. She goes on to say that you had spent time discussing
3 this toy fighting issue with colleagues and that you are
4 a thoughtful person who analyses the impact which you
5 make on clients, and in the meantime, you had given,
6 him, the boy, a clear message that you wouldn't be toy
7 fighting with him and that it's inappropriate.

8 So that's one of the issues in relation to toy
9 fighting that you had raised as part of this competency
10 ongoing discussion with Carol Mentiplay; is that right?

11 A. Yes, that's correct.

12 Q. Going on then to the next page, page 9, this again is
13 an assessor's statement and it's Carol Mentiplay and
14 again it's dated February 2000.

15 This related to young people having posters that
16 depicted cannabis on them in their rooms and you had
17 a particular view about that, is that right?

18 A. Yes, that's correct.

19 Q. Did you think it was mixed messages to the child or the
20 young person to say drugs were not allowed and are bad,
21 but yet allowing them to have posters that showed
22 drugs --

23 A. Yes.

24 Q. -- in the room was something that seemed to be okay?

25 A. It seemed a rather incongruent thing to say that people

1 shouldn't be using drugs which are illegal and
2 detrimental to your well-being, to then allowing people
3 to have posters up. It just didn't add up to me.

4 Q. She notes that there was a team meeting that you told
5 her about where you raised that with others and there
6 was a sort of vote about what should happen, but
7 ultimately the posters stayed, is that the upshot of it?

8 A. Yes, the posters stayed.

9 Q. You point out there was a large group of people who had
10 been quiet and hadn't expressed strong feelings about
11 it?

12 A. Yes.

13 Q. Just at the last paragraph here, Carol has noted:
14 'It has been fed back to 'Chris' that she is
15 sometimes too confrontational in the way she tackles
16 issues. However, in this case she had raised the issue
17 in a more acceptable way, in a way which will allow
18 debate to go on.'

19 She's pointing out that somebody told you that the
20 way that you were raising concerns was perhaps too
21 confrontational. Who is she referring to? Who had said
22 that to you?

23 A. I think that was mentioned by the men who were on my
24 team. I think that also relates to the fact that
25 possibly they didn't want me to raise any of these

1 things.

2 However, I think even raising them was deemed to be
3 confrontational, in that their expectation would be that
4 you did not raise such things.

5 Q. Now, we might be going a little bit out of order, but
6 the next page is page 10, which is the sort of report or
7 assessment -- I think it's report -- on your progress.
8 It's by LUZ and it's dated 23 February 2000.

9 I think we'll come to see in a minute that by this
10 point, you had already officially raised concerns, so
11 this was a little bit after. This is a sort of report
12 being done at the end of your six months in the unit; is
13 that right?

14 A. Yes.

15 Q. This is the report where he says that his observations
16 about you are that your use of self suggests that you
17 operate at a very concrete level of thinking, and that's
18 what you told us in your statement.

19 Then the next sentence talks about an overly
20 procedural approach to practice and he says that you set
21 yourself very high standards of practice and are eager
22 to impress, but that this can lead to a degree of
23 frustration or disappointment when things do not go as
24 well as you would like them to.

25 He goes on to say:

1 'There can be times that this can be deflected into
2 a critical approach to colleagues' practice and
3 insufficient assumption of responsibility for her own
4 role in situations. It would be fair to say that
5 a number of colleagues do not feel particularly
6 comfortable in working with 'Chris' for this reason.
7 She has also, on occasion, taken some non-contextualised
8 concerns beyond the individual with whom they are
9 located and beyond established line management channels.
10 'Chris' has repeated this approach, despite being
11 appraised of appropriate ways to raise practice issues.'

12 Just going on into the second part of the last
13 paragraph, he says:

14 'She does need, however, considerable work on some
15 of the more interpersonal aspects of working in
16 a setting such as this, in relation to both young people
17 and within a staff team. In some of her competency
18 write-ups, 'Chris' does acknowledge her need for a more
19 flexible approach and she can reflect this in
20 discussion, there is still room for improvement in this
21 area.'

22 This, it seems, is reflecting what you have told us
23 about LUZ [REDACTED]'s view of your approach, being concrete
24 and overly procedural?

25 A. Yes.

1 LADY SMITH: 'Chris', are you able to help me with what he
2 meant by this expression 'some non-contextualised
3 concerns beyond the individual'? What was that all
4 about?

5 A. I think -- I was wondering, reflecting on that as well.
6 I think that may have been if I was identifying what was
7 classed as toy fighting as an issue for the whole unit
8 and not just, say, for whatever number of men were
9 engaging in that, so I think it's that type of thing.
10 Or one person buying cigarettes whereas I was saying --
11 so I think that's what he meant by that.

12 There was also -- I mean, when I worked there, they
13 also considered me to be what they called a plant, so
14 I did go through months of being called a plant. Not
15 the type with leaves, which -- I don't know if some of
16 that is part of the reason why they may have thought
17 I was taking things out of context.

18 MS FORBES: So, 'Chris', you think that relates to the toy
19 fighting and taking it to Carol Mentiplay?

20 A. I think the general concerns about the things that we
21 have talked about today, whether that was the bed
22 wetting, which may have been deemed that, well, that's
23 just those staff, it's not everybody that's doing that,
24 or whether that's issues with pocket money, again that
25 that's ... it was wider -- what I witnessed was wider

1 than one person. It wasn't one person. It was a much
2 broader experience.

3 Q. We've seen that the date of that report is
4 23 February 2000. If we go to page 12 of this document,
5 this is the supervisor's statement and I think this is
6 something perhaps that was completed by KEI [REDACTED]
7 and his signature is at the bottom of that page,
8 although it's redacted.

9 We can see in the last -- this is about maintaining
10 professional boundaries, and whilst he says:

11 'Chris' has clear and professional boundaries ...'

12 In the last sentence, he says:

13 'She can be too concrete in her perception of
14 professionalism and this can lead to a degree of
15 inflexibility.'

16 The top of that document is dated 28 February 2000,
17 so this seems to be five days after LUZ [REDACTED]'s report,
18 so it seems as though your supervisor's statement, this
19 part of it, has been written five days after SNR [REDACTED]
20 SNR [REDACTED] LUZ [REDACTED]'s report on you.

21 Were you aware of that at the time?

22 A. I can't say -- looking back and thinking about this now,
23 I think I had probably hoped that I would have all of
24 the competencies complete and it required this statement
25 and that I had made a push for -- I required statements

1 from both those men as part of the competencies
2 evidence, so I wasn't aware of the discrepancy in the
3 dates however.

4 Q. If the dates are correct, it would seem that LUZ
5 wrote his report first and then KEI wrote the
6 supervisor's statements, because there's more than one,
7 looking at different competencies?

8 A. Yes.

9 Q. If we go to page 13 of that document, again we can see
10 another supervisor's statement, again dated
11 28 February 2000 and it's KEI again. This is
12 about working as part of a team.

13 At the beginning, he notes that you found it
14 difficult to work within a team setting at first, but
15 that you had worked through some of those difficulties
16 but that you weren't perceived to be a particularly
17 strong team player.

18 In the last paragraph he then says:

19 'It would be worth noting that many within the staff
20 team feel somewhat uncomfortable in working with
21 'Chris', there is a perception that she is too ready to
22 be critical of other people's practice, while still
23 struggling with aspects of her own.'

24 Again, this is something he's written after SNR
25 SNR and do we see some of the same things that

1 LUZ has put in his report here as well?

2 A. Yes.

3 Q. In particular, in relation to the last part, the word

4 'concrete' seemed to be used by both of them?

5 A. Erm, I don't know if that's because they've discussed

6 this. I would say I maybe was -- I felt at the time

7 that I was a lone -- well, not a completely lone voice

8 in the wilderness when it came to toy fighting because

9 there were other -- primarily women -- who worked there

10 who I believe felt uncomfortable.

11 And, as you mentioned, when we were discussing the

12 massage in the team meeting, when that was raised, there

13 were people who didn't make comment, who sat back.

14 So I think some of that is about the fact that what

15 I expected from practice and thought was appropriate was

16 not what other people expected and I was attempting to

17 follow the -- when I did start, there was a folder with

18 procedures and I did, you know, as I said earlier, look

19 at those in an attempt to make sure I was doing what

20 were the right things and not just jumping in and

21 following what somebody told me.

22 Q. I think, 'Chris', just to quickly look at page 15, this

23 is again another supervisor's statement, again the same

24 date, 28 February, and it's KEI . This seems

25 to be in relation to managing conflict and stress.

1 In the last paragraph here, KEI talks about the
2 fact that you have taken issues to your assessor and
3 questions why there was a difficulty challenging staff
4 or being unwilling to discuss issues with senior staff
5 in the unit. So again, it seems, in this anyway, you
6 are being criticised for discussing these issues with
7 Carol Mentiplay, instead of with those within the unit.

8 It's rearing its head again, that issue, isn't it?

9 A. I think that is rearing its head again. However,
10 I think what I would say about that is I actually did
11 have a duty to raise that with Carol Mentiplay, because
12 that was what she was employed to do through the
13 recruitment centre. So my view would be that I was
14 required to have these discussions with Carol in order
15 to meet these competencies so that I would be able to
16 secure a permanent post with the council.

17 So without those conversations and without those
18 discussions with Carol, I wouldn't have been able to
19 achieve that, because of the way that things were
20 arranged. So my view would be that it was appropriate
21 to do that.

22 Q. But it seemed to be being used against you in this
23 context, is that right?

24 A. Yes, it was used against me. It was certainly -- it was
25 frowned upon and it was not something that LUZ or

1 other people in [REDACTED] positions wanted me to
2 do and that people who were more on my level were
3 counselling me against having discussions or saying
4 anything, because it would be detrimental for me.

5 Q. 'Chris', just to go forward in this document, I think if
6 we go to page 35, this seems to be what is headed,
7 'Background notes and sequence of events re 'Chris''.

8 This is something that goes through to page 39. At
9 the very end of 39 we see that it's Carol Mentiplay who
10 created this.

11 Now, we also have your notes, but I think it's
12 important we can see that this is notes Carol Mentiplay
13 made, sort of giving us a chronology of what took place?

14 LADY SMITH: Can we go back to -- no, it's all right, we've
15 got the signature.

16 MS FORBES: Sorry, page 35, that's my fault.

17 So I think she first starts out by setting out how
18 you came to be working in St Katharine's, and we've
19 heard about that.

20 She tells us -- this is not a very clear copy, but
21 if we could maybe make it a little bit bigger. Go down
22 to, a little bit further down it says: 'I have met with
23 ...'

24 So if we see that, she tells us she met with you
25 regularly since you started on 28 August 1999, that's in

1 the last paragraph there, and says both on your own and
2 occasionally with KEI [REDACTED], your supervisor.

3 We go forward to the next paragraph, it says:

4 'During my meetings with 'Chris', I found her to be
5 a thoughtful and considered person. She often brought
6 issues of practice for discussion and used the time to
7 explore practice and clarify ways of working. 'Chris'
8 has questioned practice from the beginning. This
9 sometimes seemed overcritical and 'Chris' was quite
10 rigid in her thinking at start. However, it was clear
11 that she strove towards good practice and over the
12 six months, she's learned to be more accepting and
13 flexible of the human nature of residential work. This
14 did not include the acceptance of bad practice, however,
15 and she has questioned staff throughout her time at
16 St Katharine's. This included going to speak to
17 LUZ [REDACTED] about a colleague's unacceptable sexualised
18 language and swearing. 'Chris' has raised other issues
19 with colleagues, including questioning the
20 appropriateness of restraint techniques, questioning
21 whether drugs posters should be allowed, questioning toy
22 fighting and her own position regarding it, et cetera.

23 'Where these issues have been raised with me, I have
24 talked through the issue with 'Chris', exploring it from
25 different angles and working out how she should approach

1 the issue. This has usually meant agreeing that she
2 would raise the issue with a particular colleague or in
3 supervision or at the staff meeting. Other
4 conversations have concluded that although a certain
5 practice is not ideal, at least it is being discussed
6 and is moving in the right direction.'

7 Over to the next page then, she says:

8 'Chris' has come to appreciate that she needs to
9 tackle different issues in different ways. At the
10 beginning she tackled some issues head on and met with
11 resistance and defensiveness from some people. She was
12 often said to be too confrontational. Over the six
13 months, she has realised that she might be more
14 successful with a slower, more subtle approach, which
15 might bring more people alongside in order to make
16 change.'

17 Then it starts to talk about events surrounding free
18 expression. This, I think, relates to the point by this
19 point you decided you were going to use the free
20 expression route, is that right?

21 A. That's correct.

22 Q. So essentially the whistleblowing provisions?

23 A. Yes, the ones that were in place at the time.

24 Q. I think this is where Carol sets out sort of chronology.

25 We can see there was a discussion on 7 January 2000,

1 where you discussed toy fighting with her in depth. In
2 particular, in relation to one boy, who seemed to be the
3 one that was often restrained and the one that was often
4 involved in toy fighting with staff.

5 She has recorded that you felt that he was unable to
6 understand the limits and that the physical playing by
7 the staff was contributing to his increasing aggression
8 and that you decided not to participate and were
9 discussing the issue with staff.

10 Is that the position, yes?

11 A. Yes.

12 Q. Then she talks about meeting again on 1 February 2000
13 and the issue of toy fighting was raised again.

14 Also, she records that you had witnessed an incident
15 with a young person again -- this is the same boy, is
16 that right?

17 A. Yes.

18 Q. 'Who had been going along a corridor when KEH
19 SNR, had grabbed his hand and twisted it, forcing him to
20 the floor where he was begging him to stop. This was
21 all done in a half joking/half serious manner with KEH
22 saying that the boy better be going to behave himself
23 that day or else.'

24 You felt that his fingers had been bent back or
25 squeezed in a painful way and that KEH was

1 putting pressure on them, is that right?

2 A. That's correct.

3 Q. That is something that she's recorded there that you

4 discussed with her on that day at the time?

5 A. Yes.

6 Q. She says that although you discussed the incident and

7 were clear:

8 'We thought it was unacceptable practice.'

9 She records you were unsure how you were going to

10 tackle it, as it had just occurred. She records:

11 'She did not feel the culture of the unit was

12 conducive to her speaking out, as there is a culture

13 that toy fighting is not only acceptable but is

14 a positive way of working with clients. 'Chris' has

15 also been unpopular before for speaking out. She

16 decided to take some time to think about it.'

17 Is that something you recall?

18 A. Yes.

19 Q. Again, 7 February 2000, she records a meeting with you

20 and says that there was a second incident on 1 February.

21 She records that this involved a group of several staff,

22 including you, KEH [REDACTED] -- sorry, there was a group

23 of several staff, which included you and KEH [REDACTED],

24 and KEH [REDACTED] had kicked this same boy in the backside

25 and this seemed to perhaps relate to the boy touching

1 KEH ' folder, but you weren't sure because you
2 had not seen what happened before the kick.

3 'A colleague, IDJ ...'

4 Is that IDJ ?

5 A. Yes.

6 Q. ' ... had said to KEH , "That's not helpful",
7 ...'

8 And had later been called aside by KEH and
9 she has recorded you felt that IDJ had reacted
10 instantly and clearly had not approved of the kick.
11 However, it was normally not ideal to criticise
12 a colleague in front of a young person. The boy then
13 had realised he had support from IDJ and had then
14 said something like, 'That's right, you can't do that to
15 me'.

16 You had felt that you had to say something to
17 KEH and had later said to him that you had not
18 been happy about him kicking the boy and his reply was
19 that the boy had kicked him so he had kicked him back.

20 Is that what you remember?

21 A. Yes.

22 Q. You were unhappy with that reply and you and Carol then
23 had a lengthy discussion about your options for raising
24 it further. She notes that your scheduled supervision
25 had been cancelled, so you had not had the chance to

1 speak to KEI and she notes that you weren't sure that
2 you were comfortable going to him anyway, as KEH
3 was his peer, so he was the same level?

4 A. Yes, that's correct.

5 Q. Also because KEI engaged in a similar practice?

6 A. Yes, that's correct.

7 Q. When you say similar practice, do you mean toy fighting
8 or something more?

9 A. Well, I mean I'm using the term toy fighting. I would
10 say -- and maybe that's not fair, because I think you
11 might think a little bit of toy fighting might okay, and
12 as with some of this, I cringed a little bit where
13 I kind of maybe thought some of it might be okay, but,
14 I mean, I would say the majority of this, in my view,
15 whilst it's classed as toy fighting and I have written
16 that down as toy fighting, what we are actually talking
17 about is a physical assault.

18 So if somebody's hand is being bent to complete
19 pain, to me that's a physical assault. If your nose is
20 grabbed and it's twisted until it's bleeding, to me
21 that's a physical assault.

22 At the time when I worked there, those things were
23 being normalised, that that was okay and that was
24 acceptable and there wasn't any guidance that I had seen
25 or been made aware of that would have suggested that

1 that behaviour was acceptable and I haven't seen -- you
2 know, it's not something you would do if you were
3 teaching. It's not something I've ever done since, it's
4 not something I did then.

5 To me those things are physical assaults, but, yes,
6 so we are using the term 'toy fighting', but it's
7 probably in parenthesis because it's not -- it's not two
8 brothers having a little bit of fun playing cowboys and
9 Indians type of toy fighting. Sorry, that's probably
10 not a good analogy. It's not two people. This is
11 adults.

12 LADY SMITH: It's also the way you describe it, 'Chris', not
13 pretend fighting in the sense that nobody actually
14 touches each other, but acts as though they're fighting.
15 It's actual physical contact.

16 A. Yes, yes. So any time I have mentioned toy fighting,
17 I am referring to actual physical contact.

18 LADY SMITH: I thought so.

19 A. And I would say actual physical harm. Well, the type of
20 contact which causes pain, rather than the type of
21 contact -- you could hold somebody's arm, you could do
22 that to me and that would not cause me pain, but you
23 could do that to me and it would cause me pain. So the
24 type of contact that causes pain, not the type of
25 contact -- not just contact.

1 MS FORBES: Carol has recorded, 'Chris', and this is the top
2 of page 37, she says:
3 'We decided to go to LUZ [REDACTED].'
4 So it seems that this was a decision that you came
5 to together; is that right?
6 A. Yes.
7 Q. Then she goes on to record in the next paragraph,
8 7 February 2000, saying:
9 ''Chris' and I met LUZ [REDACTED] and asked if we could
10 have five minutes and went to his office.'
11 Then you introduced the topic of toy fighting and
12 said that you weren't against it completely, but you had
13 concerns of a couple of incidents with KEH [REDACTED] and
14 this boy and described the two incidents to LUZ [REDACTED], as had
15 been detailed previously, and that you were very open in
16 your description, keeping it factual and making it clear
17 that you were looking for clarification and that:
18 'LUZ [REDACTED] said that as KEH [REDACTED] wasn't there, he
19 could not answer for the specific incidents. However,
20 he knew KEH [REDACTED] and his practice and he felt that KEH [REDACTED]
21 would not have been involved in anything that was
22 outwith the context of his relationship with the boy and
23 he couldn't believe that KEH [REDACTED] had made the
24 comment, "He kicked me so I'll kick him".'
25 But that's what you heard him say, is that right?

1 A. That's correct.

2 Q. She goes on to say:

3 'LUZ made some comments about toy fighting being in
4 the context of the relationship ...'.

5 And about it being about residents testing out in
6 a safe way:

7 'And he added that he didn't do it as he usually got
8 beaten as he wasn't strong enough.'

9 Then he expressed some concern that Carol was
10 involved and asked why and that was explained to him,
11 I think she goes on to say, and the fact that under
12 normal circumstances, you might have taken up the issue
13 in supervision, but it had been cancelled but also LUZ
14 acknowledged that there might be difficulties bringing
15 it up as KEH is a senior?

16 A. Yes.

17 Q. And LUZ said that he would look into it.

18 Then I think she records on 9 February, she got
19 a phone call from you, that you were quite distressed
20 and said that you wanted to be moved from St Kat's, that
21 there had been an issue -- I think this surrounded
22 a child that you were a key worker for, is that right?

23 A. Yes.

24 Q. Essentially, I think, what was being described was you
25 were being shut out of that?

1 A. Yes, that's correct.

2 Q. So there was a meeting and you were not to be involved
3 and you weren't to attend?

4 A. Yes, that's correct.

5 Q. Did you form the impression that that was because of the
6 fact that you had been raising concerns?

7 A. Yes, and -- it was important also at that time, it was
8 important to me because it was something I also required
9 for the competencies. So it was something that was
10 impacting not only on me on that day but potentially on
11 my future.

12 Q. She records then that you told her about a meeting you
13 had with LUZ on 9 February 2000, that you were upset
14 about the tone and content of the meeting and that he'd
15 asked you if Carol had:

16 ' ... pressurised you into making a complaint and
17 saying that the assessment process should be internal,
18 as external people could misinterpret the context of
19 what was happening in the unit and saying that the
20 whistleblowing policy was not appropriate or necessary,
21 that he had spoken to KEH and IDJ, and
22 that the incident was all good humoured and in the
23 context of relationships and was therefore not abusive
24 and that there would be consequences for 'Chris' as
25 a result of her having raised this issue.'

1 Is that accurate from what you recall your meeting
2 with LUZ ?

3 A. Yes, that is accurate.

4 Q. She goes on to say that:

5 ''Chris' confirmed with me that in her original
6 meeting, we had never mentioned abuse or complaint or
7 whistleblowing, but had clearly said that we just wanted
8 to discuss an issue.'

9 A. That's correct.

10 Q. That you had gone on to say you were having increasing
11 concerns about practice in the unit, both towards staff
12 and to young people, and you then set out something she
13 recounts that you had heard before about a boy using
14 a tape recorder to record KEH and that that had
15 been taken away from the boy by LUZ and destroyed
16 but that is something that was before your time and you
17 didn't see it, but you heard about it?

18 A. Yes.

19 Q. Was that from other staff in the unit?

20 A. Yes.

21 Q. She goes on to say, this is the next paragraph, that you
22 felt you could no longer continue to work under
23 LUZ and she suggested you take a couple of days
24 to think about things and that you could meet on
25 11 February to talk through options and she met with you

1 on 11 February and you agreed to continue your shifts
2 until 18 February, because then you were going to be on
3 leave and there would be just three more shifts before
4 your contract ended and it seemed unlikely that you
5 would be able to complete your assessment in order to go
6 to a management board as planned.

7 So is that something that was quite disappointing to
8 you at the time?

9 A. Yes, it was disappointing at the time.

10 Q. Then it seems on 11 February that Carol spoke with
11 Duncan MacAulay and John Robertson and somebody advised
12 that you could be moved to another unit and could take
13 any of a number of options through the free expression
14 of staff concerns policy.

15 I think she then spoke to you, over the page, on the
16 same day and you said you would like to take the weekend
17 to think about your options, but you'd go in on shift
18 over the weekend.

19 On 14 February then, she notes that in a phone call
20 you decided to carry on with the procedure, the
21 whistleblowing procedure, and to set up a meeting. You
22 outlined in that that you had been physically sick and
23 were feeling very stressed about the whole situation?

24 A. Yes.

25 Q. Then I think there was another incident that was

1 recounted there with KEH [REDACTED], in that you say that
2 you had felt quite paranoid about things that were
3 happening and you felt you couldn't go back into
4 St Kat's again and you would need to take some sick
5 leave.

6 She records that you talked of messages which you
7 felt were being said at St Kat's, which included, 'Let
8 it go over your head', 'Turn a blind eye', and 'Cross
9 LUZ [REDACTED] or the centre and you'll never work in social work
10 again'.

11 Despite that, you indicated you were determined to
12 go ahead with raising the concerns?

13 A. Yes.

14 Q. I think then she says that a meeting was arranged to
15 meet with you and Duncan MacAulay on 17 February and on
16 15 February, she met with you and there was a discussion
17 about the issues and you made a diagram, which we have
18 in the records, with notes as well, which we also have,
19 and notes for Duncan. I think she says:

20 'I believe that all the issues raised are now
21 contained in these notes [your notes] or the notes from
22 the meeting with Duncan.'

23 I think we can see then that this meeting with
24 Duncan and Carol Mentiplay took place on 17 February, is
25 that right?

1 A. I can't remember the specific date, but that's ...

2 Q. I think we have notes of a meeting.

3 A. I think I provided notes.

4 Q. Page 23, I'll just briefly go to that to see that. This

5 is a record, it's two pages, and it's a record by

6 Duncan MacAulay of the meeting with you and Carol on

7 17 February. He recounts the concerns that were raised.

8 If we just go further down that page, page 23, we

9 see there are ten numbered points that are raised there,

10 which seems to reflect some of the things you told us

11 and some other things. One in particular, number 5, it

12 says:

13 'An incident where a child had a seizure as a result

14 of toy fighting.'

15 Was that something that you witnessed?

16 A. Yes, that's something I witnessed.

17 Q. So that was a different boy from the boy we've been

18 talking about, is that right?

19 A. Yes, that's a different boy.

20 Q. But you described him as having what you thought was

21 a sort of seizure after --

22 A. It was what looked like -- the young person was

23 literally thrown to the floor, so sometimes you could

24 take a hold of somebody and almost throw them down, and

25 when he hit the floor, he then started to have what

1 looked like a seizure.

2 Q. It's also mentioned there at 2:

3 'Pain control to manage difficult behaviour among
4 young people.'

5 Is that pain control in the context of restraints or
6 are you talking there about the holding back of the
7 fingers?

8 A. I think the holding back of the fingers and twisting the
9 nose. If you move somebody's hand in a certain way,
10 I'm not sure how you do it actually, but I know you can
11 do it and it's really painful. So there's like
12 squeezing fingers but also there's also -- I know
13 there's another movement that was often used.

14 Q. I think we can see from page 26 of this, this is what
15 follows from page 26, I think, to 34 is your notes of
16 different incidents that you witnessed that you set out
17 there, which you say relate to physical assaults on
18 children or young people, involving staff members and
19 raising the concerns, some of which we have talked
20 about, I think from page 26, page 27 details specific
21 dates and instances involving boys in the unit, is that
22 right?

23 A. Yes.

24 Q. I think it starts on 1 February 2000 and goes to the
25 last occasion, 7 February. That's over a particular

1 period of about seven days, is that right?

2 A. Yes, I think -- as I worked there, I suppose for
3 context, throughout the time I became increasingly aware
4 and less -- much less tolerant. Initially I was trying
5 to process these things and work out and then as these
6 things continued and as the intensity of these things
7 continued, to the kind of degrees that you are seeing
8 there, to me, I potentially became less concrete, they
9 became less acceptable and I realised that -- so
10 a combination of because of the recruitment centre,
11 I had to keep notes about what happened, which is why
12 I have so many notes about what happened then, erm, but
13 also because I became increasingly concerned about what
14 I was seeing.

15 I felt it was -- and I knew having spoken to people
16 that you can't really just say I'm not happy with what
17 I've seen. It was important to say: well, on this
18 occasion this happened, so I then started to keep notes
19 as I became more concerned about -- well, I started to
20 keep more notes as I became more concerned. It's not
21 that things didn't happen prior to that, it was just
22 that I was becoming increasingly aware of them.

23 Q. So this sort of page that we are looking at on the
24 screen, when were these typed up? Was this something
25 that was prepared by you before the meeting that you had

1 with Duncan and Carol on the 17th?

2 A. Yes, I would have taken notes and then written this up
3 in preparation for that meeting.

4 Q. So were these notes that we're looking at ever shown to
5 LUZ or was this really in preparation for that
6 meeting to set out your concerns?

7 A. No, the specific notes weren't. What you have
8 already -- what we have talked about, about the meetings
9 with LUZ, whether that was with myself or with myself
10 and Carol, erm, I had those meetings and by this time
11 had felt that those meetings weren't going anywhere and
12 that I wasn't being listened to and that it was then
13 therefore appropriate to then follow that procedure,
14 which was in place for that very reason.

15 LADY SMITH: Ms Forbes, can you give me an indication of how
16 much longer?

17 MS FORBES: No, I don't have too much longer, I would say
18 five or ten at a push.

19 LADY SMITH: Just let me check with the stenographers.

20 (Pause)

21 MS FORBES: 'Chris', as a result of that meeting, we have
22 the notes from Duncan as well in relation to that that
23 we looked at, so we have your notes that you prepared in
24 advance of the meeting, we have Carol's notes of what
25 was discussed at the meeting and we also have Duncan's

1 notes. So we can see all the different things that were
2 dealt with.

3 If we go to page 40 of this document, we can see
4 this is a letter, and it's a letter to you, and it's
5 from Duncan MacAulay, Head of Operations, Leslie McEwan,
6 Director of Social Work, and it's dated 7 April 2000.
7 This is really to deal with the outcome of that meeting
8 and the raising of your expressions of concerns.

9 You can see, paragraph 2:

10 'As a result of your expressions of concern and the
11 enquiries that were undertaken, matters affecting
12 supervision, training, practice and staffing have been
13 identified as requiring detailed attention. No matters
14 have been identified as being required to be dealt with
15 under the disciplinary procedure.'

16 So it seems that there were some practices, some
17 matters that were identified as requiring detailed
18 attention but nothing seems to have led to any
19 disciplinary procedure, is that right?

20 A. That's my understanding.

21 Q. Then if we could just go to page 42 quickly. We can see
22 that this is a UNISON [REDACTED], [REDACTED] 2000, which is
23 headed:

24 [REDACTED]

25 [REDACTED]

1 This seems to be [REDACTED] talking about
2 the investigation that took place. If we see at the
3 bottom of the first column, we can see it starts:

4 'This instance highlights the problems caused by
5 accepting all whistleblowing as [and if we go to the top
6 of the second column] having substance and worthy of
7 investigation. UNISON recognises there is
8 a responsibility on the authority to be willing to
9 recognise and address service issues, but the approach
10 that everything must be investigated creates a field day
11 for mischief makers.'

12 If we go over to the third column, this third-last
13 paragraph, it says:

14 'The past two years must have been a terrific strain
15 on LUZ [REDACTED] and his family and it is to his credit he stuck
16 it out until such times as his staff were vindicated.
17 That demonstrates a truly professional approach from
18 SNR [REDACTED] who believes in his staff and the services
19 they provide, perhaps others should take note.'

20 So it seems that after this happened, there seems to
21 be something [REDACTED] about the outcome of
22 an investigation at Howdenhall and St Katharine's, and
23 it seemed to be critical of the whistleblowing
24 procedure?

25 A. Yes.

1 LADY SMITH: When you say [REDACTED], you mean there is
2 something in the union's [REDACTED]?
3 MS FORBES: The union [REDACTED], my Lady, yes.
4 It doesn't say who this is written by, but certainly
5 it's something that appeared in their [REDACTED]?
6 A. It was their [REDACTED] at the time, yes.
7 Q. Now, you provided this to us. Was this something that
8 you saw at the time?
9 A. Yes, I saw that at the time.
10 Q. Were you quite disappointed by that?
11 A. I was very disappointed that that was the view that
12 UNISON were taking and I would hope that if UNISON read
13 this now, that they too would be disappointed in what
14 they have said in this statement. I don't know who made
15 it, I don't know who wrote this, but, yes, I was very
16 disappointed in this and I certainly don't view myself
17 as a mischief maker.
18 Q. 'Chris', you left St Katharine's, I think really you
19 didn't go back to work after what we have seen in the
20 notes from Carol, is that right, you didn't go back to
21 the unit?
22 A. Yeah, that would be correct. I must have -- I had
23 forgot I had leave, but I think I had leave, I think
24 those final three shifts -- I knew -- I recalled that
25 I may have missed a few shifts, so I didn't -- I was on

1 leave and then I didn't go back for the final few days
2 of the six-month contract.

3 Q. You then go and work in a different unit as
4 a residential care officer?

5 A. Yeah. I was then able to move to Greendykes Young
6 People's Centre, where I worked for -- I'm not sure of
7 the specific times. I remained in residential childcare
8 for about another five years after that.

9 Initially I worked at Greendykes, I then moved to
10 Ferniehill, and during that time I did my social work
11 training and, following qualifying, I then moved to the
12 current role that I'm in, with justice.

13 Q. Is that as a criminal justice social worker?

14 A. It is, yes.

15 Q. That's something that you continue with today; is that
16 right?

17 A. Yeah, I've been in that role for -- since -- I started
18 in 2006.

19 Q. The police spoke to you later, perhaps in about 2016 or
20 so, is that right?

21 A. Yes, that's correct.

22 Q. Again, that was about St Katharine's?

23 A. Yes.

24 Q. Do you recall giving them interviews about your time
25 there?

1 A. Yes. I, erm, gave two or three -- I think it was two,
2 but they were videoed interviews at their Livingston --
3 in their video suite, and I provided them with the
4 information that I've provided to the Inquiry --

5 Q. You provided them with copies of these documents that we
6 have?

7 A. Yes, a copy of the documents that you have to assist
8 with their investigations.

9 Q. Would it be fair to say that in those interviews to the
10 police, you told them about the things you've told us in
11 your statement and that we've talked about today?

12 A. Yes, that's correct.

13 Q. We have seen a report in relation to that investigation
14 and I just want to ask for your comment on this:

15 In relation to them speaking to you, there's
16 a summary of what they say about your evidence in the
17 report and I'm not going to bring it up on the screen or
18 anything, but what they say is that you were spoken to
19 by police in relation to that investigation into
20 St Katharine's and you said to them that you had
21 reported concerns about restraint techniques being used
22 inappropriately, but you could not recall any staff
23 behaviour that you considered to be criminal.

24 Now, what would you say about that characterisation
25 of what you told the police?

1 A. I think that's -- it's disappointing, actually, is what
2 I would say. Erm, I would say the behaviour -- I gave
3 those statements and the police came back to me with
4 feedback and they said to me that they weren't able to
5 prosecute because the young people in question felt that
6 it was consensual and it was what they classed as toy
7 fighting. Which is what I was very disappointed at,
8 because I thought surely somebody has to make a stand,
9 and I was clearly wrong in that but ...
10 So I was raising these concerns. These were
11 physical assaults on young people that I was raising,
12 and I think that would have been clear in the evidence
13 that I gave to the police.
14 Q. I think, though, you did get some feedback from police
15 after you spoke to them and did they tell you that one
16 of the boys that you had told them about had been spoken
17 to and said that he considered it to be horseplay?
18 A. Yes, that's correct.
19 Q. So he didn't consider it to be any physical assaults on
20 him and he didn't have any concerns?
21 A. He -- I believe that that's what he said, which, from my
22 perspective, indicates the normalisation of that type of
23 behaviour in that unit at that time.
24 Q. There is an induction pack that we have been provided,
25 but this is for Howdenhall and it's dated 1998. Again,

1 I'm not going to bring it up on the screen, but
2 I've shown the part to you that I'm going to ask you
3 about.

4 There's a part within that induction pack titled
5 'Safe caring' and in it there are two sections on -- one
6 on toy fighting, at page 98, and again at the same page,
7 one on young people visiting staff homes.

8 Essentially, that seems to suggest that these things
9 in 1998, an induction pack, were okay and acceptable.
10 Is that something that you had seen before when you
11 started at St Katharine's?

12 A. No, that's something that I had not seen before.

13 Q. Now, one further thing, 'Chris', and you don't have to
14 make any comment on this if you don't want to, but
15 I think that we have been provided with a decision from
16 the SSSC from 24 September 2014. It may be that this is
17 referred to in somebody else's evidence, so I just want
18 to let you comment on it if you want.

19 This was a decision you are aware of, which related
20 to you, and it related to the SSSC making a decision
21 that there was misconduct and that related to you
22 submitting what they say was an inaccurate breach report
23 to the court on 10 July 2012, in that the report said
24 that three formal warnings had been issued when they had
25 not been and then, when questioned about the report,

1 there was a suggestion by you that it may have been
2 completed by your line manager. So they took the view
3 that this was dishonest.

4 However, they point out in their decision that you
5 co-operated with them, that this was an isolated
6 incident. You had previous good history. There was no
7 repetition and that you had complied with all
8 development measures that had been put in place.

9 The decision meant that there was a warning put on
10 your registration for two years and there was
11 a condition on your registration which had to be
12 complied with within three months, which was complied
13 with.

14 Now, again, 'Chris', you don't have to say anything
15 about that, that is a decision by the SSSC, but if you
16 want to say anything in relation to that, you can.

17 A. Yes, I mean, that is correct. There was -- I submitted
18 a report to the court in connection with a client who
19 was on a community payback order at the time, in the
20 belief that the report was accurate. That client
21 subsequently committed a further offence, when he wasn't
22 being seen, and because of that, there was a serious
23 incident report carried out and during that, when they
24 looked at the documentation that was available, they
25 discovered that the formal warning letters weren't

1 there.

2 And when it -- I think it's slightly regrettable it
3 says I blamed my manager, I didn't feel that I blamed my
4 manager. What I said -- I was specifically asked in the
5 serious incident report interview if anybody else had
6 access to this, and it was quite normal for my manager
7 to have access to the report, so I did say the only
8 person who would have looked at it was my manager, which
9 was then interpreted in that way, which is regrettable.
10 It certainly wasn't my intention to blame that.

11 Yes, I fully complied with the council and with the
12 SSSC and those matters are -- I'll use the word 'spent',
13 because I'm not sure what it's called, but they have
14 been spent, I would say -- well, for at least eight
15 years.

16 Q. That decision was over ten years ago now.

17 A. Sorry, yes, well, I was going to say ten. When you said
18 2014 -- yeah, I mean, it's on your registration for
19 two years, it's then removed. I'm aware that you have
20 a process to obtain that information, but that is --
21 that was what happened and I'm in the same job and I'm
22 in the same role and there have been -- there were no
23 concerns before and there have been no concerns since.

24 Q. You continue in that role today?

25 A. Yes, I continue in that role today.

1 MS FORBES: 'Chris', thank you very much. I know we have
2 covered a lot today and there is a lot in your statement
3 that we haven't gone through, but we have your statement
4 and that is evidence in the Inquiry and you have signed
5 your statement and we have your documents, so thank you
6 very much for bearing with me today.

7 I'm grateful to you.

8 A. Thank you.

9 LADY SMITH: 'Chris', can I add my thanks. It's been a long
10 afternoon and we have drilled down into your memory and
11 into the documents that you have helped us with.

12 I'm sure you are exhausted and I'm sure you wish
13 that you hadn't had to do this, but it's been really
14 valuable to the work we're doing here.

15 A. Thank you.

16 LADY SMITH: I'm delighted now to be able to let you go and
17 you go with my thanks.

18 A. Thank you.

19 (The witness withdrew)

20 LADY SMITH: I want to mention three names who -- and let me
21 put it this way -- who may have the protection of their
22 identities of my General Restriction Order. I would
23 simply ask if anybody is wanting to identify them as
24 having provided evidence to the Inquiry, please would
25 you check with us first. They were IDJ [REDACTED]

1 KEL [REDACTED] and KEH [REDACTED].

2 Thank you very much. Now, until Tuesday morning,
3 I think.

4 MS FORBES: I think tomorrow, my Lady.

5 LADY SMITH: Where are we?

6 MS FORBES: Yes, Thursday, unfortunately, it feels like
7 Friday.

8 LADY SMITH: It has been a long week. Of course, tomorrow
9 morning.

10 MS FORBES: We have a witness at 10.00 am.

11 LADY SMITH: 10 o'clock. A witness in person. Thank you.

12 (4.43 pm)

13 (The Inquiry adjourned until 10.00 am on

14 Friday, 17 January 2025)

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