

1 Tuesday, 29 April 2025

2 (10.00 am)

3 (Proceedings delayed)

4 (10.30 am)

5 LADY SMITH: Good morning, and welcome to the start of
6 Phase 9 of our hearings in relation to a case study in
7 which we will be looking at provision of residential
8 care for children in healthcare institutions, additional
9 support needs institutions, and places that provided for
10 children with disabilities.

11 You may have picked up already that in circumstances
12 which are quite beyond the control of the Inquiry, we're
13 not able to start as we had planned this morning.

14 I would have been inviting representatives to make their
15 opening submissions and we can't do that until we have
16 a stenography system available in some format, and
17 I'm advised that nothing can be done in relation to that
18 at the moment.

19 However, you will have seen from the programme for
20 today that we were planning to play a couple of videos
21 after the opening submissions. What we're going to do
22 is play those videos now, so as to make use of some of
23 the time available. I'll just invite Ms Innes to
24 explain what the videos are being played in relation to.
25 I know she'll say something later in more detail about

1 them, but if we just outline what they are now.

2 MS INNES: Thank you, my Lady.

3 These videos relate to Lennox Castle and therefore
4 are only relevant to the NHS and any other party which
5 may have an interest. But I would have thought it would
6 be the NHS provider who would have the greatest interest
7 in these videos.

8 We propose to play two videos of material, which are
9 available online; an Open University programme and also
10 Lennox Castle Stories, which is output from a joint
11 project between C-Change and Project Ability. I will
12 repeat in retrospect a fuller introduction to the videos
13 once we have the stenography system up and running so
14 that it can be recorded in retrospect. It may be that
15 your Ladyship may wish to rise so that those in the room
16 who are not directly engaged in this part can take
17 a break and return, perhaps at 2 o'clock, if that's when
18 it's thought the opening submissions can start.

19 LADY SMITH: They are, of course, welcome to see the videos,
20 if that's what they choose to do. But they don't need
21 to feel obliged. I'm so sorry about this. There is
22 nothing I can do to change matters, but I'll rise for
23 a few minutes while we get the videos organised, and
24 anyone who wants to depart just now and come back later
25 can do that.

1 (10.43 am)

2 (A short break)

3 (10.56 am)

4 LADY SMITH: I understand that we're ready to play the

5 videos. Sorry about that feedback. I hope it's okay.

6 Let's go.

7 (Video played)

8 (11.30 am)

9 (A short break)

10 (11.49 am)

11 LADY SMITH: Is the next video ready? Do we think it's

12 ready? Let's go. Thank you.

13 (Video played)

14 MS INNES: That concludes the two videos, my Lady.

15 LADY SMITH: So the plan is that we rise now until 2 o'clock

16 and then proceed to opening submissions at that stage,

17 we hope.

18 MS INNES: Yes.

19 LADY SMITH: Very well. Thank you very much. Until

20 2 o'clock.

21 (12.16 pm)

22 (The luncheon adjournment)

23 (2.00 pm)

24 LADY SMITH: Good afternoon. I'm told the system is now

25 working and we can proceed to the submissions that

1 weren't able to be given this morning.

2 Could I add that I do appreciate that for many of
3 you, your diaries probably had to get ripped up for
4 today because I'm sure you had arrangements to do other
5 things when you didn't have to be here once your
6 submissions had been delivered. I'm so sorry about
7 that. We have moved things as fast as we can and this
8 is the earliest we have been able to get to this stage.

9 So without taking any more time to have you listen
10 to me, I would like to turn to Ms Innes and she'll take
11 it up from there.

12 Opening submissions by MS INNES

13 MS INNES: Thank you, my Lady.

14 This case study will focus on settings which
15 provided residential care for children and young people
16 with healthcare and additional support needs and
17 disabilities.

18 The organisations involved in the provision of such
19 residential accommodation included the National Health
20 Service, local authorities, voluntary and private
21 providers.

22 Over the next three weeks, our focus will be on
23 healthcare settings. Primarily those which provided for
24 those with learning disabilities or mental health needs.
25 This will cover the three NHS institutions;

1 Lennox Castle, Ladyfield and other units at the Crichton
2 Royal and the Royal Scottish National Hospital.

3 It will also cover St Joseph's, Rosewell, operated
4 by the Daughters of Charity of St Vincent de Paul and
5 Algrade operated by the Algrade Trust.

6 Within this set of hearings, evidence will also be
7 led from the Care Inspectorate, the SSSC and Healthcare
8 Improvement Scotland.

9 LADY SMITH: Thank you.

10 MS INNES: Thereafter, commencing on 27 May, we will move on
11 to focus on other settings, including residential
12 schools providing for children with additional support
13 needs. We will also, in that block, hear evidence from
14 Education Scotland.

15 Later, and towards the end of the case study, in
16 hearings in August and September, we will hear evidence
17 relative to residential schools making specialist
18 provisions for children who are deaf or visually
19 impaired.

20 Expert evidence has also been commissioned from
21 Strathclyde University in relation to legislative and
22 policy developments over time in residential education
23 for disabled children. A separate report has been
24 commissioned from Professor Anita Franklin of MMU, on
25 what is known from the research in relation to the

1 nature and extent of abuse of disabled children in
2 residential care settings. This will also consider
3 particular risks and protective factors. Both of these
4 reports will be produced in due course and will be
5 spoken to in evidence.

6 While some of the institutions covered in the case
7 study remain in operation, others shut down many years
8 ago, for example, the large healthcare institutions.
9 Some other providers withdrew from the provision of
10 residential care in this area. However, that is not to
11 say that abuse of children in healthcare or other
12 specialist settings is a thing of the past, or that we
13 cannot learn from what happened.

14 We are, of course, aware of recent press reports in
15 relation to the abuse of children with healthcare or
16 additional support needs, including the recent BBC
17 Disclosure programme in relation to Skye House. Whilst
18 the period covered in the Disclosure programme was after
19 2014, it does highlight possible ongoing systemic issues
20 which are relevant for the Inquiry to consider in
21 relation to terms of reference 6 and 7.

22 That is: 'To consider the extent to which failures by
23 state or non-state institutions to protect children in
24 care in Scotland from abuse have been addressed by
25 changes to practice, policy or legislation and whether

1 any further changes are required.'

2 We have, therefore, served Section 21 notices on all
3 of the health boards which provide inpatient psychiatric
4 care for children and young people in specialist
5 settings in order to ascertain what current practices
6 are, particularly in relation to restraint and sedation.
7 And, indeed, whether there are any changes following
8 upon the recent television programme.

9 At the end of the case study, there will be evidence
10 from the Mental Welfare Commissioner, who, together with
11 Healthcare Improvement Scotland, have been commissioned
12 by the Scottish Government to carry out a series of
13 visits to all such inpatient units. And it's hoped that
14 at that time, the Inquiry can be updated as to progress
15 in relation to that.

16 Whilst the evidence in this case study will no doubt
17 disclose themes common to other settings that the
18 Inquiry has considered, there are specific issues which
19 arise which have not been considered elsewhere. The
20 importance of these cannot be understated, given the
21 vulnerability of the children and young people
22 concerned.

23 LADY SMITH: Thank you very much, Ms Innes.

24 MS INNES: My Lady, there was some video evidence this
25 morning, but I think, perhaps, it's appropriate that we

1 hear the opening submissions of the other parties.

2 Then, perhaps at the end, I might just provide a brief
3 narrative in relation to that evidence for the record.

4 LADY SMITH: Yes, I'm happy with that as a way forward.

5 Thank you very much.

6 MS INNES: Thank you, my Lady.

7 LADY SMITH: I would now like to turn to the representation
8 for INCAS. That takes me to Ms McCall. I'm ready to
9 hear you when you're ready.

10 Opening submissions by MS MCCALL

11 MS MCCALL: Thank you, my Lady.

12 INCAS is grateful for the opportunity to make
13 an opening submission. As the Inquiry begins to hear
14 and consider the evidence in this phase, it's important
15 to bear in mind that those children and young people
16 placed into the establishments with which we're now
17 concerned were especially vulnerable.

18 It is said by some institutions and organisations
19 that there are no records of complaints being made and
20 that they're unaware of any abuse. In that context,
21 it's important to bear in mind the particular challenges
22 that these children may have had in communicating about
23 abuse.

24 The Inquiry will learn that in spite of there being
25 no records of any complaints, as adults, former

1 residents or patients have reported abuse to the police,
2 resulting, in some instances, in criminal charges. The
3 Inquiry should therefore not accept such institutional
4 responses at face value.

5 When representatives of institutions come to give
6 evidence, they should be asked whether they accept the
7 testimony of survivors that they will read and hear
8 during this phase as to the abuse that they suffered.

9 Where they accept it, will they apologise? Where
10 they do apologise, survivors want them to explain what
11 that apology means. Survivors want to be reassured that
12 any acknowledgment and apology are not made because they
13 think it's what's expected, but that it is meaningful,
14 that it will be reflected in their approach when they
15 leave the Inquiry room and in any future interactions
16 with survivors.

17 My Lady, attitudes towards those with disabilities
18 and additional support needs have undoubtedly evolved in
19 recent years. But, even allowing for historical
20 attitudes, it's anticipated by INCAS that the Inquiry
21 will hear evidence of Dickensian conditions in some
22 establishments. Particular themes are expected to
23 emerge, which we invite the Inquiry to explore in depth.

24 The first concerns systemic failings. Were there
25 similar concerns about different institutions under the

1 control of one local authority or other single provider?
2 Where institutions had common policies and common
3 oversight and there was abuse, why was that not picked
4 up as a pattern and actioned? Was there a tendency to
5 view individual incidents of abuse as involving bad
6 apples without considering if there was a more
7 fundamental system failure?

8 The second theme concerns staff recruitment. It
9 appears that in past decades, the vetting of potential
10 staff members was deficient in multiple respects. The
11 Inquiry will hear evidence of staff with previous
12 convictions for sexual offending being employed to look
13 after children. Regardless of whether knowledge has
14 developed more recently about how child abusers operate,
15 there is no point in time when that can be said to have
16 been appropriate.

17 In other instances, in spite of concerns being
18 raised about the conduct of staff and, on occasion,
19 a staff member being suspended, some individuals were
20 re-employed at other institutions. Some of those
21 individuals continued to abuse children over many years.
22 Survivors will want to understand how these things were
23 allowed to happen.

24 The next theme, my Lady, relates to the physical
25 conditions in which children were living and the failure

1 to take steps to properly address issues, even when they
2 were known about. It's anticipated the Inquiry will
3 hear evidence about institutions where management were
4 aware of concerns around cleanliness, nutrition, lack of
5 suitable clothing, dehydration, yet failed to act until
6 outside inspectors intervened.

7 The Inquiry should consider whether such conditions
8 were unavoidable or were the result of a complete
9 disregard by staff and organisations for those under
10 their charge.

11 As in other case studies, INCAS anticipates that the
12 Inquiry will hear evidence of inappropriate punishment
13 and the disproportionate use of restraint to control
14 children, rather than to protect them. Children were
15 subjected to corporal punishment, placed in isolation or
16 denied family contact.

17 In this case study, there is also a further concern
18 relating to the improper use of medication to subdue or
19 control children rather than for a therapeutic purpose.

20 During the evidence, the Inquiry may hear
21 institutions or some individuals argue that societal
22 attitudes towards children and those with mental
23 illness, additional needs and disabilities were very
24 different in the past.

25 INCAS anticipates that the sort of testimony the

1 Inquiry will hear from survivors and their relatives
2 will put the lie to that suggestion. Whatever the
3 standards of the day, children deserved to be treated
4 with dignity. They were placed in these institutions
5 because they were in need of particular care and
6 support. They ought to have been nurtured and
7 encouraged to develop their potential. INCAS fears that
8 the picture that will emerge is of children being denied
9 their humanity and simply being housed, rather than
10 helped.

11 INCAS welcomes the opening of this case study and
12 invites your Ladyship to bring her customary rigour to
13 examination of the evidence that will be heard with
14 these various themes at the forefront of her mind.

15 LADY SMITH: Thank you very much, Ms McCall.

16 Could I turn next, please, to the representation for
17 NHS Greater Glasgow & Clyde, Forth Valley and Dumfries &
18 Galloway. I think that's what you're here for,
19 Mr Davidson; is that right?

20 Opening submissions by MR DAVIDSON

21 MR DAVIDSON: That's correct, my Lady.

22 This opening statement has been prepared on behalf
23 of three NHS health boards. That's Dumfries & Galloway,
24 Forth Valley and Greater Glasgow.

25 The said boards appreciate their role in

1 participating in this case study concerning the
2 provision of residential care in establishments for
3 children and young people with long-term healthcare
4 needs, additional support needs and disabilities.

5 This is the first case study in which the three
6 health boards have participated. The boards anticipate
7 engaging fully and will be assisting the Inquiry in its
8 important work. Anything that the Inquiry can do to
9 improve the care of young people in Scotland is both
10 welcomed and supported by the boards.

11 At the outset, my Lady, I can say that the boards'
12 sympathy is with all those who have survived abuse in
13 any establishment operated by each of the respective
14 boards or their predecessors.

15 The boards accept that the abuse of children in
16 whatever form is always reprehensible.

17 I propose to say a few words about the history of
18 the various institutions, which are being considered by
19 the Inquiry and for which the respective boards are
20 responsible. But, to accommodate the need for brevity,
21 I don't propose to read out fully paragraphs 6, 7 and 8
22 of my written submission, which has been handed to
23 your Ladyship's senior counsel. That will be in the
24 final copy, which is intimated electronically and will
25 be available on the website.

1 LADY SMITH: Thank you.

2 MR DAVIDSON: But I do propose, having set out the history,
3 to go on to summarise the approach the boards have taken
4 to this Inquiry and its important work. I do not
5 propose to say much about the substance in this opening
6 statement. The time for that will come later in the
7 case study.

8 So turning now to Dumfries & Galloway Health Board.
9 So far as that health board is concerned, the Inquiry
10 will be considering four establishments linked to the
11 former Crichton Royal Hospital in Dumfries and that will
12 be Ladyfield East, Ladyfield West, Hannahfield Hall and
13 Eskdale House.

14 The Crichton Royal Hospital was Scotland's seventh
15 and last royal asylum to be established. Building began
16 in 1835. The written submission goes on to set out the
17 detailed history of the development of that hospital. I
18 propose to take up my reading of the submission in
19 paragraph 8, about halfway through that paragraph, with
20 the words 'following various reorganisations', if your
21 Ladyship has that?

22 LADY SMITH: Thank you, yes.

23 MR DAVIDSON: So, following various reorganisations in the
24 following decades after 1951, in 1995,
25 Dumfries & Galloway Community Health NHS Trust was

1 formed and it took over the management of Crichton Royal
2 Hospital.

3 In July of the same year, the majority of the
4 Crichton estate was transferred to Dumfries and Galloway
5 Council. NHS Dumfries & Galloway was formed in 2004,
6 with the abolition of NHS trusts, and Crichton Royal
7 Hospital officially closed in November 2011. At that
8 time, the last patients were moved to a new mental
9 health hospital at Midpark, located across the road from
10 the Crichton estate.

11 The board today. It is relevant at this point to
12 note that the board no longer provides any residential
13 care in its establishments for children and young
14 people, such as those which are the focus of the present
15 case study.

16 During the relevant period, the hospital regarded
17 itself as a centre of pioneering excellence and
18 innovation. Sadly, it is now clear that not every child
19 received that quality of care and treatment within the
20 Crichton Royal Hospital during the period under
21 consideration.

22 Some children had an experience which, even judged
23 by the standards of the time, was unacceptable. This is
24 a matter of considerable regret for the board. The
25 Inquiry will hear more details in due course.

1 The children who were placed into residential care
2 of the type provided by the board in Dumfries were
3 amongst the most vulnerable in Scotland. Often the care
4 of these children was challenging. That cannot possibly
5 provide an excuse. The board does not intend it to be
6 regarded as such. Rather, the board considers that the
7 only way to look after vulnerable children appropriately
8 is by caring for them with compassion and understanding.

9 Children in the establishments for which the board
10 was responsible were often victims of trauma prior to
11 entering those establishments. Those caring for them
12 ought to have understood the behaviours such trauma
13 might induce and how to respond appropriately. That, as
14 your Ladyship well knows, is often referred to as
15 a trauma-informed approach to caring for children.

16 Instead, it now appears that some of the children
17 cared for by the board encountered staff who were either
18 unable to care for them appropriately or, even worse,
19 took advantage of their vulnerabilities.

20 The abuse noted particularly in both Ladyfield units
21 is deeply troubling. The board stands ready to assist
22 Police Scotland and the Crown Office in any ongoing or
23 future criminal investigations which may arise.

24 Forth Valley Health Board. So far as Forth Valley
25 Health Board is concerned, the Inquiry will be

1 considering a single establishment, the Royal Scottish
2 National Hospital in Larbert. The Royal Scottish
3 National Hospital opened in May 1863. The hospital was
4 one of the first institutions in Scotland to care for
5 children with learning disabilities. It took patients
6 from across the country. The success of the institution
7 was seen in the steady increase in the number of
8 patients from 43 in 1863 to 120 in 1881, increasing to
9 350 in 1911.

10 The facilities at the hospital also expanded to
11 accommodate this growing patient population. Further
12 expansion followed in the 1920s and, in 1948, it, too,
13 became part of the National Health Service, ending the
14 charitable status it had held since its foundation. The
15 hospital finally closed in 2002. The site was re-used
16 for the new Forth Valley Royal Hospital, which opened in
17 2010.

18 The board today. Like Dumfries & Galloway, it must
19 be pointed out that since the closure of Royal Scottish
20 National Hospital in 2002, Forth Valley Health Board no
21 longer provides any residential care in establishments
22 for children and young people, such as those which are
23 the focus of the present case study.

24 On behalf of Forth Valley Health Board, it is again
25 accepted that not every child received the care and

1 treatment within the Royal Scottish National Hospital as
2 they ought to have been entitled to expect.

3 Again, some children had experiences which, even
4 according to the standards of the time, were
5 unacceptable. Again, that this occurred is a matter of
6 considerable regret for the board.

7 As with Dumfries & Galloway, Forth Valley Health
8 Board offers no defence to any abuse on the basis that
9 these children were extremely complex care needs. Forth
10 Valley Health Board is appalled to learn about the
11 allegations, especially those involving criminal
12 behaviour by its staff, regarding the care provided to
13 children at the Royal Scottish National Hospital. It,
14 too, stands ready to assist Police Scotland and the
15 Crown Office in any ongoing or future criminal
16 investigations which may arise as a result.

17 The final health board represented at the Inquiry is
18 Greater Glasgow Health Board. So far as it is
19 concerned, the Inquiry will be considering a further
20 single establishment, Lennox Castle Hospital.

21 Lennox Castle Hospital was built between about 1837
22 and 1841. In 1927, the castle and its land were
23 purchased by the local authority, Glasgow Corporation,
24 and converted into a hospital for people with learning
25 disabilities.

1 The hospital itself opened in 1936. The castle was
2 the nurses' home, while its grounds provided
3 accommodation for about 1,200 patients. The hospital
4 was absorbed into the NHS in 1948. It was predominantly
5 an adult facility, although there were two wards known
6 as Adair and Leslie Cox, which admitted under
7 16-year-olds, which were a very small proportion of the
8 overall hospital population.

9 The hospital closed in 2002. Its closure reflected
10 changes to the way in which society, especially
11 professional physicians and carers, treated patients
12 with additional support needs. During the 1990s, there
13 was a national move away from institutional care towards
14 patients being supported in the community.

15 Greater Glasgow Health Board continues, to a limited
16 extent, to provide residential care in establishments
17 for children and young people. For that reason, Greater
18 Glasgow differs from the other two boards.

19 There are two facilities for the care and treatment
20 of children and adolescents with severe mental health
21 conditions requiring inpatient treatment. These have
22 been delegated under the Public Bodies (Joint Working)
23 (Scotland) Act 2014, to the East Dunbartonshire Health
24 and Social Care Partnership managed through the East
25 Dunbartonshire Integration Joint Board.

1 While the focus of this Inquiry is on the abuse of
2 children in care up to December 2014, the board is aware
3 that the Inquiry is taking an interest in Skye House,
4 an adolescent inpatient unit and ward for a children's
5 inpatient unit. This is further to the recent BBC
6 Scotland Disclosure programme regarding previous care
7 and treatment of some children at Skye House in Glasgow.
8 The recent complaints made in relation to Skye House
9 have already been the subject of an unreserved apology
10 by the board, with both an internal and an external
11 review ongoing.

12 As with the other two health boards, Greater Glasgow
13 Health Board offers no defence to any abuse on the basis
14 that the children had extremely complex care needs. It,
15 too, stands ready to assist Police Scotland and the
16 Crown Office in any ongoing or future criminal
17 investigations which may arise as a result of the
18 Inquiry's investigations and recommendations.

19 The approach to the Inquiry. On behalf of the three
20 boards, I wish to apologise unreservedly to all of those
21 who, as children, were abused within the various
22 hospitals for which the three boards were and are
23 responsible. What happened to you was unacceptable. At
24 the material time, the boards should have done more to
25 protect you. The boards are sorry.

1 Against that background, I make the following two
2 additional points:

3 First, the boards see their primary role as being to
4 assist the Inquiry. The boards have already reviewed
5 their initial Section 21 responses and have completed
6 a number of addendum responses.

7 The assistance of the boards will continue
8 throughout this case study. The Inquiry will shortly be
9 hearing from senior figures, that's the Chief Executive
10 of Dumfries & Galloway, and the Medical Director of
11 Forth Valley, and the Medical Director of Greater
12 Glasgow, who will all attend Mint House to give their
13 evidence.

14 Secondly, the purpose of the boards' participation
15 in this Inquiry is not to challenge the accounts of
16 applicants. The Inquiry's terms of reference are
17 understood by the boards. In particular, the boards
18 understand that within the Inquiry's remit is the need
19 to consider both the abuse suffered by the children and
20 whether there were any systemic failures leading to that
21 abuse. The boards also understand that they are not
22 here to paint an alternative account of residential care
23 for children such as those which are the focus of this
24 case study.

25 Instead, the boards are here to listen to the

1 accounts of applicants who were abused while under their
2 care. Where it might assist the Inquiry, and only in
3 such circumstances, any factual questions will be
4 referred to Inquiry counsel who can consider how best to
5 proceed.

6 Therefore, in conclusion, my Lady, the boards will
7 listen carefully to all the evidence. The boards are
8 committed to doing all that they can to assist the
9 Inquiry in this important work.

10 One abused child is one too many.

11 LADY SMITH: Well said, Mr Davidson. Thank you for that.

12 I would now like to turn to Fife Council, please.

13 Ms Jack, I think you're here for Fife; is that right?

14 MS JACK: I am. Thank you, my Lady.

15 Opening submissions by MS JACK

16 MS JACK: Fife Council are grateful for having been granted
17 leave to appear at this Inquiry.

18 Fife Council was constituted by the Local Government
19 (Scotland) Act 1994 and is a statutory successor to Fife
20 Regional Council and before that, Fife County Council.
21 One of the functions of Fife Council is the provision
22 within its local authority area of residential care for
23 children, including residential care in establishments
24 for children and young people with long-term healthcare
25 needs, additional support needs and disabilities.

1 Fife County Council held that responsibility between
2 1930 and 1975, with Fife Regional Council taking over
3 that responsibility between 1975 and 1996. Then
4 Fife Council, in its current form, taking over
5 responsibility from that date.

6 Throughout the history of Fife Council and its
7 statutory predecessors, approximately 34 residential
8 homes and schools were operated by Fife Council. From
9 the mid-1990s, children's homes in Fife closed as part
10 of a strategic plan to maintain more young people at
11 home and in foster care.

12 The remaining units, as they were called, were moved
13 out from a large multi-unit children's centre into the
14 community as smaller four and five bedroom
15 community-based houses supplemented by the use of
16 purchased private provision.

17 This Inquiry has identified three establishments run
18 by Fife Council and/or its statutory predecessors for
19 investigation. Those are Linwood Hall, Melville House
20 and Ovenstone School.

21 Linwood Hall opened in 1974. Ovenstone School and
22 Melville House respectively operated as residential
23 schools from the mid-1960s and 1970s. All three closed
24 in 1998, following the council accepting the
25 recommendations of an independent review and changing

1 its policy to provision of community-based care for
2 children. Staff were redeployed into other duties
3 within the council at that time.

4 Fife Council's Social Work Children and Families
5 Department continue to provide residential care for
6 children to the current day. There are currently four
7 residential houses in Fife which have a capacity of
8 18 beds.

9 Fife Council's Education Service is no longer
10 involved in the provision of residential care for
11 children following the closure of Linwood Hall,
12 Melville House, Ovenstone School and other
13 residential --

14 LADY SMITH: Just to check that: four in total now?

15 MS JACK: That's my understanding, my Lady.

16 LADY SMITH: Down from what was once 34?

17 MS JACK: Indeed. With a significant move to foster care as
18 the primary provision.

19 LADY SMITH: Yes, we covered that to some extent during the
20 Foster Care case study of course.

21 MS JACK: Indeed.

22 LADY SMITH: Yes, thank you.

23 MS JACK: Indeed.

24 Additionally, Fife Council's Social Work Service has
25 additional capacity to provide support and respite to

1 children in crisis and regular respite is also offered
2 to up to 53 children affected by disability with
3 a maximum of three children in each of the council's
4 establishments at any one time.

5 Fife Council has responded in detail to the
6 Section 21 notices for this part of the hearing,
7 providing parts A, B and, later, parts C and D
8 responses, for each notice, and submitting extensive
9 documentation with a view to assisting the Inquiry and
10 its work.

11 The council has also responded to requirements to
12 produce records relating to named children and staff.

13 The council's core team includes its archivist and
14 its records manager, as well as colleagues in its legal,
15 social work and education teams. It's intended that two
16 witnesses from the council's senior leadership team will
17 give evidence during the course of this part of the
18 Inquiry's investigations. Those witnesses are
19 James Ross and Maria Lloyd.

20 James Ross is Fife Council's Head of Service for
21 Children, Families and Justice. He has held that role
22 since May 2024. However, prior to taking up this role,
23 Mr Ross had worked in the council's Children and
24 Families Team between 2006 and May 2023 beginning his
25 career in youth work services and holding a variety of

1 social work roles, including residential, child
2 protection and permanent placement work, working
3 directly with children, families and communities, as
4 well as operational and strategic management.

5 Mr Ross has also contributed to the council's work
6 in the Historic Child Abuse Redress Scheme, which
7 includes supporting those accessing their records and,
8 through the adoption team, supporting individuals to
9 reconnect with their families.

10 In the outline submission that I've handed up prior
11 to this hearing, I've listed a range of responsibilities
12 that Mr Ross has. I won't list them all but the Inquiry
13 has a note and his responsibilities include statutory
14 duties and responsibilities as Chief Social Work Officer
15 and for Children, Families and Social Work Services,
16 including residential care provision.

17 LADY SMITH: Thank you.

18 MS JACK: Maria Lloyd is the Head of Service for
19 Fife Council's Education and Children's Services. She
20 has held this role since 2019. Again, I've listed the
21 various responsibilities that fall within her remit and
22 I won't go through them all, but would simply mention
23 that she is lead officer in education for child
24 protection, including adult allegations for staff.

25 On behalf of Fife Council, Mr Ross and Ms Lloyd are

1 anxious to assist the Inquiry to the best of their
2 abilities and also to learn from all of those giving
3 evidence to the Inquiry as part of this investigation.

4 Fife Council is committed to delivering the highest
5 standard of care, support and education to children and
6 young people in line with best practice legislation and
7 national guidance. As part of Fife Council's commitment
8 to continuous improvement, Mr Ross and Ms Lloyd will
9 welcome, in due course, the Inquiry's report following
10 the conclusion of its investigations and will work with
11 their colleagues to ensure that lessons learned are
12 fully considered and acted upon throughout their service
13 areas.

14 Fife Council wishes to pay tribute to and offer its
15 sincere apology to those who suffered abuse as children
16 within establishments run by Fife Council and its
17 statutory predecessors.

18 The council accepts and wishes to acknowledge the
19 failure of systems to prevent abuse at each of the three
20 Fife Council establishments that are being examined as
21 part of this Inquiry.

22 Those establishments no longer exist and the way in
23 which services were provided by those establishments has
24 clearly changed significantly since their closure in
25 1998. However, the experiences of individuals and the

1 trauma connected with those experiences persist to this
2 day.

3 The council recognises that there is still much that
4 can be learned from the investigations that this Inquiry
5 is undertaking and wishes to acknowledge at the outset
6 the contributions that will be made during the course of
7 these hearings from those who experienced abuse in the
8 establishments concerned.

9 In concluding, Fife Council wishes to thank the
10 Inquiry for giving it an opportunity to provide evidence
11 and assist it with its important work during the course
12 of this case study.

13 LADY SMITH: Thank you very much, Ms Jack.

14 Now, next I would like to turn to representation for
15 the Daughters of Charity of St Vincent de Paul and
16 I think, Mr Rolfe, that is you.

17 Opening submissions by MR ROLFE

18 MR ROLFE: I'm much obliged, my Lady. Yes, I'm
19 Gregor Rolfe. I'm an advocate instructed on behalf of
20 the Daughters of Charity of St Vincent de Paul.

21 The Daughters of Charity would like to thank my Lady
22 for the opportunity to make these opening submissions.

23 My Lady will no doubt recall that the Inquiry heard
24 evidence in relation to the Daughters of Charity and
25 their role in caring for children in Scotland during

1 Phase 1, Case Study 1.

2 That phase of the Inquiry focused primarily on
3 Smyllum Park Orphanage in Lanark and Bellevue Children's
4 Home in Rutherglen, both having been operated by the
5 Daughters of Charity.

6 At the conclusion of that case study, my Lady found
7 that, amongst other things, for many children who were
8 in Smyllum and Bellevue, the homes were places of fear,
9 coercive control, threat, excessive discipline and
10 emotional, physical and sexual abuse, where they found
11 no love, no compassion, no dignity and no comfort.

12 The Daughters of Charity do not shy away from
13 my Lady's findings. They welcome the opportunity to
14 engage with the Inquiry's investigations into
15 establishments operated by the Daughters of Charity,
16 which provided care for children and young people with
17 long-term healthcare needs, additional support needs and
18 disabilities.

19 The Daughters of Charity, my Lady, will participate
20 in blocks 1 and 4. In block 1, the Inquiry investigates
21 St Joseph's Hospital, Rosewell. St Joseph's was run by
22 the Daughters of Charity from 1924 until 1999.

23 The Daughters opened St Joseph's initially for the
24 support and care of children with profound learning
25 disabilities, who often also suffered from physical

1 disabilities. Children were referred to St Joseph's
2 from a number of health boards throughout Scotland. By
3 the early 1930s, St Joseph's was, while continuing to
4 care for children with learning disabilities, also
5 providing care and support to adults.

6 From 1942, St Joseph's was established as a training
7 school for nurses, approved by the General Nursing
8 Council of Scotland. The nursing school was open to
9 anyone in Scotland wishing to train in the field of
10 learning disability nursing.

11 By the late 1970s, local authorities began to place
12 younger children with learning disabilities in schools
13 nearer to their own homes. Over the following decades,
14 the number of children in St Joseph's reduced in number,
15 as those who had been admitted as children reached
16 adulthood, with fewer young children newly admitted.

17 From the early 1990s, St Joseph's increasingly
18 supported adults with learning disabilities in smaller
19 care homes in a community setting. Records identify
20 that the last child cared for at St Joseph's reached the
21 age of 18 in 1997. From that date forward, my Lady,
22 St Joseph's provided care and support to adults only.

23 The St Joseph's Hospital building itself, locally
24 known as the 'Big House', was eventually closed in 1999,
25 although the number of smaller community homes supported

1 by St Joseph's continue to increase, providing care to
2 adults only.

3 Since 2015, that service has been managed by a newly
4 formed independent charity, rather than by the Daughters
5 of Charity themselves.

6 In block 4, the Inquiry will be looking into
7 St Vincent's School, Tollcross, in Glasgow. The
8 Daughters of Charity had a role in the care of children
9 at the school between 1911 and 1985. The Daughters of
10 Charity constructed St Vincent's as a boarding school,
11 having noted a need in the west of Scotland for the
12 education of children who were deaf, blind or visually
13 impaired. There were several such children resident at
14 the Smyllum Park Orphanage. The first cohort of pupils
15 transferred there from Smyllum, although admission was
16 open to other children with similar needs.

17 In 1925, the school came under the control of the
18 Education Board and the property was extended utilising
19 funds provided by the Daughters of Charity, who
20 continued to staff the residential block for boarders.

21 Glasgow Education Authority further extended the
22 school in 1965 to meet the increasing need for education
23 of Catholic deaf and blind children in Glasgow and
24 surrounding areas.

25 The Daughters of Charity withdrew from St Vincent's

1 in 1985 when the residential block was demolished, as
2 the school had become a day school only.

3 The Inquiry has further detail on the Daughters of
4 Charity and their involvement with St Joseph's and
5 St Vincent's within their written response to the
6 Section 21 notice.

7 My Lady, the Daughters of Charity wish to use this
8 opening submission as an opportunity to apologise to
9 anyone that is a survivor of abuse, directly or
10 indirectly, at any establishment where members of their
11 community were involved, including St Joseph's or
12 St Vincent's.

13 The abuse of children in any form is contrary to the
14 values of the Daughters of Charity, namely compassion,
15 respect, love, forgiveness, justice and dignity.

16 Since the Inquiry's inception, it has been
17 demonstrated that abuse of children took place within
18 establishments for which the Daughters of Charity were
19 responsible. That such abuse could and did take place
20 was and is diametrically opposed to the core values of
21 the Daughters of Charity.

22 For many survivors and their families, the
23 devastating impact of that abuse persists. The
24 Daughters of Charity of St Vincent de Paul offer their
25 deepest and sincerest apologies to each and every

1 individual that experienced abuse whilst under their
2 care.

3 The Daughters of Charity recognise the long-term and
4 debilitating effects of childhood abuse, both on
5 survivors and on those close to them.

6 The Daughters of Charity commend the courage of all
7 of the applicants that have come forward throughout each
8 phase of this Inquiry. They recognise that
9 participation in this Inquiry requires each applicant to
10 relive traumatic experiences that in many instances have
11 been locked away for decades.

12 Each applicant exposes themselves to
13 retraumatisation via the retelling of their story to the
14 Inquiry. For the pain endured and that continues to be
15 endured by survivors of abuse at their establishments,
16 the Daughters of Charity are truly and sincerely sorry.

17 The Daughters of Charity have fully supported, and
18 will continue to fully support, the work of my Lady, as
19 Inquiry Chair, and her team. They will offer all
20 assistance within their power to allow a full
21 investigation to be carried out with a view to examining
22 the experiences of the past and ensuring that the abuse
23 of children is eradicated in Scotland.

24 The Daughters of Charity maintain their commitment
25 to working to put right the wrongs that occurred. The

1 Daughters of Charity strive to respond to anyone who has
2 survived abuse and are open to exploring new ways of
3 offering pastoral, emotional or practical support. To
4 date, emotional and practical help has been provided via
5 phone calls, visits and email communication. Wherever
6 it has been made known to the Daughters of Charity that
7 such emotional, psychological or practical support would
8 be welcome, that has been provided.

9 Such support has been and will continue to be
10 provided on a confidential basis. The Daughters of
11 Charity earnestly invite any further survivors who would
12 welcome such support to make contact with them. They
13 are resolutely committed to listening with compassion,
14 responding with gentleness and cordiality, and to
15 respecting the wishes of survivors.

16 In closing, the Daughters of Charity reiterate their
17 deep and sincere apology to all survivors and those
18 close to them who have dealt and continue to deal with
19 the enduring suffering caused by abuse under their care.
20 I'm much obliged, my Lady.

21 LADY SMITH: Thank you very much. Thank you.

22 Can I turn now to representation for the
23 Good Shepherd Sisters? And I think that's Ms Flanagan.
24 When you are ready.

25

1 Opening submissions by MS FLANAGAN

2 MS FLANAGAN: Thank you, my Lady.

3 Thank you for the opportunity to make this opening
4 statement. I appear on behalf of the congregation of
5 Our Lady of Charity of the Good Shepherd, commonly known
6 as the Good Shepherd Sisters.

7 While this order was formed in June 2014, following
8 the amalgamation of the Order of Our Lady of Charity and
9 the Order of Our Lady of Charity of the Good Shepherd,
10 it can trace its origins back to 1641 in France, when
11 the Order of Our Lady of Charity was formed. The Order
12 of Our Lady of Charity of the Good Shepherd was founded
13 by Sister Mary Euphrasia Pelletier in 1835.

14 On behalf of the Good Shepherd Sisters, the Order is
15 grateful for the opportunity to participate in the
16 Inquiry's ongoing work and seeks to re-emphasise its
17 commitment to assisting the Inquiry in any way that it
18 can.

19 The Order's interest in this phase of the Inquiry's
20 work relates to Woodfield Ladymary School in Colinton,
21 in Edinburgh.

22 The Order's involvement in that school was between
23 1967 and 1978. The Order was served with Section 21
24 notices requesting responses and documentation relating
25 to this case study, which have been duly provided to the

1 Inquiry. The Order has also provided an updated
2 Section 21 response to the Inquiry.

3 The Order has the greatest sympathies for survivors
4 who have suffered from abuse and accepts that abuse took
5 place at Woodfield Ladymary School between 1967 and
6 1978. As the Inquiry is already aware, in 2017 and
7 2022, a former staff member at the school, Mr Brian
8 Dailey, was convicted of numerous charges of physical
9 and sexual abuse of children in care at the school.

10 The Order accepts that there will be other survivors
11 who have not yet come forward, whether to the criminal
12 justice process or to the Inquiry itself. The
13 Good Shepherd Sisters acknowledge the suffering, trauma
14 and the pain that all survivors have experienced.

15 The Order apologises to all those who suffered harm
16 as a result of their time spent in the care of the
17 Sisters at Woodfield Ladymary School. The abuse of
18 children goes against everything that the Order stands
19 for.

20 From the information sought by the Inquiry and with
21 the information released to parties by the Inquiry, it
22 appears to those instructing me that the Good Shepherd
23 Sisters have an interest in the testimonies to be
24 offered in this case study. The Good Shepherd Sisters
25 therefore consider it appropriate that they exercise

1 their leave to appear in this case study.

2 On behalf of the Good Shepherd Sisters, I conclude
3 by reiterating their appreciation for the opportunity to
4 participate in this Inquiry and their hope and desire
5 that it will go towards providing survivors with the
6 closure that they seek.

7 The Good Shepherd Sisters have previously made clear
8 to the Inquiry that they deplore abuse of children in
9 any form and they're happy to assist the Inquiry in any
10 way required of them. The Sisters wish to reiterate
11 that position here today.

12 Unless I can assist your Ladyship further, that
13 concludes the opening statement for the Good Shepherd
14 Sisters.

15 LADY SMITH: That's all. Thank you very much, Ms Flanagan.

16 Now, I would like to turn to the Archdiocese of
17 St Andrew's in Edinburgh. That is you, Mr Blair, is
18 that right?

19 Opening submissions by MR BLAIR

20 MR BLAIR: Thank you, my Lady. I represent the Archdiocese
21 of St Andrew's in Edinburgh this afternoon. It is
22 pleased to be able to make a short opening statement.

23 The Archdiocese traces its history back to the
24 founding of the diocese in St Andrew's in the 14th
25 century and, following the reformation, the Archdiocese

1 was re-established in 1878. The present Archbishop is
2 the Most Reverend Leo Cushley, the 56th Bishop of
3 St Andrew's in Edinburgh. The Archdiocese of today has,
4 as its main purposes, the service of the 130,000
5 Catholics in its geographical area, which is bounded by
6 Dunbartonshire to the west, the Borders to the south,
7 Fife to the east, and Stirling to the north.

8 It does this through the advancement of the
9 Christian religion, through Catholic education and by
10 seeking to alleviate poverty in the community.

11 The Archdiocese works together with the See of Rome
12 and its Bishop, currently sede vacante following the
13 death of Pope Francis.

14 My Lady, the Archdiocese was granted leave to appear
15 in this phase on 9 April this year in relation to its
16 connections to the establishments at St Joseph's,
17 Rosewell; Ladymary's, Colinton; and St Mary's,
18 Balnakeil. The decision to apply was taken following
19 the Archdiocese's substantive involvement in Phase 8 of
20 the Inquiry in respect of St Joseph's, Tranent, and St
21 John Bosco's, Aberdour.

22 In anticipation of this involvement, the Archdiocese
23 considered it would be appropriate to carry out a review
24 of records held by the Scottish Catholic Archives on its
25 behalf in respect of the institutions named in Phase 9

1 which were located within its Archdiocese. Records show
2 it had a connection to the three establishments named,
3 which were all operated and managed by autonomous
4 religious orders in conjunction with local authorities
5 and regional health boards.

6 Whilst the Archdiocese was not involved in the
7 management, running or day-to-day care of the residents
8 at the three establishments, it acknowledges that it did
9 have a connection to them through the religious orders
10 that operated them and holds records which may assist
11 the Inquiry and the representatives of the Archdiocese
12 will be liaising with the Inquiry legal team regarding
13 the provision of these documents in early course,
14 my Lady.

15 LADY SMITH: Thank you.

16 MR BLAIR: Taking each establishment in turn, I'll summarise
17 very briefly what the records do tell us about the
18 Archdiocese's connection with these establishments.

19 Firstly, in terms of St Joseph's, Rosewell, the
20 Archdiocese is aware that it opened around 1924, was
21 operated by the Daughters of Charity of St Vincent de
22 Paul. Representatives of the Archdiocese have reviewed
23 documents which indicate that in the 1930s, the
24 Archbishop commissioned a series of independent
25 inspections by the Diocesan Visiting Committee to visit

1 St Joseph's.

2 The committee prepared three reports which
3 highlighted the extremely poor conditions of the homes
4 in the 1930s. The precise jurisdiction being exercised
5 by the Archbishop in relation to these inspections is
6 not clear from the documents that have been so far
7 considered but that issue is the subject of further
8 research at the hands of the Archdiocese in respect of
9 its involvement with St Joseph's.

10 Following the intervention and in light of the
11 findings of the report, the Daughters of Charity
12 implemented positive changes within the home. This is
13 the most substantive involvement that the Archdiocese
14 has had with St Joseph's according to the records
15 reviewed. Following the NHS Act 1947, the Archdiocese
16 was kept updated as regards negotiations regarding the
17 future of St Joseph's Hospital with the regional health
18 board and local authorities.

19 The Archbishop would from time to time be informed
20 of staff changes amongst the Daughters of Charity and
21 invited to attend events in a pastoral capacity or as a
22 matter of courtesy.

23 The Archbishop was responsible for appointing the
24 local chaplain. In the 1990s, there are records which
25 indicate that parishioners would ask the Archbishop to

1 approach the Daughters of Charity on their behalf to
2 request for their children to be placed at St Joseph's.
3 Whilst the Archbishop would pass on those requests, any
4 referral would require to be signed off by the regional
5 health board.

6 The final records indicate that prior to St Joseph's
7 closure in 1992, parishioners also contacted the
8 Archbishop at the time asking if he would be able to
9 intervene to allow St Joseph's to remain open.

10 So, my Lady, the Archdiocese notes that it did have
11 a connection to St Joseph's, albeit not necessarily
12 a formal role in its respect of the day-to-day
13 operation.

14 With regards to the Ladymary's, Colinton, the
15 Archdiocese notes that this was operated by the
16 Good Shepherd Sisters. The Sisters were not subject to
17 the hierarchy of the Archdiocese for its internal
18 workings and had a degree of autonomy in the way it
19 provided care for children in Scotland. It's noted that
20 the Catholic children went to mass in the chapel each
21 Sunday and the chaplain held services for the children
22 and gave religious instruction, if required.

23 The documents reviewed from the archives suggest
24 that the Archbishop, again, was, from time to time, told
25 of changes to the headmaster of the school as a matter

1 of courtesy and that he would appoint the school
2 chaplain.

3 Finally, in respect of St Mary's, Balnakeil, this
4 was operated by the Poor Servants of the Mother of God.
5 The Poor Servants are a Roman Catholic Apostolic
6 congregation, and, as such, are under the jurisdiction
7 of Rome rather than the Bishop of any particular
8 diocese.

9 They came to Scotland in 1948 at the invitation of
10 the Archbishop McDonald of St Andrew's, in Edinburgh,
11 who had approached the congregation to work in Scotland
12 around 1921. This work was initially at St Teresa's, in
13 Aberdour, before the Poor Servants moved to St Mary's.

14 From the review of the records from the Scottish
15 Catholic Archives, we note that the Archbishop made
16 visits to the Convent of St Mary's, including in the
17 1980s. And the records show the Archbishop would also
18 liaise with the Mother Superior of St Mary's in respect
19 of the provision of their chaplain, and the Archdiocese
20 has provided the names of those who were appointed.

21 The Archdiocese has followed the works and findings
22 of the Inquiry to date, in particular as it has related
23 to abuse in the context of religious care and education.
24 It has been shocked by the accounts given by witnesses
25 in previous phases of the Inquiry and has sought to

1 reflect on its involvement with those institutions
2 considered in Phase 8.

3 The Archdiocese is most grateful for the opportunity
4 to appear in this new phase and for the opportunity to
5 make this opening statement and it wishes to assist the
6 Inquiry in any way it can in relation to its
7 investigations.

8 As a closing remark, my Lady, the Archdiocese wishes
9 to make it clear to the Inquiry that it takes
10 allegations of abuse extremely seriously. It is
11 committed to learning ways in which its own safeguarding
12 processes may be strengthened. The safeguarding adviser
13 for the Archdiocese is in attendance today and will
14 listen to any evidence relevant to the establishments
15 with which the Archdiocese has a connection.

16 Thank you, my Lady.

17 LADY SMITH: Mr Blair, you mentioned records and that there
18 are records holding information that we don't yet have.
19 But you said you will be liaising with us regarding
20 provision of these documents; when?

21 MR BLAIR: My Lady, I consulted with my agents in the course
22 of last week and my understanding from that consultation
23 was that contact was to be made with those acting for
24 the Inquiry as soon as possible.

25 LADY SMITH: Obviously, now we're getting underway, the

1 sooner we have these the better.

2 MR BLAIR: Indeed, my Lady. I'm sure those behind me will

3 hear that.

4 LADY SMITH: Thank you.

5 Very well, if I could now turn to Save the Children

6 UK and also the representation for Seamab, because it's

7 the same person. Mr Watson, you represent both,

8 don't you?

9 Opening submissions by MR WATSON

10 MR WATSON: Yes, thank you, my Lady.

11 My Lady, in the first instance in respect of

12 Save the Children UK, Save the Children's involvement in

13 this phase stems from their management and operation of

14 Harmeny School, in Edinburgh. Save the Children

15 operated that school from 1958 until 1995.

16 This was in fact the only establishment they have

17 operated in Scotland, save for wartime evacuation

18 centres.

19 In the 1950s, Save the Children were concerned that

20 local authorities could not send children with

21 additional needs to appropriate schools. Instead they

22 were sending them to approved schools, which may not

23 have been appropriate or suited to their needs, as

24 your Ladyship has heard on previous occasions.

25 LADY SMITH: Yes.

1 MR WATSON: Harmeny was founded to address that issue. In
2 the language of the day, their counsel stated that the
3 intention, in 1955, was: to establish a residential
4 school for maladjusted children of both sexes, aged 5 to
5 12, of average and above average intelligence.

6 They were gifted Harmeny House in Balerno and
7 established the school there. Children were referred
8 from local authorities and the numbers fluctuated over
9 the years. In 1991, they commissioned an independent
10 review of the work being undertaken there under
11 Barbara Kahan.

12 That report led rather to several structural changes
13 but, ultimately, to the recognition that the work being
14 undertaken there was incongruent with the rest of their
15 work. Save the Children therefore took the decision to
16 establish an independent charity, Harmeny Education
17 Trust Limited -- your Ladyship will hear from Mr Ross in
18 that respect -- and transferred the trust to them with
19 effect from 21 December 1995.

20 My Lady, Save the Children want to take this
21 opportunity to offer their sincere unreserved and
22 heartfelt apology and their regret to the children who
23 were harmed at Harmeny School.

24 They now know that children witnessed and
25 experienced serious abuse at the school. They now know

1 that unacceptable practices took place. There were
2 failures in safeguarding systems. Opportunities were
3 created in which children could be and were harmed.

4 This goes against everything that Save the Children
5 stands for and should never have happened.

6 My Lady, there is no time limit on their
7 accountability to children and they are committed to
8 playing their part in the effort, including this effort,
9 to address historic child abuse in Scotland. They will
10 continue to listen to experiences, take responsibility
11 for and learn from these grave failings.

12 As Save the Children have stated publicly before,
13 they are committed to playing their part in the
14 collective national effort to address historic child
15 abuse. My Lady, I will have more to say about that at
16 the close of Phase 9.

17 There are, however, a number of practical
18 consequences from Save the Children transferring the
19 school to Harmeny Education Trust in 1995. First, their
20 involvement ceased as from that date. Secondly, much of
21 the record-keeping and archive material remained with
22 the trust. We have responded wherever possible to
23 requests for information and documents.

24 Although Save the Children does not hold much
25 material and hasn't for 30 years, they continue to work

1 closely with the trust. They have an information
2 sharing agreement in place, which sets out how they work
3 together as members of the Scottish Redress Scheme to
4 support former pupils to access records and also to
5 provide emotional and practical support.

6 The third consequence is that Save the Children does
7 not have institutional knowledge of the running of the
8 school. The knowledge they have comes from the limited
9 records available to them.

10 All that said, my Lady, Save the Children has been
11 keen from the start to contribute fully and to assist
12 this Inquiry as far as possible. They have prepared
13 detailed responses to the Section 21 notices served on
14 them. They have reviewed those to bring them up to date
15 and have submitted an addendum response to parts A to D.

16 Your Ladyship will hear in block 4 from Cat Carter,
17 Director of Safeguarding and, in addition, she or
18 a senior representative will be present in person or via
19 Webex for all the evidence of the relevant applicants.
20 Again, we'll take the opportunity to respond to that at
21 the close of this phase.

22 Ms Carter, the UK Director of Safeguarding,
23 Claire Telfer, Head of Scotland, and Bonike Bracewell,
24 General Counsel and Company Secretary are here today,
25 illustrative of their desire to engage with and hear

1 directly from the Inquiry.

2 My Lady, Save the Children is committed to assisting
3 this Inquiry and would like to take this opportunity to
4 reiterate their desire to listen, to understand, to take
5 responsibility and to learn. They will be closely
6 following this phase and will engage fully with
7 your Ladyship's recommendations in due course.

8 My Lady, that's all I propose to say for now, unless
9 I can assist any further at this stage.

10 LADY SMITH: Thank you very much.

11 MR WATSON: My Lady, the running order has
12 Harmeny Education Trust next. I'm happy to follow that
13 or to speak on behalf of Seamab at this point.

14 LADY SMITH: I wonder if it would make sense, and you have
15 trailed him already, if I heard from Mr Ross on the
16 Harmeny Trust and then I'll come back to you on Seamab,
17 is that all right?

18 MR WATSON: Yes, I'm obliged, my Lady.

19 LADY SMITH: Mr Ross.

20 Opening submissions by MR ROSS

21 MR ROSS: Good afternoon, my Lady.

22 I appear on behalf of Harmeny Education Trust
23 Limited, which is the organisation currently responsible
24 for the operation and management of Harmeny School in
25 Balerno, Edinburgh.

1 As your Ladyship has just heard from Mr Watson, the
2 trust took over the running of the school from the
3 previous operator, Save the Children, in 1995. For
4 simplicity and to avoid any artificial distinction
5 between the trust and the school, I will simply refer to
6 my client as 'Harmeny' in the remainder of this opening
7 statement.

8 Today, Harmeny provides therapeutic residential care
9 and education services for 26 children and young people
10 from Scotland aged 5 to 18, who are placed there by
11 local authorities. The school also offers a day
12 education for 7 children.

13 The children who come to live at Harmeny, have
14 suffered early years trauma, whether arising from
15 familial neglect, parental substance use, mental health
16 issues, domestic violence, poverty and disadvantage to
17 name but several and some have been victims of child
18 abuse.

19 Many of the children have experienced complete
20 family breakdown or been in the care system from a young
21 age, followed by multiple residential or foster
22 placement breakdowns and exclusion from mainstream or
23 specialist education.

24 As a result of these difficult circumstances, the
25 children at Harmeny have complex additional support

1 needs, which demand a highly specialist approach to
2 their care and education. In delivering these services,
3 Harmeny provides therapeutic care and education, which
4 helps children to overcome and recover from their trauma
5 and adversity, discover the joy of learning and to lead
6 happy, fulfilling lives. Harmeny takes pride in being
7 one of Scotland's leading providers of care and
8 education of this very specialist type today.

9 My Lady, there are four overarching matters which
10 Harmeny has asked me to briefly address in this opening
11 statement today.

12 Firstly, Harmeny wishes to express its profound
13 sorrow and sympathy to all those who have been the
14 victims of child abuse at residential schools and care
15 establishments in Scotland, which the work of this
16 Inquiry has shone such a revealing light upon in its
17 work to date. That includes, of course, those incidents
18 of abuse sustained by children at Harmeny School, since
19 it was established in 1958.

20 As I have said, Harmeny is a place where the
21 traumatic impacts of previous childhood abuse and
22 neglect are seen and felt every day in the children who
23 are cared for there. For that reason, all those who
24 work at Harmeny recognise and appreciate, from
25 first-hand experience, the devastating consequences of

1 such abuse upon the lives of survivors and their family
2 members.

3 Secondly, Harmeny considers it important on this
4 occasion and in this forum, to pay tribute to all of the
5 survivors of child abuse who have come forward to share
6 their experiences with this Inquiry and their
7 extraordinary dignity and courage in doing so.

8 For its own part, Harmeny commits itself to ensuring
9 that the learning gained from the testimony of survivors
10 to this Inquiry and from the report and recommendations
11 which your Ladyship will make in due course are taken on
12 board and implemented in its approach to the care and
13 protection of the children at the school.

14 Thirdly, an apology. Harmeny takes this opportunity
15 at the outset of these hearings to publicly acknowledge
16 and accept that acts of child abuse have been committed
17 against children at Harmeny School during the period
18 since 1995 when it first became responsible for the
19 school. This has included incidents of physical and
20 verbal abuse by members of staff upon children. In
21 particular, Harmeny is aware that a number of such
22 incidents have occurred in the context of what is
23 referred to as physical interventions or restraint
24 procedures. There have also been incidents of abuse
25 between children at the school.

1 It is Harmeny's position that abusive conduct
2 against children of any kind is completely unacceptable
3 and it goes against everything that Harmeny stands for.
4 It should not have happened. Harmeny, therefore, wishes
5 to express its deep contrition for any shortcomings on
6 its own part, whether in failing to prevent such
7 incidents from occurring or in failing to meet the high
8 standard of professional practice which is rightly
9 expected of it. To all those who have been affected by
10 child abuse at Harmeny School during this period,
11 Harmeny would like to say to you that it is sorry.

12 The strength and sincerity of this apology is,
13 of course, for those to whom it is given to judge.
14 However, given that it is actions that ultimately matter
15 more than words here, it may be appropriate for me to
16 mention two points briefly.

17 First, in 2023, Harmeny committed to membership of
18 the Scottish Government's Redress Scheme. In its
19 acknowledgment letter upon joining the scheme, Harmeny
20 offered an unreserved apology to anyone who suffered
21 abuse or harm while in their care.

22 Harmeny also acknowledge that the harm suffered by
23 survivors of abuse cannot be undone. However, it is
24 hoped that, if nothing else, its membership of the
25 Redress Scheme serves to affirm Harmeny's commitment to

1 trying to make amends.

2 The second point is that the Inquiry will, I hope,
3 hear evidence in due course demonstrating the
4 organisation's real and sustained commitment to
5 continuous improvement in its systems for protection and
6 safeguarding of the children entrusted to its care
7 within its policies and procedures, as well as its
8 therapeutic practice framework which the organisation
9 calls the Harmeny Way.

10 Harmeny will listen carefully to and reflect upon
11 all of the evidence which the Inquiry will hear in the
12 coming weeks relating to the school and it may be that
13 in light of that, I'm instructed to add to the terms of
14 this apology, when I next address your Ladyship at the
15 conclusion of these hearings.

16 Fourthly and finally, Harmeny would like to reaffirm
17 its commitment to assisting the Inquiry, in whatever way
18 it can, to fulfill its terms of reference during the
19 course of these hearings. This Inquiry is a matter of
20 utmost importance for the school.

21 Harmeny's overriding purpose in appearing at these
22 hearings is to listen to and learn from the evidence,
23 both in order to gain a better understanding of what may
24 have gone wrong in the past and to help inform continued
25 improvements in its current practice.

1 Harmeny is dedicated to providing the highest
2 quality services and the safety and well-being of
3 children in its care are central to its values, practice
4 and ethos. In particular, and as the Inquiry will
5 understand, the needs and vulnerabilities of the
6 children who live and are taught at Harmeny mean that
7 the issue of physical intervention or restraint arises
8 for consideration as a necessary aspect of its core duty
9 to keep the children safe from harm.

10 For Harmeny, the children's vulnerability only
11 serves to underscore the importance of ensuring that
12 such physical interventions are only ever carried out as
13 a last resort to prevent harm in a protective and caring
14 manner by staff fully trained in their use.

15 As would be expected, Harmeny has robust procedures
16 and policies in place which underpin a culture based on
17 the principle of avoiding physical interventions
18 wherever possible. Nevertheless, and as the Inquiry may
19 hear in due course, there have been relatively recent
20 incidents at Harmeny which tend to highlight the fact
21 that harmful aberrations from those principles can still
22 occur, even within a well-developed child protection
23 framework.

24 The questions which naturally arise such as: 'how
25 did such incidents happen?', and: 'what more can be done

1 to prevent this?', are therefore matters which Harmeny
2 has been reflecting on from within its own recent
3 experience. The Inquiry's consideration of this issue
4 during this phase of hearings, including in the context
5 of its terms of reference relating to current child
6 protection systems, is therefore of particular interest
7 and relevance to Harmeny.

8 Finally, may I say that Harmeny's Chief Executive,
9 Gavin Calder, and Jennifer Scott, the chair of the
10 board, in addition to other trustees, plan to be in
11 attendance for those evidence sessions concerned with
12 events at the school, as well as other hearings of more
13 general relevance to the school's position.

14 Those are my opening submissions on behalf of
15 Harmeny, my Lady, unless I can be of any further
16 assistance at this stage?

17 LADY SMITH: No, I have no other questions. Thank you very
18 much, Mr Ross.

19 Mr Watson, if I can invite you now to address me on
20 Seamab.

21 Opening submissions by MR WATSON

22 MR WATSON: Thank you, my Lady.

23 I do indeed appear on behalf of Seamab and also
24 present this afternoon is Stuart Provan, Chief Executive
25 of Seamab.

1 My Lady, Seamab is a charity providing residential
2 care for children and young people from across Scotland
3 with a variety of complex and additional support needs.
4 They provide primary and secondary education, therapy
5 and specialist support in school and in a separate care
6 campus in Perth and Kinross.

7 Seamab's involvement in this phase of the Inquiry
8 relates to earlier iterations of that provision of care.
9 The charity has existed for several decades. It has
10 gone through a number of changes to evolve into the
11 charity that exists today.

12 The first iteration was Lendrick Muir School. That
13 opened in 1962 as a school for secondary school pupils
14 unable to cope with mainstream schooling. It opened on
15 the site of a previous private school.

16 In 1988, the governors of Lendrick Muir established
17 Seamab School as a primary school. The location of that
18 school has moved on several occasions. In 1998,
19 Lendrick Muir School was closed and the property sold.
20 That reflected falling pupil numbers as more pupils were
21 catered for in mainstream schooling.

22 Seamab began as a primary school and is now able to
23 support children and young people aged from 5 to 18
24 across the full year, not simply term time.

25 My Lady, through the changes of site and management

1 and through the closure of Lendrick Muir, the Seamab of
2 today has limited records for earlier eras and no
3 institutional knowledge of the care then provided.

4 That has hampered their ability to give detailed
5 responses to some aspects of the Section 21 notices.
6 However, I'm particularly grateful to the Inquiry's
7 legal team for highlighting areas where further
8 information might be available and that has allowed
9 Seamab to prepare an addendum response covering some
10 additional matters.

11 LADY SMITH: Good.

12 MR WATSON: My Lady, through preparing for this phase and
13 reading the applicants' statements, the current leaders
14 of Seamab have learned a lot about those earlier eras,
15 much of it distressing.

16 Mr Provan will be attending the oral evidence to
17 hear in person from the applicants, to hear directly
18 from them about what they experienced. He will then
19 give evidence and respond on behalf of Seamab.

20 My Lady, Seamab will contribute as fully as possible
21 to this phase through their Section 21 response, through
22 Mr Provan's evidence, through responding to any other
23 queries they receive and, in due course, through closing
24 submissions.

25 However, at this stage, that is all I propose to

1 say, unless I can assist your Ladyship any further.

2 LADY SMITH: No, that is very clear. Thank you, Mr Watson.

3 Now, we're now just after 3.15 and I normally take
4 a very short break in the middle of the afternoon and
5 that will give the stenographers a breather, so I'll do
6 that now but we'll keep it short and then I'll return to
7 the remaining opening submissions. I think we still
8 have half a dozen or so to hear from after that. Thank
9 you.

10 (3.18 pm)

11 (A short break)

12 (3.29 pm)

13 LADY SMITH: I would like to turn to the Donaldson Trust
14 next and, Mr Batchelor, I gather you are here for them,
15 yes?

16 Opening submissions by MR BATCHELOR

17 MR BATCHELOR: Thank you, my Lady.

18 I appear on behalf of the Donaldson Trust. The
19 Donaldson Trust was constituted in 1844 following the
20 bequest of James Donaldson of Broughton Hall.

21 Donaldson's School for Deaf Children was initially
22 established in 1850 and admitted its first pupils in
23 1851. Whilst originally it accepted both hearing and
24 deaf pupils, from approximately 1930 onwards, pupils
25 there were exclusively deaf. The principal aim of

1 Donaldson's School was to provide education to deaf
2 children. It also provided residential accommodation
3 and care until approximately 2016.

4 From its establishment until 2008, Donaldson's
5 School for Deaf Children was based at The Playfair
6 building, Wester Coates, Edinburgh and in 2008, the
7 school moved to new premises in Linlithgow.

8 The trust acknowledges that some children who
9 attended the school were abused. That abuse included
10 physical, sexual and emotional abuse.

11 There have been a number of police investigations
12 and prosecutions relating to allegations of abuse at
13 Donaldson's School in the past which the Inquiry will
14 wish to consider.

15 A former principal of Donaldson's School was
16 prosecuted for physical abuse of children in
17 approximately 2000. Following a trial, the majority of
18 charges against him were found not proven. Another
19 member of staff [REDACTED]
20 [REDACTED]

21 Some former pupils have also been prosecuted in the
22 criminal courts. One pupil was convicted of sexual
23 offences whilst at the establishment.

24 A significant number of other incidents have been
25 reported since 2000 involving pupils physically

1 assaulting other pupils. When the previous Chief
2 Executive, Laura Watkins, joined the organisation in
3 2014, she raised a number of child protection and
4 safeguarding concerns with Education Scotland.

5 This led to a preliminary notice being served under
6 Section 66C of the Education (Scotland) Act 1980. The
7 concerns raised included that the behaviour of some
8 children and young pupils was resulting in a high number
9 of assaults of a physical, verbal and sexual nature.

10 The trust wishes to apologise to all pupils who
11 suffered abuse as children whilst in their care.

12 The trust's assessment, my Lady, is that there were
13 failures in the historic safeguarding systems during the
14 period 1930 to 2014. Two specific points in time which
15 the Inquiry may consider to be particularly significant
16 have been identified.

17 The first occasion is in around 1998/1999, when
18 significant failures were noted in an inspection report
19 by the Edinburgh and Lothians Registration and
20 Inspection Service.

21 The second occasion was the Section 66C notice which
22 was served in 2014, as I've mentioned.

23 The trust has provided assistance to the Inquiry to
24 date by framing detailed responses to Section 21 notices
25 and through the provision of extensive documentation.

1 The governors and senior management team at the trust
2 are fully committed to assisting the Inquiry with its
3 work. Safeguarding of children is at the heart of what
4 they do. They hope to be able to assist the Inquiry
5 with its work, with a specific focus on the safeguarding
6 of children with additional support needs.

7 LADY SMITH: Thank you very much, Mr Batchelor.

8 And next I would like to go to Sight Scotland. I
9 think that is you, Ms Loosemore, is it?

10 Opening submissions by MS LOOSEMORE

11 MS LOOSEMORE: Yes, thank you, my Lady.

12 I'm here to make opening submissions on behalf of
13 Sight Scotland in relation to the Royal Blind School.

14 Sight Scotland is a charity that has been dedicated
15 to providing services to people with visual impairments,
16 for over two centuries, in one form or another. It is
17 currently the largest vision impairment organisation in
18 Scotland.

19 Sight Scotland fully supports the work of the
20 Inquiry and Pam Gaiter, Executive Support Manager, is
21 present today. Representatives intend to be present
22 whenever evidence is being given which concerns the
23 Royal Blind School.

24 Sight Scotland has fully cooperated with the Inquiry
25 to date and will continue to do so.

1 From its beginning, a main focus of the organisation
2 has been the provision of education and training to
3 children with visual impairments. Sight Scotland is
4 responsible for the Royal Blind School which has
5 operated in Edinburgh since 1875 and has provided, and
6 continues to provide, residential boarding facilities to
7 some of its students.

8 At its height in 1958, the school had 170
9 residential pupils. For a number of reasons, the
10 numbers have declined since that time. Since 2000,
11 there has been a presumption of mainstreaming, meaning
12 that, wherever possible, children are educated in
13 a local mainstream school, rather than a residential
14 specialist school. I understand that, currently, this
15 school has 17 residential pupils.

16 Sight Scotland is aware that there have been three
17 past instances of pupils being convicted of serious
18 criminal offences against other pupils.

19 David Penman was convicted in 2018 for offences
20 dating from the late 1980s to the early 1990s, and two
21 other pupils have been convicted of offences in the
22 early 2000s.

23 Sight Scotland is deeply saddened by these crimes
24 and wishes to express its heartfelt sorrow to the pupils
25 who were the victims of these individuals.

1 Sight Scotland is also aware of a single allegation
2 of abuse by a now deceased staff member, dating to the
3 1970s. That matter continues to be investigated.

4 The protection of all pupils is of prime importance
5 to Sight Scotland. The Royal Blind School has had child
6 protection guidelines in place since 1997. This
7 procedure was most recently reviewed in 2024 and now
8 goes under the title, 'Safeguarding Policy Document'.

9 Sight Scotland is here to listen and to learn, to
10 pay close attention to the experience of the former
11 pupils of the Royal Blind School, and to reflect on what
12 more can be done to prevent anything like these past
13 occurrences from happening in the future.

14 I thank the Inquiry for this opportunity to provide
15 submissions on behalf of Sight Scotland.

16 LADY SMITH: Thank you very much.

17 And next to the Lord Advocate and, Ms Lawrie, you
18 are here for the Lord Advocate. I'm ready to hear you
19 when you're ready.

20 Opening submissions by MS LAWRIE

21 MS LAWRIE: My Lady, I'm grateful for the opportunity to
22 make this brief opening statement on behalf of the
23 Lord Advocate, which explains the Crown's interest in
24 the present phase of the Inquiry's investigations.

25 As with previous case studies, the Lord Advocate's

1 interest stems from her responsibilities as Head of the
2 Systems of Criminal Prosecution and the Investigation of
3 Deaths in Scotland.

4 The focus of the present case study is the abuse of
5 children within healthcare establishments, and
6 establishments caring for children with additional
7 support needs and disabilities.

8 It's anticipated that as the chapters of evidence
9 progress, the Inquiry may hear evidence about the past
10 and the continuing involvement of the Crown in relation
11 to the prosecution of offences committed against
12 children at those establishments.

13 The Crown Office and Procurator Fiscal Service
14 continues to strive to be a compassionate and
15 trauma-informed service. In particular, the service is
16 committed to continuous improvement and to delivering
17 the quality of service the public rightly expects.

18 The important work of this Inquiry, and, in
19 particular, the evidence of those applicants with
20 criminal justice experience, has allowed, and will
21 continue to allow, the Crown to carefully reflect and
22 consider how that service and, in particular, its
23 communication with survivors of abuse in residential
24 care settings can be improved.

25 In conclusion, my Lady, may I once again repeat the

1 Lord Advocate's public commitment to supporting the
2 Inquiry's important work and to contributing positively
3 and constructively to it. Secondly, to learning from
4 the Inquiry's work in relation to the prosecution of
5 crime in the public interest and the investigation of
6 deaths in Scotland.

7 I'm grateful, my Lady.

8 LADY SMITH: Thank you very much.

9 And now to Police Scotland. Ms Whyte, I think
10 that's you. Whenever you're ready.

11 Opening submissions by MS WHYTE

12 MS WHYTE: It is. Thank you, my Lady.

13 My Lady, I am grateful for the opportunity to make
14 this opening statement on behalf of the Chief Constable
15 of the Police Service of Scotland.

16 Firstly, the Chief Constable wishes to express
17 sympathy to all survivors of childhood abuse, including
18 survivors who have experienced abuse within healthcare
19 establishments and establishments caring for children
20 with additional support needs and disabilities.

21 Police Scotland remains committed to delivering its
22 response to the Inquiry and ensuring that all relevant
23 information held is provided in compliance with the
24 terms of the notices issued under the Inquiries Act
25 2005.

1 This information includes policies, procedures and
2 documents relating to investigations into the abuse and
3 neglect of children in establishments falling under the
4 Inquiry's remit.

5 With regard to this phase of the Inquiry's hearings,
6 Police Scotland has identified and provided all material
7 meeting the terms of the request from the Inquiry
8 relating to previous police investigations into the
9 abuse and neglect of children within healthcare
10 establishments, and establishments caring for children
11 with additional support needs and disabilities.

12 Police Scotland also wishes to inform the Inquiry
13 that, in keeping with its continued commitment to
14 non-recent investigations, it is currently conducting
15 a number of investigations into non-recent child abuse
16 within healthcare establishments and establishments
17 caring for children with additional support needs and
18 disabilities.

19 Police Scotland continues to build on its engagement
20 with adult survivors of childhood abuse, seeking views
21 and consulting with survivors, support services and
22 statutory partners, to enhance public confidence and
23 improve service provision to adult survivors.

24 Police Scotland recognises the importance of using
25 organisational learning to ensure its staff have the

1 capabilities and skills required to effect continuous
2 improvement.

3 As such, Police Scotland will take into account any
4 good practice or areas of learning that may be
5 identified from this phase of the Inquiry hearings as
6 part of its commitment to developing and improving its
7 service provision.

8 In conclusion, my Lady, Police Scotland remains
9 committed to child protection, both locally, as a core
10 statutory child protection agency, and nationally, in
11 partnership with multi-agency and strategic leadership
12 groups, to implement continuous improvements and make
13 a positive contribution to protecting Scotland's
14 children, both now and in the future.

15 LADY SMITH: Thank you very much. Thank you, Ms Whyte.

16 Next, the Care Inspectorate, please, and that
17 I think is you, Ms Toner.

18 Opening submissions by MS TONER

19 MS TONER: It is. Thank you, my Lady.

20 My Lady, I do indeed appear on behalf of the Care
21 Inspectorate, and the Care Inspectorate is grateful,
22 my Lady, for the opportunity to address the Inquiry at
23 this time.

24 The Care Inspectorate has, of course, been a core
25 participant in the Inquiry in earlier phases, my Lady,

1 and opening and closing statements have been made on its
2 behalf at earlier hearings.

3 The background to the creation of the Care
4 Inspectorate and its statutory predecessor, the Care
5 Commission, has been set out before the Inquiry in
6 evidence and in previous opening and closing statements.
7 So consequently, my Lady, the role of the Care
8 Inspectorate is no doubt well recognised by
9 your Ladyship. But it may be appropriate for me to say
10 something of the background to the work of the Care
11 Inspectorate in order to place in context the
12 organisation's participation in this new phase of the
13 Inquiry.

14 In essence, my Lady, the Care Commission was created
15 in 2002 by the enactment of the Regulation of Care
16 (Scotland) Act 2001, with its purpose being to carry out
17 the regulation of care services in Scotland. Its
18 creation, my Lady, was against a background of
19 recognition that regulation of care services was at that
20 time not carried out to any consistent or identifiable
21 standard, with some services not being regulated at all.

22 The purpose of the Act, my Lady, and the creation of
23 the Care Commission itself, as it was at that time, was
24 to reform the regulatory system for care services in
25 Scotland.

1 From April 2011, following further legislative
2 change, the Care Inspectorate was established as the
3 statutory successor to the Care Commission and the
4 Inspectorate now has the responsibility for regulation
5 of care services in Scotland.

6 The care services for which the inspector has
7 regulatory responsibility are varied and include
8 regulation of residential care in establishments for
9 children and young people with long-term healthcare
10 needs, additional support needs and disabilities.

11 In that capacity, my Lady, the Care Inspectorate has
12 a clear interest in the matters being explored in
13 Phase 9 of the Inquiry's work.

14 The work of the Inquiry in investigating the nature
15 and extent of abuse of children whilst in care in
16 Scotland is of the utmost gravity. Principal amongst
17 the Inquiry's terms of reference is no doubt the
18 consideration of whether further changes in practice,
19 policy or legislation are necessary in order to protect
20 children in care in Scotland from such abuse in the
21 future.

22 It is appropriate, my Lady, that the regulatory
23 framework within which the Care Inspectorate operates is
24 considered against that background.

25 My Lady, the Care Inspectorate is committed to

1 maintaining and improving the standard and quality of
2 care delivered by the services for which it has
3 regulatory responsibility.

4 Further, my Lady, it is committed to assisting the
5 Inquiry, as it has done so far, and to acting upon any
6 lessons learned from the findings of the Inquiry in due
7 course.

8 The Care Inspectorate, my Lady, reiterates that it
9 will continue to assist the Inquiry in whatever way it
10 can in order for the Inquiry to fulfil its terms of
11 reference thoroughly and expeditiously.

12 Thank you, my Lady.

13 LADY SMITH: Thank you very much.

14 And finally, could I turn to Ms O'Neill for Scottish
15 Ministers?

16 Opening submissions by MS O'NEILL

17 MS O'NEILL: Thank you, my Lady.

18 This opening statement is made on behalf of the
19 Scottish Ministers. As the Inquiry is aware, the
20 Scottish Ministers also represent, at this Inquiry,
21 those executive agencies which form part of the Scottish
22 Government and for which the Scottish Ministers are
23 directly responsible.

24 In the context of this part of the Inquiry's work,
25 those agencies include Education Scotland, under whose

1 umbrella HM Inspectors of Education currently sit. The
2 Scottish Government is also responsible for the
3 Registrar of Independent Schools and the Registrar is
4 appointed by the Scottish Ministers and, of course, the
5 Scottish Government is also ultimately responsible for
6 the delivery of healthcare by the National Health
7 Service, in Scotland.

8 As your Ladyship is aware, Crown Office and
9 Procurator Fiscal Service is, of course, represented
10 separately.

11 So far as Scottish Ministers' interest in this part
12 of the Inquiry's work is concerned, Ministers continue
13 to have an interest in all aspects of the Inquiry's work
14 and are represented throughout the hearings of evidence
15 from applicants and from others.

16 Scottish Ministers have a range of policy interests
17 in the way in which residential accommodation services
18 are provided to children and young people with long-term
19 healthcare needs, additional support needs and
20 disabilities.

21 In the first place, Scottish Ministers are
22 responsible for setting the legal framework for the
23 provision of those services. In addition, they have
24 an overarching policy interest in the way in which the
25 services are provided.

1 In relation to healthcare, Scottish Ministers have
2 legislative and policy responsibility for the provision
3 of healthcare by the NHS in Scotland and for the
4 inspection of healthcare services, which inspection is
5 carried out by Healthcare Improvement Scotland and by
6 the Care Inspectorate.

7 If a hospital establishment is considered to be
8 a school, it will be subject to inspections by His
9 Majesty's Inspectors of Education. While responsibility
10 for the provision of education to children and
11 healthcare establishments does not rest directly with
12 Scottish Ministers, the Scottish Government has produced
13 guidance setting out the legislative and policy context,
14 and providing advice on roles and responsibilities of
15 local authorities, hospitals and other services in
16 relation to children unable to attend school due to
17 ill-health.

18 In relation to education, Education Scotland is
19 an executive agency. It operates at arm's length while
20 remaining directly accountable to Scottish Ministers.
21 As noted previously, it houses His Majesty's Inspectors
22 of Education and the Registrar of Independent Schools.
23 Inspectors are responsible for inspecting educational
24 provision within special schools, while the
25 accommodation service in such schools is regulated and

1 inspected by the Care Inspectorate. That Inspectorate
2 liaises with the Registrar of Independent Schools in
3 respect of the registration and regulation of those
4 schools.

5 In relation to this phase of the Inquiry's work, the
6 Scottish Government has received a number of Section 21
7 notices. Several of those related to the production of
8 relevant records held by Scottish Government.

9 In addition, the Inquiry served a Section 21 notice
10 requiring a report to be produced and submitted by
11 Education Scotland to deal with various matters,
12 including the nature and extent of Education Scotland's
13 responsibility for safeguarding and child protection in
14 Phase 9 establishments.

15 Its knowledge of the nature and extent of abuse of
16 children, and of complaints and allegations of abuse in
17 each of those establishments, and the nature and extent
18 of problems or issues with educational attainment in
19 Phase 9 establishments, and the steps or actions taken
20 by Education Scotland or its predecessors to address
21 such problems or issues.

22 A report in response to that Section 21 notice was
23 produced on 11 March this year. In that report,
24 Education Scotland acknowledged that the records
25 disclosed the abuse of children who were accommodated in

1 at least some establishments under investigation by the
2 Inquiry during the relevant period.

3 Education Scotland also acknowledged that the
4 available records are unlikely to provide a full and
5 comprehensive account of the extent of abuse that took
6 place.

7 There are a number of reasons for that, including
8 that it is unlikely that all abuse will have been
9 reported, because children may have been discouraged
10 from reporting incidents or not felt comfortable in
11 doing so.

12 It is also because the records indicate that in some
13 establishments, there were periods of time when
14 inspections by HM Inspectors do not appear to have been
15 carried out, including because there was a lack of
16 clarity as to which body or bodies had responsibility
17 for inspections of hospital settings where there was
18 some educational provision for the children resident
19 there.

20 In the report, Education Scotland apologised to
21 children and their families for failings in inspection
22 regimes that contributed to the creation of environments
23 that enabled the abuse of children to take place in
24 those establishments.

25 The Inquiry will hear evidence from Janie McManus,

1 His Majesty's Interim Chief Inspector of Education, on
2 27 May. She will wish to expand on Education Scotland's
3 acknowledgment of abuse and to apologise in person for
4 the inadequacies of inspection regimes that contributed
5 to an environment that allowed abuse to take place.

6 For the avoidance of doubt, the Scottish Government
7 also anticipates that in this phase of its work, the
8 Inquiry will hear evidence that will point to failings
9 in relation to legislation, policy and resourcing as
10 contributing to an environment that allowed abuse to
11 take place.

12 The Scottish Government will listen carefully to
13 that evidence and will not hesitate to acknowledge and
14 apologise for such failings.

15 The Scottish Government, my Lady, would wish to draw
16 the Inquiry's attention to two current issues and
17 ongoing work that is relevant to this phase.

18 Your Ladyship may recall that in the closing
19 submissions in Phase 8, reference was made to the fact
20 that the Scottish Government had published new guidance
21 for schools on the use of physical intervention,
22 restraint and seclusion. That was published, my Lady,
23 in November of last year.

24 Since then, my Lady, a Bill has been introduced in
25 the Scottish Parliament by Daniel Johnson MSP, that is

1 the Restraint and Seclusion in Schools (Scotland) Bill.
2 It is a Members' Bill rather than a Government Bill. It
3 was introduced in March of this year and would, among
4 other things, impose on Scottish Ministers a duty to
5 issue guidance about the use of restraint and seclusion.

6 Scottish Ministers are considering that Bill and
7 will engage with it during its parliamentary passage.
8 It remains, my Lady, at stage 1 at this point.

9 LADY SMITH: Thank you.

10 MS O'NEILL: My Lady, mention also has already been made, in
11 opening submissions, of the recent BBC Disclosure
12 programme focused on patient safety and care issues at
13 Skye House, adolescent mental health in-patient unit, in
14 Glasgow, between 2017 and 2023, and Scottish Government
15 understands that the Inquiry will have an interest in
16 those matters.

17 While long-term residential hospitals for children
18 and young people with mental health needs,
19 neurodivergence or learning disability no longer exist
20 in Scotland, there are three regional adolescent mental
21 health inpatient units for young people aged 12 to 18,
22 and one child mental health inpatient unit for children
23 under 12.

24 These are short-term hospital settings to support
25 young people who are acutely mentally unwell. Only

1 a small minority of children and young people requiring
2 mental health support are admitted to these units, while
3 the vast majority of care is provided within community
4 settings.

5 The allegations that have been made about Skye House
6 relate to overuse of restraint, seclusion, sedation,
7 nasal gastric feeding for children with extreme eating
8 disorders, and unacceptable staff communication and
9 behaviour.

10 As part of the Scottish Government response to these
11 allegations, and to seek assurance about current
12 standards of care and treatment, Ministers have asked
13 NHS Healthcare Improvement Scotland, which is
14 responsible for monitoring the quality of healthcare
15 provided by the Health Service, and the Mental Welfare
16 Commission, which is an independent body responsible for
17 ensuring compliance with the Mental Health Act, to
18 undertake a series of joint visits to all three
19 adolescent mental health inpatient units in Scotland, as
20 well as the National Child Inpatient Unit and to make
21 recommendations for improvement of services and for
22 future scrutiny and assurance arrangements.

23 My Lady, the Scottish Government and Education
24 Scotland want and need to understand the nature and
25 extent of the abuse suffered by the survivors who have

1 engaged with the Inquiry and how that abuse was able to
2 happen.

3 The evidence of survivors and others may lead the
4 Inquiry, in due course, to make recommendations about
5 the further regulation of provision for children and
6 young people with long-term healthcare needs, additional
7 support needs and disabilities.

8 The Scottish Government has a direct interest in
9 supporting those who were abused while in residential
10 accommodation for children and young people with those
11 needs and ensuring that they secure acknowledgment of
12 and accountability for the abuse that they experienced.

13 The Scottish Government will reflect on all evidence
14 given during these hearings, including evidence that may
15 relate to how the government has responded and continues
16 to respond to survivors of abuse.

17 Those are my submissions, my Lady.

18 LADY SMITH: Thank you very much, Ms O'Neill. And thank you
19 for the update on the Bill. We'll keep track of that.

20 Ms Innes, back to you.

21 MS INNES: Thank you, my Lady.

22 As I said earlier, I would retrospectively advise
23 the Inquiry what happened this morning in terms of two
24 videos which were played.

25 The first video which was played was an Open

1 University programme called Lennox Castle: A Hidden
2 History, in which Howard Mitchell, who is due to give
3 evidence to the Inquiry on Friday of this week, spoke to
4 two former residents and a staff member of
5 Lennox Castle.

6 It's understood from Mr Mitchell's statement that
7 the interviews were conducted in about 1996.
8 Thereafter, a video was played called
9 Lennox Castle Stories, which was a project conducted by
10 C-Change, along with Project Ability in 2012.

11 This is spoken to by Samantha Smith, the Chief
12 Executive of C-Change, in her witness statement, which
13 for reference is at WIT-1-000001458 and at
14 paragraphs 134 to 139 thereof.

15 She will also give evidence this Friday. But she
16 explains that the partnership with Project Ability was
17 to allow people to share their experiences in more
18 creative ways rather than simply through question and
19 answer.

20 At the end of the video, there were two short
21 excerpts of two other interviews, one which I think was
22 also conducted by Howard Mitchell and the other was
23 a short video from Enable Scotland, again with a former
24 resident of Lennox Castle.

25 All these videos are available online, on YouTube.

1 They were simply patched together, so that they could be
2 played for the Inquiry.

3 Tomorrow, we will begin hearing evidence. We will
4 begin with evidence from Dr Scott Davidson, Medical
5 Director at NHS Greater Glasgow & Clyde, followed by
6 Julie White, Chief Executive of NHS Dumfries & Galloway.

7 LADY SMITH: Thank you very much.

8 It's almost 4 o'clock, so I'm going to rise for
9 today and we'll sit again at 10 o'clock tomorrow morning
10 for the evidence to which Ms Innes has just referred.

11 Thank you all.

12 (3.58 pm)

13 (The Inquiry adjourned until 10.00 am
14 on Wednesday, 30 April 2025)

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