### Title of Policy

Multi-agency public protection arrangements (MAPPA), as provided for by section 10(6) of the Management of Offenders etc. (Scotland) Act 2005, as amended, and the proposed extension of these arrangements through Management of Offenders etc. (Scotland) Act 2005 (Commencement No. 8) Order 2015 to include additional offenders posing a risk of serious harm.

### Summary of aims and desired outcomes of Policy

The MAPPA are a framework of statutory arrangements operated under sections 10 and 11 of the 2005 Act. They are operated by Police Scotland, local authorities, the Scottish Prison Service, and NHS to manage and reduce the risk presented by certain sexual offenders and perpetrators of violent offences who are mentally disordered in order that re-offending is reduced and the public are protected. This policy also includes proposals to extend MAPPA to additional offenders managed in the community who, by reason of their conviction, are assessed as posing a risk of serious harm.

The sharing of information and the establishment of co-ordinated risk management plans allow relevant offenders to be effectively managed. The MAPPA guidance is a multi-agency document which effectively supports the management of MAPPA offenders.

### Directorate: Division: team

Directorate for Safer Communities: Safer Communities Division: Public Protection Unit.
Executive summary

Multi Agency Public Protection Arrangements (MAPPA) Guidance is issued by the Scottish Ministers under section 10 (6) of the Management of Offenders etc. (Scotland) Act 2005. The current 2014 version of the guidance is an update of earlier versions to take into account changes in policy and legislation as well as learning. Further development of the MAPPA guidance will reflect proposals to include additional offenders managed in the community who pose a risk of serious harm.

The MAPPA guidance does not replicate the responsibilities of individual agencies; rather it sets out what they are specifically required to do under MAPPA.

It is considered that there will be limited impact on staff, offenders or other stakeholders, as the MAPPA guidance updates earlier versions.

Criteria for inclusion under MAPPA is defined by type of offence. All decisions made under MAPPA are on the basis of individualised assessed risk and specific actions required to manage them.

Background

Multi Agency Public Protection Arrangements (MAPPA) is the framework which joins up the agencies who manage high risk offenders in the community, currently registered sex offenders (RSOs) and mentally disordered restricted patients. The extension of MAPPA to additional offenders managed in the community who pose a risk of serious harm has been proposed. The fundamental purpose of MAPPA is public safety and the reduction of serious harm.

MAPPA supports the following national outcomes:

- National Outcome 9: We live our lives safe from crime, disorder and danger. Reoffending constitutes a significant proportion of the overall rate of crime and victimisation. By using public expenditure effectively in reducing reoffending, we contribute to reducing crime, help protect communities and reduce the number of victims;

- National Outcome 11: We have strong, resilient and supportive communities where people take responsibility for their own actions and
how they affect others. Work on rehabilitation and community reintegration helps ensure that offenders returning to their communities have every chance of leading a life where they desist from crime, with benefits for communities, victims and themselves; and

- National Outcome 15: Our public services are high quality, continually improving, efficient and responsive to local people’s needs. We aspire for public expenditure and services to reflect Ministerial priorities for the justice system, and for interventions to be effective in delivering better outcomes. We work with partners to ensure this is the case, given the significant assets and investment already dedicated to reducing reoffending, while respecting the relationships central Government needs to have with the relevant delivery agencies.

The introduction of MAPPA across Scotland in April 2007 gave a consistent approach to the management of RSOs across Scotland. MAPPA is not a statutory body in itself but is a framework through which agencies can better discharge their statutory responsibilities and protect the public in a co-ordinated manner. Agencies at all times retain their full statutory responsibilities and obligations, including their legal and policy obligations regarding equalities issues. The Scottish Ministers’ statutory guidance does not replicate the responsibilities of individual agencies; rather it sets out what is specifically required under MAPPA.

Lead responsibility within the Scottish Government for policy and guidance in relation to MAPPA and sex offenders lies with the Public Protection Unit (PPU) within the Safer Communities Directorate. The PPU works to ensure the delivery of public protection arrangements to safeguard communities from the risks posed by this category of offender. The PPU is responsible for maintaining the MAPPA guidance and for bringing forward proposals to enhance the current arrangements.

The latest version of the guidance was published in June 2014. The main development in the 2014 version was in the Document Set. The 'Basic Minute Template' from 2012 was replaced with 3 new documents: a Minute template; Risk Assessment template; and a Risk Management and Contingency template.

The documents and supporting guidance were developed in conjunction with a multi-agency sub-group of the Risk Management Authority’s FRAME Standards and Guidelines Group. This work was undertaken as part of a wider agreement with stakeholders to ensure consistency in risk
assessment and management, and to address specific findings and recommendations from a number of significant case reviews. Further development of the MAPPA guidance with stakeholders to take account of the proposed MAPPA extension has helped inform development of the policy and is on-going.

The Scope of the EQIA

MAPPA for Registered Sex Offenders and Restricted Patients

The Scottish Government took account of the information provided by the Responsible Authorities (Police Service of Scotland, Local Authorities, Scottish Prison Service, and Health Boards and Special Health Boards) in MAPPA annual reports, as required to be provided by virtue of section 11(2) of the 2005 Act, and multi-agency information sharing databases such as the Violent and Sex Offender Register.

It should be noted however that the vast majority of RSO cases managed under MAPPA (4,787 as at 31 March 2015 equating to over 95%) are managed under ordinary agency management (Level 1). At this level of management, information is exchanged but the guidance does not require formal inter-agency meetings to be held. Only those RSOs managed at level 2 or level 3 routinely require inter-agency meetings to support the management of their case. Numbers of RSOs managed at level 2 and level 3 are very small. There were 234 RSOs managed at Level 2 and 9 RSOs managed at Level 3 as at 31 March 2015. It is only to this much smaller group of RSOs that much of the MAPPA guidance applies.

In terms of restricted patients, Health boards are required to establish joint arrangements for the assessment and management of the risk they pose. These patients are reviewed under the Care Programme Approach and community risk is managed through MAPPA. There were some 306 restricted patients in Scotland (as at 18 September 2015).

Extension of MAPPA to Additional Offenders posing a Risk of Serious Harm

This EQIA also considers proposals to extend MAPPA to those offenders managed in the community who, by reason of their conviction, pose a risk of serious harm to the public. This is based on analysis of criminal proceedings statistics by Scottish Government analysts and agency partners which have helped provide some illustration of the effect of
extending MAPPA and the potential impacts this could have on those subject to it. This suggests some 460 offenders who could be in scope for the MAPPA extension at any one time, and details protected characteristics in relation to age and gender. It is not possible to predict however what percentage of this overall figure would enter arrangements, as entry would be based on each individual’s assessed risk of serious harm.

**Key Findings**

It is not believed there is anything in the systems and processes in the MAPPA guidance (to which the responsible authorities must have regard) which has a differential impact on equality and the protected characteristics.

Inclusion under MAPPA is based on set criteria. All decisions made under MAPPA are on the basis of assessed risk and actions required to manage them. The MAPPA guidance underpins this process.

The latest version of the MAPPA guidance has been redrafted to emphasise the need to develop individual risk strategies that will ensure that the needs of each offender are met. Agencies will also be bound by their own legal and policy obligations regarding equalities. Further development of the guidance to reflect the proposed extension of MAPPA will not alter this emphasis.

It is considered that the guidance will not impact adversely or unfairly on any groups as it is predicated on the importance of developing individual risk strategies which will ensure that the needs of each offender are met.

The EQIA has enhanced the development of the guidance. In particular, the guidance states that each of the Responsible Authorities must have in place plans to ensure that matters relating to diversity are addressed, and that due consideration must be given to diversity issues.

**Age**

The age profile of RSOs ranges across the full age spectrum from 17-90 years of age. The average age of RSOs subject to MAPPA is mid-40s; with most offenders being aged between 21 and 60 years old (this is current age, not the age when their offence was committed). The age spectrum of restricted patients follows a similar path from 18-80, with most being aged between 31-60.
MAPPA in Scotland excludes much of the young offender population who are managed through the Children’s Hearing System. Accordingly there are only 26 registered sex offenders in Scotland under 18 (0.5%).

The extension of MAPPA could increase the proportion of young offenders subject to multi-agency management. Of the 460 offenders scoped for the MAPPA extension, less than 17 could be under 18 years of age. As detailed above it is however not possible to anticipate what percentage of this number would enter MAPPA.

The Scottish Government published FRAME guidance for Local Authorities and partners for children and young people under 18 (Scottish Government 2011c). The FRAME policy (RMA Scotland 2011c) specifically focuses on adopting a tiered approach to risk management of young people, recognising again the differences between adults and under 18s.

These differences were acknowledged with the publication of specific guidance for the assessment and management of young people who present a risk of harm through sexually harmful and/or violent behaviour (Scottish Government 2014).

**Disability**

The EQIA identified no significant impacts in relation to disability.

**Sex (including pregnancy and maternity)**

The information presented in MAPPA annual reports and ViSOR indicates that there are only 26 female RSOs in Scotland, and 18 female Restricted Patients. The extension of MAPPA could increase the proportion of female offenders subject to multi-agency management. The scoped cohort suggests some 28 of the total 460 offenders could be female, again however it is not possible to predict what portion of this number would be considered for entry to the MAPPA arrangements.

Evidence sourced for the EQIA showed that most risk assessment tools have been framed and validated for male offenders. Accordingly the applicability of tools such as RM 2000, and Stable & Acute is not appropriate with female offenders. Measures designed to assess risk of sexual recidivism for males are also not appropriate for females.
However, the commonly used Level of Service Case Management Inventory (LSCMI) has been validated for females.

**ACTION:** The Risk Management Authority should be asked to consider appropriate risk assessment protocols for female sex offenders.

**Gender reassignment**

No RSOs or Restricted Patients have indicated that gender reassignment has taken place. Accordingly it is not considered that this policy highlights any issues specific to gender reassignment.

**Sexual orientation**

The information presented on ViSOR confirms that of those RSOs that provided information (3345), 6% identified themselves as homosexual; 5% bisexual, and 0.08% asexual. Accordingly it is not considered that this policy highlights any issues specific to sexual orientation.

**Race**

Of those RSOs that provided information (4995), 79% identified themselves as White-Scottish, 11% White-other British, and 1.3% Asian-Pakistani, Pakistani Scottish or Pakistani British.

In terms of restricted patients, 88% % identified themselves as White-Scottish, 5% White-other British, and 1% Asian-Pakistani, Pakistani Scottish or Pakistani British.

Most risk assessment tools have been framed and validated for offenders from the largest ethnic grouping. Accordingly the applicability of tools such as RM 2000, Stable & Acute, and LS/CMI to offenders from ethnic minorities cannot be taken for granted.

The RMA periodically updates a Risk Assessment Tools Evaluation Directory (RATED) which presents evidence about the validation and applicability of many instruments, including reference to age, gender, race and mental disorder. Therefore, the Responsible Authorities can consider diversity issues when selecting and administering risk assessment instruments.
**ACTION:** The RMA should be asked to consider appropriate risk assessment protocols for ethnic minorities.

**Recommendations and Conclusion**

The MAPPA guidance is not a policy, rather, it is statutory guidance on how a range of agencies should work together to carry out their duties under MAPPA. Agencies retain their own statutory responsibilities and must abide by their own policies, including those relating to equality and diversity, at all times. The proposed extension of MAPPA will not alter this position.

Entry to the proposed MAPPA extension is based on risk, and as risk is specific to the individual it is not possible to predict the protected characteristics of those who will enter the arrangements. The extension of MAPPA will likely increase the proportion of young people and women subject to multi-agency management, although scoping suggests offender numbers to be low.

Section 11 of the 2005 Act requires the Responsible Authorities to monitor the operation of MAPPA, making changes to improve effectiveness where required. Accordingly, Scotland has 8 Strategic Oversight Groups (SOGs) which are responsible for performance monitoring and quality assurance of MAPPA, and for the co-ordination and submission of the annual report for their area.

Scotland’s 10 MAPPA co-ordinators also gather statistical information required for the reporting period 1st April to 31st March on the race and ethnic origin, age profile, and gender of those subject to MAPPA. The SOGs consider this demographic data and its impact on their operations. They are also required to examine qualitative data to consider if their local arrangements are working effectively.

It must also be remembered that relatively few offenders are managed through inter-agency meetings, so the need for additional safeguards is limited and can be managed by the measures indicated above. While there have been successful legal challenges to the legislative provisions relating to the sex offender notification requirements, none of these has related to the operation of MAPPA and issues of diversity or equality, or the terms/application of the overarching national guidance.