

1 Tuesday, 21 January 2025

2 (10.00 am)

3 LADY SMITH: Good morning.

4 We return today to Chapter 12 of this phase of our
5 case study evidence and we start with a witness in
6 person this morning.

7 Mr Sheldon.

8 MR SHELDON: We do, my Lady.

9 This is a witness who is anonymous. His pseudonym
10 is 'Bill' and this is a witness who will require
11 a warning, my Lady.

12 LADY SMITH: Thank you.

13 'Bill' (affirmed)

14 LADY SMITH: 'Bill', thank you for coming along this morning
15 to help us with your oral evidence. I stress 'oral
16 evidence', because, of course, I already have evidence
17 from you in your written statement and I'm really
18 grateful to you for the care and trouble that you've put
19 into that being prepared. It's been very helpful to me
20 to be able to look at it in advance.

21 A. Thank you.

22 LADY SMITH: Your statement is in that red folder that's on
23 the desk there so it will be available to you, as you go
24 through your evidence with us.

25 We'll also bring parts of it up on that screen in

1 front of you. You might find either or neither helpful,
2 but they're there for you if you want to use them.

3 'Bill', separately from that, let me assure you,
4 I do know that what we're asking you to do this morning
5 is probably the last thing you want to be doing, in
6 a public place, talking about your working life from
7 quite a while ago and you'll be aware, being, as some
8 would call it, put on the spot about some things.

9 I get that, if you want a pause at any time or
10 a break for a breather, that's not a problem. You just
11 let me know.

12 For the timetabling, I normally stop at about
13 11.30 am for a morning break for about a quarter of
14 an hour, but if you want a break before then, just say.

15 A. Thank you very much.

16 LADY SMITH: If we're not explaining anything properly,
17 speak up. It's our fault, not yours, if we're confusing
18 you.

19 Separately, 'Bill', do be aware that although this
20 is a public Inquiry, not a court, you have all the
21 protections you would have in a court setting. That
22 means that if you are asked a question, the answer to
23 which could incriminate you, you don't have to answer
24 it. The choice is yours.

25 If you decide to answer it, I do, of course, expect

1 you to do so fully, but the key is that you're not
2 obliged to answer any such question, because you're
3 protected in the usual way, that you would be in
4 a courtroom.

5 If you're in any doubt as to whether anything we're
6 asking you falls into that category, just say and we'll
7 tell you.

8 A. Thank you very much.

9 LADY SMITH: I'll hand over to Mr Sheldon now, if you're
10 ready, and he'll take it from there.

11 Mr Sheldon.

12 MR SHELTON: Thank you, my Lady.

13 Questions from Mr Sheldon

14 MR SHELTON: Good morning, 'Bill'.

15 'Bill', there is a couple of bits of housekeeping
16 that are really for our benefit, and please don't you
17 worry about them.

18 The first is just to read into our record the
19 reference number for your statement, and that's
20 WIT-1-000001526.

21 As Lady Smith has said, you have your statement in
22 front of you in the red folder there. Could you turn
23 for me, please, to the last page of it. That would be
24 page 30. At the foot of that page; is that your
25 signature and did you date that in November 2024?

1 A. I did.

2 Q. You say there:

3 'I have no objection to my witness statement being

4 published as part of the evidence to the Inquiry.

5 I believe the facts stated in this witness statement are

6 true.'

7 Is that correct, 'Bill'?

8 A. That is. That is.

9 Q. Thank you.

10 'Bill', turning back to the start of your statement.

11 We're just going to go through this, but not line by

12 line. There's just a few topics I want to ask you for

13 a bit more detail about.

14 First of all, you give us your date of birth and

15 I think you were born in 1960?

16 A. I was.

17 Q. You then go on to tell us a bit about your background.

18 I think you started off initially as a mental health

19 nurse; is that right?

20 A. Erm, I actually started ... when I left school I joined

21 the National Coal Board and worked in the mining

22 industry. Then I trained and qualified as a mental

23 health nurse.

24 Q. That would be when you were about 28, is that right?

25 A. Yeah.

1 Q. You tell us a bit about your family life, but at that
2 time, this is paragraph 4, there was no Child and
3 Adolescent Mental Health Service, CAMHS, posts in
4 Scotland, so you worked down south in an inpatient unit
5 with children and families there?

6 A. That's correct, aye.

7 Q. What sort of difficulties, what sort of issues were the
8 children there facing?

9 A. Erm, some of them had early onset mental health. We had
10 one young man who was diagnosed with bipolar affective
11 disorder, we had a young woman who -- erm, and she had
12 psychosis, early onset psychosis. We had young people
13 who would come in, who would, erm -- I have to
14 apologise, my memory is a wee bit --

15 Q. We understand --

16 A. Young people who were displaying sort of the signs
17 associated, erm, with trauma, like defecating, urinating
18 in inappropriate places and inappropriate times.

19 Those issues would now -- social work would probably
20 be able to address with input from CAMHS and other
21 professionals but at that time, the young person would
22 have come in as an inpatient.

23 Er, it was mostly -- quite a lot o' it was stuff
24 that we dealt wi' in secure.

25 Q. I was going to ask you a little more about that.

1 First of all, what sort of age range were these
2 young people in Kent?

3 A. Er, the same age range as we worked wi' at
4 St Katharine's, which was 10 through to 16/17.

5 Q. Okay, and I dare say that some of them would be
6 exhibiting quite challenging behaviours --

7 A. Yeah.

8 Q. -- because of the conditions or the problems that they
9 had; is that fair to say?

10 A. That is. We had self-harming, er, absconding. Erm, not
11 a lot of violence and aggression directed at other
12 people. It was mostly the young people dealing with the
13 trauma themselves.

14 Q. Did you get any training at that stage, this is in the
15 job in Kent, the mental health nursing job, about
16 restraint techniques?

17 A. We did, but at that time, we were using control and
18 restraint, which was a pain-based system. Control and
19 restraint, it was the system used by police, the
20 Scottish -- the Scottish ... the prison service and the
21 military, erm, but we never actually implemented it. We
22 never used pain as a means of control. That was the
23 system.

24 Q. The training that you received at that time, that was
25 based on police-type training, is that right?

1 A. Yeah.

2 Q. We'll come on a bit later to look at CALM training that
3 you talk about quite a bit in your statement and how
4 that differed and so on, but for the moment, I just want
5 to ask you a little bit about your experiences before
6 St Katharine's.

7 You say that you moved back to Scotland and got
8 a job at Greendykes Young People's Centre

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The next thing was I was offered a move to

St Katharine's, which I accepted.

Q. From paragraph 11 onwards, you start to tell us a bit
about St Katharine's and in particular you talk about
the children at St Katharine's --

LADY SMITH: This is from about 1996, I think you say,
don't you --

A. Yes, around about then, yeah.

LADY SMITH: Thank you.

MR SHELDON: You told us a bit about the children that you
worked with in Kent and that actually, in some ways, the
problems that they had were quite similar to the ones
you encountered at St Katharine's.

A. Yeah.

Q. What sort of issues and behaviours were you finding at
St Katharine's?

1 A. Erm, young people came to us suffering variously, erm,
2 physical, sexual, emotional abuse, extreme neglect --
3 Q. Sorry, I keep interrupting you, 'Bill', I'm sorry, but
4 just to pick up on that. Where did you gain the
5 understanding about these things from? Who told you
6 about that, about the issues in their past that they'd
7 had?
8 A. A young person can't be secured unless an order has been
9 sort of signed over at a children's hearing and
10 background reports would follow a child into the unit.
11 They would go wi' the young person, so we would have
12 access to the hard file, because at that time we weren't
13 online. Some of them came wi' -- some of them came wi'
14 one or two volumes. Other ones, you were looking at
15 a hefty load, but we had the background information when
16 they were admitted to the unit.
17 Q. What kind of behaviours were they exhibiting from time
18 to time, that were problematic to manage in the unit?
19 A. Erm, you would get violence and aggression directed
20 towards other residents and staff. There would -- they
21 didn't have -- a lot of them didn't have rhythms and
22 routines to their day, so when you tried to put rhythms
23 and routines around them, you were faced wi' a lot of
24 confrontational behaviour. Some of them, the neglect,
25 would come through in gorging of food. Erm, young

1 people who'd been sexually abused, sometimes you'd get
2 some inappropriate behaviours. You get a lot of
3 self-harming. Erm, you would get destruction of
4 property, whether it was their own, others or the unit.

5 You -- some days you didn't know what you were going
6 to face, but we encountered a lot of difficult
7 challenging behaviour. These -- if I can just -- these
8 young people are highly vigilant, they were well
9 guarded, they had been abused, they had a highly
10 developed sense of fight or flight and when they came to
11 secure, they had nowhere to fly to. All they had was
12 fight and we had to work our way through that and
13 establish decent working relationships with them.

14 Q. I was just going to ask you about that. How did you try
15 to, as it were, calm them and give them reassurance and
16 to soothe the kind of behaviours that you're talking
17 about?

18 A. In the most extreme cases then you would have to hold
19 a young person and that might mean just simply holding
20 them or it might mean putting them down on the floor,
21 right, in a prone position.

22 Throughout that, you were taking care to avoid any
23 inappropriate physical contact. You were taking care to
24 ensure that they weren't in any pain and you weren't
25 inflicting pain on them and you continually gave them

1 reassuring messages, that you didn't want this, we
2 appreciated how they felt, we maybe not feel it all, but
3 we didn't want this. We wanted to calm them, we wanted
4 to help them, we wanted to avoid this. And over time,
5 that reassurance -- and the fact that you didn't inflict
6 pain and that your message was consistent and that you
7 acted in line wi' it, caused the young person to
8 establish a level of trust.

9 Q. I'll come back in a few minutes, 'Bill', to ask you
10 a bit more about CALM and restraint. It's quite a big
11 topic that we're interested in.

12 I just want to ask you first of all about your role
13 at St Katharine's and really the running of the place.
14 This is at page 5, starting at paragraph 18.

15 You tell us that you started as a residential care
16 officer or RCO?

17 A. Yeah.

18 Q. You say there was no recruitment process because you
19 were transferring, but you did have, you tell us, have
20 to have a Protecting Vulnerable Groups certificate, PVG
21 certificate, was that the case when you first started or
22 did that come in at a later point?

23 A. Erm, honest, it was called the police check when I first
24 started, and then you had the PVG came later.

25 Q. Did people who were already working there have to get

1 that?

2 A. Yeah.

3 Q. So it wasn't just that they would have been there as

4 an employee, as it were, trusted, perhaps in inverted

5 commas, and then things continued as they were without

6 any further check?

7 A. No -- aye.

8 Q. So they did have to have a further check?

9 A. Mm.

10 Q. Yes?

11 A. Aye. You couldn't be employed without checks being

12 done.

13 Q. But only at the start of your employment or when new

14 checks came in, because of legislation, did you then

15 have to get the check at that point?

16 A. Probably, I honestly can't remember.

17 Q. That's all right.

18 You talk about your responsibilities, making sure

19 the unit was staffed appropriately, and I am sorry,

20 I should have asked you, in paragraph 19, are you

21 talking about your role as an assistant unit manager or

22 as an RCO?

23 A. Oh, that was an AUM, as an assistant unit manager.

24 Q. All right. When were you promoted to that post?

25 A. Honest, I can't remember. I'm no being difficult.

1 Q. It's fine. It's all right. We understand it's a while
2 ago. Do you think it would still have been in the
3 nineties or in the thousands by that stage?
4 A. That would have been in the thousands.
5 Q. All right, because I think we know you left
6 St Katharine's in about 2010; is that right?
7 A. Mm.
8 Q. Thinking about that date as a kind of backstop, how long
9 before that might it have been that you were promoted?
10 A. Erm, maybe about 2003, 2002/2003.
11 Q. Okay. We know that there were a number of units in
12 St Katharine's. You were the unit manager of Guthrie?
13 A. Assistant unit manager.
14 Q. I beg your pardon. Assistant. Before that, as an RCO,
15 were you working in Guthrie at that point or across the
16 units in St Katharine's?
17 A. I worked across the units and then eventually I moved to
18 Guthrie.
19 Q. Was that the case with most of the staff? Did most of
20 the staff tend to have a role across different units or
21 were they, as it were, kept in teams as a unit, as it
22 were?
23 A. Usually you were assigned to a unit and it was a team in
24 each unit. But each unit would also have what was known
25 as a responder, who, if something happened in one of the

1 other units or in education, would go and assist
2 colleagues elsewhere.

3 Q. Okay. So there was, as it were, cross-fertilisation
4 across the different parts of St Katharine's?

5 A. Yeah.

6 Q. Was that the case with Howdenhall as well or was that
7 separate again?

8 A. I honestly can't really tell you about Howdenhall,
9 because I didn't do shifts there.

10 Q. Right. Did some of your colleagues at St Katharine's do
11 shifts at Howdenhall as well?

12 A. They might've done them to cover and bolster numbers
13 when staff numbers were low.

14 Q. I'll come on again in a few minutes to ask you about
15 perhaps some problems with staffing, but I think for the
16 moment it's just enough to know, that yes, some staff
17 did from time to time go across from Howdenhall to
18 St Katharine's and presumably the other way round as
19 well?

20 A. Aye, yeah.

21 Q. I should have asked you actually, still paragraph 19: in
22 your role as assistant unit manager, was that mainly
23 office-based then or were you, as it were, also on the
24 floor of the unit?

25 A. No, you would go -- if, for instance, there were outings

1 in one of the units which meant that the unit would be
2 a member of staff down, I could go over and cover in
3 their place if needs be. Erm, a lot of the time was
4 spent filling shifts, because we would -- were running
5 low on staff numbers and a lot of time was spent in the
6 office, but I'd cover the units when I was needed.

7 Q. Yes. You talk about sometimes being called over to
8 assist with an incident. What sort of incident might
9 you be called out to?

10 A. You would -- if there was a restraint in a unit, if
11 there was a young person upset, sometimes they would
12 barricade themselves in their room. I would go over and
13 support the staff. I might not be involved directly but
14 I could be involved in the background, supporting the
15 other young people, mostly that type of thing.

16 Q. You go on to talk about staff structure and you tell us
17 about SNR [REDACTED] and that was LUZ [REDACTED].
18 He was SNR [REDACTED] of both Howdenhall and
19 St Katharine's; is that right?

20 A. I believe so.

21 Q. When you were promoted, I think LUZ [REDACTED] in the
22 early thousands and [REDACTED] as SNR [REDACTED],
23 is that right?

24 A. Yeah.

25 Q. SNR [REDACTED] would have duties in relation to both

1 units. Did that mean that from time to time, they were
2 pretty stretched in terms of their time?

3 A. I couldn't comment on certainly SNR [REDACTED]'s
4 workload, because they spent most of their time in their
5 office. I mean, they had [REDACTED] for
6 five units and they were -- partly their [REDACTED] was
7 ensuring that policy procedures were followed and
8 implemented, so I couldn't comment. That was above my
9 pay grade.

10 Q. All right. Did you see them, as it were, on the floor
11 at all?

12 A. Yeah.

13 Q. Did they come out and chat?

14 A. Yeah.

15 Q. How often would that happen?

16 A. It was more so LUZ [REDACTED]. LUZ [REDACTED] wasn't averse to
17 getting his, er, kit on and taking the boys down to the
18 gym to play football or take them -- kids out into the
19 courtyard to lend support to staff in the units.

20 Erm, no, LUZ [REDACTED] was -- he still maintained contact wi'
21 the kids and the main grade staff.

22 Q. You mentioned, and I'm sorry, you talk a bit at
23 paragraph 23 about shifts. So day shifts, night shifts
24 and I think you talk about twilight staff members. Can
25 you just explain to us how the shift system worked?

1 A. We had three shifts. We had the early shift, the late
2 shift -- three -- four shifts. The early shift, the
3 late shift, the night shift and the twilights, and you
4 would have a cross-over, a meet and a changeover between
5 each shift. You kept ... the shifts were, erm, the same
6 people. You knew which team was coming on. Sometimes
7 due to either absence, due to holidays or sickness
8 absence, there may be other faces, but generally, you
9 knew all the core members in each shift.

10 The early, late and night shift worked, I think at
11 that time it was about a 37-hour week. The twilights
12 covered -- they supported the night staff from 10.00 at
13 night until 2.00 in the morning and if the unit was
14 settled, they would go home. However, if they were
15 required, then they had to stay on.

16 Q. We know, 'Bill', that at various points St Katharine's
17 and Howdenhall had to employ temporary staff, supply
18 staff, as it were?

19 A. Yeah.

20 Q. But was the idea anyway that shifts generally, the shift
21 teams would stick together, they would be the same teams
22 on each shift --

23 A. Yeah.

24 Q. -- so they would know each other and know which staff to
25 expect on a particular shift?

1 A. Yeah.

2 Q. I suppose having temporary staff disrupts that to some
3 extent?

4 A. Initially it did, but what we tried to do was -- if we
5 had to get in touch -- if we'd to use agency staff, we
6 would request the same members of staff so that we'd
7 some consistency across the team, that the agency staff
8 would be known to the full-time -- full-timers.

9 Q. All right, and presumably known to the children as well,
10 or at least hopefully so?

11 A. Yeah.

12 Q. Because that would be quite important, wouldn't it?

13 A. Yeah.

14 Q. To have members of staff perhaps that the children
15 trusted?

16 A. Yep.

17 Q. Paragraph 24, you talk about recruitment and I just want
18 to ask you one thing about that, I think this must be in
19 your role as assistant unit manager, you say that you
20 were able to supply feedback on whether you thought they
21 were up to doing the job for probationers:

22 '... but that was the extent of my involvement.'

23 What sort of things were you looking for in terms of
24 giving feedback about a probationer?

25 A. We'd be looking for good interpersonal skills. We'd be

1 looking for staff who had a fairly healthy degree o'
2 insight and self-awareness, who wouldn't take chances on
3 their own without checking wi' more experienced
4 colleagues whether they were doing the right thing or
5 not. Staff who were comfortable at expressing their own
6 uncertainties and anxieties, 'cause it is a challenging
7 environment to work in.

8 You would be looking for good role models, erm, for
9 these kids, for our kids. A lot of pro-social
10 modelling, if they were capable of doing that. If --

11 Q. I'm sorry to interrupt again, 'Bill', but you used
12 an expression 'pro-social modelling', what do you mean
13 by that?

14 A. Just basically going there and showing them the proper
15 way to react, to live, to respond to other people,
16 different stressful situations. Erm, in a nutshell that
17 was about it.

18 Q. What sort of things would you pick out as making someone
19 unsuitable to work at St Katharine's?

20 A. If they were using -- if they were using foul language,
21 verbally abusive, if there was any inappropriate
22 physical contact, if they'd no awareness about people's
23 personal space, limits and boundaries. Erm, if they
24 were -- not only sort of verbally abusive, but using
25 humiliating terms, belittling young people. Erm,

1 maintaining improper lines o' contact, you know, either
2 during the time that the person was in the unit or
3 afterward, so that would be what we would be looking
4 for.

5 Q. Were these things that you would notice yourself or were
6 you getting reports from other members of staff about
7 particular problems there might be?

8 A. It was definitely collective, myself and colleagues.

9 Q. Jumping ahead to paragraph 30 of your statement, and you
10 talk about staff training and that some of the RCOs, the
11 residential childcare officers, were qualified, some
12 unqualified. Are you talking about the point at which
13 you joined St Katharine's there or at a later stage?

14 A. This was at a later stage, when there was a requirement
15 that residential care staff had to be qualified to
16 a certain level.

17 Q. I think that came in with the SSSC; is that right?

18 A. Yeah.

19 Q. So certainly when you were working at St Katharine's,
20 most of the time some qualified, some unqualified. What
21 kind of qualifications did the qualified ones have?

22 A. Er, some did have SVQs. Er, we had two, I think, that
23 had been teachers. They'd all completed -- the other
24 part o' it was the competencies, they'd all completed
25 their competencies.

1 Erm, I'm trying to think. Honestly, I can't
2 remember what the qualification level, pardon me, was
3 like, sorry.

4 Q. That's all right.

5 Paragraph 32, you tell us a bit about the CALM
6 technique, that's Crisis Aggression Limitation
7 Management, and you tell us you were trained in that.

8 First of all, can I just ask you when you were
9 trained in that?

10 A. I can't remember the year, what I do remember was that
11 the chap who devised this system, I think he'd been
12 an employee of the council and he was given funding to
13 devise the course and the reason I mention this is
14 I think we were the first people to benefit from that
15 training. Erm, David ... I can't remember his surname.

16 Q. It doesn't matter. It's fine. You tell us in
17 paragraph 32:

18 'The CALM technique is how to hold young people
19 safely and how to manage violent incidents, or incidents
20 where the young people were self-destructive.'

21 So as far as you were concerned, it was principally
22 a technique or a method of holding people safely?

23 A. Yeah.

24 Q. Did the course include anything about how to de-escalate
25 the situation without having to hold a child?

1 A. Yeah, because you looked to work to recognise the signs
2 o' arousal in young people and in basically everybody
3 and then how to intervene as soon as possible with the
4 minimum level of physical intervention.

5 That was -- they were the two aims. Get in early,
6 use the minimum amount of physical intervention that was
7 necessary.

8 Q. You use the expression 'get in early', what do you mean
9 by that, 'Bill'?

10 A. Oh, that was ... sorry, aye, I shouldnae resort to
11 euphemisms.

12 Q. No, it's all right.

13 A. It was to help a young person regain a level of
14 self-control. It was to prevent them fae harming
15 themselves or other people and you were using it as well
16 as a learning tool, so that they would recognise when
17 they were becoming aroused themselves and be able to
18 exert some form of self-control. You were looking to
19 increase their own self-awareness, get in there,
20 I'm sorry about that, but those were the aims.

21 Q. No need to apologise, we're just keen to understand what
22 it is that you're telling us.

23 You mentioned that there were -- and I'll come back
24 to the issue of CALM training and holds and so on later
25 on. But for the moment, you mentioned a bit about there

1 being staff shortages from time to time?

2 A. Yeah.

3 Q. Did that cause problems in the unit or, indeed, across

4 the unit?

5 A. Well, it could but it wasn't -- I wouldnae say it was

6 commonplace. Sometimes we would be quite reliant on

7 agency staff or we would call our own colleagues in,

8 people who were not scheduled to work, we would ask them

9 to come in and do overtime. We would always attempt to

10 use our own staff first, because of the relationships

11 they had wi' our young people and then we would use

12 agency staff.

13 When we used agency staff, as I said earlier, we

14 tried to get the same people all the time.

15 Q. I suppose permanent members of staff would have a better

16 understanding of what their colleagues were doing, what

17 they were going to do, how to work together?

18 A. Yeah.

19 Q. Certainly we see in the inspection reports, round about

20 that time, 'Bill', I don't think I need to go to them,

21 at least not yet, but the inspection reports suggest

22 that some staff were feeling vulnerable because of

23 perhaps the staff shortages. Do you recall that?

24 A. Erm, honestly, no, I can't. It doesn't mean it didn't

25 happen. It just means I can't recollect. We -- more

1 than likely we did, but I honestly can't recollect.

2 LADY SMITH: Mr Sheldon, you say round about that time, can
3 we put an approximate date or dates on the period you're
4 talking about?

5 MR SHELTON: Perhaps I can just show my Lady one of the
6 reports. It's at EDI-000003673.

7 We can see that this is the Edinburgh and Lothian's
8 inspection unit, ELRIS 1999/2000, for St Katharine's, we
9 see SNR [REDACTED] is LUZ [REDACTED]. Date of inspection is
10 1 March 2000.

11 If we can go then to page 9, please, which is right
12 at the foot of the page, the last paragraph on that
13 page, it says:

14 'During inspection, stated staffing difficulties
15 were presented as major issues within the centre. While
16 the management services review has resulted in a more
17 appropriate staffing model for the centre, a number of
18 posts remain vacant. Currently, SNR [REDACTED]
19 post remains vacant ... management post remains vacant
20 ... approximately six full-time equivalent day posts are
21 unfilled ... during inspection a member of probationary
22 staff was transferred at short notice to another unit
23 and a further member of staff gave notice of resignation
24 ... another member of staff is long-term sick ...'

25 Scrolling down:

1 'The above resignations, transfers and training
2 cover issues compound what is perceived as a major
3 problem in relation to the filling of vacant posts.'

4 Going short to the next paragraph:

5 'The inspector was made of aware of the stress being
6 placed on the whole team through this staff vacancy
7 situation.'

8 LADY SMITH: I think that's at least a dozen vacancies you
9 have identified there, Mr Sheldon, is that correct?

10 MR SHELDON: Yes.

11 First of all, 'Bill', do you recall these staffing
12 issues being quite acute really at the end of the 1990s
13 and into 2000?

14 A. It's probably about that time. As I said earlier,
15 I spent a lot of my time in the office covering shifts,
16 erm, phoning round, phoning agency, phoning our staff,
17 trying to cover for vacant slots, so it's -- my focus
18 would have been on trying to fill those gaps.

19 Q. What about the staff who were, as it were, on the floor,
20 who were working directly with children most of the
21 time? What kind of effect would these shortages have on
22 them and what stresses would it be placing on them?

23 A. A lot of it would have been down to the resident groups,
24 how they were constituted, what problems that they were
25 being presented wi', what behaviours fae the kids.

1 Erm, I think round about that time we probably were
2 reliant on -- erm, it's actually good to see that
3 report -- we were reliant on a core group of staff and
4 we would make sure -- sometimes what we'd do, we'd
5 take -- if for instance Guthrie had two experienced
6 members of staff and the other units were a bit weaker,
7 we would take one experienced member. We would chop and
8 change to try and level, erm, the need across the
9 centre, making sure the need for each unit was met and
10 the kids and the staff were kept safe.

11 Q. I suppose, 'Bill', and this is not intended as
12 a criticism of you at all in the circumstances, but
13 I suppose one might say it was a bit like robbing Peter
14 to pay Paul in that sort of circumstance?

15 A. It was, yeah.

16 Q. I mentioned another issue arising from the reports.
17 Perhaps, while we're on the subject, we can just look at
18 that as well. It's EDI-000003600.

19 If we look at the first page again, this is another
20 inspection report, 1998/1999, this is for Howdenhall, so
21 I suppose there's a limit to which you can comment on
22 this, 'Bill', but I just want to look at this briefly
23 and get your comment on it.

24 If we can look, please, at page 10 and it's at
25 paragraph 8.3, so scrolling down a bit, we can see the

1 conclusions actually from the start of section 8.

2 Back to 8.1. We see again reference to staff
3 sickness absence, in particular sickness absence has had
4 a deleterious effect on the unit's ability to progress
5 development agenda.

6 Then there's a further paragraph and at
7 paragraph 8.3:

8 'Staff morale overall appears to be low. Staff were
9 signalling to the inspector feelings of vulnerability.
10 This needs to be addressed to ensure that the
11 environment continues to be one of safety and security.'

12 Then just the first sentence of the next paragraph:

13 'Care and control is a major issue and the review
14 suggested by the unit is welcomed.'

15 So as I say, this is staff in Howdenhall, but would
16 you say at the time, 'Bill', that that was a feeling
17 shared by staff in St Katharine's as well?

18 A. I would. Seeing the reports, I wasn't an AUM at that
19 time. We didn't have AUMs. We had shift leaders and
20 I was one of the experienced staff that would be moved
21 to units, but, yeah, we were feeling -- we did -- we
22 would get agency staff and we would even get staff from
23 our own locum bureau, er, some of whom wouldn't have
24 been up to the task and you had to work with them and
25 then you had to request that they weren't sent back, but

1 you could only take -- I know for the shift leaders,
2 they could only take what they were offered, you know.

3 Q. I suppose if staff are feeling vulnerable in that way --
4 well, perhaps just another way of putting it is that
5 they might have felt a bit on edge?

6 A. If you had the core group there then that wasn't really
7 an issue. It wasn't really an issue. Er, there were
8 very few occasions when I remember personally feeling on
9 edge because of what was happening, but that was down to
10 how -- that was down to the resident group at that time
11 and the interactions and the dynamic between them, er,
12 but, no, that's true.

13 Q. Again, we might come back to that a little bit later,
14 but for the moment, I just want to look at some other
15 parts of your statement.

16 At page 9, you talk about the food. You say that
17 that was plentiful and lovely. This is paragraph 38.

18 A. Yep.

19 Q. But at some point it rather deteriorated. You tell us
20 that the particular chef was caught stealing food?

21 A. Aye.

22 Q. And that he was, I think, prosecuted for that?

23 A. Yep.

24 Q. When was that roughly?

25 A. I can't remember the date, but I remember the time, the

1 circumstances at the time. A colleague of mine came
2 down and just said, 'Look, I've got to go, I've just
3 seen the chef and his mate loading food from the unit
4 into his mate's van', and it was like, 'Can you be
5 ready?', we had an alarm system, 'Can you be ready to
6 respond, because I'm going to have to challenge them?'.
7

8 As turns out, the alarm didn't have to be used. He
9 was challenged, put his -- the chef put his hands up.
10 He was charged and he was prosecuted. He was using the
11 food for his own catering business.

12 Q. Right, okay.

13 Page 10, paragraph 40, you tell us a bit about the
14 sleeping arrangements in St Katharine's. The kids were
15 locked in at night, but they had an en suite toilet --

16 A. Mm.

17 Q. -- and shower. Was that always the case when you were
18 at St Katharine's or did the en suite facilities come in
19 at a later point?

20 A. No, in Guthrie secure unit every room came wi' an en
21 suite.

22 Q. We have heard evidence that staff could remotely control
23 access to the toilets; is that right?

24 A. You could -- remotely, what you could do was you could
25 turn the water supply off, right, because what would
26 happen would be children would endeavour to block the

1 drains and flood their rooms, er, or they would try and
2 block the loo and use that as well. So you could
3 isolate the water supply, erm, but you could also -- you
4 could lock the door to the en suite. That was a tumbler
5 lock, so you had to be there to do -- actually do that.

6 Q. Right, so it wasn't a remote --

7 A. No, not a remote lock on the door.

8 Q. Why would you want to lock the doors of toilets?

9 A. If you had a young person who was particularly
10 distressed or who may have been self-harming, they could
11 have gone into the en suite and they could have
12 self-harmed in there without, er, the knowledge and out
13 of sight of staff.

14 Again, they might also go in there as -- as I said
15 a minute ago -- to block the drains, block the plug
16 holes, block the loo and then cause damage to their
17 room. Some of them laboured under the misapprehension
18 that if their room was out o' order then they had to be
19 released from secure, and that happened occasionally.

20 Q. Paragraph 42 you tell us that kids from St Katharine's
21 were taken out but how often depended on where they were
22 in their care plan.

23 Should we understand from that, 'Bill', that if it
24 was felt that children hadn't progressed enough, that
25 they weren't taken out, they'd just be held in the unit?

1 A. Yeah. Just to say that progress -- everything was risk
2 assessed, but we wanted -- we would assess the risk that
3 the young person was placed, putting themselves at and
4 other people, so it was -- everything was risk assessed
5 and if we deemed the risk to be too high, then, er, they
6 wouldn't be going out.

7 Q. All right, so those children would be effectively
8 confined to the unit?

9 A. Yeah.

10 Q. Again, this isn't intended as a criticism of you,
11 'Bill', but I suppose to the children it must have
12 seemed a bit like being in prison?

13 A. Without doubt it felt like being in prison, but equally
14 I can recall, erm, one young person who was due for
15 discharge breaking down and asking to be kept in secure,
16 because they'd never felt so physically and emotionally
17 safe in their life.

18 Erm, you had that thing about building
19 a relationship wi' a young person, overcoming the
20 fight-or-flight response. That was -- we worked to
21 ensure that our young people got out. We worked to
22 reduce the level of risk that they placed themselves and
23 our -- others at, you know?

24 Q. Page 11, paragraph 44, you were asked if children were
25 ever taken to staff members' homes. The answer is:

1 'No, that never happened. It wasn't allowed.'

2 Was that always the case? Was that always the

3 policy, so far as you were aware, or did the policy

4 change at some stage?

5 A. No, most definitely. That was the policy from the

6 moment I arrived until I left.

7 Q. Was that a written policy or was it just something that

8 was understood?

9 A. In terms of written, I think that would have been part

10 about maintaining safe and productive relationships wi'

11 young people. Maintaining their safety and yours, your

12 own. Erm, I can't remember precisely.

13 Q. What would you have thought if a staff member had taken

14 a child or seemed to take a child home?

15 A. Excuse me. That would have concerned me.

16 Q. Perhaps an obvious question, but why?

17 A. I'd be looking to see if that young person was being

18 exploited or manipulated or even abused.

19 Q. That would be an obvious concern for you?

20 A. Yeah.

21 Q. Moving on to the topic of schooling. You say, rather

22 bluntly, that school staff weren't up to the job and

23 care staff were never out of the classrooms because

24 school staff couldn't manage the behaviour of the

25 children. Perhaps you can just tell us a little bit

1 more detail around that. What would happen in the
2 classrooms?

3 A. These young people, they would come into the unit, if
4 they were absconders, if they were abused, they were
5 either school refusers, they were truants, they just
6 wouldn't go. They didn't like being in school.

7 When I started there, the staff group in education
8 were not equipped to deal wi' traumatised children, and
9 our kids were traumatised. They had no idea how to
10 manage, no insight into why our young people behaved as
11 they did and believe it or not, our kids exploited that,
12 because, 'I don't want to go to school. So I just have
13 to verbally abuse my teacher and I will be taken out of
14 school'. And some of the names they called the teaching
15 staff, even I blushed, but that's what would happen.
16 The kids would sabotage their education.

17 Q. Was it just verbal abuse, 'Bill', or were there ever
18 incidents where you had to restrain a child, you had to
19 hold a child in the classrooms?

20 A. I don't remember having to hold a child in a classroom
21 personally, I don't remember that.

22 Q. You say that children could be sent to what you call the
23 timeout room instead of back to the unit. What was the
24 timeout room?

25 A. The timeout room was essentially -- was a bare room wi'

1 a chair in it, that was right next door to the
2 classrooms. The kids had worked out that if they wound
3 up a member of teaching staff, they would be taken back
4 to the unit because we didn't have a timeout room.

5 So they would go back to the unit and they would
6 hope that they would get to watch TV. You would take
7 them back to the unit. There was no TV. There was no
8 nothing. That could in some cases lead to further
9 confrontation and you were just like, hold it there,
10 this cannot continue, you're not getting an education
11 and you're only digging yourself into a deeper hole,
12 because it's got consequences in terms of reports that
13 we would put back to the children's hearing.

14 So we had a timeout room that kept the kids in the
15 education department. There were no distractions, no
16 diversions. Er, all of a sudden going back to class
17 seemed like a more pleasing alternative.

18 Q. You say that the timeout room was a bare room with just
19 a chair. Was it literally just that, just a room with
20 a chair?

21 A. Aye, two chairs. One for a member of staff if needs be
22 and one for a young person, definitely.

23 Q. How long could a young person be in the timeout room?

24 A. They wouldn't be in there very long, because they didn't
25 like it. Erm, I mean, they could hear their friends,

1 their peers, in class having -- you know, enjoying it,
2 'cause some of them did. Some of our kids went on to
3 get qualifications from an education in a secure
4 establishment. Er, the kids would go down to the gym
5 for PE and, 'I want to go. I want to go'. You need to
6 get into class, you know, or if you're doing HE, home
7 economics, or whatever it was called at the time, you
8 need to get back in and then once they'd calmed, were
9 able to self-regulate, they would go back to class.

10 Q. Could the timeout room ever turn into -- I think what
11 certainly later was called 'single separation'?

12 A. I don't -- honestly do not remember that phrase, single
13 separation.

14 Q. Or 'segregation' perhaps, if they were just then sent to
15 their own rooms?

16 A. No. The timeout room was just always the timeout room.

17 LADY SMITH: Could there be more than one person in it at
18 any one time?

19 A. Er, no, no.

20 LADY SMITH: So what did you do if several children needed
21 to be excluded from the classroom?

22 A. It was rarely the case. I don't recall. You would have
23 occasions where two kids would get into a confrontation
24 in class and you would take them out and you would
25 attempt to de-escalate that, help them both

1 self-regulate and put them back in.

2 If not, then what we would need to do would be we
3 would need to take them both back to the unit and if
4 they went to the unit, they would go into their rooms
5 and we would isolate the power so that -- we could
6 isolate the power, so they couldnae sit and watch TV or
7 listen to music or the radio.

8 LADY SMITH: Thank you.

9 Mr Sheldon.

10 MR SHELDON: Thank you, my Lady.

11 What do you recall is the longest time that a child
12 might have been held in the timeout room?

13 A. Maybe about a period.

14 Q. Right. About an hour, less than an hour?

15 A. A period would be about 40 minutes or something.

16 Q. As far as you knew, it was never longer than that?

17 A. I think it would have been pointless having it if it had
18 been longer than that, because you were looking again as
19 you built your relationship with the kid and they were
20 learning, they trusted you, then they would be able to
21 self-regulate sooner, you know, and we'd built on the
22 experience that we'd had wi' the staff group, teaching
23 staff, who were there when I started.

24 Q. As far as you were aware, children weren't sent to the
25 rooms and locked in their rooms during the day?

1 A. Well, yeah, that would happen.

2 Q. That did happen. All right. Tell us about that then.

3 In what circumstances would that happen?

4 A. Like, for instance, the incident I described where two

5 children have been getting into a fight, right. It

6 would have been unfair to put one in the timeout room

7 and the other one back to the unit. So you would take

8 them back, both of them back, and you would work with

9 them individually while they were in their rooms.

10 Again, the idea was to de-escalate, help them

11 self-regulate and get them back into school again. The

12 only time anybody could be kept out for any significant

13 period would have been had there been an assault or

14 significant damage, destruction of property, or somebody

15 had harmed themselves.

16 Q. So again, how long might a child be held in their room?

17 A. I honestly can't recall. The one time I think we'd --

18 we had a log, a register, and it was the time the child

19 went and the reason and then the time they came back out

20 again, that we had to log that.

21 Q. We have heard reports, for example, that children might

22 be held in their rooms like that even for days?

23 A. There were instances where young people were in their

24 room for days, but that was because of their refusal to

25 engage wi' staff. It was due to -- I can think of one

1 young man, erm, just refused and rebuffed every attempt
2 at engaging wi' him. Even trying to get a meal to him
3 put staff at risk, because he would attack them. For
4 that young man we actually -- rarely did we do it, but
5 we had to call the police and the police laughed at us.
6 One officer laughed at us when he saw the young man in
7 his room.

8 The next thing his hat came flying out the room, his
9 stab vest came flying out the room and so did his belt
10 and by the time he came out and the young person still
11 hadnae been subdued, his shirt was transparent with
12 sweat.

13 So that was rare and it would only be in those
14 extreme circumstances would anybody be in their room for
15 days.

16 Q. But it could be a day, was that fairly common?

17 A. Yeah. And in terms of violence, if it had been violence
18 ... serious violence against another young person or
19 a member of staff, then it could be, you know, because
20 it would take a while to get it all dealt wi', done wi'
21 and everybody looked after.

22 Q. All right, sure.

23 LADY SMITH: You told me that, on that occasion, that the
24 policeman came to this young person who refused to
25 engage. The police laughed at you. What was the

1 policeman laughing about?

2 A. It's not always the big kids who present the most risk,
3 the most danger. This young man stood about that
4 height --

5 LADY SMITH: What height are you indicating?

6 A. He was about that height.

7 LADY SMITH: Sorry, what height are you trying to indicate,
8 about five --

9 A. About five-two, right, five-two, slight and I mean
10 slightly built, and he was a handful. He's one of the
11 most violent young people I've ever met, I've ever
12 encountered. And this police officer thought it was
13 funny that we couldn't deal with this.

14 LADY SMITH: Thank you.

15 A. And then he found out.

16 MR SHELTON: You talk a bit more about all this at
17 paragraph 57, page 13, and the following paragraphs,
18 'Bill'.

19 Paragraph 58, you tell us that an incremental
20 approach was taken, the worse the behaviour, the more
21 serious the sanction. You've been telling us about
22 confining a child to their room, sometimes.

23 What about removing items from the room; duvets,
24 blankets, furniture? Did that happen?

25 A. It did.

1 Q. All right. In what sort of circumstances did that
2 happen?

3 A. We would remove -- in terms of removing bedding, that
4 was always an option of last resort, because you would
5 want to ascertain why a young person wasn't getting out
6 of their bed in the morning. It could have been because
7 they'd a broken night's sleep, due to either nightmares
8 or just reflecting on their life experience or whatnot.
9 It could have been related to an incident in the unit
10 earlier in the day, so you wanted to try and ascertain
11 why they couldn't sleep, why they were still tired in
12 the morning.

13 Erm, if they had shared wi' us, 'I had a really bad
14 night because I'm missing my mum', which wisnae uncommon
15 or, 'I had a really bad night because I was getting
16 bullied', which again -- it wasn't -- it did happen
17 occasionally, but not as often as some folk might have
18 imagined. Then we would work on that.

19 We would, er -- some kids were just school refusers,
20 as I've said before, they had no rhythms, they had no
21 routines. They were anti-authority. They saw no point
22 in engaging wi' education, then we would need to deal
23 with that.

24 So what we would do is if it was a broken night's
25 sleep and a kid had shared this wi' us, then actually

1 we'd leave them to get a bit o' sleep.

2 If it was, erm, because they simply werenae going to
3 school, then we would put the power off to their room,
4 'cause you could isolate that from a cupboard outside.
5 So that they werenae lying in bed watching the TV,
6 listening to music or playing their games console. So
7 we would try that.

8 Then the next thing would be -- the ultimate would
9 be removing the duvet, so that it wisnae a comfortable
10 environment for them.

11 Removing furniture and belongings, erm, young
12 people, they would go to their room, they would be
13 upset, er, they would start destroying their own
14 property. They would start to self-harm. It's amazing
15 what you can use to inflict serious cuts and inflict
16 serious harm in yourself.

17 You could take [REDACTED], and by the
18 way, you can accomplish a lot more than superficial
19 scratches wi' [REDACTED].

20 You could take a [REDACTED], shatter it. You could do
21 that. I've seen --I have seen cuts [REDACTED]
22 and in those cases we'd remove everything we could. In
23 some cases that wasn't enough, because young people
24 would find places to hide, conceal stuff to self-harm.

25 You could put it in the creases in your body, your

1 thighs, top of your thighs, onto your trunk. If you
2 were clever enough then could you stick it in there, you
3 could put it in your hair, as well as putting it in your
4 body, in your orifices.

5 So we did not remove belongings as a matter of
6 routine, it was only when required.

7 Q. I suppose though, 'Bill', it might have had the effect
8 that if you had had to do that, the child's out of their
9 room during the day, and then, because of bad behaviour
10 during the day or some incident, whatever, they're sent
11 to their room again, does that mean they're sent back to
12 a room that has essentially nothing in it?

13 A. What you'd be looking to do would be again it's all
14 about de-escalating, it's help the child, the young
15 person, self-regulate. You want to help them develop
16 an understanding of why they're behaving the way they
17 do. You want to share the fact that you're concerned
18 about their welfare with them and that there are other
19 coping mechanisms that they can use, you know.

20 And we would -- we'd work on that. In some cases,
21 once we get the kid calmed down, the stuff could all go
22 back in. In other instances, if we still harboured
23 concerns, then you would allow a limited amount of stuff
24 in. You might allow, er, their ... what they used to
25 call a boombox, right? You might allow their boombox in

1 wi' two or three CDs, but you wanted the CDs back and
2 you wanted them intact and if they were intact and they
3 could show you, demonstrate to us, that it was okay,
4 then we'd give them more.

5 It was never intended to be punitive. It was there
6 as a preventative and it was there to protect those kids
7 fae doing further harm to theirselves.

8 Q. I want to go on to ask you a bit more about restraint.
9 We have touched on that and about the CALM technique or
10 the CALM protocol. You tell us more about that from
11 paragraph 62, this is page 15. At the end of
12 paragraph 62, you say:

13 'We always used the minimum level of physical
14 intervention. We didn't just go in there and put
15 someone on the floor. You wouldn't do that unless it
16 was absolutely necessary and justifiable.'

17 Do we take it from that, that, in your view,
18 restraint was regarded as, as it were, the last resort?

19 A. Yeah.

20 Q. We have heard some evidence that in some instances staff
21 resorted to restraint too easily and sometimes even,
22 apparently, as a punishment?

23 A. At no time -- during my time at St Kat's, at no time was
24 restraint or pain ever used as a punishment. That would
25 have undermined everything we were trying to do wi'

1 young people who had been physically, sexually and
2 emotionally abused. That would've set them back. We
3 would never have done that. We would only have been
4 reinforcing the young people's mistrust o' adults and
5 fears for their own safety further down the line. We'd
6 only have been strengthening maladaptive coping
7 mechanisms. No, it was never used as a means o' control
8 or punishment.

9 Q. There are a couple of other documents then I want to
10 show you and just get your comments on them. The first
11 one is SGV-000024049.

12 We'll move on then to EDI-000003600.

13 LADY SMITH: This is a Howdenhall report.

14 MR SHELTON: This is a Howdenhall report, my Lady.

15 So again, I understand that you may not be able to
16 comment on this fully, but I just want to get your
17 perspective from St Katharine's, as it were.

18 This is an inspection report 1998/1999, Howdenhall,
19 Frank Phelan acting manager. If we can then go to
20 page 6, please, 3.13 the recommendation is:

21 'A review of care and control practices within the
22 unit be undertaken. In particular, the apparent high
23 use of prone restraint techniques. This should include
24 an audit of records and incidents and discussion within
25 a working party, not restricted to internal

1 Howdenhall/St Katharine's membership.'

2 So he's suggesting a wider discussion about it.

3 (c):

4 'A "whole unit" behaviour management policy and

5 practice be established. This will require

6 clarification on the use of CALM by members of the

7 educational component of the unit.

8 'The review group should elicit the views of staff

9 in relation to managing challenging behaviour with

10 a view to recommending training and support systems.'

11 So there is apparently a concern about care and

12 control and particularly prone restraints.

13 If we can move on, and I'm going to ask you for your

14 comment after I've shown you all these parts of the

15 document, 'Bill'. If we move to page 10, please, and

16 paragraph 8.3, this is the document or the part of the

17 document we looked at briefly before:

18 'Staff morale appears to be low.'

19 Vulnerability and so on.

20 Then there is a series of pages which I'm afraid are

21 in the wrong order in this version of the document, so

22 I'll try and get this right.

23 The first one is page 19. We can see this is

24 a letter to Frank Phelan and it's from the Head of

25 Social Work. If we just look briefly at page 15, to get

1 the name into the record. That's the conclusion of the
2 letter. If we scroll down, we see it's cc'ed
3 Les McEwan, the Head of Social Work at that time.

4 Going back to page 19:

5 'Dear Frank.

6 'I write ... regarding issues of care and control
7 ... this is because of issues touched on in the draft
8 report.'

9 At paragraph 1, the writer says:

10 'The effectiveness of CALM may be being restricted
11 within the unit by the fact that not all staff are
12 trained in the techniques of de-escalation and physical
13 intervention. This needs to be part of the initial
14 induction programme.'

15 Then 2:

16 'The records suggest that during the period
17 January 1999 to March 1999, there were 61 incidents
18 recorded, 55 of these resulting in restraint being used.
19 Further analysis suggests that although guiding and
20 de-escalation features in some of the records, that
21 incidents can quickly escalate and result in young
22 people being placed in the prone position, sometimes for
23 periods up to 30 minutes, and at times in multiple
24 restraint interventions until the situation is
25 resolved.'

1 If we can then look at page 20, paragraphs 4 and 5:

2 'From reading the records, the inspector is of the
3 view that there may be incidents which led to prone
4 restraint techniques which could have perhaps been
5 handled in a different way and that the intervention of
6 staff may have escalated the situation.'

7 The writer goes on to give an example of a young
8 person having refused a shower, became verbally abusive
9 to a member of staff, after the member of staff removed
10 the young person's duvet. This led on to a situation
11 where the young person was placed in the prone
12 restraint, briefly.

13 5:

14 'The records indicate that on a number of occasions,
15 the situation escalates quickly from verbal abuse to
16 physical intervention by staff. It's unclear as to what
17 guidance staff have been given on this, but it appears
18 necessary to the inspector that a full audit of reports
19 is required to ascertain how and why staff are
20 intervening in this way.'

21 The conclusion is:

22 'The lack of agreed individual measures of care and
23 control appears to suggest that the common denominator
24 may apply, "If challenged, intervene".'

25 Just pausing there, 'Bill', for your comments on all

1 that, the inspection team clearly has a concern that
2 restraint is being used too often and too easily, that
3 prone restraints are being used too much, and that the
4 ethos, the culture, if you like, of this unit,
5 Howdenhall, at least, is if you're challenged, intervene
6 and I think we understand by that: intervene physically.

7 What's your recollection of how things were at
8 St Katharine's, 'Bill'? Was it the same as that or
9 different?

10 A. No, no. It's different. Erm, I'm quite surprised at
11 that. Erm, I didn't work in Howdenhall. I didn't
12 really know the staff group that well. I didn't know
13 how the teams were composed.

14 Q. You have told us some of the staff from St Katharine's
15 worked at Howdenhall from time to time and vice versa?

16 A. Yeah, but that wouldn't be enough to give an indication
17 as to how the unit was run and how they responded as
18 a team, you know. You would see an individual, they
19 would come round to St Kat's. They would have to fit
20 in. They would have to take their lead from St Kat's
21 staff.

22 So I'm not avoiding the question. I'm answering it
23 honestly. I have no recollection of that and my
24 recollection of how we used restraint in St Kat's was in
25 line with CALM policy. The references made to CALM all

1 go automatically to being restrained in a prone
2 position. CALM is a system, it teaches various levels
3 of physical intervention, all of which -- again, you
4 start off at the minimum wi' a safe hold to you go up to
5 restraint -- a prone restraint. The idea is you go in
6 there, when you're intervening, it's the minimum amount
7 of physical intervention as soon as possible.

8 Q. Okay, but, at least on the basis of what we see here,
9 that doesn't seem to have been the case at Howdenhall at
10 this time?

11 A. Certainly not fae reading that, but it's not my
12 recollection of how we used CALM in St Kat's.

13 Q. If we can just move on to look at Mr Phelan's reply to
14 this, page 17.

15 I'm sorry, I gave you the wrong name of the person
16 at the registration and inspection office, it's
17 Lawrie Davidson, and Frank Phelan writes to Mr Davidson.
18 He's responding to the letter at 27 April about care and
19 control, he says, paragraph 1:

20 'There was clearly an issue surrounding the CALM
21 training for recently recruited staff, which left
22 themselves and CALM-trained staff feeling unsafe. Newly
23 recruited staff are waiting approximately five months
24 before being trained in CALM, despite our frequent
25 requests to have these staff trained.'

1 So I suppose we see there that that may have been at
2 least part of the problem, that some of the staff
3 weren't trained in that particular technique.

4 We know that there were staff shortages at St Kat's
5 as well. Was that lack of training sometimes also
6 an issue at St Katharine's?

7 A. Again, I honestly can't remember. We had instructors --
8 CALM themselves trained colleagues at St Kat's and
9 I think at Howdenhall as well, er, to teach CALM
10 techniques, but as to whether that -- obviously it's
11 after that letter, that report, but that -- that's my
12 recollection.

13 Q. About halfway down that paragraph, Mr Phelan says:

14 'Another issue raised by the senior team here is
15 that although reaccreditation is welcome, our experience
16 of this is that it focuses almost exclusively on
17 physical intervention techniques, undermining the
18 de-escalation skills that are an integral part to the
19 CALM system.'

20 Again, do you have any insight into that from the
21 St Katharine's point of view, 'Bill'?

22 A. Not really. We would try -- before even going there,
23 I mean, you're talking about de-escalation, we would try
24 distraction and divert, you know, to try and help
25 a young person sort of self-regulate again.

1 We would try the skills that we had been taught, the
2 ones that came to us in the sort of intrinsically as
3 well. No, I don't remember that for St Kat's.

4 Q. Page 18, please, it's paragraph 4, Mr Phelan says:

5 'The issue of why situations escalate so rapidly
6 will be addressed by the care and control working group
7 ... any review of working practices must be done in the
8 context of the department's own care and control
9 practices.'

10 At the end of the paragraph, he says:

11 'We are also in the process of attempting to define
12 the differences between what might be dangerous
13 behaviour and what might be difficult behaviour and how
14 we need to plan our responses to each.'

15 Was that an issue for staff generally, 'Bill', the
16 idea that a young person might have posed challenges and
17 might have behaved, for example, in a verbally
18 challenging way, even perhaps squaring up to a member of
19 staff, but that, I think, perhaps we can distinguish
20 from dangerous, where they're actually doing something
21 actively to harm themselves or others, how did that sort
22 of distinction play out in the CALM system restraints in
23 St Katharine's?

24 A. I would hope that some of the answers I gave to your
25 earlier questions, when I was describing that -- my

1 language is deserting me, my command of English is
2 deserting me, but how you would use, erm, incremental
3 approach to an intervention, that the extremes,
4 self-harm, the extremes of violence and destruction of
5 property, down to somebody simply calling a teacher, you
6 know, something, not very nice. That was my practice
7 and it -- I think it is also illustrative of the
8 practice that my colleagues used as well, you know.

9 I mean, we took an incremental approach to these
10 things, using risk assessment. If people are doing
11 properly informed risk assessment, then you are able to
12 discern between dangerous behaviour and simple --

13 Q. So that was your approach, you tell us.

14 I suppose though that you wouldn't have been
15 involved in all the restraints that happened?

16 A. No.

17 Q. Both in St Kat's and across all the units?

18 A. No.

19 LADY SMITH: Mr Sheldon, it's now 11.30 am. Would that be
20 a good place to stop for the break?

21 MR SHELTON: Yes, can I take one more passage from this
22 letter, my Lady?

23 LADY SMITH: Certainly, and then we can move away.

24 MR SHELTON: If we can just look at page 16, and it's
25 paragraph 9, please:

1 'Note your comments with concern about some staff
2 feeling unsafe.'

3 He says, about halfway down the paragraph:

4 'It's not realistic that our practices here are
5 exempt from scrutiny and development. It may be that it
6 would have been useful to reflect this discussion in
7 your letter. The point highlighting staff perceptions
8 about the support being offered by the Social Work
9 Department as a whole are similar to those outlined in
10 the Edinburgh Abuse Inquiry.'

11 Pausing there, 'Bill', do you remember the Edinburgh
12 Inquiry into abuse at some children's homes in
13 Edinburgh, sexual abuse in some children's homes?

14 A. Yes.

15 Q. I think that's what Mr Phelan is talking about there.

16 He says:

17 'Staff do feel that the prescribed method of dealing
18 with difficult behaviour, ie CALM, is driven by a desire
19 for the department to protect itself rather than meeting
20 the needs of the staff and young people in its
21 residential units. Allied to this is my experience of
22 a staff team here that can be quite inward looking and
23 can be very suspicious of the motivation of people
24 outside the centre. I would be interested to hear your
25 views on what staff are saying they would find

1 supportive. I certainly know that one of the main
2 issues would be the level and quality of staffing
3 available.'

4 First of all, just asking you about CALM. Was there
5 a feeling that CALM wasn't really addressing the
6 problems that staff were experiencing on the ground?

7 A. Not in St Kat's. That wasn't the case. I'm sorry,
8 I interrupted you there.

9 Q. No, it's fine, I'm so sorry, I'm becoming hoarse.

10 A. The sentence:

11 'Allied to this is my experience that staff here can
12 be quite inward looking and can be very suspicious of
13 the motivation of people outside the centre.'

14 That was a feeling that did circulate for a wee
15 while.

16 Q. Why was that, 'Bill'?

17 A. That was down to the fact that people felt that staff --
18 staff felt that outsiders prejudiced secure, that secure
19 was composed, big men, it was all about hurting kids,
20 restraining them.

21 Er, all these beliefs that were in stark contrast to
22 what staff were actually trying to achieve and how they
23 went about achieving their aims and objectives, that
24 was, er -- I remember that feeling.

25 MR SHELDON: We'll come on after the break to look at some

1 of those perceptions, if you like, and I'll ask you
2 about those, but I think it's --

3 LADY SMITH: I think we should take the break now.

4 A. I would like to take a break.

5 LADY SMITH: We have kept you going for quite a while so
6 far.

7 We'll have a break for a quarter of an hour or so
8 and get back to your evidence again after that.

9 (11.35 am)

10 (A short break)

11 (11.51 am)

12 LADY SMITH: Is it all right if we carry on now, 'Bill'?

13 A. Yes.

14 LADY SMITH: Thank you.

15 Mr Sheldon.

16 MR SHELTON: Thank you, my Lady.

17 'Bill', before the coffee break we were looking at
18 an inspection report and some material around it, from
19 1999.

20 You, I think, agreed with me there was sometimes
21 a bit of suspicion within St Katharine's and Howdenhall
22 about outsiders and I want to ask you a bit more about
23 that.

24 Before I do, I just want to get from you that the
25 figures that we saw in that report suggest really that

1 restraints, indeed prone restraints, of young people,
2 were happening pretty much every day in Howdenhall.

3 Was that also the case in St Katharine's?

4 A. No, it wasn't. As I say, repeatedly, the use of CALM is
5 incremental and it would be -- the level of restraint
6 would be determined by the behaviour being displayed by
7 that young person.

8 The way the group was composed and constituted would
9 change as one young person left and somebody new came
10 in, er, factors like that would have an effect on the
11 behaviour of the kids and sometimes that would impact on
12 the need for a prone to be used.

13 Erm, old grudges, kids might know one another of
14 old, they might harbour grudges. You would have to
15 intervene. Every new admission came with that
16 fight-or-flight response that you had to overcome, and,
17 er -- but it wasn't every day, definitely not.

18 Q. But quite a common occurrence?

19 A. You'd have clusters at particular times probably, but,
20 no, it wasn't every day.

21 Q. You tell us at page 17, paragraph 72, that you didn't
22 see any behaviour that you considered to be abuse and no
23 child reported abuse to you.

24 Just thinking about the restraints and so on that
25 you've told us did happen, both at Howdenhall and at

1 St Katharine's. Do you think other staff could have
2 viewed some conduct by staff as abusive?

3 A. They may have done, but that would depend on their own
4 experience, life experience. If they'd been --

5 Q. Sorry, to interrupt, but why do you say that? What does
6 their life experience have to do with it?

7 A. For instance, maybe they'd suffered trauma themselves in
8 the past and this caused, you know, sorta reflection,
9 a bit of a flashback. You could also have -- erm, you
10 can't forget that witnessing, never mind participating,
11 but just witnessing a restraint can be upsetting and it
12 can provoke different emotions in different people.

13 If you don't understand the back story to whatever
14 led up to that particular intervention, then you might
15 view it as being abusive.

16 Q. I don't want to put words in your mouth, but I think
17 you're agreeing with me that other members of staff
18 might have viewed some of the restraints and so on as
19 disturbing?

20 A. Yeah, that's true.

21 Q. Perhaps even shocking?

22 A. Yeah, but for the reasons I've described.

23 Q. I just want to ask you about another document, this is
24 EDI-000000749.

25 This is a report of a significant case review that

1 was undertaken actually in the wake of the
2 Gordon Collins trial and the sexual abuse that he was
3 found guilty of ultimately.

4 I think it's fair to say, and you tell us in your
5 statement, that staff were unaware of what was going on
6 and at the time didn't really have any great suspicion
7 of Collins?

8 A. No.

9 Q. Anyway, there was a significant case review, to
10 understand how this could have happened, and the review
11 looked at a number of different aspects of practice at
12 the other children's home involved, Northfield, and
13 St Katharine's.

14 They found, as well as some of the factors that led
15 to the sexual abuse, they found other things that
16 disturbed them. I want to take this short, so I can
17 perhaps just tell you that the review spoke to a number
18 of members of staff, both internally and externally, so
19 residential care officers, social workers, children's
20 rights officers, and so on, and they also looked at
21 files, case notes, and again, all the paperwork to do
22 with the children and the circumstances surrounding
23 this.

24 The period covered 1995 to 2006, that being the time
25 that Collins worked at Northfield and then

1 St Katharine's.

2 If we can look, please, at page 48, they go on to
3 look at St Katharine's and this is on the basis of the
4 various people they've spoken to and the written records
5 that they looked at. It says:

6 'Some of the staff behaviour and management
7 responses at St Katharine's that were described to us
8 concerned us. Residents were locked in their rooms
9 without any possessions for long periods at a time,
10 sometimes days. This had a severely adverse impact on
11 the mental health of already vulnerable young people.
12 A member of staff raised a concern with the unit manager
13 about a colleague who had pinned to the floor a girl who
14 had given the member of staff a "funny look". The staff
15 member who reported the concern was told "perhaps secure
16 is not the place for you".

17 'A residential care officer saw a boy's wrist and
18 arm twisted by a member of staff as he escorted the boy
19 to his room, the boy was crying.

20 'A member of staff complained that she saw a girl
21 restrained and dragged upstairs to stop her leaving
22 Chalmers unit.

23 'One member of staff said she reported a colleague's
24 harsh behaviour and her concern was received well,
25 although she saw no diminution in the behaviour ... many

1 external professional staff and ex staff said that
2 St Katharine's was a macho environment, staffed by big
3 men who believed the young people were high risk, needed
4 to be locked up and had to be kept under control. The
5 harsh regime and overuse of power was considered by
6 those visiting the unit to be abusive.'

7 So I suppose, 'Bill', that summarises the point of
8 view that you put to us before the break, that this was
9 the perception, but based on the examples that the
10 review gives, would you agree that that perception
11 appears to be, to some extent, justified?

12 A. No.

13 Q. So you would disagree that this was a harsh regime with
14 an overuse of power?

15 A. Yes. Certainly, in light of the example cited in that
16 report. Had I seen anything of that nature occurring in
17 the unit, it would have been reported. Now, erm --
18 I'm reading it and I'm thinking the implication is that
19 every other member of staff in this centre was complicit
20 by their silence and by their refusal to raise these
21 allegations, was complicit in the abusive behaviour that
22 is described in that section of the report.

23 LADY SMITH: 'Bill', you said in light of the example cited,
24 which example?

25 Can we just go back up the page a bit, because

1 there's more than one example.

2 A. Yeah, well, for instance, the one about the possessions
3 in the room, I spoke to that one earlier, about the
4 young person.

5 Er, a member of staff pinning a girl to the floor
6 because of a funny look. I cannot, for the life of me,
7 see that happening. And if I had seen it, I would have
8 reported it.

9 MR SHELTON: We did hear some evidence directly, 'Bill',
10 from a young person who was at St Katharine's in the
11 thousands who describes an incident very like that.

12 A. I can only speak to my own experience, that's --

13 LADY SMITH: Well, that's the point, isn't it, 'Bill'? It's
14 well nigh impossible for you to speak to what was
15 happening across the board, isn't it?

16 A. Well, that's -- no, it's true, my Lady. I'm just taking
17 this as a, you know, almost feel like I'm under
18 a magnifying glass as opposed to a microscope.

19 MR SHELTON: We just want to get your help, 'Bill', to
20 understand what was going on.

21 A. No, no, no, and I appreciate that, but at no time would
22 I have supported or -- that type of behaviour by
23 a colleague. And if it did happen, then I'm ashamed
24 that it happened.

25 Q. If you look, please, over the page, page 49, and we see

1 the second paragraph there:

2 'Interviewees who had stopped working at

3 St Katharine's or who were from external agencies

4 described many staff at St Katharine's as "pumped up,

5 "overexcited", said they deliberately wound up young

6 people. A number of interviewees commented that some

7 staff were openly contemptuous of staff from different

8 backgrounds, [so] (nursery nursing, mental health ...'

9 And there was mocking.

10 There was apparently again a concern from external

11 agencies, certainly, that staff at St Katharine's were

12 perhaps contributing to this macho, overwrought and

13 perhaps violent atmosphere?

14 A. Certainly not my experience, no.

15 LADY SMITH: What about that last sentence, the paragraph

16 that begins 'interviewees, 'Bill', and that last

17 sentence:

18 'We were also told by a senior manager that it was

19 not uncommon for staff's arguments to spill over into

20 physical aggression in front of children.'

21 A. Honestly, I never -- never encountered that. I have no

22 recollection, even being informed about that. I mean,

23 if that's what happened, that's shocking.

24 LADY SMITH: It is, isn't it?

25 A. It is.

1 LADY SMITH: Yes. Thank you.

2 MR SHELTON: Moving on a little bit, although I'm afraid

3 I need to come back to that topic in a moment or two or

4 a related one.

5 You note at paragraph 75 that there were various

6 safeguards -- I think introduced at a later stage --

7 like a pager system and CCTV. When did CCTV come in?

8 A. The CCTV had been there from the time the place was

9 open, it was built into the unit.

10 Q. We understand that the footage from the CCTV might have

11 been deleted after about seven days, does that accord

12 with your recollection?

13 A. Honestly, I have no recollection of any -- the incident

14 you're referring to, or CCTV footage being deleted.

15 Q. I'm sorry, I'm not saying it's of a particular incident,

16 just that that was done automatically, just to,

17 I suppose, to clear the memory or clear the film --

18 A. I couldn't tell you, honestly, I couldn't tell you.

19 Q. Again, presumably there were areas that weren't covered

20 by the CCTV?

21 A. Er, aye, there were areas that weren't covered.

22 Q. Can you remember what those were?

23 A. Er, let me see, one half of the gym wasn't, I don't

24 think, was covered. Erm, there were no cameras in any

25 of the bedrooms. That was the only place I can think --

1 oh, and a short piece of corridor between education and
2 the gym might not have been covered.

3 Q. You go on to talk about investigations into abuse and
4 indeed some allegations of abuse. We understand your
5 position about the allegations against you, that you
6 firmly deny them.

7 A. Mm-hmm.

8 Q. I want to ask you a bit more about that. You talk about
9 -- this is page 19, paragraph 82, that there were
10 various investigations, you say, there were allegations
11 by KTV [REDACTED] and by KTS [REDACTED], and you
12 describe the allegations as being lies and far-fetched
13 lies.

14 In general terms, 'Bill', do at least some of their
15 concerns not seem to have been the same as the ones that
16 I have just shown you that were expressed in the
17 significant case review?

18 A. I can only speak to the ones that directly relate to
19 myself.

20 The incident wi' a staff member chasing a kid wi'
21 a drill, I've no recollection of that. I didn't hear
22 anything about it. I can only speak to what is directly
23 related to myself, ken.

24 And when I do know about other stuff, I would answer
25 honestly and fully.

1 Q. You describe the allegations that they make as lies and
2 far-fetched lies at that. Why do you say that? Why do
3 you think they're far-fetched?

4 A. A couple of things have to be borne in mind, that, for
5 instance, it's 24 years later and I'm made aware that
6 somebody's raised allegations against me. Erm, memory
7 gets in the way. I mean, I'd moved on to different
8 posts.

9 Looking back, it's -- I always thought of my time
10 back in St Kat's, I looked on it wi' fondness and a bit
11 of pride and then this comes out and the fact that the
12 allegations raised by both Ms KTS and Ms KTV
13 had been investigated and found to be groundless. The
14 whole thing was honestly like standing in front o'
15 a train, so my response might have been -- was obviously
16 influenced by the emotions I was experiencing at that
17 time.

18 Q. I think you tell us that there were investigations by
19 the police, but, of course, you know that the police and
20 indeed the courts, if it had got that far, would be
21 operating to a different standard of proof, it's
22 a higher standard?

23 A. You'll have to excuse me, my knowledge of criminal law
24 ...

25 Q. All right, that's perhaps an unfair question, but I just

1 want to ask you a little bit more about why you say that
2 these are lies and specifically at paragraph 114,
3 page 26, you say that:

4 'What KTS [REDACTED] said is lies verging on
5 slander. KTS [REDACTED] is doing nothing but bearing
6 a grudge against someone, and I believe that is
7 KEH [REDACTED].'

8 Why do you think KTS [REDACTED] would be bearing
9 a grudge against KEH [REDACTED]?

10 A. Having read the statement, it was to do with she'd come
11 to the unit to do like a six-month probationer and KEH [REDACTED]
12 wasn't going to sign off -- wi' what I can gather fae
13 her statement, KEH [REDACTED] wasn't going to sign off on it,
14 which meant she wouldn't have been employed at St Kat's.

15 Now, if I can just -- to help put things into
16 perspective, my relationship wi' KTS [REDACTED] when we worked
17 together was unremarkable. If anybody had asked me,
18 until such times as I read her statement: do you know
19 KTS [REDACTED]? My simple comment would have been:
20 I worked wi' her at St Kat's for a wee while.
21 I wouldn't have made any comment beyond that.

22 So when all this comes out in the wash, it's like:
23 wow.

24 Q. But it clearly, for whatever reason, has stuck pretty
25 firmly in her mind, unless she's just making it up

1 completely?

2 A. Yes. Mm-hmm.

3 Q. As I've said, some of her concerns seem to be similar to

4 the ones that other professionals have had, so do you

5 still say it's obviously lies?

6 A. Well, certainly the stuff related to myself I can

7 comment on, yes.

8 Q. All right. You do talk a little bit about that at --

9 it's also page 26, paragraph 113, this is in relation to

10 the allegation that staff would bend children's fingers

11 back until the children were begging for the staff to

12 let go and you say, and you've told us this already:

13 'We never used pain for control. We did have cause

14 to prise kids' hands open at times.'

15 Perhaps you can explain what you mean by that?

16 A. As I explained earlier, we had young people who would

17 self-harm and self-mutilate. Mostly it was [REDACTED]

18 [REDACTED] but on occasion it would go to [REDACTED]

19 and they would use implements that ordinarily people

20 wouldnae consider to cause that harm to themselves. And

21 so we would find them and they were still clutching it

22 in their hand and we wanted to remove that, before they

23 did any further damage to themselves, cause themselves

24 any further harm.

25 So, yes, we would prise a young person's hand

1 over -- not over, open. We certainly did not push kids'
2 fingers back to inflict pain.

3 Q. At least when you were carrying out a restraint?

4 A. Yeah.

5 Q. So it's possible that KTS did see something
6 like that, it just wasn't you that was doing it?

7 A. Yeah, but it's me that --

8 Q. Well, I appreciate that and we know your position about
9 that, 'Bill', and fine, we note that, but I'm saying
10 it's possible that other members of staff may have been
11 doing this and KTS did witness that?

12 A. It's possible, but it would never have happened on my
13 watch.

14 Q. Even if it wasn't being done deliberately, I suppose it
15 might have appeared to be causing the child pain when it
16 was being done?

17 A. It might very well.

18 I mean, as I explained earlier, witnessing this,
19 a restraint, if you are new to that sorta type of
20 intervention can be highly emotive. It can really get
21 people upset, you know, and it might have affected her
22 recollection. It might even have affected her
23 observations of what was going on. I can't speak to
24 that.

25 Q. You thought she might have been getting overemotional?

1 A. It's possible. I'm not saying she was.

2 Q. What about toy fighting, 'Bill'? We know that toy
3 fighting or horseplay was allowed in
4 St Katharine's/Howdenhall and, indeed, some members of
5 staff were positively in favour of it as a way of --
6 well, I understand that the idea was that it would be
7 a way of letting off steam for young people, is that
8 right?

9 A. No, that would imply that it was -- no, no, no, that's
10 a coping mechanism. You don't want to teach kids that
11 to let off steam, they've to climb over people and jump
12 on them. So it wouldn't have been as a method o'
13 letting off steam.

14 Certainly, it was one way that for some children
15 they -- the first time that they'd had safe, physical
16 contact with an adult, predominantly male, but
17 occasionally female because some had been abused by
18 females. So it was a way of having safe physical
19 contact. It was recapturing for some of them the
20 experiences that they didn't have in their formative
21 years.

22 Q. Help us understand, 'Bill', what was toy fighting or
23 horseplay like? What did it consist of?

24 A. Er, do you have children, sir?

25 Q. Sorry?

1 A. Do you have children?

2 Q. I don't, but I'm asking you --

3 A. You know, kids will come up and they'll run up and

4 they'll jump on you --

5 LADY SMITH: All right, 'Bill', you tell me, I know about

6 children.

7 A. Right.

8 LADY SMITH: But before we do that, there's something I want

9 to ask you and I've read what you say was involved here

10 and the reasoning behind it, which you have just alluded

11 to. Is there any academic or other similar study that

12 supports this in the way you set it out, that these are

13 children who haven't had contact with adults and it's

14 maybe going to be beneficial to them? I'm shorthanding

15 it, but that's what you say. Is it backed up by --

16 A. I cannae give you any references.

17 LADY SMITH: All right.

18 A. -- my Lady, but I can say about, you know, childhood

19 development and the early years and whatnot and physical

20 contact, as one of the ways you enhance a child's

21 development.

22 LADY SMITH: Well, there's one side to that and it involves

23 picking up and cuddling a baby from newborn and cuddling

24 toddlers and carrying on hugging your children as you

25 get older, but this is different. This isn't that sort

1 of setting.

2 A. Yes, some of the kids had never had that.

3 LADY SMITH: Yes. And the staff in St Katharine's or

4 Howdenhall were not family, they were not their parents.

5 A. No. And the other thing would be for some of the kids,

6 they would display inappropriate physical contact wi'

7 adults and you were trying to teach them what was

8 appropriate, what was safe and what wasn't.

9 LADY SMITH: So with those children you are trying teach

10 them not to touch?

11 A. Yeah, you know, what constitutes safe and unsafe

12 physical contact.

13 LADY SMITH: Thank you.

14 Mr Sheldon.

15 MR SHELTON: Thank you, my Lady.

16 I want to come back to the issue of toy fighting,

17 but just while you're on the subject of touch and safe

18 touch. Of course, one of the allegations is about

19 massaging children and you say that's something that you

20 didn't do and we understand that.

21 Do you recall there was a staff discussion about

22 that at some point, that some staff were comfortable

23 with it and some were not?

24 A. No, I -- honestly I do not.

25 Q. You don't recall that. All right.

1 But a discussion might have been had and that is
2 something that might have happened?

3 A. It might've done, but certainly I have no recollection
4 of it.

5 Q. You've no recollection, all right.

6 I want to go back then to the subject of toy
7 fighting or horseplay. Is it the same thing? Is that
8 just two words for the same idea?

9 A. It's the same idea.

10 Q. Can we look, please, at EDI-000003595.

11 This is in relation to a reinspection of Edinburgh
12 secure units in 2000. We see it's an inspection of
13 Braid and Guthrie and a copy of the letter was being
14 sent to LUZ [REDACTED], SNR [REDACTED] of Howdenhall.

15 If we just look at one passage in the inspection
16 report, it's at page 16, please. Paragraph 37. If we
17 can just blow that up a little, please. Thanks very
18 much. We see:

19 'In Braid, the atmosphere was warm, caring and
20 relaxed.'

21 That's the secure unit at Howdenhall, right?

22 A. Mm-hmm.

23 Q. 'Difficult situations were defused rapidly and
24 appropriately by staff. In Guthrie, a relaxed
25 atmosphere could soon become tense with horseplay

1 deteriorating into loss of self-control. This was
2 partly attributable to the instability of some young
3 people and the mix of residents at the time of the
4 inspection. However, the standoffish approach adopted
5 by Guthrie staff may have contributed to a climate where
6 incidents were more likely and could easily escalate.'

7 Could I just get your comments about that, please,
8 'Bill', that while Guthrie could be relaxed, if there
9 was horseplay then that could go downhill, it could
10 deteriorate and there could be a loss of control?

11 A. If it wasn't properly managed, aye, if staff werenae
12 sorta implementing a decent level of supervision to the
13 kids.

14 Q. If they're taking a standoffish approach, then it sounds
15 as if perhaps they were not --

16 A. They weren't.

17 Q. Would it be fair to say, again, I don't want to put
18 words in your mouth, that if there is a loss of control,
19 if there's a deterioration of the situation, then that
20 would be more likely to lead to a restraint?

21 A. It could do, yeah.

22 Q. And, indeed, a prone restraint?

23 A. Mm-hmm.

24 Q. So thinking about that, and the idea of horseplay, would
25 you say now, in the light of that, that horseplay, that

1 toy fighting was a good idea?

2 A. Not in those circumstances, no.

3 Q. 'Bill', really one last thing and it's to ask you about
4 this idea: is it possible that female staff and female
5 professionals in particular could view all this in
6 a different light from the men in the unit, in the
7 establishment?

8 A. Could you repeat the first part, sorry?

9 Q. Is it possible that female staff and female
10 professionals from outside could have been viewing all
11 this in a rather different light from the males?

12 A. I wouldn't say it was gender-based, it's individual,
13 based on the particular individual.

14 Q. I just want to again get your comment on another
15 document. It should be the last one, I hope. It's
16 EDI-000004977.

17 Again, if we can blow that up, please. It is the
18 annual inspection at St Katharine's, 1997. We know that
19 LUZ [REDACTED]'s [REDACTED] SNR [REDACTED] of
20 St Katharine's/Howdenhall. There's a note there about
21 Guthrie containing secure residential provision and so
22 on and there's then inspections of various aspects of
23 the unit's work.

24 If we look, please, at page 8, and it's
25 paragraph 5.3:

1 'To further enhance the positive quality of life
2 experienced by young people resident within the centre,
3 the following issues require to be addressed.

4 'Whilst there is an appropriate level of awareness
5 in relation to anti-discriminatory practice/equal
6 opportunities amongst the staff group and the management
7 team specifically, a majority of female staff members
8 stated that on occasion, they felt marginalised or
9 discriminated against by male colleagues on gender
10 grounds. A percentage of male colleagues shared this
11 view.

12 'It was acknowledged that to some extent the
13 situation resulted from (a) inherited "custom and
14 practice" from workers' previous workplaces, (b) overall
15 predominance of males within the staff team and (c)
16 misguided paternalism.

17 'However, staff members did relate incidents that
18 appeared overtly discriminatory, the inspectors
19 witnessed on one occasion the use of inappropriate
20 language of a sexist nature.'

21 'Bill', do you recall that sort of behaviour in
22 St Katharine's at that time?

23 A. Not in my relationships wi' female colleagues, I mean,
24 I'd already come -- I'd come fae a nursing background
25 where predominantly the workforce was female, so my

1 experience -- my personality as well had shaped my views
2 about working wi' female colleagues and I have no --
3 that wasn't my experience of working wi' female
4 colleagues.

5 Q. Again, so far as you were concerned, that wasn't
6 an issue in St Katharine's?

7 A. Not for me and not within my ken, no.

8 Q. All right. You say that you yourself were once subject
9 to a complaint, this is page 29, paragraph 126. You'd
10 made a decision to take a young woman to the floor,
11 a colleague disagreed and thought you'd acted too
12 quickly, so the colleague complained.

13 Can you just tell us about that and about what led
14 to that incident?

15 A. A young girl had been brought back to the unit. She'd
16 been underneath -- not underneath, she went under the
17 influence of some substance or other and we were using
18 the emergency room and she kept trying to get out the
19 room and it's going to sound stupid, but I had a good
20 working relationship with her. I had never seen her
21 that distressed or that upset before and that did have
22 an emotional impact on my judgment.

23 And I'd -- as I've said there, and I'm quite open
24 about it, my decision to go to prone was hasty, you
25 know, erm, and I've said this more than once during the

1 course of this questioning, that getting involved in
2 restraint or even observing can be upsetting.

3 This was my upsetting moment and my colleague, er,
4 disagreed with the decision and raised it and we had to
5 -- I had to sit down and resolve it and I was able to
6 resume a good working relationship with that young
7 woman.

8 Q. What was her reaction to it at the time?

9 A. The young woman?

10 Q. Yes.

11 A. Well, she wisnae happy, you know, she wisnae happy,
12 I'm not going to ...

13 Q. Did that help her distress or make it worse?

14 A. I suppose the only thing I did was maybe compliance,
15 that was about it. Er, I got myself away fae it and
16 left it to colleagues to do the debrief and everything
17 else.

18 Q. The last thing I want to ask you about that is: do we
19 understand, from what you say there, that you made the
20 decision to take this young woman to the floor? How old
21 was she, by the way?

22 A. About 15, 16.

23 Q. What sort of size was she?

24 A. Er, she wisnae very tall. She -- maybe -- she was about
25 average height for a lassie, about five-six.

1 Q. You told us that you made the decision to take her to
2 the floor. Did you do that yourself?

3 A. I said, aye, 'Go down', you know, 'Get down to the
4 floor'.

5 Q. So it was just you and the young woman then on the
6 floor?

7 A. No, there was a group o' us there.

8 Q. How many?

9 A. Honestly, I can't recall.

10 Q. So did you all take her down or --

11 A. Those o' us that were involved the hold.

12 Q. How many of you were involved in the hold?

13 A. There would have been three -- no, hold on. One either
14 side and then on the way down, there would have been
15 somebody on the legs.

16 Q. I should perhaps have asked you this before, but were
17 children ever injured in the course of restraints?

18 A. Were children in general ever?

19 Erm, you would get the occasional carpet burn,
20 that's true. You would get that. There was never
21 anything in terms of like musculoskeletal, you know,
22 like bones and whatnot, I don't recall anything wi'
23 that.

24 Staff, I can recall staff being injured and
25 assaulted.

1 Q. You tell us at paragraph 128 that you left
2 St Katharine's in 2010 and now you work, I think, in
3 a role not directly involved in residential childcare;
4 is that right?
5 A. Yeah.
6 Q. You are still in post at the moment?
7 A. Yeah.
8 MR SHELDON: 'Bill', thank you very much. I don't have any
9 further questions.
10 My Lady, anything further?
11 LADY SMITH: No.
12 'Bill', thank you so much. I think we've questioned
13 you enough for one morning. I'm sure you feel that now.
14 I'm really grateful to you for bearing with us and
15 I hope you understand why we have had to press you in
16 the way we have, because of the work that we're doing
17 here.
18 A. Mm-hmm. No, no.
19 LADY SMITH: Now I'm able to let you go and be relieved of
20 this pressure.
21 A. Thank you.
22 LADY SMITH: Thank you very much, indeed.
23 A. Thank you very much.
24 (The witness withdrew)
25 LADY SMITH: We'll have time to read in some evidence before

1 the lunch break, but before I do that, I want to mention
2 some names we've used with that witness of people whose
3 identities are not to be repeated outside this room,
4 because they're protected by restriction orders.

5 There's KTV [REDACTED], KTS [REDACTED] and
6 KEH [REDACTED], so please do not identify them as having
7 been referred to in our evidence beyond these four
8 walls.

9 Thank you.

10 Ms Forbes.

11 'Jamie' (read)

12 MS FORBES: My Lady, there is a statement that we can read
13 in just now and it's from an applicant who is anonymous
14 and is known as 'Jamie'.

15 The reference for his statement is WIT-1-000000891.

16 My Lady, 'Jamie' tells us he was born in 1993 and
17 talks about his life before going into care between
18 paragraphs 2 and 21 of his statement.

19 In summary, he was born in Aberdeen. He lived with
20 his parents and three older siblings and says he had
21 a good upbringing but life at home was sometimes
22 volatile. His parents would fight a lot, his dad was
23 an alcoholic. They got divorced but his mother kept his
24 dad in the house.

25 He went to school but had issues. He says that ADHD

1 wasn't a thing at that time and he wasn't diagnosed
2 until he was 10. He had a social worker and there was
3 an incident then at school where he was accused of
4 hitting a teacher with a chair and his mum took him home
5 and battered him with a belt. He says he ran out of the
6 house then covered in marks in freezing cold weather and
7 was wearing only boxer shorts and his sister's coat.

8 A woman took him in and contacted the social work
9 and he was taken to hospital and his injuries were
10 photographed and after that, he was put into care.

11 My Lady, the records that we have show that that
12 assault was on [REDACTED] 2001 and it's described in his
13 records as a serious assault. We know that a child
14 protection order was then granted.

15 His mother received a two-year probation order as
16 a result of that assault.

17 He then tells us about foster care, children's homes
18 and secure units.

19 He says he was 7 or 8 when he first went into foster
20 care and, according to our records, he went into foster
21 care on [REDACTED] 2001 and he was there for a month. He
22 was aged 7 at that time.

23 He talks about his time in foster care between
24 paragraphs 22 and 32 and he tells us there was sexual
25 abuse from the foster carers' granddaughter, he

1 eventually told the foster carers about it, they said he
2 wasn't fitting in and he was moved and he was then
3 placed with his aunt and uncle.

4 He thinks he was still only 8 or 9 at that time, but
5 I think we know from his records he was younger. Whilst
6 he was with his aunt and uncle, he was being abused by
7 his cousin. He ran away, told his mum and the social
8 work found out, but he then felt pressured to say it had
9 all been a lie and he went to stay with his dad.

10 'Jamie' says his dad let him smoke and drink. His
11 dad was always drunk and there was an incident that took
12 place when he was bringing his dad back drunk from his
13 grandparents' house and 'Jamie' was almost hit by a van
14 and he says that his dad pushed him in the way of it.

15 He then went to his dad's house and smashed it up
16 and his dad phoned his mum and his mum said to phone the
17 police and the police came and lifted him and he went
18 back to his aunt and uncle's. Pressure was put on him
19 to go back there and the abuse started again.

20 He would run away, he says, after they took him to
21 school. School ended up taking his clothes off of him
22 and leaving him with just boxer shorts and socks on, but
23 he still kept running away.

24 He was then sent to a children's home and he tells
25 us about that from paragraph 60 to 70 of his statement.

1 From our records, we know that 'Jamie' was sent there on
2 [REDACTED] 2004 and he stayed there for just under a month
3 to [REDACTED] 2004, so he was 10, almost 11 years old at
4 that time.

5 Secondary Institutions - to be published later

6 [REDACTED]
7 [REDACTED]
8 Secondary Institutions - to be published later

he

9 went to a semi-secure unit.

10 From the records we have, 'Jamie' was sent there on
11 [REDACTED] 2004 and he was there until [REDACTED] 2004,
12 so just under four months, and he was 11 years old.

13 He tells us about that between 71 and 140.

14 He thinks he was 10 but I think we know he was 11 at
15 that time. Secondary Institutions - to be published later

16 Secondary Institutions - to be published later

17 [REDACTED]
18 [REDACTED]
19 Secondary Institutions - to be published later

He was then taken to

20 Rossie Farm.

21 He tells us about Rossie Farm between
22 paragraphs 141 --

23 LADY SMITH: So he must have been 11 when he got to Rossie?

24 MS FORBES: Yes. He thinks he was still only 10, but we

25 know he was sent there on [REDACTED] 2004 and he was

1 there until [REDACTED] 2005, so about six months and he was
2 11 the whole time. If we can go to that part of his
3 statement.

4 'Jamie' says that there were boys in there who were
5 a lot older, 17- or 18-year-olds and there were those in
6 Rossie who had been remanded for murder.

7 He tells us about the units in Rossie, which we have
8 heard evidence about, and he says he was in Lunan. He
9 says that was a secure unit and they all had their own
10 bedrooms.

11 He tells us about the staff, but says they didn't
12 really supervise them and the staff used to spend most
13 of the time in the office.

14 He says that they would supervise them through
15 a window in the office into the games room, but you
16 could do whatever you wanted in the living room and
17 people used to smoke, he says, and chuck the cigarettes
18 out the living room window and he says he started
19 smoking cannabis when he was at Rossie.

20 He tells us that a lot of the staff were Glaswegian
21 and most of the other young people were Glaswegian, he
22 was the only Aberdeen boy there.

23 He tells us then about the routine at Rossie from
24 paragraph 144. He says:

25 'When I arrived at Rossie Farm, my mum started

1 shouting that what they were doing to her son was
2 illegal. My mum told me to get into the car. She said
3 she was taking me home with her. A member of staff from
4 Rossie Farm spoke to her. My mum and dad then walked me
5 into Rossie Farm. She told the staff to get away from
6 me. They sat in the car while my mum walked me in.
7 I would have ran away if the staff had come near me.
8 That was what I had planned to do when I got out the
9 car.

10 'We were taken into a room. My mum and dad were
11 allowed to stay with me for a while. I was then taken
12 up to my unit, Lunan. They let my mum have a look at
13 unit, but they told her she could have a proper look
14 around when she came to visit me. My mum told me that
15 I'd be all right and then that was it.'

16 He says Secondary Institutions - to be published later
17 Secondary Institutions - to be published later he didn't even have
18 a change of clothes. His things followed a couple of
19 months later and his mum had to go and buy him new
20 clothes until his things arrived.

21 He tells us then that he had his own bedroom in
22 Rossie. The bed was fixed and wasn't moveable and like
23 a bed you'd get in a police station cell. The only
24 thing that could be moved was the mattress.

25 At paragraph 147 he tells us:

1 'The staff often took our mattresses away so we
2 didn't sleep during the day. They thought it would make
3 us go to sleep at nighttime. Sometimes night shift
4 staff would flick your light on and off to annoy you.

5 'They didn't tell us, but I'm sure there was
6 asbestos at Rossie. They took down the wall and I could
7 see it in the bricks. I was moved out of the room and
8 there were people with white suits in there hoovering.
9 They didn't check me to see if I was all right. I was
10 exposed to that wall for months. One day, I damaged
11 a part of it and a member of staff said I had to get
12 moved.'

13 Then he tells us that another boy had to be moved to
14 the remand area because he got put into that boy's room
15 for a few days.

16 He tells us about a dining room and a kitchen in his
17 unit, but he can't remember what the food was like.

18 At paragraph 149, he says:

19 'I started to get tics because of medication I was
20 prescribed. Because of the tics my eating became really
21 bad. When I was eating in the kitchen another boy in my
22 unit used to mock me. I used to go off my head at him.
23 The staff would then put me into my room for swearing.
24 [The boy] would never get into trouble but I was always
25 getting into trouble for reacting to him.'

1 He says the boy always mocked him when they were
2 eating their dinner and he says at paragraph 150:

3 'Without him realising it, it was really affecting
4 my eating. I would get chucked out of the kitchen and
5 put into my bedroom. You were only allowed to eat in
6 the kitchen. I wasn't allowed to eat in my bedroom, so
7 if I was put in there I wouldn't get my dinner.'

8 He talks about the fact that there was more control
9 in Rossie than his previous placement and they would
10 only let a certain number of people out to shower at
11 a time. He then says that he did go to education at
12 Rossie but very rarely and if he wasn't in education, he
13 would just sit about the unit.

14 In relation to leisure time, 'Jamie' says from 153:

15 'We weren't allowed to leave the building because it
16 was secure. After three months I was allowed one to
17 ones, there were also two to ones. Two to ones meant
18 two members of staff would walk around the grounds with
19 you. Rossie Farm used to be a big farmhouse, so you
20 were basically walking around a farm.'

21 He says that because of his age he wasn't supposed
22 to watch films that were certified as 12, but most of
23 the staff would let him watch 12 certified films and 15
24 films.

25 He tells us at paragraph 155 that his mum used to

1 buy him food in Rossie, but he was also allowed to buy
2 food once a week and you could spend whatever you
3 wanted. Staff would go and buy it for you and it was
4 kept in a cupboard. You had to go through staff to get
5 access to the food.

6 He says they weren't allowed to smoke in Rossie, but
7 kids would sneak cigarettes in during visits.

8 He then talks about ADHD and says that his mum
9 always thought that he had that and he says there was
10 a woman who spent 20 minutes with him on two occasions
11 at a hospital in Aberdeen and said that he didn't have
12 ADHD and that he was all right, but when he went to
13 Rossie, his mum demanded that he get a psychiatric
14 assessment and was taken to a place in Dundee and then
15 he was there for less than an hour and was diagnosed
16 with ADHD. That would be when he was 11, because of the
17 records, my Lady.

18 He says he then was prescribed medication, but that
19 was the medication that gave him the tics and he says
20 that he would be mocked because of the tics and he says
21 he still gets them to this day, but they started at
22 Rossie and that that medication messed his head up and
23 it's never been the same since.

24 He tells us at paragraph 161 that his mum would come
25 and visit him at Rossie and that no matter where he's

1 been, his mum would always visit, but he says that when
2 he went to most of the panels, he didn't really get to
3 speak, because his mum would be shouting at them and he
4 was always trying to pacify his mum and calm her down
5 and it was always chaos.

6 He says he did get to say something at the
7 Children's Panels, but there were people he had never
8 met. He says at paragraph 162:

9 'You're not going to be honest in front of all those
10 people in a room full of social workers. They were
11 asking direct questions and I found it hard to be
12 truthful. There were things I found hard to tell my
13 mum, so I wasn't going to tell a room full of people
14 that I didn't know. They shouldn't even be putting you
15 in a situation like that.'

16 He goes on to talk about discipline at 163:

17 'I was always being put into my room at Rossie. It
18 was for stupid reasons. The staff did it for power.
19 There were older members of staff who were really good.
20 They were decent. They would calm me down and speak to
21 me. There was one older member of staff who used to use
22 an invisible fishing wire with a caterpillar at the end.
23 His name was Eddie. He would pull it and it would jump.
24 I was only young at the time and he used to make me
25 laugh. He was distracting me, but I didn't realise it.

1 I used to get excited about it. He would pull it out
2 and make me laugh, which was how he got me to calm down.
3 Most of the other staff didn't do that. They just put
4 me in a room and left me.

5 'The younger staff didn't care. At the time
6 I didn't have a diagnosis. They knew that there was
7 a chance I had ADHD, but they didn't really care. It
8 was 20 years ago and back then, ADHD was just starting
9 to get mentioned. The older members of staff would take
10 me into the office and talk to me. The younger members
11 of staff would put me in my room. They would come to
12 the door and laugh. They would say things like, 'What
13 have you done this time?'. They would find it funny and
14 it wasn't funny. I can't remember the names of members
15 of staff who did that.

16 'The staff would also take all your stuff off you.
17 They would take your TV, your CD player and all your
18 stuff off you and put you in a room with nothing in it.
19 They took your duvet and pillows as well, anything that
20 would make it comfy. I can remember being put in rooms
21 without a mattress. That happened in other children's
22 homes as well as Rossie. I would have to be in a room
23 all night without a mattress. I would kick the door and
24 ask how I was supposed to go to sleep. The staff would
25 tell me that I had a bed. That happened to me all the

1 time in Rossie. There were times that I went 24 hours
2 without a mattress. They did that to me a couple of
3 times. They would come in the next day and wonder why
4 I was going off my head, but it was because they kept me
5 in a room all night without a bed.

6 'On one occasion, I asked a member of staff how
7 I was supposed to get to sleep. The staff member said
8 that I had a mattress. I stood aside and showed him
9 that I didn't have a mattress. I think he genuinely
10 felt bad about it. He said there was nothing he could
11 do about it. He even tried to put a towel under the
12 door but it wouldn't go under. He did try to help me.
13 He stood at the door and spoke to me for a long time
14 until I managed to fall asleep. I think he was at the
15 door for about four hours.

16 'If you spoke to people out the window at nighttime
17 at 12.00 am/1.00 am or if somebody banged, the night
18 shift would pass it on to the day staff. They would
19 then take your mattresses away first thing in the
20 morning. They would keep it so that you couldn't go to
21 sleep all day. They thought you would be tired at
22 nighttime and go to sleep, but it didn't work out that
23 way. As soon as I got my mattress back, I would rip it
24 up and fight them even more. It made me even more
25 determined to get one over them.

1 'About 70 per cent of my time in Rossie Farm was
2 spent behind doors, smashing up the rooms. I remember
3 the staff trying to torment me. I remember being in
4 a room all the time and trying to take bricks out the
5 wall. I remember thinking, "What the fuck do I have to
6 do to this building for them to pay attention to me?"
7 They weren't. They were just leaving me in a room.
8 I was literally taking walls down. It might sound
9 far-fetched, but the staff would disappear for three or
10 four hours, come back and it would be open plan. It
11 hadn't been like that before they left. They didn't
12 care. I was literally messing about with the integrity
13 of the building and they didn't care. They just let me
14 do it.

15 'Rossie was a very old building. There was
16 plasterboard covering the walls but most of it was
17 damaged so you could see the bricks. On my bedroom wall
18 there was a part of the wall that came out where the
19 chimney was. I remember I saw the roof move after
20 taking the bricks out. The staff moved me to another
21 room, because things started falling through the roof.

22 'I was restrained all the time in Rossie. It was at
23 least once a day. It's recorded in my papers. My mum
24 had piles of records, including a pile about restraints.
25 The staff used figures of four, which is used in most

1 children's homes in Scotland. It's meant to be a method
2 that doesn't hurt you. If the staff are holding you
3 still, it won't hurt. If they put pressure on you, it
4 hurts. Prison officers at HMP Grampian have told me
5 that when they're trained how to restrain prisoners,
6 they have to get restrained in that method themselves.
7 They then have a better understanding of when the
8 restraint inflicts pain on the person being restrained.

9 'If the staff restrained people and put them in
10 their room, most people calmed down. I didn't calm
11 down. It made me worse. If they came and spoke to me,
12 I would calm down. The more they left me to just get on
13 with it, the more I'd go off my head. They used to put
14 me in what they called the dungeon. I would be put in
15 there for stupid things.

16 'Rossie was quite a tall building and the dungeon
17 was down the stairs. It must have been like a basement
18 because if you looked out one of the windows as you went
19 down to it, you could see the ground. It was above the
20 window. The dungeon was in the deepest part of the
21 building. It was about as far away from everyone else
22 as you could get, right in the corner of the building.
23 You had nothing in there, not even a mattress or a bed.
24 The only time I've been in a similar room was in
25 Carstairs. Even in Carstairs there was a window. There

1 wasn't even a window in the room in Rossie.

2 'There were three brick walls and the back one was
3 made out of wood. I remember kicking the wooden wall
4 and a gap began to appear between the wood. I kept
5 hitting it, hitting it, hitting it. That was the only
6 reason that I managed to get out of the room because
7 I'd almost made a hole in the wall. They painted over
8 it and put me back in the room a few days later.

9 'When you first went into the room, the light would
10 be on. They'd pat you down. As soon as they went away,
11 they would turn the light off. They would sometimes
12 come to the door and flick the light on and off to annoy
13 you. I don't know how long I was in the room for.
14 I know that it was sometimes light when I went in and
15 dark when I came out, or dark when I went in and light
16 when I came out. I would imagine I was in there for
17 a good number of hours.'

18 He then talks about abuse at Rossie at paragraph 175
19 onwards. He says the name of a girl that was in his
20 unit:

21 'She was a prostitute on the outside. I think she
22 was 16 and turned 17 when she was in Rossie. Somebody
23 told members of staff that she had performed a sex act
24 on me. They got the police involved. What [she] told
25 the police was a lie because it didn't happen at the

1 swimming pool, but she did do something to me in the
2 living room.'

3 He mentioned a boy:

4 'He asked whether I had ever been intimate with
5 a woman before. It was in front of other young people
6 and a member of staff. He was using really vulgar
7 words. He asked whether it was hot or cold, as in
8 a woman's vagina. People were mouthing at me what to
9 say. He was asking whether it was wet or dry.'

10 Then he says the name of the girl:

11 'She was mouthing at me to say wet but [the boy's]
12 friend was saying dry. I said dry and they all started
13 to laugh. The member of staff was laughing at this
14 happening. It was a male member of staff in his mid to
15 late 20s. It was really embarrassing.

16 'I think that conversation kicked off what happened
17 next. I know it wasn't the same day, but not long after
18 we were all sitting in the living room.'

19 He says that a boy dared the girl to do something to
20 him and he says:

21 'I was put on the spot. I was embarrassed. He said
22 to me that I had done it before. I said, "Aye,
23 I've done it before". But I hadn't been with a lassie
24 before. I just said that because I was embarrassed.
25 She put my penis in her mouth.

1 'The staff ended up hearing that something sexual
2 had happened between me and [the girl]. A boy was
3 talking about it in education and a member of staff
4 overheard it. The staff thought that it had come from
5 me, but it hadn't. They pulled me into the kitchen.
6 They asked me if I had made an allegation that [she] had
7 done something to me. I said that she hadn't. I denied
8 it but it was true. A member of staff called Eddie came
9 into my room later. He was laughing and joking about it
10 and asking me questions about it. I think he was trying
11 to draw what happened out of me, but he shouldn't have
12 been laughing about it. The staff didn't seem worried
13 about what had happened. The police came and questioned
14 me about it. They asked me if [she] had touched me and
15 I denied it. They were asking me if she had done it in
16 the swimming pool but she didn't touch me in the
17 swimming pool.

18 'I think I was in Rossie for about six months, but
19 I can't really remember.'

20 He says he can't remember leaving Rossie, but he'd
21 been in so many children's homes he didn't know how
22 many, he has been in homes that he has forgotten about.

23 As I've said, my Lady, our records show that he left
24 Rossie and was transferred to Oakbank on [REDACTED] 2005,
25 but I think he goes on to mention his time then in

1 a children's home.

2 Just so we have the dates, he was in Oakbank from
3 [REDACTED] 2005 to [REDACTED] 2005, from our records, so
4 that's about three-and-a-half months, so he was aged 11
5 and he turned 12 there.

6 Then he was at an activity centre between
7 [REDACTED] 2005 and [REDACTED] 2006, so that was
8 13 months.

9 He was then in a wilderness experience in England
10 for two-and-a-half months, and that was between
11 [REDACTED] 2006 and [REDACTED] 2007 and he left there at
12 13 years old.

13 He was then in a place in Stirling for six weeks in
14 [REDACTED] 2007 into [REDACTED] 2007, aged 13.

15 Then he was in St Mary's Kenmure between
16 [REDACTED] 2007 and [REDACTED] 2007 which was
17 six months. He was 13 and turned 14 there.

18 In relation to the children's home he talks about,
19 he tells us about that from paragraph 180. Secondary Institutions -

20 Secondary Institutions - to be published later

21

22

23 and he was sent to England.

24 Secondary Institutions - to be published later

25

2 He tells us about Oakbank from paragraph 213 and, as
3 I've said, he was 11, turned 12 there and he was there
4 three-and-half months, so he was younger than he thinks
5 he was.

6 He says he was drinking quite a lot and taking drugs
7 whilst there. He would run away and meet up with people
8 and he said he was taken to hospital to get his stomach
9 pumped on several occasions.

10 He talks about restraint there.

11 At St Mary's Kenmure then, he tells us about that
12 from paragraph 218 to 231. Again, he was there
13 six months. He was aged 13 to 14 and again he thinks he
14 was younger.

15 He says he was there four or five times between the
16 ages of 12 and 15, but that doesn't seem to be reflected
17 in his records, my Lady, but he says he was there in
18 between staying at his mum's.

19 He says there was strip searching and restraint
20 there and he says he left when he was 15, but I think he
21 was 14.

22 He says then he lived with his mum until he got the
23 jail when he was 16 and he was remanded to Craiginchies
24 when he was 16.

25 That evidence, my Lady, was previously read in on

1 14 December 2023 into the Inquiry, and that was Day 399.

2 He tells us about that between paragraphs 232 and
3 240.

4 There was physical abuse by staff in Craiginches.

5 He was then in Polmont, and he tells us about that
6 from paragraph 241 to 255. He tells us about physical
7 abuse by staff and segregation.

8 Then he talks about life after being in care from
9 paragraph 256.

10 He says that he hasn't had a life since he turned
11 18. He's been in the jail. In 2016, he was out of
12 prison for nine weeks and that was it and he was
13 recalled to prison. The last time he was taken to
14 hospital, he escaped.

15 He tells us about impact from paragraph 257 and he
16 says, my Lady, that if he hadn't been in secure units
17 and children's homes he doesn't think he would have been
18 as involved in offending or using drugs and alcohol and
19 talks about the fact that he took heroin for the first
20 time in Craiginches and smoked cannabis for the first
21 time in Rossie Farm and took Subutex for the first time
22 in Polmont. He's now on a methadone prescription,
23 because he became addicted to Subutex.

24 He tells us about the effect on his relationship
25 with his brother. He tells us about health issues that

1 he has got due to restraints, the number of restraints
2 and these relate to problems with his hands and feet.

3 He's been in Carstairs. He's had mental health
4 issues, diagnosis of paranoid schizophrenia, he is on
5 a lot of medication which he says just gets chucked at
6 him. He tells us about the effect that being in care
7 has had on his education and talks about the sexual
8 abuse by his cousin.

9 He tells us about lessons to be learned, my Lady,
10 but I think that really relates to all of his time in
11 care and at paragraph 272 he has made the usual
12 declaration and he has signed his statement and it's
13 dated 20 January 2022.

14 LADY SMITH: Thank you very much, Ms Forbes.

15 I'll rise now for the lunch break and I'll sit again
16 at 2 o'clock, when we should have another witness in
17 person ready to give evidence, yes?

18 MS FORBES: That's right, my Lady, yes.

19 (12.58 pm)

20 (The luncheon adjournment)

21 (2.05 pm)

22 LADY SMITH: Good afternoon.

23 Mr Sheldon.

24 MR SHELDON: My Lady, yes.

25 We have another witness in person this afternoon.

1 He's another witness who is anonymous and is to be known
2 as 'Joe'.
3 LADY SMITH: Thank you.
4 MR SHELTON: My Lady, I beg your pardon. He is a witness
5 who will require a warning.
6 LADY SMITH: Thank you.
7 'Joe' (sworn)
8 LADY SMITH: 'Joe', thank you for coming along this
9 afternoon to give evidence here at the Inquiry.
10 We already have your written evidence, of course.
11 It's in the red folder on the table there in front of
12 you and it's been really helpful for me to be able to
13 read it in advance, but we'd like to explore some
14 particular aspects of it with you this afternoon, if we
15 may.
16 As we go through the different parts, if you have
17 any questions, don't hesitate to speak up. If we're not
18 explaining things properly, it's our fault not yours.
19 You have your statement there as I say to be
20 available to you and we'll bring bits of it up on that
21 screen in front of you as well, the parts that we're
22 looking at, so I hope you'll find that helpful,
23 possibly.
24 I take a break at 3 o'clock in the afternoon
25 normally in any event, so if we haven't finished your

1 evidence by then, you can look ahead to that being
2 a point that we'd normally have a breather, but, 'Joe',
3 if at any time you want a break or just a pause, please
4 don't hesitate to say.

5 I do understand that what we're asking you to do
6 here isn't easy and you'd probably rather be somewhere
7 else than giving evidence to a public inquiry in public,
8 to talk about things that happened quite a long time ago
9 and in circumstances where I'm sure you have the feeling
10 that you're going to be put on the spot a bit. It's not
11 our intention to make life difficult for you, but we may
12 have to ask you some particular questions that need us
13 to look into exactly what was happening at the places
14 we're interested in all these years ago.

15 This is, as I say, a public Inquiry. It's not
16 a courtroom. But it does mean that you have all the
17 protections that you would have if it was a court case,
18 whether a civil case or a criminal case. That means
19 that if you're asked a question, the answer to which
20 could incriminate you, you're not obliged to answer it.

21 But, of course, if you do answer it, I expect you to
22 give me a full and complete answer. If you've any doubt
23 as to whether anything we are asking you is that sort of
24 question, do ask us. Don't feel you are not allowed to
25 and we'll try and explain.

1 If you're ready, I'll hand over to Mr Sheldon and
2 he'll take it from there.

3 Mr Sheldon.

4 MR SHELTON: Thank you, my Lady.

5 Questions from Mr Sheldon

6 MR SHELTON: Good afternoon, 'Joe'.

7 'Joe', as her Ladyship has said, you have your
8 statement in front of you. It may be helpful for you
9 just to have it open and keep it open. I'll be going
10 through some parts of the statement, please don't take
11 it as any sign that we're not interested if there are
12 parts that I skip over. It's evidence before us and we
13 are interested in it, but there are certain parts of it
14 that we are particularly wanting to look at and
15 concentrate on today.

16 'Joe', before we get started, there's a couple of
17 pieces of housekeeping that we need to do really just
18 for our benefit, so please bear with us.

19 The first thing is that your statement reference is
20 WIT-1-000001518. It's just for our records.

21 'Joe', if you can turn to the last page of your
22 statement, please, it's page 37.

23 Can you confirm, please, that you've signed and
24 dated the statement?

25 A. Yeah.

1 Q. You say at paragraph 197:
2 'I have no objection to my witness statement being
3 published as part of the evidence to the Inquiry.
4 I believe the facts stated in this witness statement are
5 true.'
6 Is that the case?
7 A. Yes.
8 Q. Thank you.
9 You can turn back to the start of the statement then
10 and you tell us a little bit about yourself. You were
11 born in 1964 and in your early life, you had a number of
12 jobs, but then came into perhaps the world of social
13 work, because you got a job working in social work
14 transport. This was about 1996 or 1997?
15 A. Yeah.
16 Q. What was that doing, 'Joe'?
17 A. That was transporting young people, er, handicapped
18 children, from homes and day centres and transporting
19 them in the morning and afternoon and doing any other
20 social work transport tasks for the Social Work
21 Department.
22 Q. You say that you sometimes picked up children from
23 police stations; was that after they'd been arrested for
24 something or because they'd absconded from a unit?
25 A. Yeah, so what you had was you had to do -- we called it

1 duty, so you would do duty driver for a week, where you
2 took a mobile phone and a car home and you were just
3 called on at any point throughout the day or night and
4 a number of times that would be you would get a phone
5 call to say: can you go to such and such police station
6 and transport a young person to whatever unit or social
7 work home or wherever else it was. And it just depended
8 on what was required.

9 Q. You say you would have got a mobile phone, it must have
10 been in the early days of mobile phones?

11 A. They were big phones.

12 Q. Big phones, like the sort of big brick things that you
13 saw back in the day?

14 A. Yeah.

15 Q. Tell me, did you have a colleague with you or was it
16 just you in the car with the child?

17 A. No, there was always a social worker.

18 Q. Okay. Did children ever kick off or react badly to
19 being taken where they were being taken to?

20 A. Sometime they would, yeah, sometime they wouldn't. It
21 just depended. If was a police requirement, you were
22 there with a police officer and the police officer would
23 come in the car with you or ... just depend on that.

24 Q. There would usually be a police officer if there was
25 a risk of something kicking off, as it were?

1 A. Mm-hmm. Yeah.

2 Q. You tell us you got an opportunity to do a six-month
3 secondment to St Katharine's as a residential care
4 worker and you say you jumped at that. What was it that
5 appealed to you about it, 'Joe'?

6 A. Who would want to be a bus driver?

7 Q. All right.

8 A. And, er, also, the money was almost double my salary at
9 that point.

10 Q. I suppose you'd had a bit of experience by that point,
11 working with young people?

12 A. Yeah.

13 Q. You tell us that while you were at St Katharine's, you
14 got some qualifications and in 2009, you were promoted
15 and moved over to Howdenhall residential in 2009 as
16 assistant team leader.

17 Was this, I guess, the new Howdenhall building by
18 then?

19 A. No, it was the old one.

20 Q. In 2009?

21 A. Yeah.

22 Q. Right. I think we thought that the new Howdenhall was
23 built in about 2004, does that sound right?

24 A. Maybe I've got my dates wrong but certainly I was in the
25 old Howdenhall and the new building, I was the first

1 manager in the new building.

2 Q. All right, well, I wanted to ask you about that, because

3 at parts of your statement, it does seem as though you

4 are quite familiar with Howdenhall as well as

5 St Katharine's?

6 A. Yeah.

7 Q. So that's why. You got the job as the assistant team

8 leader, worked in the old Howdenhall for a bit?

9 A. Yeah.

10 Q. Then it became the new one and I think you tell us later

11 that you were perhaps one of the first staff in the new

12 building?

13 A. Yeah.

14 Q. While you're on that subject, I think we understand from

15 what you say, that the new building was an improvement,

16 perhaps a vast improvement on the old one?

17 A. Massive, massive improvement.

18 Q. We'll come back to that perhaps a little bit later,

19 'Joe'.

20 You tell us a bit about life as a residential care

21 worker in 1996 to -- we think it's perhaps 2004 or so,

22 2003/2004. You talk about the different units in

23 St Katharine's.

24 You tell us at paragraph 10 that some of the young

25 people in secure care, and you were perhaps unused to

1 secure care at that time when you started, were
2 difficult. In what way did you find the children
3 difficult, 'Joe'?

4 A. I suppose -- no young person wanted to be locked up in
5 a secure unit, but no young person wanted to be in
6 a children's home. So you would have the young
7 people -- they always wanted to go home. That was the
8 main focus for any young person, was to get home, and
9 then bringing a young person into any residential
10 estate, they didn't want to be there. They made it
11 known they didn't want to be there and, sorry, but they
12 also classed us as a social worker. Everybody hated
13 social workers.

14 Q. I'll come to the topic later on, 'Joe', there's quite
15 a lot I want to ask you about restraint and so on, and
16 particularly prone restraints and so on.

17 But for the moment, you tell us in paragraph 10
18 there were some really good positive relationships built
19 with both staff and young people. How did the issue of
20 restraint affect that in cases where that had happened
21 to a young person?

22 A. Well, that's a difficult one, because for you to put
23 your hands on a young person, the young person have to
24 be comfortable with the staff. A lot of our young
25 people were -- what's the words I'm looking for, they

1 were probably ... they hated being in secure, but they
2 knew it was a place where they felt safe. And to build
3 up a relationship with a young person, you need to have
4 good communication skills with these young people and to
5 put -- what we called it, put hands on, hold young
6 people, things like that, the difficulty with that is
7 that to build a relationship wi' a young person you need
8 confidence and good communications with that young
9 person.

10 Q. Did you find that after a restraint, after an incident,
11 that communication had to be, as it were,
12 re-established, that a good relationship had to be
13 re-established?

14 A. It depended on what young person you were dealing with.
15 Some of our young people, they wanted to be held, to be
16 comfortable, to be felt safe and then other ones we'd
17 have what we called a debrief. After every restraint,
18 every incident, we had a debrief and it was a discussion
19 with a young person, how they felt, how the staff felt
20 and what positive interactions we could have made from
21 that.

22 Q. You actually deal with this a little bit later in your
23 statement, 'Joe', but I'll just ask you about it now. I
24 think you are telling us that some children really
25 wanted to be held?

1 A. Yeah.

2 Q. Do you mean by that they wanted to be held in
3 a comforting way or held in a restraint?

4 A. We used to have a lot of young people who would ask for
5 cuddles. Er, I never, ever went down that -- for me,
6 that was just a boundary that wasnae acceptable.

7 Q. You didn't feel comfortable with that?

8 A. No, not at all and, er -- but when you got into
9 a restraint with a young person, a lot of the young
10 people would know that if they were held on the floor,
11 they were held safely and no one was going to abuse 'em.
12 So through the years you would get to know that that's
13 how young people interacted with staff.

14 Q. I suppose, 'Joe', there might have been some dangers in
15 that sort of situation. For example, were you conscious
16 that some children were trying to goad staff into
17 restraining them? Were they trying to provoke it?

18 A. Sometimes, yeah, sometimes. Sometimes, not. Sometimes
19 a young person would just completely lose and be having
20 to be held within 10, 15 seconds of them kicking off or
21 coming at you.

22 Q. They calmed down, is that what you're saying?

23 A. Yeah.

24 Q. I'll come back to the issue of restraint a bit later,
25 'Joe'. But I'd like to get some background from you

1 first.

2 You said that when you were at St Katharine's, you

3 were in the Chalmers unit and I think we understand that

4 was a close support secure unit?

5 A. Close support unit, yeah. Chalmers and Alison were both

6 close support units.

7 Q. That was for children generally stepping down from

8 secure?

9 A. Yeah.

10 Q. You have told us a bit about different units in

11 St Katharine's. You have told us about Howdenhall.

12 How much crossover was there between the units? Did

13 staff from one unit also work in other units? Did staff

14 from St Katharine's also work in Howdenhall and vice

15 versa?

16 A. No, not in the early days, no.

17 Q. That suggests then that at some point that did happen?

18 A. It depends if the staff were on what was called the

19 locum bureau, staff would cover shifts in either one,

20 but Howdenhall stuck with the Howdenhall staff, whether

21 it was Guthrie, which was the secure -- I beg your

22 pardon, Guthrie was in St Katharine's. It was Braid

23 unit which was Howdenhall and Calton unit was the close

24 support in Howdenhall.

25 In St Katharine's, it was Guthrie was the secure and

1 you had Chalmers and Alison unit were the open units.

2 Q. When did the locum bureau come about?

3 A. Och, no idea. No idea.

4 Q. Any idea? We think you probably started at Howdenhall

5 just before the new building opened, so we think

6 probably 2003/2004?

7 A. Possibly, yeah, I couldn't give you a definitive day

8 when the locum --

9 Q. Would it have been the thousands or the nineties maybe?

10 A. I guess I'd probably say late nineties.

11 Q. Okay, thank you, and did that come about because there

12 were staff shortages at that time?

13 A. I think it was, yeah. Staff shortages across the whole

14 of the residential estate in Edinburgh.

15 Q. We looked with the last witness about that and staff

16 shortages appearing from inspection reports in 1999 and

17 2000, and that was said to provide:

18 'Staff difficulties presented as a major issue

19 within the centre.'

20 Do you think that's a fair characterisation?

21 A. Yeah, probably, yeah, yeah. Staff did a lot of

22 overtime.

23 Q. And if we could look please at another document,

24 my Lady, that was the EDI-000003673 document, but

25 I don't think we need to look at that again, but perhaps

1 if we can look at CIS-000005289.

2 If we can just blow that up, please. I think we see

3 that that's an inspection report for -- if we scroll up

4 to the top -- the Chalmers unit in St Katharine's?

5 LADY SMITH: Yes, it is. You can see it there. The

6 establishment is Chalmers.

7 MR SHELTON: This is December 2001. Were you still working

8 in the Chalmers unit at that time; do you remember?

9 A. Er, possibly, I can't remember.

10 Q. If we could turn, please, to page 6, paragraph 7.1.

11 We're told there that staffing arrangements reflect the

12 setting up of intended short-term provision, but has

13 become a medium- to long-term resource, is that what you

14 describe as the locum bureau or is that something

15 different?

16 A. Yeah, just we see in the word there, Swiis, we used

17 a number of Swiis employees, er, it was a separate

18 company and if I'm right, the locum bureau came into

19 effect around about that time, because it was cheaper to

20 pay locum than it was to pay Swiis workers through the

21 council.

22 LADY SMITH: I think Swiis is the organisation that also was

23 able to provide foster care families.

24 A. Swiis?

25 LADY SMITH: Yes.

1 A. Ah right, no, I didn't know that.

2 LADY SMITH: But generally a different organisation used by
3 the local authority for various purposes.

4 MR SHELDON: 'Joe', these, I'm assuming, would be, as it
5 were, temporary staff brought into the unit who wouldn't
6 necessarily know other staff or the children in the
7 unit?

8 A. Some of the Swiis workers, if I recall, some of the
9 Swiis workers we had there would do quite a number of
10 shifts wi' us, so they would get to know them, but,
11 yeah, certainly at St Katharine's there was always
12 an induction for staff and that was talking about the
13 alarms, exits, when you go into secure, you made sure
14 the door behind you was closed, stuff like that.

15 Q. We're told there that a total of 29 additional workers
16 are employed within the unit, involvement varies from
17 shift to shift, the inspector is saying:

18 'Clearly the involvement of such high numbers of
19 workers in the lives of looked-after young people runs
20 contrary to best practice. Staff gave examples of where
21 this negatively affected young people's responses.'

22 To counter this, the rota has -- over the page,
23 please. I think we need to scroll back up a bit.

24 (Pause)

25 At all events from that passage we're seeing that

1 there are a number of these locum workers, and if we go
2 to page 8, please, just the last sentence of 11.2:
3 'Fragile and flexible function of the unit, coupled
4 with the current staffing arrangements, severely inhibit
5 the task.'
6 That's of providing a good quality service to the
7 young people:
8 'Whilst the inspectors are satisfied that the young
9 people currently resident are "safe", the framework
10 within which they are being cared for is not conducive
11 to promoting safe care practices.'
12 Again, 'Joe', can I just ask you to comment on that?
13 Given the number of locum staff you had, did you feel
14 that inhibited you, as a permanent member of staff, and
15 your colleagues, in doing the best that you could for
16 the children?
17 A. Yeah, definitely, and I alluded to it earlier on,
18 a number o' us would work all sorts of funny hours and
19 stupid hours just for the sake of the young people.
20 Q. I suppose if you're working -- well, perhaps if I can
21 just ask you what you mean by 'stupid hours'?
22 A. Er, two or three shifts at a time; to go on a back
23 shift, and you do a back shift, a night shift and a day
24 shift, 'cause there was no staff.
25 Q. At the end of that you're going to be pretty tired?

1 A. Yes.

2 Q. I don't mean any criticism of you in this respect, but

3 that is bound to affect the way that you can interact

4 fully and --

5 A. Yeah, definitely.

6 Q. -- with the children?

7 A. Yeah.

8 Q. Page 4, that's over the page, in your statement, back to

9 the statement, you tell us a bit about the staff

10 structure. You tell us that LUZ [REDACTED] was SNR [REDACTED]

11 SNR [REDACTED] and you say that you had little to do with him.

12 He was based in the admin block, so the admin block;

13 should we understand that's away from the units where

14 the children are held or taught?

15 A. Yeah, yeah. There's a door between them. So you go in

16 the front door, on the right side was the admin block to

17 what we called the conference room and the manager's

18 office. You went in the left door, it was the education

19 corridor and then into the secure unit in

20 St Katharine's.

21 Q. LUZ [REDACTED] was perhaps mostly office-based, was he?

22 A. Yeah.

23 Q. You didn't see him very much.

24 You tell us a bit about some other staff, unit

25 manager in Alison and Frank Phelan in Chalmers unit.

1 I think at some point he became overall principal of
2 St Katharine's and Howdenhall?
3 A. Frank did, yeah.
4 Q. Would that have been about 2000?
5 A. Er, yeah, probably.
6 Q. All right.
7 A. Er, I think [REDACTED] LUZ [REDACTED]
8 [REDACTED].
9 Q. All right.
10 We might have heard that he was also in charge of
11 Howdenhall --
12 A. Yeah.
13 Q. -- in the late 1990s?
14 A. Yeah, towards the end, yeah.
15 Q. Did he have that function at the same time as being
16 a unit manager in Chalmers, or was that a different
17 posting or post --
18 A. It was after Chalmers, so he was the unit manager in
19 Chalmers when I was an RCO and then he went to --
20 I think he went to Howdenhall and then came back as the
21 principal.
22 Q. Right.
23 You tell us he was brilliant to work for,
24 knowledgeable and calm. Did that give you confidence in
25 him as a manager, his calmness?

1 A. Definitely, yeah, definitely. [REDACTED] to be fair,
2 [REDACTED] and Frank. [REDACTED] door was always open to staff.
3 There was no separation in that way.

4 Q. You then go on to tell us about the shifts and the way
5 that worked. I don't want to take you through that in
6 any detail, but I just want to ask you about the shift
7 teams.

8 Did people tend to work as a team without much
9 crossover or did the shift teams --

10 A. If I recall rightly you worked in a team, so I had ...
11 Emily Campbell was my shift partner while I was an RCO
12 and then it was another female, Leanne Dale. So we
13 worked as a partnership, but I think it was every third
14 week you did what was called cover shifts on your rota
15 and you would be --

16 Q. What were the cover shifts?

17 A. Cover shifts were when you were covering any vacancies
18 within the whole estate.

19 Q. So at that point you could be working with anyone in the
20 establishment?

21 A. You could work in secure, you could work in Alison unit,
22 it just depends where there was a space that the staff
23 would work there.

24 Q. You wouldn't obviously have any control over who was
25 working with you on that particular shift?

1 A. No, no.

2 Q. At paragraph 27, you tell us about the old
3 assessment centre in Howdenhall and it's quite a strong
4 expression; you tell us it was dire. What was the old
5 Howdenhall like?

6 A. It was a horrible building.

7 Downstairs was Calton unit. It had a massive big
8 games room wi' a couple of snooker tables.

9 Up the stair in the secure unit, it had three rooms
10 for the young people to be in, they only ever used two
11 o' them, 'cause the far end one had a lift in it where
12 the food would come up and all the meals would come up
13 and the food would come up in the lift in boxes.

14 And then you had a bathroom and then you had a --
15 I think it was four or five bedrooms. They weren't en
16 suite, they were all individual bedrooms, that didn't
17 have any electricity in them other than the light.
18 There was no power sockets or anything in the rooms.

19 Q. And no toilet facilities in the room?

20 A. No, none. It was one communal toilet for everyone.

21 Q. Were the rooms locked at night?

22 A. Yeah.

23 Q. So children would have to ring or knock to get staff --

24 A. They'd have to knock on the door and two night staff
25 would open the door and let them go out, if it was for

1 the toilet or whatever else it was.

2 Q. Again, no criticism implied, I suppose if night staff

3 were doing something else, they might not be able to get

4 to the child to take him to the toilet?

5 A. No, the two night staff -- there was two night staff.

6 In the upstairs, in the secure unit, in Braid, I think

7 there were four or five bedrooms, the staff base and

8 across the corridor was the Calton unit, where the young

9 people were in their beds. So there was always two

10 night staff in the secure unit.

11 Q. All right, and you felt that was sufficient?

12 A. Yeah. Well, I didn't have any say in it. That was just

13 what it was. That's what it's always been.

14 Q. Well, that's a slightly different point, 'Joe'. That's

15 what it was. That's what you had to deal with and

16 I'm sure people did deal with it --

17 A. Yeah.

18 Q. -- but in your view, was that sufficient for the number

19 of children that were being cared for at that time?

20 A. Yeah, I would say, yeah. It's still the same today, two

21 night staff.

22 Q. What difference was there -- you may not be able to

23 answer this, but if I can ask you -- between the

24 services offered by St Katharine's and Howdenhall?

25 A. As in St Katharine's had the secure part, St Katharine's

1 had bedrooms with en suites for the young people and
2 that was literally one of the only differences I could
3 see.

4 Q. I'm really asking you if there was any difference in
5 function or any difference in the type of children that
6 were sent to each unit?

7 A. No, not at all.

8 Q. You tell us that when you went to Howdenhall, there had
9 been an investigation there, a member of staff from
10 Edinburgh City Council Social Work Department had
11 carried out the investigation.

12 Do you remember what the investigation was about?

13 A. No. We were just told that Stan Goddick was doing
14 an investigation, that was it, and as an RCO at that
15 point, before I went to Howdenhall, I didn't know.

16 Q. So I suppose, again, it might have been above your pay
17 grade to be told what was going on?

18 A. Yeah.

19 Q. Did you notice any differences after the investigation
20 was carried out, even members of staff that were there
21 or came into the unit?

22 A. No.

23 Q. You tell us about the management at Howdenhall when you
24 moved across --

25 A. Yeah.

1 Q. -- to what became the new building, and a bit about
2 recruitment, page 7.

3 I just want to ask you about paragraph 34. You tell
4 us that at that point as assistant team leader, you were
5 involved in the recruitment process. Managers would
6 attend specific training, I think at the time it was
7 a five-day assessment centre that they all took part in:

8 'I didn't do that, but I did go on a course on how
9 to interview staff and then took part in some of the
10 assessment centre days for staff recruitment. They were
11 very superficial, so when I had a choice, I chose to
12 take part in the interviews, not the assessment centre.'

13 I wanted to ask you what you mean by that? Why was
14 the assessment centre superficial?

15 A. It's probably the wrong choice of words. I'm not one
16 for doing role playing, and a lot o' the
17 assessment centres were role playing stuff that they
18 did.

19 Q. What sort of stuff?

20 A. They would put a scenario in front o' a recruit or a new
21 member of staff, they'd put a scenario in front of them
22 and ask them to act out in it, er, what they would do,
23 what they would say and things like that. I found that
24 superficial, 'cause I'm not a role player.

25 Q. Can you recall what sort of situations they would use?

1 A. No, no, that was just that.

2 Q. That wasn't for you?

3 A. No, no.

4 Q. Had that been a fairly recent innovation? When was that

5 brought in?

6 A. Oh, God knows. God knows. That was some time when

7 I was at Howdenhall.

8 Q. Might it have been slightly before that, perhaps the

9 late 1990s?

10 A. Possibly, yeah. I wouldn't have got -- I didn't get

11 involved until later on, when I started the

12 assessment centre and I do recall there was

13 an assessment centre, I'm going back a while, that we

14 all laughed about, there was a member of staff who was

15 told to play the young person at one of these

16 assessment centres and this is -- this was part of the

17 role playing, and he was to play the young person and be

18 obnoxious to the staff. And he -- I think it was in the

19 City Chambers actually, and he pulled out his cigarettes

20 and lit a cigarette and everybody is shaking, 'No, no,

21 you can't do that', and he went, 'But I'm being a young

22 person'.

23 That's the type of thing, the role playing that

24 I thought, 'Nah, I'm not doing all this'.

25 Q. Paragraph 36, you talk about supervision when you became

1 the team leader. I just want to ask you: would staff
2 take concerns about children or, indeed, other staff to
3 their supervisors?

4 A. Yes.

5 Q. Was that part of what supervision was for?

6 A. Yeah. I would like to think they would, yeah.

7 Q. Did that ever happen when you were supervising? Did
8 they bring concerns about children or staff?

9 A. Not to me, no. But I can't answer for other supervisors
10 and other managers. Certainly while I was supervising
11 staff, I had no concerns that way.

12 Q. Presumably children were discussed?

13 A. Yeah, yeah, you spoke about your key child at the time
14 so ...

15 Q. You tell us you received some guidance on that from
16 LUZ and Frank Phelan.

17 Paragraph 38 you tell us that you would have had
18 induction training at the start of your secondment. Was
19 there ever an induction pack, a document that you were
20 given, that had information and, indeed, guidance about
21 life at St Katharine's and/or Howdenhall?

22 A. Not that I recall at that point.

23 Q. Okay. Can I just show you a document quickly, it's
24 EDI-000005685.

25 LADY SMITH: Is it EDI-000005685 not EDI-000005687?

1 MR SHELTON: I beg your pardon, it might be EDI-000005687.

2 We can see there from the first page, this is your

3 induction pack, 'Welcome to Howdenhall'. There's

4 obviously space there for some personal details.

5 A. Yes.

6 LADY SMITH: Do we have a date for this, Mr Sheldon?

7 MR SHELTON: We think it's 1996, my Lady.

8 A. I was going to say, this one, if you go right to the

9 bottom, it should state at the bottom there, the very

10 bottom page, it should state the day it was updated or

11 when it was produced.

12 Q. Oh, yes, you are quite right, 'Joe', thank you very

13 much, that's helpful. This is a document from 1992.

14 Do you recall seeing anything like that, 'Joe'?

15 A. Yeah.

16 Q. You did?

17 A. Yeah, mm-hmm.

18 Q. Actually, if we can just --

19 A. And there was one for St Katharine's, which was similar,

20 but Howdenhall taken out and St Katharine's was there.

21 Q. Was it then just really the same document but --

22 A. Yeah, yeah. As far as I'm led to believe, yeah.

23 Mm-hmm.

24 Q. We'll look at this in more detail a bit later, but do

25 you recall, did it have guidance then about restraint

1 and play fighting or toy fighting?

2 A. Toy fighting, I'm sure -- if I recall rightly I'm sure
3 it says wasn't acceptable, but I may be wrong.

4 Q. We'll look at that a bit later on. Certainly, I think
5 toy fighting or horseplay was banned at some point?

6 A. Yeah.

7 Q. But I think we think that wasn't until about 2010, does
8 that sound about right?

9 A. Possibly, yeah, yeah.

10 Q. Is that what you recall --

11 A. Roughly, probably, yeah. Dates-wise it makes no
12 difference to me, I couldn't remember, but yeah, it
13 certainly was -- at one point there was a big discussion
14 and it was stopped being available.

15 Q. You tell us at paragraph 40:

16 'A lot of the policy development in both
17 St Katharine's and Howdenhall was led by the children's
18 hearings and the social workers.'

19 Can you tell us by what you mean by that, please,
20 'Joe'?

21 A. Well, it was -- we were part of the social work system,
22 so a lot o' our policies were driven by Edinburgh City
23 Council.

24 Q. Did you ever understand the children's hearings system
25 or the Children's Panels to be telling you, as

1 residential care workers, to do anything or implement
2 particular policies?

3 A. No, no. The Children's Panels were very much if you
4 took a young person to a Children's Panel, it was either
5 for a further three-month order -- we worked on
6 three-month orders at the time, and it would determine
7 whether a young person met the criteria for that.

8 The agreement with the criteria would be from the
9 social worker, their senior, our managers and the case
10 manager at the time and the young person's behaviour
11 would warrant which way they were looking at going.

12 Q. Moving on to paragraph 42, you talk about the children
13 and young people who came to St Katharine's and
14 Howdenhall:

15 '[Sometimes social workers would come to the unit
16 managers] looking for a vacancy for a young person who
17 was unruly and out of control.'

18 Now, is that what you'd be told about the young
19 people?

20 A. Yeah, yeah.

21 Q. Was it always that or were there different messages?

22 A. No, no, so at the beginning it was very much if you had
23 a vacancy, the social worker would speak to the
24 managers, whatever managers were there or the
25 principals, and if they met the criteria for that place,

1 and there was a vacancy, that was it.

2 Further on, through time, they had a referrals
3 process, so the social worker would complete a referral
4 for secure accommodation and then they would come to
5 a meeting wi' the unit managers, the principal, and they
6 would discuss had the young person made the criteria to
7 be in secure.

8 LADY SMITH: Can you remember what the criteria were?

9 A. The criteria? A lot o' the time it was a young person
10 who was either offending behaviour or outwith parental
11 control.

12 LADY SMITH: Well, why would offending behaviour
13 particularly lead to secure?

14 A. If a young person -- an example would be a young person
15 constantly breaking into a house, assaulting people or
16 stealing cars and it was for the community safety as
17 well.

18 LADY SMITH: Okay, thank you.

19 MR SHELDON: Thank you, my Lady.

20 I suppose from time to time, 'Joe', it would also
21 include children who had perhaps been running away, who
22 had substance issues, mental health issues?

23 A. Yeah, mm-hmm, yeah.

24 Q. And might well be in some distress?

25 A. Mm-hmm, yeah.

1 Q. So they could all be in St Katharine's/Howdenhall --
2 A. All at the same time, yeah.
3 Q. -- at the same time?
4 A. Yeah.
5 Q. You tell us at paragraph 46 that it was boys and girls,
6 so a mix. Can you recall what the gender balance was
7 like as between girls and boys?
8 A. Sometimes it was -- in St Katharine's, if I remember
9 right, there were seven beds in St Katharine's and six
10 in the new Howdenhall and that could just vary from one
11 boy to six girls, one boy to five girls. We had no
12 input whatsoever on the balance of the gender.
13 Q. All right, but it could, for example, be one girl and
14 five or six boys?
15 A. Yeah, or it could be five or six, seven girls, boys.
16 Q. At paragraph 55, this is page 11, you tell us that the
17 Chalmers unit had a communal bathroom, so just thinking
18 about that, was it communal for girls as well as boys?
19 A. Yeah, they had a shower room and a bathroom.
20 Q. Did that cause any concern, either to you or to
21 management generally?
22 A. No.
23 Q. Was it policed? I suppose there are perhaps obvious
24 risks in that?
25 A. If there was one young person up the stair, the staff

1 was no required. If you had two young people up the
2 stair, staff would go up and either sit in the office or
3 sit in the corridor.

4 Q. You tell us it was the same in Howdenhall, that the
5 bathroom was communal. You say it was horrible and it
6 stank?

7 A. Oh, it was horrible, yeah. It was an old sixties
8 building, yeah, it was horrible.

9 Q. It sounds like the old Howdenhall just wasn't really fit
10 for purpose at all?

11 A. No, definitely not. If I recall rightly, John Stevens
12 was ... he ended up -- he was the unit manager at the
13 old Howdenhall, the secure unit, and we called it John's
14 baby, the new Howdenhall, 'cause John travelled the
15 breadth of the country to pick all the best o' all the
16 different secure units to put into Howdenhall, the new
17 Howdenhall.

18 Q. We know --

19 A. It was purpose built.

20 Q. Certainly from other sources, I think we know that there
21 had been talk of getting rid of the old Howdenhall in
22 the late 1990s --

23 A. Yeah.

24 Q. -- but clearly it took until, we think about 2004, for
25 that to happen?

1 A. Yeah.

2 Q. You tell us at paragraph 57 that leisure time was very
3 much shift led. What does that mean in practice?

4 A. Depending what staff were on shift was the leisure time.
5 In the -- in Chalmers if all the young people had their
6 mobility and time out from the unit, we could go and do
7 activities. Regular in the summer time we used to take
8 them down to the Tweed and swim in the Tweed, provided
9 the staff had the right qualification. We'd go to the
10 cinema. We'd do all sorts. I took a group o' young
11 people to Germany and then a group o' young people to
12 France so ... and it just depended on what staff were
13 on, if you had a minibus driver or not.

14 Q. Sure. I was going to ask you about the trips. That's
15 page 12 of your statement. There had been a group that
16 had gone to Alton Towers, I think, and you suggested --
17 I think LUZ [REDACTED] had suggested going somewhere and you
18 had thought France.

19 Why did you pick France particularly?

20 A. Why did I pick France?

21 Q. Yeah.

22 A. 'Cause I'm a fanatic for battlefield studies.

23 Q. Right, and there are obviously some very famous battle
24 sites in France.

25 A. Sites, yeah, we did the Somme, we did all sorts with

1 them, fantastic.

2 Q. And the Normandy beaches, is that right?

3 A. Yeah.

4 Q. There were boys and girls on that trip too?

5 A. Yes.

6 Q. You tell us that you stayed in tents. Again, did that

7 cause any difficulties or concerns?

8 A. No, none at all.

9 Q. I think we know that children from time to time acted

10 out in St Katharine's and Howdenhall. They may have had

11 challenging behaviours from time to time. How was it on

12 the trip?

13 A. There was none, no. There was absolutely no

14 interactions that required anything. We -- it was just

15 a great week.

16 I don't know if I've mentioned it in here, but

17 an example, we drove all the way down to Dover, stayed

18 the night in Dover. Er, one of the young people wet his

19 bed in the hostel. That was fine. We got onto the

20 ferry and we had -- at the time, you know, finances with

21 Edinburgh City Council were quite good, we had

22 an abundance o' money and offered the young people

23 a lovely meal on the boat, and all they wanted was

24 a McDonald's.

25 Q. Do you have any thoughts on why it would have been that

1 the children who might act out perhaps significantly
2 when they're in Howdenhall/St Katharine's, were -- it
3 sounds as if they were well behaved on the trip?

4 A. New experiences. New experiences and not having been
5 out of the country and at that point we used what we
6 called was a group passport, so it was literally just
7 a small ID picture with the work stamp on it that got
8 them out the country.

9 Q. You tell us at paragraph 66 that you still smile when
10 you think about those trips?

11 A. Definitely, yeah.

12 Q. That's a good memory?

13 A. Fabulous.

14 Q. On a different topic, just on healthcare briefly, I just
15 want to ask you about paragraph 68:

16 'In Howdenhall [you say] within roughly the first
17 week, we would have the looked-after nurse come out.'

18 I take it that's a nurse for looked-after children?

19 A. Yeah.

20 Q. '... to do a quick medical.'

21 So do we understand that this was an automatic
22 process, every child got a check-up?

23 A. Yeah.

24 Q. It wasn't that they had to be showing signs of --

25 A. No, no, it was done because what we used to do was take

1 the young person to the doctors and it would mean two
2 staff going out to the doctors wi' a young person if
3 they'd been in secure, or just come into secure, so you
4 would have a driver and two staff taking a young person
5 to the doctor. And then when the looked-after nurse
6 came on o the scene, we started using the nurse to give
7 them a medical.

8 Q. So I suppose it was perhaps a more efficient way of
9 doing it?

10 A. Yeah, mm-hmm.

11 Q. Moving on again, you talk about schooling in
12 paragraph 69/70.

13 'Each unit had to do what we called education
14 cover.'

15 What did that involve, 'Joe'?

16 A. So what that involved is you'd walk the young people
17 from -- if we're talking St Katharine's, you'd walk them
18 down the ... out of the secure unit, walk them down to
19 the education wing. There was a small staff base. The
20 teaching staff would take over at that point, the young
21 people would be allocated into their classrooms and then
22 we'd sit in the staff base and wait for any incidents,
23 anything that required assistance, and nine out of ten
24 times teachers would shout, 'Staff', and you'd go and
25 respond to that. That could be for anything, absolutely

1 anything. A young person no doing their work, a young
2 person having a carry on or whatever else.

3 Q. You say in the middle of that paragraph you got the
4 impression the teaching staff almost had a 'wait until
5 your father's home' type of attitude?

6 A. Yes, yeah, that's probably a great wording. The teacher
7 used to say, 'We'll get the care staff in and then they
8 can deal with this situation'. So that terminology is
9 probably fitting for that.

10 Q. You said they wouldn't deal with whatever the issue had
11 been?

12 A. Yeah, definitely, no.

13 Q. That annoyed quite a few of you?

14 A. Yeah.

15 Q. Do we take it from that there were some tensions between
16 teaching staff and care staff?

17 A. Yeah, yeah. Some time, depending what teachers. Some
18 of them were good, some of them would just, as I say,
19 shout, 'Staff'. And that's all you got from them.

20 Q. Did issues in the classroom ever lead to, well, if I can
21 put it colloquially, a child kicking off?

22 A. Yeah.

23 Q. Did that sometimes require restraint?

24 A. Yeah.

25 Q. How often did that happen?

1 A. It happened -- I wouldn't say it was a regular
2 occurrence, or every day or whatever else, just
3 depending what young person and what was the issue.
4 Q. Okay, but it wasn't uncommon?
5 A. No, no.
6 Q. Page 14, you talk about chores and again, just one thing
7 about that. I think you make clear at paragraph 75 that
8 the children did have to do some chores, but really it
9 was perhaps a rather token thing, is that right?
10 A. Yeah, yeah.
11 Q. You had cleaners in to do the bulk of the chores?
12 A. Yeah, mm-hmm.
13 Q. Page 15, paragraph 82, you talk about weekly care
14 planning meetings and you tell us that the young person
15 would be in the meetings and had involvement.
16 I just want to ask you: did you feel that the young
17 people or the children were able to participate fully in
18 those meetings? Were they asked for their opinions?
19 A. Yeah. Certainly in my -- when I was key working, any
20 young person, they were listened to. Er, I can't say
21 for all the meetings, 'cause I wasn't in all of them,
22 but the ones I attended, the ones for my key kids, or
23 when I was case managing, yeah, it was important to get
24 the young person's view on what they wanted, where they
25 wanted to go, what their future was going to be.

1 Q. Sure.

2 Would they have been able to raise any concerns at

3 that sort of meeting; do you think?

4 A. Yes.

5 Q. Did they?

6 A. None of my young -- the food, they always moaned about

7 the food, yeah.

8 Q. I think you say at one point the food was a bit school

9 dinner like?

10 A. Definitely, yeah.

11 Q. Do we take it that means not very inspiring?

12 A. Och, yeah, yeah. I'll gi' you an example, and I laugh

13 about it today. We had a chef, and I think I mentioned

14 it in one -- we had a chef that the kids used to call

15 'Mr Boke', 'cause his food was that bad and he came in

16 one morning to do breakfast and he says he's got

17 fat-free sausages, but he deep fried 'em. That's the

18 type o' chef we had.

19 Q. You have mentioned key kids a couple of times, 'Joe'.

20 I just want to ask you about paragraph 85, where you

21 mention, I think, a case worker. We've heard obviously

22 about social workers and there's a key worker.

23 Can you just talk us through the difference between

24 those three categories; case workers, social workers and

25 key workers?

1 A. Probably a terminology for me then.

2 The case worker is a key worker, and you would have

3 the -- if the case manager was on shift at the same time

4 as you were having a care planning meeting, he would

5 attend ... it was important that we had the social

6 worker there. That was the main one and it was

7 a standing agreement that social workers would attend.

8 You wouldn't have a care planning meeting without

9 a social worker there.

10 Q. Presumably both case workers or key workers and social

11 workers would keep notes?

12 A. Yeah, certainly the key worker would have to do what we

13 called a CPM sheet after each one, and that was

14 everything that was discussed in the meeting and also if

15 there was any movements for the young person, if they

16 were getting any mobility or anything else like that,

17 that would be on that. That was more so for the staff

18 that weren't involved in the care.

19 Q. Okay, the CPM is the care planning meeting sheet; is

20 that right?

21 A. Yeah.

22 Q. That's what it stands for?

23 A. Yeah.

24 Q. You think that both the key worker and social worker

25 would keep notes of these meetings and also, presumably,

1 other meetings with the child?

2 A. Yeah, mm-hmm. It was certainly always recorded on care
3 planning sheets.

4 Q. All right. You talk there a bit more about the
5 different orders, the children's hearing orders, perhaps
6 court orders, that children were at the unit on.

7 Paragraph 87, you talk about recommendations for
8 Children's Panels. About halfway down 87, you say:

9 'I've made a recommendation before that the young
10 person needed to leave the secure setting and the social
11 worker has disagreed.'

12 What did you think -- sorry, I should ask you this
13 first: did you go to the children's hearings, 'Joe'?

14 A. Yeah.

15 Q. As the key worker?

16 A. As a key worker and as a case manager.

17 Q. Did you always sit in or were you sometimes asked to sit
18 outside the hearing room?

19 A. No, so the children's hearing system, not when I first
20 started but later on, probably the late nineties, young
21 people would be asked if they wanted to speak to the
22 panel on their own and then everyone would leave the
23 panel apart from the young person and the panel members.
24 But that was later on, late nineties/early twenties.

25 Q. Do we take it that you did sit in on at least some of

1 the panels?

2 A. Yeah, yeah.

3 Q. What was your general feeling about the way they

4 operated?

5 A. They were fairly -- well, fairly well good, yeah, fairly

6 well swept up.

7 Q. For example, how did you feel their communication with

8 the young person was?

9 A. Very good. Very good, but then it would depend on the

10 panel as well, you know. A lot o' the panel were laymen

11 who hadn't any qualifications other than attending

12 whatever courses they did for children's hearings, so

13 that was it. But yeah, and they all seemed to listen to

14 the young people. They listened to the social worker.

15 They listened to the key team and then they would make

16 their decision.

17 Q. Was there any suggestion or did you have any impression

18 that panels would tend to go with the social workers'

19 recommendations rather than others?

20 A. No, not at all.

21 Q. That wasn't your experience?

22 A. No.

23 Q. You talk a bit about giving children support to go home.

24 Paragraph 89, you say that you have a captive

25 audience when you are looking after a young person for

1 three months in a secure unit. What do you mean by
2 that, 'Joe'?

3 A. Terminology again for myself. Captive audience, I mean,
4 if a young person's locked up for three months, that's
5 the captive audience you've got with that. So it's
6 probably wrong terminology from me, but that's what it
7 is. You know, a young person who's incarcerated for
8 three months in a secure unit. They couldn't go
9 anywhere, so that's where I use that terminology.

10 Now -- we wouldn't use that terminology now, but
11 then, yeah.

12 Q. Is that how you thought of it at the time?

13 A. Yeah, mm-hmm.

14 Q. I suppose, looking at that from the other side, the
15 children have no choice, they have to be there --

16 A. Yeah.

17 Q. -- so they have to be with whoever the staff happens to
18 be?

19 A. Yeah, mm-hmm.

20 Q. We then go on to look at issues of discipline and
21 punishment.

22 My Lady, it's quite a big topic. It's not quite
23 3.00 pm, but it might be an appropriate --

24 LADY SMITH: Maybe we should have a pause before we move on
25 to that.

1 'Joe', we can take the afternoon break just now, if
2 that's okay with you?
3 A. Yeah.
4 LADY SMITH: We'll carry on with your evidence afterwards.
5 (3.00 pm)
6 (A short break)
7 (3.10 pm)
8 LADY SMITH: Welcome back, 'Joe'.
9 Is it all right if we carry on?
10 A. Yeah.
11 LADY SMITH: Thank you.
12 Mr Sheldon.
13 MR SHELTON: Thank you, my Lady.
14 'Joe', I was about to go on, before the afternoon
15 break, to a section in your statement about discipline
16 and punishment and it's quite a long section, together
17 with what you say about restraint.
18 Paragraph 92, you say that if a young person kicked
19 off, becoming aggressive physically or verbally, they
20 would be asked to go to their rooms or they'd be removed
21 to their rooms.
22 How quickly would that tend to happen?
23 A. How often or -- it could vary. A young person could
24 just become completely verbally abusive/aggressive
25 within seconds.

1 Q. Is that right? It would really come from nowhere as it
2 were?

3 A. Yeah, yeah.

4 Q. Even if they were verbally abusive, they might be
5 removed to their rooms?

6 A. Yeah.

7 Q. How was that done physically?

8 A. Then, back in the early days in residential, they would
9 be physically removed if they didn't go themselves. But
10 you would only do that if you had sufficient staff
11 around to support you. You wouldn't do it on your own.
12 No staff ever put any, what we called then, hands on,
13 a young person on their own. It just was never done,
14 er, and that would vary in that depending -- they would
15 go to their room.

16 Now -- probably not now, but ten years ago now, we'd
17 use the quiet room, so they'd be asked to go to the
18 quiet room rather than their bedroom, so just with the
19 move on the progression from then to now, it was the use
20 of the bedroom was the main thing.

21 Q. Was the quiet room sometimes called the timeout room?

22 A. Yeah, yeah.

23 Q. Again, just thinking about these situations.

24 Paragraph 94, you say:

25 'The staff wouldn't tolerate being abused by a young

1 person.'

2 What do you mean by 'abused' in that context?

3 A. Whether it be physical abuse or verbal abuse, yeah.

4 Q. That, I think, you've told us, could lead to

5 an intervention, a child being removed?

6 A. Yeah, mm-hmm.

7 Q. You talk at paragraph 92 about the CALM system, I think

8 we understand that's Crisis Aggression Limitation

9 Management?

10 A. Yeah.

11 Q. I think at paragraph 96 you say a little bit about what

12 you just told us, about children being taken to the

13 quiet room first or, if necessary, straight to their

14 room?

15 A. Yeah.

16 Q. I just want to ask you a little bit about that.

17 You talk about taking a young person from education

18 through the open units and a group of you couldn't hold

19 the young person, because you'd end up going sideways?

20 A. Look at the size of me.

21 Q. So how did that happen? What was the technique for

22 taking a child away?

23 A. You wouldn't -- you wouldn't take a young person ...

24 because it was the open units, at St Katharine's, if

25 we're talking St Katharine's, the open units were

1 outside, you wouldn't take a young person outside if
2 there was such an arousal in them and they were still
3 aggressive. You just wouldn't move them. You'd wait
4 until they were such stages as they were calm enough to
5 walk over themselves.

6 Nine out o' ten times, one staff would grab the cuff
7 of their jumper and just hold them lightly if they were
8 going over there, just so that they wouldn't run away,
9 but you wouldn't take any of the young people out if
10 they were still aggressive.

11 Q. If they were really kicking off, 'Joe', would they
12 sometimes have to be taken to the ground?

13 A. Yeah, yeah, and that's what we called 'prone' then.

14 Q. And kept there for long enough that they would calm
15 down?

16 A. You would hold a young person until -- yeah, until such
17 stages as it was safe and calm for the young person and
18 for the staff to release them, but through CALM, there's
19 a training technique that you use when you're doing
20 CALM. So one on each arm, one on the legs, one
21 person -- one of the members of staff taking control for
22 then that.

23 Q. Could it be for quite lengthy periods that the child
24 would be held on the ground?

25 A. Depending, yeah. Yeah, just depending on the young

1 person, as well.

2 Q. I suppose taking a young person to the ground could
3 involve risks, well, I suppose, for everyone, but
4 certainly for the young person?

5 A. The young person and staff, yeah.

6 Q. Were young people ever injured in that process?

7 A. A lot of the time you -- the carpets, you had carpet
8 burns from it. Staff getting carpet burns with their
9 knees. Young people getting carpet burns from their
10 face when they used to end up -- a lot -- not a lot of
11 them, a couple of young people used to rub their face on
12 the carpet to get carpet burns, er, and then blame staff
13 for assaulting them.

14 Q. All right, but some carpet burns happened without that?

15 A. Totally, yeah. So a lot of staff in the summer time
16 would wear shorts and it was always carpet burns from
17 that.

18 Q. You say at paragraph 101 that when you were working in
19 Chalmers, there was never a record of a young person
20 being put in their room following an incident?

21 A. No, not then, not at the beginning, no.

22 Q. Perhaps we can look briefly, please, at another
23 document, it's EDI-000003672.

24 We see that's another inspection report, it's
25 St Katharine's Centre, and that's 1999/2000.

1 If we can go to page 4, please. It should be
2 paragraph 3.23, if we can scroll down. (Pause)
3 I'm sorry, it's my fault. Don't worry about it,
4 'Joe'.
5 LADY SMITH: Just for the record, what is EDI-000003672?
6 MR SHELTON: Excuse me, my Lady.
7 LADY SMITH: Certainly. Maybe you can try and sort this
8 out.
9 (Pause)
10 Here we are. Thank you. This is the St Katharine's
11 report for 1998/1999?
12 MR SHELTON: This is the previous year, my Lady. Yes.
13 Sorry for the delay there.
14 LADY SMITH: That's all right.
15 MR SHELTON: It should be page 4 and 3.23.
16 I think we see the recommendation there if the
17 inspector is within Guthrie and St Katharine's, the
18 records of admissions and discharges should be up to
19 date, but the second paragraph is:
20 'The use of and recording of "time out" in bedrooms.
21 The use of and recording of bedroom searches.'
22 A. But that's in Guthrie.
23 Q. It's Guthrie, but that's consistent, I think, with what
24 you say in Chalmers?
25 A. Yeah. Not Chalmers. Yeah.

1 Q. Sure, but it was the same in Chalmers, was it?

2 A. Not that I recall that, but certainly in Guthrie, if you
3 put a young person in their bedroom, it was recorded.
4 It wasn't the same in the open unit, no, 'cause we used
5 to use the quiet -- the downstairs quiet room in the
6 open unit.

7 Q. I think what they're saying there is that in Guthrie and
8 the secure unit, recording should be monitored and
9 I think it sounds as though there's some concerns about
10 that?

11 A. Yeah.

12 Q. But in Chalmers you are saying there just wasn't
13 recording at all at that time?

14 A. Yeah.

15 Q. Again, paragraph 102, you say:
16 'Any time you put hands on a young person, it had to
17 go on a pink sheet, which was an incident form.'

18 A. Yeah.

19 Q. So that should have been recorded.
20 If we can look please at -- this time it is
21 EDI-000003563. This is an inspection report for
22 Howdenhall, so again not Chalmers but it's the related
23 unit, 1997/1998. Page 5, please, paragraph 3.13:
24 'The inspector evidenced that the monitoring of
25 record keeping in relation to care and control requires

1 attention.

2 'The records requiring attention particularly
3 related to Braid unit. The inspector found a number of
4 incomplete records in relation to the use of locked
5 bedrooms and restraint.'

6 So at this time there seems to have been a problem
7 in Howdenhall. What can you tell us about the way
8 things were managed in St Katharine's at that time?

9 A. Well, as I say in my statement, I used the term 'pink',
10 it's 'cause the coloured sheets were pink and they were
11 incident logs. Any incident involving a young person,
12 whether it be verbal, physical, were completed on a pink
13 form and that was at St Katharine's. I allude that it
14 should have been done. Certainly anything that I was
15 involved in, it was -- pink form was done.

16 Q. I suppose at that time as an RCO you might not be able
17 to tell, have an overview really, of whether every unit,
18 every RCO was completing the forms?

19 A. No, no, no.

20 Q. Paragraph 104, you go on to tell us a bit more about
21 CALM training.

22 You tell us it consisted of a three-day course and
23 one day of physical training in the gym. Did the
24 physical training include instruction on performing
25 holds?

1 A. Yes.

2 Q. And taking children to the floor?

3 A. Yeah.

4 Q. What did you feel about that? What did you feel about
5 the training specifically? Did you feel the training
6 helped you in the work that you then had to do?

7 A. No, because it was a false environment with the
8 training. So when you had to put hands on a young
9 person for whatever reason, the young person was really
10 aroused, they were really aggressive, er, but when we
11 did the training, it was all staff, and it was quite
12 a calm environment, so it was just practising the holds,
13 practising your moves and that's it. So that's why
14 I say it was a false environment with that, 'cause you
15 couldn't physically, you know, get to that level with
16 staff members and you couldn't bring a young person in
17 to do the practice.

18 Q. So are you telling us that at times staff had to be more
19 reactive or felt they had to be more reactive than the
20 CALM training taught you to be?

21 A. Yeah, yeah.

22 Q. It certainly seems as though restraint was quite common.
23 You tell us at paragraph 108 there were some weeks that
24 you would have to use restraint four or five times
25 a day?

1 A. Yeah.

2 Q. Is that right?

3 A. But that would depend on the young person, yeah, mm-hmm.

4 Q. Certainly there were periods, we have looked at the

5 records and we don't need to look at them again, in

6 Howdenhall at least, there were certainly restraints

7 pretty much every day?

8 A. Mm, yeah.

9 Q. I'll go on to ask you a bit more about that just in

10 a moment, 'Joe'. You tell us at paragraph 108 that in

11 Howdenhall, when you went over there, you'd moved on in

12 techniques and there was a big push about not putting

13 young people into a prone position?

14 A. Yeah.

15 Q. 'Through our assessment and annual accreditation, they

16 removed prone, so we stopped using it.'

17 Do we understand that at that point, when you're at

18 Howdenhall, there was just a sudden stop to using prone

19 restraints?

20 A. No, it was just -- we were told that it was a discussion

21 through, er, Who Cares? Scotland and senior managers

22 within the residential estate that they were going to do

23 away with prone and we had to look at alternatives to

24 prone, which was the use of the bedrooms and things like

25 that and towards the end of my time at Howdenhall, if

1 you put a young person into their bedroom, they weren't
2 just locked in their bedroom, the door had to remain
3 open, staff member would interact with the young people
4 constantly and then you would check on them every 10 to
5 15 minutes and you would record you went to check on
6 them every 10 to 15 minutes.

7 LADY SMITH: When was the end of your time at Howdenhall?

8 A. Oh, good question. 2005.

9 LADY SMITH: Thank you.

10 A. No, yeah. 2015 probably.

11 MR SHELTON: 2015?

12 A. Probably, yeah. I don't know, when was COVID?

13 LADY SMITH: 2020.

14 MR SHELTON: But are you telling us -- sorry, my Lady.

15 LADY SMITH: When was COVID I was asked, 2020.

16 A. Probably then 2016.

17 MR SHELTON: Are you telling us, 'Joe', that restraints,
18 physical restraints, and particularly, the prone
19 position in restraint carried on to some extent after
20 this push or drive?

21 A. I've no idea. I've not been involved in any. Possibly,
22 but I've certainly not been involved in any and it was
23 always a last resort to the point where I did my CALM
24 reaccreditation last year and we didn't even, er, do any
25 training on prone. That was completely removed.

1 Q. Did the CALM system place any emphasis on restraint in
2 the prone position?

3 A. As in the sense that you could only do it when there was
4 three staff, that was the principles wi' prone or
5 'figure 11', we called it.

6 Q. Did you or any of your colleagues ever feel that they
7 had to perform a singleton restraint, just one person?

8 A. No, certainly not on any shifts that I've ever done, no.

9 Q. That's something you didn't see?

10 A. No, no.

11 Q. If it had happened, what would you have thought about
12 that, 'Joe'?

13 A. That's a massive risk to take on your own.

14 Q. For whom?

15 A. For both, young person and staff.

16 Q. I think you yourself were involved in a number of prone
17 restraints?

18 A. Yeah.

19 Q. Particularly late 1990s/early 2000s?

20 A. Yeah, yeah.

21 Q. If I can perhaps take you to a few documents now, 'Joe',
22 just to explore this a bit more.

23 If we can look first of all at SGV-000024049. We
24 see this is a report called 'Edinburgh's Children:
25 The Report of the Edinburgh Inquiry into Abuse and

1 Protection of Children in Care', this is January 1999.

2 Do you remember the Edinburgh Inquiry, 'Joe'?

3 A. I knew it was going about, but I can't ever remember
4 seeing the report.

5 Q. This was following the conviction of two individuals for
6 sexual abuse in other Edinburgh children's homes, not
7 St Katharine's at that stage.

8 A. Yes.

9 Q. I just want to take you to some things they say about
10 the CALM system and what staff were saying about it.

11 If we can go to page 169, please: it's
12 paragraph 10.75.

13 If we can look briefly at 10.74 please, the writers
14 say:

15 'The CALM training was a topic which elicited some
16 of the most strongly worded comments from staff.'

17 They say:

18 'The response to training was overwhelmingly that
19 the theoretical aspects were good, but the actual
20 practical techniques were not appropriate and not
21 helpful. Some commented that they were based on
22 a martial arts approach involving difficult techniques
23 and balances. They required too many members of staff
24 to be involved, more than would normally be around to
25 help them when a situation blew up.'

1 What do you think about that, 'Joe'?

2 A. That's the first I've ever heard o' it being a martial
3 arts technique, no.

4 Q. That's certainly what some of the staff seem to be
5 saying, but that's not something you would agree with?

6 A. No. No, I wouldn't agree with that and I wouldn't agree
7 that it required too many staff. Personal opinion,
8 I wouldn't even get involved in a young person unless
9 there was another member of staff there.

10 Q. 10.75:

11 'Some said the techniques weren't appropriate for
12 younger children.'

13 A. Yeah, I would agree wi' that, yeah.

14 Q. Why would that be, 'Joe'?

15 A. Well, I alluded to me earlier on, I'm a six foot four
16 bloke and if I've got a four foot 11- or 12-year-old,
17 some of the holds just weren't safe for them or me and
18 I wouldn't entertain 'em.

19 Q. Going to the end of that paragraph 10.75:

20 'Others said it was not always a helpful confidence,
21 it might encourage physical intervention when other
22 approaches would be more helpful.'

23 Did you feel that?

24 A. That's very much now, yeah. There's different
25 approaches now.

1 Q. I think that's not what's being said here, 'Joe'.
2 They're saying that the CALM training system might give
3 staff confidence, but because of that, it might
4 encourage them to intervene physically when it might not
5 be the right thing to do?
6 A. No.
7 Q. No?
8 A. No.
9 Q. You don't agree with that?
10 A. No, no, no.
11 Q. If we could look then at page 170.
12 At 10.76, should be top of the page:
13 'Many comments to the effect that the training was
14 being done to cover the department's back. It was seen
15 as being there primarily to protect the department,
16 rather than to benefit children.'
17 A. I would say that's a disgruntled member of staff or
18 ex-member of staff that's said that. CALM's there for
19 and still there for everyone's protection, young people
20 and the staff. So I would disagree with that comment.
21 Q. Okay. Page 171, please. It's just at the top of the
22 page there, there's a recommendation about CALM
23 training. At 10.88:
24 'We were also concerned at what seemed to us to be
25 a lack of consistency in practice regarding care and

1 control, and the persistence in some units of a culture
2 based upon physical force.'

3 Now, they're not being specific about that, 'Joe',
4 but just thinking about St Katharine's and Howdenhall,
5 did it seem to have a culture based on physical force?

6 A. No, not as far as I'm led to believe, no. I never seen
7 it as a -- one of the words I would use when I read that
8 was the power imbalance was never there and that's
9 clearly what that says, a power imbalance, and
10 definitely not.

11 Q. We looked this morning at some inspection reports which
12 commented on the high number of prone restraints that
13 there were in St Katharine's and Howdenhall. That,
14 I think, in the late 1990s/early 2000s is something that
15 you would agree with, that that did happen?

16 A. Yeah.

17 Q. I think we touched on this earlier on, but what about
18 horseplay or toy fighting in the units, did that happen?

19 A. It happened. I never did it, 'cause I wasn't ever
20 comfortable, as I say, it's my size again, but yeah, it
21 did, happen. Certainly not by me.

22 Q. What was it, 'Joe'? What was toy fighting or horseplay
23 in that sense?

24 A. Well, certainly, I recall a young person in the secure
25 unit, PCX [REDACTED] his name was, and PCX [REDACTED] used to wait for

1 certain individual staff to come in the door, because
2 PCX -- PCX was PCX and you would walk in the door and
3 PCX would jump on your back and that was -- that was a
4 level but as I said, that was never me. I was never,
5 ever comfortable doing horseplay.

6 Q. Given that example, was PCX quite a big lad?

7 A. Yeah, yeah.

8 Q. But that, I think, wasn't the only example of toy
9 fighting that went on; is that right?

10 A. Yeah, yeah.

11 Q. This would be toy fighting or horseplay between both
12 children as in children toy fighting with other
13 children --

14 A. Never seen that.

15 Q. Oh, right, so it was always, you say, children toy
16 fighting with members of staff?

17 A. Yeah.

18 Q. Was that something that was, well, either tolerated or
19 even encouraged by the management?

20 A. No. No, it was never encouraged and I think you alluded
21 to it earlier on, I can't remember if there was an email
22 or a policy came out to say that it was to stop and
23 then, as far as I knew, it stopped.

24 LADY SMITH: 'Joe', where did this expression 'toy fighting'
25 come from?

1 A. Where does it come from? I've no idea. It was just
2 a terminology that was used. Play fighting.
3 LADY SMITH: Play fighting.
4 A. Yeah, toy fighting, play fighting.
5 LADY SMITH: Well, I just wondered what the 'toy' was in
6 this fighting that was going on?
7 A. Yeah, yeah. I suppose you'd probably say it was a bit
8 of fun.
9 LADY SMITH: Depending on your point of view?
10 A. Well, yeah, yeah.
11 MR SHELTON: Should we understand it was then physical fun,
12 it was quite physical?
13 A. Depending what you mean by 'physical'. If it meant, you
14 know, a young person jumping on your back or rolling
15 around the floor like that, but then, yeah, but anything
16 as in a power balance, no, definitely not, but I can't
17 comment for other people.
18 Q. Were there any rules to it?
19 A. No.
20 Q. There were no rules?
21 A. No.
22 Q. All right, so nobody sat down with you and said, 'All
23 right, toy fighting might happen, but it mustn't go
24 beyond a certain stage'?
25 A. No, no.

1 LADY SMITH: That reminds me of a game I've heard about in
2 some places, that gets referred to as 'murderball', in
3 which the only rule is there are no rules. Have you
4 heard of that game?

5 A. Yeah, I've heard of that, yeah. Yeah, I've heard it,
6 that type of thing, but I wouldn't say that was the same
7 as what was -- the interactions with the young people.
8 I think there's a massive difference with murderball or
9 something like that.

10 LADY SMITH: All right, thank you.

11 MR SHELTON: If we can look, please, at EDI-000003595.

12 If we look at the first page, we can just check that
13 that's an inspection of secure units at Howdenhall and
14 St Katharine's, February 2000.

15 If we could then look at page 16, paragraph 37.
16 This certainly relates to Braid unit and Guthrie:

17 'In Braid, the atmosphere was warm, caring and
18 relaxed. In Guthrie, a relaxed atmosphere could soon
19 become tense with horseplay deteriorating into loss of
20 self-control. This was partly attributable to the
21 instability of some young people and the mix of
22 residents. However, the standoffish approach adopted by
23 Guthrie staff may have contributed to a climate where
24 incidents were more likely and could easily escalate.'

25 Was that something that you came across in your

1 practice in the Chalmers unit?

2 A. No, no.

3 Q. Or later in Howdenhall?

4 A. No.

5 Q. Certainly it's something the inspector at that time

6 seemed to be concerned about. Would you agree with me,

7 'Joe', that that is almost bound to be a risk of toy

8 fighting, that someone perhaps just goes a little bit

9 too far?

10 A. Yeah, yeah, no, I would agree wi' that, yeah.

11 I certainly never witnessed it going to that level, but,

12 yeah, depending on what you say as what level it is, you

13 know.

14 Q. Someone might then be inclined to retaliate?

15 A. Mm, yeah.

16 Q. Do you accept that?

17 A. Yeah.

18 Q. Might that someone sometimes be a staff member?

19 A. Possibly, yeah.

20 Q. Would that staff member then perhaps be tempted to

21 restrain the young person?

22 A. It never happened on my shift, yeah, and I certainly

23 wouldn't have done that, but, yeah, there is

24 a possibility, yeah.

25 Q. If we can look, please, at what we think is perhaps some

1 guidance about horseplay or toy fighting. It's
2 EDI-000005687, it's perhaps a document we have looked at
3 before. It's the second page, please. This is the
4 Howdenhall induction document and at paragraph 5 there
5 are some passages about toy fighting. We are told:
6 'Toy fighting between staff and young people can
7 provide an appropriate mode of physical contact.'
8 Again, is that something that was mentioned to you
9 or that senior staff told you?
10 A. No, not that I recall, no.
11 Q. Do you remember seeing this guidance?
12 A. Yeah.
13 Q. You did?
14 A. I can't recall seeing this one. I'd be curious if you
15 went down to the bottom what the date was of that one,
16 but, no yeah, but, you know, it was open that there was
17 toy fighting in the unit and, as I said, I never took
18 part in it, 'cause I just never felt comfortable taking
19 part in any type of toy fighting.
20 Q. 5.3 says:
21 'Staff should be aware that there may be a sexual
22 element in young people engaging with other young people
23 or with staff in toy fighting.'
24 At 5.4:
25 'Toy fighting should not be used as a trial of

1 strength with young people. If this is one of its
2 purposes, it excludes those staff who are not as
3 physically able or who are less comfortable in such ways
4 of working and hence reinforces messages that control is
5 executed through physical strength.

6 'Staff should always consider the need to be able to
7 justify engagement in toy fighting.'

8 'Joe', would you agree with me that there are
9 perhaps a number of risks in toy fighting?

10 A. Yeah, no, I would agree, yeah.

11 Q. That, first of all, it might escalate, we have seen the
12 inspectors being concerned about that.

13 There's the risk of a possible sexual element,
14 perhaps on either side and there's a risk of excluding
15 staff who don't feel comfortable working in that way?

16 A. Well, as I says, I never, ever got involved in toy
17 fighting and I was never excluded.

18 Q. I suppose, looking at it perhaps as an outsider, as it
19 were, seeing staff engaging in wrestling with young
20 people, that might seem quite surprising?

21 A. Yeah.

22 Q. Disturbing?

23 A. Mm-hmm.

24 Q. I think finally might that also apply to girls in the
25 unit? Might girls in the unit actually be quite

1 frightened by what was going on?

2 A. Yeah, possibly, yeah.

3 Q. Even some boys too?

4 A. Yeah, mm-hmm.

5 Q. When did you say you thought it was prohibited?

6 A. Early twenties, I would imagine, but ...

7 LADY SMITH: Sorry, by that do you mean early 2000s?

8 A. Yeah.

9 LADY SMITH: Thank you.

10 MR SHELTON: 'Joe', we know there are some allegations

11 against you and you talk about allegations of abuse from

12 page 22. I just want to take you very briefly to that.

13 You say that you didn't ever witness abuse from staff of

14 young people. You say you wouldn't have tolerated it

15 then or now?

16 A. No.

17 Q. I suppose, from what you've already told us, the number

18 of restraints, the number of prone restraints, the toy

19 fighting, as it's called in that document we just looked

20 at, one might think that St Katharine's/Howdenhall were

21 quite violent places to be?

22 A. I think -- when you were talking about -- when you were

23 saying the late 1990s/early 2000s, when there was

24 a number of restraints, I'd be curious to find how many

25 of the young people were in secure because of their

1 risk-taking behaviour, ie offending and things like
2 that. And that would play a lot on the sense that, you
3 know -- the restraints certainly would play a lot on the
4 young people not wanting to be there, so they were
5 fighting against the system. So there's every
6 possibility of that.

7 Q. Well, we certainly heard from at least one young person
8 in this part of the case study that there were violent
9 restraints and that she was shocked at what was
10 happening.

11 A. Mm.

12 Q. We know there are certain allegations against you. You
13 have made your position very clear, that you deny those
14 forcefully?

15 A. Yes, yes, and they were investigated by Police Scotland.

16 Q. Yes, we certainly know that they were investigated by
17 Police Scotland. I think they decided that there was
18 nothing actionable criminally.

19 A. Yes.

20 Q. But perhaps that doesn't mean that there was nothing
21 actually that posed a difficulty in St Katharine's at
22 that time; is that fair to say?

23 A. Yeah.

24 Q. In relation to the allegations that you mention, and
25 that you say are lies, you say that there was also

1 an investigation at the time by Les McEwan and he was,
2 I think, at that time the Director of Social Work, is
3 that right?

4 A. Yes, he was, mm-hmm.

5 Q. You tell us that nothing came of that.

6 I wonder if we can just look at another document,
7 EDI-000003600.

8 We see again, this is an inspection report. If we
9 can scroll down, please. This is March 1999.

10 There are a number of pages to look at, if we could
11 look briefly at page 6, please. 3.13; there is
12 a concern noted there about care and control practices,
13 apparent high use of prone restraint techniques.

14 I think you very fairly said that that did happen
15 quite a lot at that time and the inspector was clearly
16 concerned about that.

17 If we look at page 10, please, 8.3. We are told
18 that staff morale overall appears to be low:

19 'Staff were signalling to the inspector feelings of
20 vulnerability.'

21 Is that something you remember from that time?

22 A. I think that goes back to one of your first questions
23 about lack of staff. That's where that morale comes
24 from.

25 Q. I was going to ask you about that. So there's a lack of

1 staff, there are shortages and so there's less cover and
2 so staff were feeling vulnerable in the unit?

3 A. Yeah. Yeah.

4 Q. Again, 'Joe', do you think that creates a risk that
5 staff are themselves likely to act more quickly if they
6 think that things are getting out of control?

7 A. No.

8 Q. No?

9 A. No. I can only speak for myself, but back then I don't
10 think that was the case. I think it was just lack of
11 staff and lack of resources for the staff, ie staff
12 shortages.

13 Q. You say yourself 'Joe' you are a big guy and you were
14 a big guy and perhaps less to worry about physically,
15 but some other staff might not have been in the same
16 position?

17 A. Possibly, yeah, possibly. However, I had two female
18 shift partners when I was an RCO and they were 100 times
19 better than me interacting with the young people and
20 defusing things if you want and they were brilliant, so,
21 yeah.

22 Q. But they'd be on duty with you?

23 A. Yeah.

24 Q. They were part of your team?

25 A. Mm-hmm.

1 Q. Page 19, please. This is a letter to Mr Phelan and we
2 understand this is a letter -- if we can look at
3 page 20, briefly, please. If we scroll to the foot -- I
4 am sorry, I have got the wrong page, I will come back to
5 that.

6 Page 19, please. It's a letter from the Director of
7 Registration and Inspection to Frank Phelan. If we look
8 at paragraphs 1 and 2, please.

9 First of all: 'The effectiveness of CALM may be
10 being ... restricted by the fact that not all staff are
11 trained in the techniques of de-escalation and physical
12 intervention.'

13 Do you remember that being a problem, 'Joe'?

14 A. Again, that would be when we had locum workers or
15 anything else like that, 'cause none of them would be
16 trained in CALM. Swiss didn't buy into CALM, as far as
17 I know.

18 Q. Paragraph 2 gives some figures about the number of times
19 that prone restraint is being used and it's clearly
20 considerable. 61 incidents, 55 prone restraints between
21 4 January 1999 --

22 A. Yeah, that is a lot, mm-hmm.

23 Q. At page 20, please, and paragraph 4:

24 'From reading the records, the inspector is of the
25 view that there may be incidents which led to prone

1 restraint ... which could have been handled in
2 a different way and the intervention of staff may have
3 escalated the situation.'

4 Do you recall that sort of situation arising?

5 A. No, no.

6 Q. But that's something that the inspector was concerned
7 about?

8 A. Yeah, it could have happened, yeah.

9 But does this report just say -- is it just Guthrie
10 unit or are they just using it as a service?

11 Q. This is Howdenhall, I think.

12 A. Howdenhall, so is it Braid or if it's -- I don't know.

13 LADY SMITH: I think there was a reference early on to
14 St Katharine's as well, but I can't remember whether the
15 title sheet suggested overall it was a report on both.

16 MR SHELTON: Can we just look at page 1 of this document,
17 just to check that?

18 A. Wasn't these inspections then done for the two units and
19 it was one report?

20 LADY SMITH: Hang on, we'll get it here. This is the
21 Howdenhall 1998 to 1999. I think there was a comment in
22 one of the early paragraphs at both Howdenhall and
23 St Katharine's.

24 MR SHELTON: Back to page 20, please:

25 'Records indicate that on a number of occasions, the

1 situation escalates quickly from verbal abuse to
2 physical intervention by staff.'

3 I think essentially you've said that's right. You
4 have told us that's right, 'Joe'?

5 A. Yeah, yeah.

6 Q. That sometimes did happen?

7 A. Yeah.

8 Q. Page 17, please. That's the cover page, I think, of
9 a reply to Mr Davidson at Registration and Inspection by
10 Frank Phelan.

11 Paragraph 1, he, I think, says quite clearly that
12 there was an issue surrounding CALM training for
13 recently recruited staff and CALM trained staff feeling
14 unsafe.

15 Reading short, during this time they were still
16 expected to manage difficult behaviour and to partake in
17 physical interventions with young people.

18 I suppose, 'Joe', you have a lot of experience as
19 an RCO and as a manager, but if a member of staff hasn't
20 been trained in CALM, or, indeed, any other technique,
21 and they're required to intervene, then again the risk
22 of injury for both --

23 A. Yeah. No, yes, definitely, I would agree with that,
24 yeah.

25 LADY SMITH: Mr Sheldon, I couldn't help but notice that

1 Mr Phelan is apologising for the delay in his response
2 under reference to heavy involvement in what he refers
3 to as an 'intensive recruitment drive'.
4 MR SHELTON: Yes, my Lady. It is plain that there were
5 really quite severe staff shortages at this period and
6 that they weren't addressed fully until around 2001 at
7 the earliest.
8 LADY SMITH: Thank you.
9 MR SHELTON: Paragraph 2 of that page, please:
10 'As I mentioned to you at the post-inspection
11 debriefing, I cannot be certain as to the weighting in
12 regards to the factors influencing the use of prone
13 position.'
14 So the manager of the unit himself isn't really
15 quite sure why this is happening, it seems?
16 A. Yeah.
17 Q. If we can look at page 18, please, at paragraph 4 first
18 of all:
19 'The issue of why situations escalate so rapidly
20 will be addressed.'
21 Clearly there was this concern that situations were
22 escalating rapidly?
23 A. Yeah.
24 Q. At the end of the paragraph, he says:
25 'We're also in the process of attempting to define

1 the differences between what might be dangerous
2 behaviour and what might be difficult behaviour and how
3 we need to plan responses to each.'

4 Thinking back to that time, 'Joe', do you feel that
5 staff at St Katharine's, perhaps Howdenhall as well,
6 weren't sure of the difference between dangerous and
7 difficult behaviour and would intervene accordingly?

8 A. That's probably a difficult one for me to answer. I can
9 only give you my answer, and I would know the difference
10 between dangerous behaviour and difficult behaviour.

11 Q. All right. But I think you've told us already that even
12 verbal abuse might be sufficient, you thought, to
13 justify physical intervention?

14 A. Yeah, mm-hmm, yeah.

15 Q. Page 16, please. I appear to be jumping around a bit,
16 but I think this is the right order.

17 A. That's fine, yeah.

18 Q. Paragraph 9, please. Mr Phelan says, about halfway down
19 the paragraph:

20 'It's not realistic that our practices are exempt
21 from scrutiny and development. It may be that it would
22 have been useful to reflect this discussion in your
23 letter.'

24 Reading short again:

25 'Staff do feel that the prescribed method of dealing

1 with difficult behaviour, ie CALM, is driven by a desire
2 for the department to protect itself rather than meeting
3 the needs of the staff and young people in its
4 residential units.'

5 That's perhaps going back to the document that we
6 saw earlier on, 'Joe', the Edinburgh Inquiry report.
7 I think you said at the time that was perhaps
8 a disgruntled member of staff?

9 A. Yeah.

10 Q. It sounds here as though 'staff' is being used in the
11 plural, this was quite a common feeling amongst staff?

12 A. Yeah.

13 Q. Is that what you recall from that time?

14 A. I think -- at this point I think I was in
15 St Katharine's, so it would have been a different area,
16 but, yeah, possibly. Staff were under a great deal --
17 there's no getting away from it, staff were under
18 a great deal of pressure on the staffing.

19 You would go in -- if you went in for your early
20 shift, and I think the early shift started at 7.30 am,
21 you finished at 10.30 pm the night before and it was all
22 about continuity for the young people. So if you
23 finished at 10.30 pm at night and all the young people
24 were in their beds, were all settled and you come in the
25 morning and you're on shift with three locum workers,

1 you just know it's going to be a hard day, so, yeah.

2 Q. Mr Phelan goes on:

3 'Allied to this is my experience of a staff team
4 here that can be quite inward looking and can be very
5 suspicious of the motivation of people outside the
6 centre. I would be interested in your views on what
7 staff are saying they would find supportive.
8 I certainly know that one of the main issues is the
9 level and quality of staffing.'

10 I think Mr Phelan there is talking about the
11 Howdenhall centre particularly, but was that feeling of
12 suspicion also something that was a feature at
13 St Katharine's?

14 A. Er, if I recall rightly, there was a suspicion at
15 St Katharine's that there was -- one member of staff was
16 a plant at St Katharine's at that point, but there was
17 no evidence. No proof on that. It was just
18 a suspicion.

19 Q. Do you recall why was there that suspicion? What led to
20 that suspicion?

21 A. 'Cause the individual was, I'm wording my words very
22 carefully here, the individual was disgruntled and
23 I think you alluded to her earlier on, KTS [REDACTED],
24 didn't get a full-time job and continually throws
25 allegations out there, so, yeah.

1 Q. Why do you think she would have been planted though?

2 A. Why do I think -- it was just a rumour that was going
3 about at that point, that she was a plant and that was
4 it. No evidence based from it, just I do recall that
5 that was a discussion.

6 Q. Even if that were true, 'Joe', it certainly seems that
7 other outside people had some concerns about
8 St Katharine's/Howdenhall at that time?

9 A. Mm, yeah.

10 Q. The inspector certainly did at this point?

11 A. Yeah. I think this was probably the same time, if
12 I remember rightly the dates, as Les McEwan did his
13 stuff, so, yeah.

14 Q. I think that's really first of all what I'm saying to
15 you, that it does seem that Les McEwan may have carried
16 out an investigation. He certainly asked for further
17 information on the back of this inspection and the
18 inspection shows that there were some concerns?

19 A. Yeah. As an RCO, I wouldn't have been involved in any
20 of that.

21 Q. Sure, but in those circumstances, would it be entirely
22 surprising if someone was asked to keep an eye on what
23 was going on in St Katharine's/Howdenhall?

24 A. Er, would it be a surprise? No. Would it be a shock?
25 No. Given the department, no.

1 Q. It would seem perhaps a natural thing to do if there
2 were concerns that the department would want to know
3 what was happening; is that not fair?

4 A. Er, I would agree/disagree wi' you there. A bit
5 underhanded, yeah. But fair, yeah.

6 Q. How else would they have found out what was going on?

7 A. I've no idea. Yeah, you know, and that's why I think
8 the inspections are quite relevant and quite important.

9 Q. 'Joe', at various points, other external people have
10 said things about St Katharine's/Howdenhall that are
11 perhaps similar to the complaints, the reports, made by
12 KTS and others.

13 Can I take you, please, to the document
14 EDI-000000749. Is that a document that you have seen
15 before, 'Joe', or are aware of?

16 A. I was aware o' it. Didn't see it, but aware o' it.

17 Q. This was the review in relation to St Katharine's and
18 Northfield following the conviction of Gordon Collins
19 for sexual abuse.

20 A. Yeah.

21 Q. As part of the review, the reviewing team looked at
22 a number of sources. They spoke to a number of people,
23 including residential care workers, managers, social
24 workers, and looked at case notes, case files and we
25 have talked a bit about the records earlier today.

1 This wasn't a restricted review. They spoke to
2 really quite a number of people. They looked more
3 widely at practices at Northfield and St Katharine's
4 over the period that they were looking at, which we
5 understand was 1995 to 2006, which is when Collins was
6 employed, first of all at Northfield and then
7 St Katharine's.

8 If we can look at page 48, please. Scrolling down
9 to the section on St Katharine's. There is
10 an introductory paragraph about Collins at
11 St Katharine's, they say:

12 'We've interviewed a similar number of staff from
13 St Katharine's to that of Northfield and spoken with
14 staff from external agencies.'

15 They say:

16 'Some of the staff behaviour and management
17 responses at St Katharine's that were described to us
18 concerned us.

19 'Residents were locked in their rooms without any
20 possessions for long periods, sometimes for days. This
21 had a severely adverse impact on their mental health.

22 'A member of staff raised a concern with the unit
23 manager about a colleague who had pinned to the floor
24 a girl who had given the member of staff a "funny look".
25 The staff member who reported the concern was told

1 "perhaps secure is not the place for you".'

2 Scrolling down:

3 'A residential care officer saw a boy's wrist and
4 arm twisted by a member of staff as he escorted the boy
5 to his room. The boy was crying.

6 'A member of staff complained that she saw a girl
7 restrained and dragged up to the stairs to stop her
8 leaving Chalmers unit. The unit took no action on her
9 complaint and so she involved CALM trainers to intervene
10 to stop the practice.

11 'One member of staff said that she reported
12 a colleague's harsh behaviour and although the concern
13 was well received, she saw no diminution in the
14 behaviour.

15 'Another ex-member of staff said she thought some
16 staff "enjoyed restraints" and were "waiting for it".
17 Some external professional staff and ex-staff said that
18 St Katharine's was a macho environment staffed by big
19 men who believed the young people were high risk, needed
20 to be locked up and had to be kept under control. The
21 harsh regime and overuse of power was considered by
22 those visiting the unit to be abusive.'

23 There's quite a lot in there, 'Joe', and I want to
24 ask you first of all, about the examples that are given
25 of practices which the review was concerned about, so

1 what appear to be some pretty rough restraints --

2 A. Mm, definitely.

3 Q. -- and children being locked up for long periods, is

4 that something that you would recall from your time at

5 the complex?

6 A. Young people being locked in their room with nothing in

7 the bedrooms, yeah, that was the case. If you scroll

8 down a bit, the stuff with twisting young people's arms,

9 no.

10 Dragging someone up the stairs, I would never have

11 witnessed -- I would never have tolerated it or allowed

12 it to happen on my shifts, but if it's in here then it

13 must've happened, but it wouldn't have happened --

14 I wouldn't have witnessed anything like that or

15 tolerated anything like that.

16 CALM clearly states, you know, taking young people

17 up and downstairs is a no-no, so ...

18 Q. What would you think about the description of

19 St Katharine's as a harsh regime and that power -- and

20 I think that means physical power -- was overused?

21 A. No, no, I wouldn't accept. No, I wouldn't accept. If

22 this is to do with the time with Gordon Collins, then

23 I wasn't at St Katharine's. I was over at Howdenhall.

24 But a macho culture, no, I would say no, and big men,

25 look at me.

1 Q. I suppose the thing here, 'Joe', is that these are
2 reports coming from a number of different sources and
3 not just the people who made allegations about
4 St Katharine's in this chapter and specifically against
5 you.

6 A. Yeah.

7 Q. So just thinking about the allegations that have been
8 made against you, do you continue to say that those
9 allegations are lies?

10 A. Yes.

11 Q. What do say then about other people who have reported
12 similar behaviour, are they also lying?

13 A. Er, about me?

14 Q. Well, about the behaviour that they're talking about
15 here?

16 A. I can put my hand on my heart and say I've never abused
17 any young person and the staff that was interviewed --
18 investigated by the police, utter lies.

19 Ask me why these individuals have made these
20 allegations, I haven't a clue.

21 Q. I think your position is that the conduct described here
22 could have happened, but you didn't witness it?

23 A. Yeah. It could have happened, yeah.

24 Q. Your position is you wouldn't have tolerated if you had?

25 A. No, definitely not.

1 Q. If someone like KTS [REDACTED] had witnessed conduct
2 like that, they would be justified then in complaining
3 about it?

4 A. Yes, mm-hmm.

5 Q. Do you have any particular theories about why they would
6 have lied specifically about you?

7 A. No idea. I was suspended for 11 months pending a police
8 investigation, and it was no case to answer. I was
9 literally interviewed for 15 minutes by the police with
10 no case to answer to after 11 months. It was pure hell
11 being sat at home and the impact it had on my family was
12 horrendous. So do I want to say there's no love lost
13 between me, KTS [REDACTED] or KTV [REDACTED]?
14 Absolutely none.

15 Q. But you would agree that members of staff or external
16 professionals witnessing behaviour like this would
17 justifiably be shocked?

18 A. Would be?

19 Q. Shocked.

20 A. Shocked, yeah.

21 Q. Just to complete this, can we look, please, at page 49.
22 It's just the first and second paragraphs.

23 We see again the reference in 1998, the inspector
24 noted there was a requirement for more detail about why
25 children were removed to their rooms, the issue is still

1 being commented on in 2001.

2 Children sent to their room too easily, does that

3 sound about right?

4 A. Yeah, probably, then, yes, yeah, I would say, yeah and

5 I think that then went back down to staffing.

6 But, yeah, following on, I don't know when after

7 that, but some time after that, we used the small quiet

8 room before they went to their bedroom and things like

9 that. So, yeah, no, that's a fair comment.

10 Q. The next paragraph:

11 'Interviewees who had stopped working at

12 St Katharine's or who were from external agencies

13 described many staff at St Katharine's as "pumped up",

14 "overexcited" and said they deliberately wound up the

15 young people.'

16 Does that sound about right?

17 A. No, not that I witnessed. Not that I witnessed.

18 Q. 'A number of interviewees commented that some staff were

19 openly contemptuous of staff from different backgrounds,

20 for example nursery nursing and mental health, mocking

21 them in front of young people and other staff.'

22 A. Never seen it.

23 Q. Was there a feeling that people from backgrounds like

24 that just didn't know what they were talking about, they

25 didn't have a place in a secure unit?

1 A. No, I never witnessed anything like that, no.

2 Q. 'Other staff told us they would not hesitate to speak
3 their minds about colleague competence and would use
4 derogatory banter to get their message across.'

5 A. No.

6 Q. Does that sound right?

7 A. No. I never witnessed any derogatory banter in that
8 respect, no.

9 Q. Bear with me, perhaps we can just briefly look at
10 another document, it's EDI-000004977.

11 Another inspection report, this time for
12 St Katharine's, March 1997. Perhaps we can just for
13 completeness go to page 5, first of all.

14 It's paragraph 3.14, the second paragraph there:

15 'Positive physical interaction between young people
16 and staff members is an acknowledged component of the
17 care on offer. The inspectors would welcome however
18 more explicit guidelines as to the appropriateness of
19 "toy fighting/dummy fighting".'

20 It does seem as though the inspectors again had some
21 concern about that issue?

22 A. Yeah, mm-hmm.

23 Q. What I really wanted to ask you about was at page 8.
24 This is paragraph 5.3, inspectors say:

25 'Whilst there is an appropriate level of awareness

1 in relation to anti-discriminatory practice/equal
2 opportunities amongst the staff group generally and the
3 management team specifically, a majority of female staff
4 members stated that on occasion they felt marginalised
5 or discriminated against by male colleagues on gender
6 grounds. A percentage of male colleagues shared this
7 view.

8 'It was acknowledged that to some extent the
9 situation resulted from (a) inherited "custom and
10 practice" (b) overall predominance of males (c)
11 misguided paternalism.

12 'However, staff members did relate incidents that
13 appeared overtly discriminatory. The inspectors
14 witnessed on one occasion the use of inappropriate
15 language of a sexist nature.'

16 Was that your experience of St Katharine's, that
17 there was --

18 A. No, definitely not.

19 Q. -- even sexist banter?

20 A. No.

21 Q. What we might describe as discriminatory banter?

22 A. No, I never witnessed anything like that, no.

23 Q. Were staff openly contemptuous about people from other
24 backgrounds and perhaps particularly women from other
25 backgrounds?

1 A. No, not that I can recall, no. So, no.

2 Q. I think one last document to look at, 'Joe', and
3 hopefully we can let you go. It's EDI-000000802.

4 This is a note of a whistleblowing investigation
5 outcome report. It's completed 2022, but it looked back
6 at a number of incidents and complaints from
7 St Katharine's/Howdenhall from about 2008. This was
8 a review again of case files, papers and so on,
9 complaint forms.

10 If we can look, please, first of all at page 13.
11 Just scrolling down a bit, it's about the third
12 paragraph:

13 'The investigating officer considered cases within
14 a 12-year period, 2008 to 2019, and found evidence which
15 is of concern in relation to 45 incidents, allegedly
16 involving ESS managers and staff.'

17 The writers then go on to summarise some of those
18 concerns. If we go to page 20, please. There is
19 a table with names of young people. The names are
20 changed to respect confidentiality and with brief
21 summaries. I think the point that the writers make is
22 that the pattern of complaints is such as to lead to
23 concerns in particular areas.

24 We see, for example, at case numbers 1, 4 and 6,
25 that restraints were conducted outwith the CALM system.

1 Is that something that rings any bells?

2 A. I would say I never, ever witnessed anything that was
3 outwith the CALM instruction and I wouldn't have
4 tolerated it anyway. I'd have went straight to my
5 supervisor, my manager, if I'd have seen anything like
6 that.

7 Q. There is a number of these incidents which involved
8 using the prone position, but also what's described as
9 'controlling staff behaviour and goading'. I think we
10 understand that means goading of the child, were
11 children goaded into situations where they would be
12 restrained?

13 A. Again, I wouldn't have tolerated that, no, definitely
14 not. I never witnessed any type of goading a young
15 person into going into a prone position or hands on, no,
16 definitely not.

17 Q. Next page, please.

18 We see more of similar types of concerns;
19 controlling behaviour, bullying, verbal abuse and issues
20 with single separation.

21 Were you conscious of staff bullying either other
22 staff or children?

23 A. No.

24 Q. What about verbal abuse of young children, the use of
25 inappropriate language about young children?

1 A. No. Again, if any member o' staff used inappropriate
2 language, I'd have been the first to say to them, pass
3 it on to my manager. So I never witnessed anything like
4 that, no.

5 Q. Page 23, please.

6 Again, it's more of the same and one can see the
7 same issues cropping up:

8 'Restraints conducted outwith CALM, controlling
9 behaviour, negative attitudes, attempted assault outwith
10 restraint.'

11 There's two examples of that given.

12 This seems to be painting a picture, 'Joe', of
13 a pretty, you know, unpleasant --

14 A. It's pretty grim. When you look at it like that, it's
15 pretty grim and yeah, and I can see, you know, it
16 clearly does show grim, but I never witnessed anything
17 like that.

18 Q. Just to complete this, please, page 28.

19 The reviewers here break down categories of alleged
20 abuse. They say, having examined all these records:

21 'Patterns can be discerned in the methods of abuse.
22 For example, young people have alleged the same forms of
23 abuse, such as being pushed, their arms twisted up their
24 back and the knee used in neck or back, sat on or the
25 staff member has laid on top of them, put into

1 a chokehold or a headlock before being punched, grabbed
2 by head or body and dragged, not listened to when they
3 said they could not breathe, goaded and verbally abused.
4 'The same managers or staff members being named as
5 involved in more than one incident.
6 'Injuries sustained, for example, carpet burns and
7 bruising.'
8 'Joe', I think you have conceded that sometimes
9 carpet burns would happen and I suppose it's perhaps
10 inevitable that sometimes children, perhaps staff too,
11 would be bruised.
12 What about the first bullet point, the patterns that
13 the reviewers point out there suggest deliberate
14 infliction of pain and inappropriate restraint
15 techniques. Is that fair to say, first of all?
16 A. It probably is, yeah, no, yes, it probably is.
17 The part that got me was, where is it? The part
18 where it says sat on staff -- or staff member sitting on
19 them. The first thing that came to my mind is if
20 a young person was put to the floor and the staff member
21 fell over them, I could see that, but anything else, no.
22 Q. Just thinking about your own statement and your
23 position, the allegations against you, and we understand
24 that you deny those --
25 A. Yeah.

1 Q. -- but what's being said is that there were occasions
2 when staff, and it is staff in one of the allegations,
3 not confined to you, staff would bend children's fingers
4 back, inflicting pain. There was twisting of noses.
5 There were inappropriate ways of holding young people,
6 inflicting pain on them and those allegations are really
7 consistent with what's said, both in this report and the
8 significant case review that we looked at before?

9 A. Mm-hmm.

10 Q. Is that fair to say?

11 A. Yeah, yeah. If it's on there, yeah, but I know
12 certainly the allegations against me -- and that was ...
13 one of them, was twisting a young person's nose to draw
14 blood -- was utter lies.

15 Q. You have made that very clear, 'Joe'.

16 It's perhaps noticeable -- I mean this particular
17 report, the significant case review, the allegations
18 made in this forum against you and other staff at
19 St Katharine's/Howdenhall, these are all made by women.

20 Is it just a perception problem or is there
21 an actual problem with staff behaviour at
22 St Katharine's/Howdenhall?

23 A. That's -- I can't answer that. As I says, I alluded to
24 it earlier on, if you interview the two -- my two
25 colleagues that I worked wi', you would find that there

1 was none of this. So you'd need to take that up with
2 the individuals that made these allegations.

3 Q. Your position is that you weren't involved in that?

4 A. Yeah.

5 Q. And you never saw it happen?

6 A. No. If I saw it happen, I'd report it.

7 Q. Even though you worked in these establishments for --

8 A. Yeah.

9 Q. Well, how long was it, about --

10 A. A number of years, yes.

11 Q. Nearly 20 years?

12 A. Yeah.

13 Q. You never saw anything like this?

14 A. No. I witnessed something, I think I put it in one of
15 my reports, where a locum member smacked one of the
16 resident's backsides and I reported that and they were
17 removed from the locum shift or it was Swiis or one of
18 the agencies.

19 Q. You felt that was inappropriate?

20 A. Yeah, definitely.

21 Q. In perhaps a sexual way or --

22 A. It was just totally inappropriate to even have that type
23 of contact with any young person.

24 MR SHELDON: Well, 'Joe', I don't have any further questions
25 for you and it's late in the afternoon.

1 My Lady, unless there's anything else?

2 LADY SMITH: No.

3 'Joe', all I'd like to do is thank you for bearing

4 with us this afternoon. We have kept you here a long

5 time. We have had a lot of questions for you.

6 I'm grateful to you for answering them as you have done

7 and coping.

8 I'm now able to let you go and I hope the rest of

9 today has more rest in it --

10 A. I'd love to say I hope this is the end o' it, but with

11 those two individuals, it's never the end.

12 LADY SMITH: Thank you.

13 (The witness withdrew)

14 LADY SMITH: Two names I'd like to mention before I rise for

15 the day, again KTS [REDACTED] and KTV [REDACTED]

16 mustn't be identified outside this room as having been

17 referred to in our evidence, because their identities

18 are protected by restriction order.

19 That's it for today and we start at 10 o'clock

20 tomorrow morning with a witness in person, isn't it?

21 MR SHELTON: With another witness in person. In fact we

22 have two witnesses in person tomorrow again.

23 LADY SMITH: Thank you very much.

24 Thank you, all.

25 (4.25 pm)

1 (The Inquiry adjourned until 10.00 am on
2 Wednesday, 22 January 2025)
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