



Protecting People Annual Report 2025-2026



**Protecting
People**
in Dundee

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Foreword

As Chairs of Dundee's Protecting People Committees and Partnerships, we are pleased to present this integrated annual report covering April 2025 to March 2026. It brings together the key achievements, challenges and priorities across our work to protect children, young people and adults from abuse, neglect and harm.

During 2025-26, partners continued to embed Dundee's more joined-up integrated Protecting People strategic arrangements. The Adults at Risk Committee and Children at Risk Committee brought together work across adult and child protection, violence against women and girls and suicide prevention, supported by shared groups focusing on learning reviews, quality assurance, performance management, workforce development and participation and engagement. The Alcohol and Drug Partnership and Community Justice Partnership continued to work alongside this wider structure and integrate their work across the shared Committee sub-groups.

As the integrated arrangements continue to develop, we will maintain a strong focus on the core responsibilities of each Committee and Partnership, while promoting more joined-up, whole-person and whole-family support for people affected by risk and harm.

A major achievement was the development of the shared foundations needed for a more evidence-informed and improvement-focused system. Partners brought together performance information across areas of risk and harm, developed an integrated quality assurance approach, completed a multi-agency workforce learning needs assessment and strengthened arrangements for learning reviews. The Family M1/M2 Learning Review was also completed and published, providing important learning for practice and partnership working.

Alongside this cross-cutting work, individual Committees and Partnerships progressed significant improvement activity. This included developing new multi-agency approaches to identifying risk and coordinating support for adults and older young people; strengthening responses to child sexual exploitation and risks experienced beyond the family home; progressing the Bairns' Hoose Pathfinder; developing prevention work across alcohol and drugs, violence against women and girls and suicide; and improving pathways, recovery support and the involvement of people and families affected by substance use. The Community Justice Partnership continued to promote early intervention, community-based support and successful community reintegration.

The report also recognises the pressures facing the partnership. These include growing demand for learning reviews, the need to sustain prevention and earlier support alongside immediate risks, financial uncertainty, new legislative responsibilities and the scale of strategic and operational change across services. Meaningful involvement of people with lived and living experience, clearer communication and maintaining partner engagement remain central to ensuring that change leads to lasting improvement.

During 2026-27, we will build on the foundations established this year. Priorities include implementing the integrated performance and quality assurance arrangements; delivering the Protecting People self-evaluation programme, risk and escalation processes; improving participation and engagement; embedding prevention; and progressing coordinated pathways for both adults and young people. Each Committee and Partnership will also continue its own focused improvement work, guided by local evidence, people's experiences and the outcomes we want to achieve for Dundee.

We would like to thank everyone who contributes to Dundee's Protecting People work. We particularly recognise the commitment of staff, volunteers, community representatives and people with lived experience who continue to share their expertise and work together every day to protect and support people across the city.



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Dundee at a Glance

Dundee is a vibrant city with strong communities, committed services and a long history of partnership working. Like many places, it also experiences significant inequalities and complex forms of harm. The figures below provide a snapshot of our city, the challenges facing people and communities, and the support available to help people stay safe, recover and thrive.

Our City



Dundee is Scotland's fourth largest city and has the second highest population density.



Dundee's population is estimated to be 149,880.



Around three quarters (74.8%) of working-age people in Dundee were economically active in 2025-26, compared with 77.7% across Scotland.

The Challenges We are Working Together to Address



Just over half of Dundee residents live in neighbourhoods ranked among Scotland's 30% most deprived, highlighting significant inequality between communities across the city.



An estimated 43% of children aged 0-15 live in neighbourhoods ranked among Scotland's 20% most deprived.



Police Scotland recorded 2,945 domestic abuse incidents and 700 sexual and gender-based crimes in Dundee.



Dundee recorded 47 drug-related deaths in 2025 and 35 alcohol-specific deaths in 2024.



There were 25 probable suicide deaths in Dundee in 2024, five fewer than in the previous year.

Protecting and Supporting People

The figures below are a small selection from the much wider range of prevention, protection and support delivered across Dundee. They illustrate the scale and breadth of some responses but cannot be combined into a total number of people supported, as individuals may use more than one service and services record activity in different ways.



Protecting adults: 2,395 Adult Support and Protection referrals were received and screened during 2025-26. Where concerns required formal intervention, 103 investigations were undertaken and 70 Initial Case Conferences brought agencies together to coordinate protection and support.



Protecting children: 100 children and young people were removed from the Child Protection Register following support and review, while 59 remained on the register at the end of the academic year.



Responding to violence against women and girls: 2,549 referrals were made to specialist women's services, 361 referrals were considered through the Multi-Agency Risk Assessment Conference to coordinate safety planning for people at high risk of domestic abuse, and 92 refuge requests were made to Dundee Women's Aid.



Alcohol, drugs and harm reduction: 543 people were referred for treatment for drug use, 558 referrals were received for alcohol use and 1,430 naloxone kits were distributed to help prevent drug-related deaths.



Mental health and suicide prevention: Hope Point supported 1,736 people through 5,953 contacts, 341 Distress Brief Interventions were delivered, and The Corner supported 1,183 young people through 1,223 contacts.



Community Justice: 95 people started diversion support, 77 received a Structured Deferred Sentence, 1,336 Justice Social Work Reports supported informed court decisions, and 116 people received voluntary throughcare and resettlement support following release from custody.

1. Protecting People in Dundee

We envision a Dundee where every individual - child, young person, and adult - is safe, supported, and empowered to thrive within inclusive, resilient communities.

Protecting People (PP) is the term that we use in Dundee to describe the work undertaken to protect children, young people and adults from abuse, neglect and harm. The PP Committees are the groups where agencies come together to lead, plan and evaluate their work to protect people from harm.

The Protecting People Integrated Strategy 2025 and accompanying Delivery Plan were developed to provide a shared, multi-agency framework for the Adults at Risk and Children at Risk Committees and the Alcohol and Drug Partnership. Together, the Strategy and Delivery Plan set out how partners would work together, use evidence and experience to improve services, and help prevent harm to people and families across Dundee.

You can read more about how partners work together to protect people at risk in appendix 1 of this report.

2. Key Achievements in 2025-2026

2.1 Cross-Cutting

During 2025-26, partners established shared arrangements for using data, quality assurance, learning reviews and workforce evidence across Protecting People. This has improved how the Committees identify common issues, agree priorities and coordinate improvement across different areas of risk and harm.

Developed an integrated Protecting People dataset and reporting approach, reducing duplication and bringing together key information across areas of risk and harm. This has supported more intelligence-led, solution-focused discussion and helped partners identify emerging concerns and shared priorities.

Developed an integrated Protecting People Quality Assurance Framework, streamlining assurance activity and reducing duplication. The Framework supports a shift from repeated annual process audits to more in-depth biennial self-evaluation focused on people's experiences, outcomes and the difference services are making, while retaining proportionate single-agency assurance of processes and service delivery. This creates greater capacity for shared learning and improvement.

Key themes from learning reviews, quality assurance, performance information, lived experience and inspection activity were brought together to identify shared priorities for improvement. This evidence will shape the 2026-27 self-evaluation and support more coordinated improvement and workforce development across the partnership.

Completed a multi-agency workforce Learning Needs Assessment to identify where staff need greater awareness, easier access to learning and more practical support. The findings will inform the refresh of the Protecting People Learning and Development Framework and help target workforce development during 2026-27 where it can have the greatest impact on confidence and practice.

Developed a Learning Quality Assurance Toolkit so that staff across different organisations receive consistent, high-quality Protecting People learning, regardless of which agency provides it.

Strengthened how Learning Review are carried out through improved guidance, templates, workforce training and more consistent involvement of frontline staff and families. These changes support reviews to be more focused, situation specific, inclusive, and help ensure that learning is translated into practical improvement.

Strengthened trauma-informed practice through workforce learning, leadership development and reflective approaches. This increased confidence in applying trauma-informed principles and reinforced the importance of supportive leadership, workforce wellbeing and organisational culture in improving services.

Improved how Protecting People communicates with staff and communities through the development of a shared vision and mission statement, a new communications strategy, and a quarterly multi-agency workforce newsletter. These arrangements support clearer, more consistent messages about risk, harm, available support and the partnership's improvement work.

Progressed delivery of **Creating Hope Together in Dundee 2024-2026**, the city's multi-agency suicide prevention plan. Work included expanding suicide bereavement support, public awareness and workforce learning, and testing new approaches with people and communities to strengthen prevention and improve access to support.

Secured funding and commissioned an independent researcher to develop a Dundee VAWG Prevention Framework. The Framework will identify effective ways to prevent gender-based violence and support a consistent, evidence-based approach across local services.

Dundee took part in the national pilot of the VAWG Local Needs Assessment Tool, which will be completed in April 2026. This will strengthen the PP Committees understanding of local need, existing support and areas for improvement, with the findings informing VAWG priorities and service development during 2026-27

As a pilot area for national chronology improvement work through IRISS, Dundee tested new approaches with five teams across children's, adult and community justice social work and developed practical resources to support more consistent and effective use of chronologies.

Developed cross-cutting workforce learning resources from Operation Recloir, sharing the multi-agency practices that contributed to the successful investigation and convictions. The learning supports staff locally and nationally across children's and adult services to recognise group - based commercial sexual exploitation, share information and coordinate support as young people move into adulthood.

2.2 Adults at Risk Committee

Agreement was secured to appoint a dedicated Development Officer to coordinate implementation of the Adults at Risk Pathway. This will increase the capacity and pace of change during 2026-27. The Pathway has two key elements: the Adult Multi-Agency Screening Hub and the Team Around the Adult and Lead Professional model.

Significant progress was made in developing the Adult Multi-Agency Screening Hub. Health, social work and police teams were co-located to strengthen joint working, with housing also contributing to the development of the Hub. Daily multi-agency screening of adult concern referrals is intended to be fully operational in 2026-2027.

The Team Around the Adult and Lead Professional model progressed from concept to draft guidance. A workforce consultation is planned for 2026-27 to support implementation of the model as the main multi-agency approach for coordinating ongoing support and risk management for adults with multiple and interconnected needs. It is intended to enable earlier, better coordinated support, including for adults who do not meet the threshold for statutory Adult Support and Protection intervention.

Dundee participated in the **Care Inspectorate self-evaluation workstream 4**. The learning supported the design of the new adults at risk pathway work and the development of the new biennial protecting people self-evaluation approach for 2026-2027. This intended to strengthen how partners use evidence to assess experiences, outcomes and areas for improvements.

Three adult learning reviews were commissioned by the Adults at Risk Committee during 2025-26, with a Thematic Review on Alcohol-Related Brain Damage being completed. Positive feedback from the Care Inspectorate on the ARBD thematic review provided assurance that the developing approach was proportionate, evidence-based, well governed and focused on improvement. Regarding the remaining two, one is expected to conclude early in 2026-27, and the other to be undertaken throughout 2026-27.

Improved the accuracy and consistency of Adult Support and Protection reporting by revising referral-counting arrangements and aligning the local dataset more closely with national reporting. This will support more reliable monitoring of demand, clearer comparison over time and better-informed decisions about where improvement is needed.

Dundee was an implementation feedback site for Scotland's new Adult Support and Protection Learning and Development Framework. We reviewed and aligned our existing learning offer with the national model, identified practical gaps and usability issues, and provided feedback to support consistent, accessible and high-quality learning across Scotland. The newly updated Dundee ASP learning Framework will be launched in 2026-2027.

2.3 Children at Risk Committee

Multi-agency arrangements for older young people continued to develop, including plans for a co-located Young People's Hub, bringing key services together due to launch in 2026-2027. This includes links with sexual health and employability support to help vulnerable young people access coordinated support and move towards positive destinations after leaving school.

Agreed a more streamlined multi-agency response to concerns about 16- and 17-year-olds. In line with the Children (Care and Justice) (Scotland) Act 2024, young people under 18 will be approached as children first, while both child protection and Adult Support and Protection legislation can be used where appropriate. This will support more consistent decision-making and safer transitions for young people, including those no longer in education.

Year two of the Tayside **Bairns' Hoose Pathfinder** strengthened support for children, young people and families affected by trauma and abuse. Progress included further development of the health pathway, holistic wellbeing support from The Corner, improvements to the Seymour House environment and additional family support. Feedback from children, young people and families continued to inform service improvements.

Three child protection learning reviews were commissioned by the Children at Risk Committee in 2025-26, The Joint Learning Review between Dundee and West Dunbartonshire for Child M1 and M2 completed and published in December 2025, while the remaining reviews will be concluded in early 2026-27.

Progressed the review of Dundee's Care and Risk Management arrangements as part of wider work to strengthen coordinated responses for older young people who present significant risks or complex needs. The updated arrangements will support clearer multi-agency assessment, planning and responsibility for managing risk.

2.4 Alcohol and Drug Partnership

Reviewed the Alcohol and Drug Partnership Delivery Plan alongside changing local needs and drug trends. This has provided a stronger basis for setting focused priorities from 2026-27 and directing partnership activity towards the areas where it can have the greatest impact.

The National Benchmarking for MAT Standards highlighted Dundee in a positive position in terms of delivering the inputs required to meet the Standards, in line with the stage of implementation. Work continues to establish a way to demonstrate the impact of the MAT Standards, with the local experiential data programme being central to this.

A Female Drug Death Deep Dive examined the experiences of women who use substances across their lives. It identified priorities for earlier intervention, stronger responses following a near-fatal overdose and more compassionate support when children are removed from their care.

A graduate post supported implementation of the Alcohol and Drugs Prevention Framework. Workforce learning was delivered, and work with services helped shape a practical toolkit for organisations planning and delivering prevention activity.

The ADP continued to fund Planet Youth and locality-based prevention activity, supporting communities to develop local approaches to reducing alcohol- and drug-related harm.

The Year of Kindness challenged the stigma experienced by people affected by substance use and promoted compassion, recovery and inclusion through community activity and lived-experience voices.

A substance use workforce wellbeing survey highlighted strong commitment and a clear sense of purpose among staff, while identifying priorities for organisational support and a coordinated response to vicarious trauma.

Commissioned the University of Dundee to assess local need for a drug consumption facility, drawing on learning from the Thistle Centre in Glasgow. The findings will help the partnership understand whether this approach could meet local need and inform future decisions about alcohol and drug support in Dundee.

An independent evaluation of Dundee's residential rehabilitation pathway was commissioned. Early feedback identified positive practice and outcomes across both residential placements and community-based rehabilitation, with the full findings expected in 2026-2027.

The Dundee Alcohol Pathway was reviewed, and changes were introduced to improve the speed and ease of access to support. Work also continued to increase frontline use of Alcohol Brief Intervention.

The ADP commissioned Scottish Families Affected by Alcohol and Drugs to review how families are supported and involved in a loved one's recovery. The review highlighted what is working well and where services can work together more effectively to improve support for families informing improvement priorities for 2026-2027.

2.5 Community Justice Partnership

Strengthened early intervention through the new Court Facilitation Team, updated diversion arrangements and improvements to Bail Supervision.

Supported people at key transition points through stronger joint working across justice, health, housing and third-sector services, including custody referral, throughcare and reintegration pathways.

Improved access to health support by co-locating Keep Well Nurses within Community Justice services. Holistic health assessments and consultations helped people involved in the justice system address unmet health needs that can affect their wellbeing, engagement and rehabilitation.

Reduced homelessness following release from prison, with applications where prison was the last address falling to their lowest level since 2007-08.

Delivered visible community benefit through Unpaid Work projects and ongoing activity across various locations, supporting neighbourhoods, schools, community facilities and local organisations. This demonstrates a strong commitment to community improvement, environmental enhancement, and support for local organisations and vulnerable residents.

Sixty six individuals were supported through the Scottish Government's Early Release Scheme (ERS) which was introduced in response to sustained pressures on the prison population. Local partners responded proactively to the scheme, contributing to risk assessment and release planning processes and coordinating community-based support. This collaborative approach helped ensure public protection considerations were balanced with effective reintegration and continuity of support.

3. Data

The figures in this section help explain the needs and experiences of people across Dundee and the level of support provided by local services. They also help us understand where risks and pressures are changing and where further improvement may be needed. The figures do not tell the whole story, so we consider them alongside what people tell us, what staff and services are learning, and findings from reviews and other improvement work. The time periods covered vary and are explained in each section.

3.1 Adult Support and Protection (ASP)

2,395

Adult Support and Protection referrals in the year 2025-26 **an increase of 22% from the previous year**. Of all referrals, 23% progressed to an inquiry or investigation.



54% women

45% men

Women accounted for 54% of adults with an inquiry and men accounted for 45%, representing a more even gender profile than in previous years.



There were 103 ASP investigations and 70 Initial Case Conferences were held.



The largest age group among adults with an inquiry (with or without investigation) was 55-64 years (14%), followed by 25-39 years (13%).

Across inquiries with and without investigation, **general welfare concerns** and **financial harm** were the most frequently recorded types of harm.



73%

Almost three quarters (73%) of recorded harm occurred in the adult's own home.



3.2 Child Protection

The Children at Risk dataset is reported by academic year. The figures below cover 2025-26.

18 **Child Protection Orders** were granted, down from 42 in 2024-25.

96 Children and Young People were considered at **Initial and Pre-birth Child Protection meetings**.

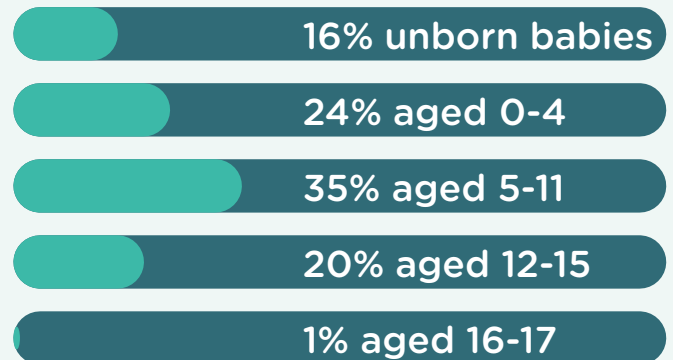
3,476 police concern reports were received by the Multi-Agency Screening Hub. These related to 523 children who were the subject of a police child protection concern.



435 children and young people received an **Initial Referral Discussion**.

88 Children and young people were added to the **Child Protection Register** over the year.

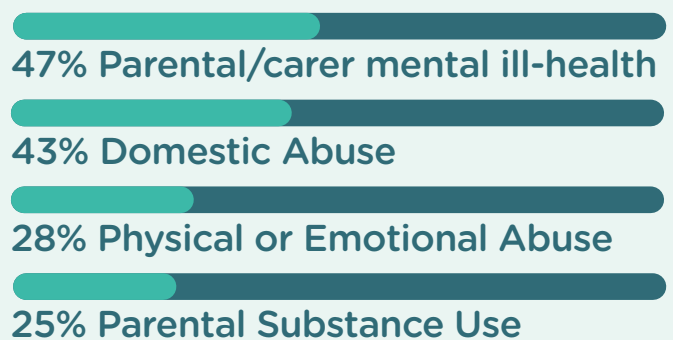
The **age profile** of those added to the Child Protection Register was:



100 children and young people were **removed** from the **Child Protection Register**, and **59 remained on the register** at the end of the academic year.



The **most frequently recorded concerns** among 2025-26 registrations were:



More than one concern may be recorded for each child.

3.3 Alcohol and Drug Partnership

Dundee had **47 drug-related deaths** in 2025 reported by the National Records of Scotland. Increase of 12% from previous year.

Dundee had the **second highest drug death rate** of all council areas at 34 per 100,000. (Scotland 21.6 per 100,000)



The **highest age group for drug deaths was that of ages 45 to 54**, and the majority of deaths were that of men (64%).

Drugs implicated in cause of death:

66% Opioids

53% Benzodiazepine

45% Gabapentin

45% Cocaine

There were **350 Non-fatal overdoses** (NFODs) in 2025-26.

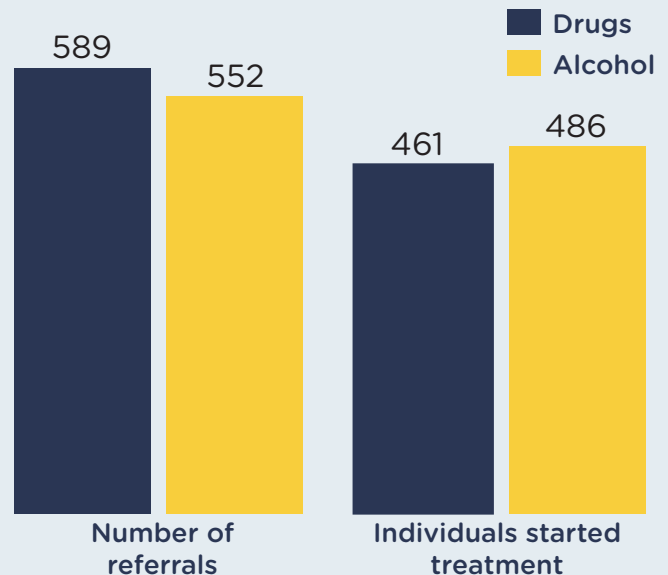
All individuals were offered assertive outreach through the NFOD pathway.



1,430 Naloxone kits were distributed.



Number of referrals to Dundee Drug and Alcohol Recovery Service (DDARS) and number of individuals started treatment:



There were **286 drug-related hospital emergency admissions** in 2025-26; a decrease of 4% from the previous year, 2024-25.

There were **35 alcohol specific deaths** in 2024; Dundee had the 5th highest 5-year mortality rate in Scotland when adjusted for age.

There were **453 alcohol-related emergency hospital admissions** 2025-26; this is an increase of 7% from 2024-25.



3.4 Violence Against Women and Girls



Number of individuals referred to VAWG specialist services:



92 Refuge requests to Dundee Women's Aid.

361 MARAC referrals.



Referrals were **predominantly made** to services **by Police**.

- **700 sexual/gender-based crimes** recorded by Police Scotland.
- **882 domestic crimes** recorded by Police Scotland.
- **2,945 domestic abuse incidents** recorded by Police.



52%

52% of children added to the **Child Protection Register** in 2025-26 had **domestic abuse recorded** as one of the contributing factors.

4% of children added to the **Child Protection Register** had **Sexual abuse recorded** as one of the contributory factors.

3.5 Suicide

Based on the most recent National Records of Scotland report, in 2024:

25 people died by probable suicide in Dundee (a **decrease of five** from 2023). Of these deaths, **76% were male**.



Nationally, the rate of **probable suicide mortality** was **2.5 times as high** in the **most deprived SIMD quintile** compared to the least deprived.



Dundee had the second highest suicide rate of all council areas at **19.9 per 100,000** (Scotland **14 per 100,000**).



Age-specific rates of probable suicide mortality were **highest for those aged between 25 and 64**.

In 2025-26 data on activity provided by suicide prevention services was collected and will be available for comparison from next year.

3.6 Community Justice

184 referrals

were received for assessment for diversion from prosecution, with **95 people starting diversion support** (52%).



12 people received bail supervision as an alternative to being remanded in custody while awaiting court proceedings.

1,336 Justice Social Work Reports were prepared to help courts make informed sentencing decisions.



77 people received a Structured Deferred Sentence, giving them an opportunity to engage with support before final sentencing.

75 people were supervised in the community on licence or parole following a long-term prison sentence.



460 Community Payback Orders were imposed in total:

- **114** included unpaid work only.
- **190** included supervision only.
- **156** included both unpaid work and supervision.
- **68** included supervision and an accredited programme.
- **25** included unpaid work, supervision and an accredited programme.



116 people received voluntary throughcare and resettlement support following release from custody.

226 people serving long-term prison sentences were supported by Justice Social Work.

38 Home Detention Curfew assessment reports were completed to inform decisions about whether people could serve part of their sentence in the community under monitored conditions.



4. Key Challenges

Learning Review demand and capacity. The continuing high volume of Learning Review referrals and commissioned reviews demonstrates a strong commitment to learning across the partnership. However, it has also placed significant pressure on the capacity required to complete reviews promptly and implement the resulting improvements. Maintaining a proportionate balance between undertaking reviews and ensuring that learning leads to sustained change will remain an important challenge.

Reaching and involving different audiences. Communicating clearly with communities, staff and people who use services remains challenging because each group needs information in different formats and through different channels. Partners will continue to coordinate campaigns and workforce communications across agencies, prioritising a smaller number of clear and consistent key messages so that important information is easier to understand and act on.

Turning lived experience into influence. The partnership has strengthened its commitment to involving people with lived and living experience, but meaningful participation requires time, trust and appropriate support. The next challenge is to embed people's voices within ongoing performance management and quality assurance, rather than relying mainly on one-off consultation. This includes bringing existing participation groups together more effectively and considering their insight alongside performance data, audits, learning reviews, complaints and workforce feedback. Bringing these different sources of evidence together will help the Committees develop a fuller understanding of people's experiences, identify recurring themes and show how people's views influence priorities and improvement.

Protecting space for prevention. Immediate risk and rising demand can draw resources towards crisis responses. The challenge is not only to maintain investment in prevention and earlier support, but to embed these approaches within commissioning, service design and routine multi-agency planning. This includes aligning systems around Team Around the Adult and Lead Professional arrangements for adults, and Getting It Right for Every Child and child planning meetings for children and families, so that needs are identified earlier, support is coordinated and escalation to crisis is reduced.

Sustaining services within financial constraints. Continued pressure on public-sector budgets and short-term funding creates uncertainty for services supporting people at risk of harm. Collaborative commissioning and funding arrangements will remain important in managing risk, maintaining essential support and making the best use of available resources.

Responding to legislative and policy change. Protecting People services continue to adapt to major national reforms, including implementation of the Children (Care and Justice) (Scotland) Act 2024 and incorporation of the United Nations Convention on the Rights of the Child into Scots law. The **Criminal Justice Modernisation and Abusive Domestic Behaviour Reviews (Scotland) Act 2025** also introduced a new statutory framework for domestic homicide and domestic abuse-related suicide reviews from April 2026. Translating these changes into clear local procedures, workforce learning and consistent multi-agency practice will require sustained partnership focus during 2026-27.

Supporting people through transitions between services and systems. People can be particularly vulnerable when moving between children's and adult services, leaving institutional settings, or transferring between health, social care, justice, housing and third-sector support. The collective challenge is to strengthen information sharing, planning and continuity of support so that people do not experience gaps, repeated assessments or unclear responsibility at important transition points.

Responding to multiple and interconnected needs. Many people affected by risk and harm experience overlapping challenges, including trauma, poor mental health, substance use, housing instability, poverty and social isolation. These needs do not fit neatly within individual service boundaries. The collective challenge is to coordinate support across organisational thresholds, avoid unaligned responses and provide a more joined-up, whole-person and whole-family approach.

Sustaining improvement through system change. During 2025-26, partners continued to build a more joined-up strategic approach to protecting people while services for adults, children and young people were also changing how they identify risk and coordinate multi-agency support. Making these changes while continuing to provide essential day-to-day support has required sustained effort across the partnership. The challenge is to keep people engaged, connect strategic planning with practice and ensure the foundations developed during the year lead to lasting improvements. In a difficult financial environment, this will require clear priorities, shared responsibility and the best use of available resources.

5. Key Priorities for 2026-2027

5.1 Cross-Cutting

Implement the Integrated Protecting People Performance Management Framework and deliver the 2026-27 biennial self-evaluation programme, bringing together performance information, multi-agency audit, workforce feedback and people's experiences to identify changing needs and provide clearer assurance about outcomes and improvement.

Introduce a proportionate referral screening and prioritisation process for multi-agency Public Protection Learning Reviews, ensuring that available capacity is balanced between undertaking reviews and implementing and monitoring the resulting learning.

Implement a Protecting People Participation and Engagement Framework that strengthens how lived and living experience, community voice and coordinated communications influence planning, quality assurance and improvement.

Refresh the Protecting People Learning Framework using the 2025-26 Learning Needs Assessment, with clearer multi-agency learning pathways and improved evaluation of impact on workforce confidence and practice.

Complete the realignment of the Protecting People Strategic Risk Register, with shared risks identified, escalated and reported consistently to the Committees and Chief Officers Group.

Embed prevention approaches across Protecting People planning and practice, including implementation of the Alcohol and Drugs Prevention Framework and completion of the Violence Against Women and Girls Primary Prevention Framework.

Revise and embed Dundee's Multi-Agency Dispute Resolution and Escalation Procedure to support earlier resolution of professional differences, consistent escalation of unresolved concerns and shared responsibility for keeping people safe.

Agree a Dundee multi-agency approach to neglect, establishing shared definitions, thresholds and priorities for improvement across services supporting adults and children at risk.

5.2 Adults at Risk Committee

Implement the Adults at Risk Pathway, including the Adult Multi-Agency Screening Hub and Team Around the Adult and Lead Professional model, to support earlier identification of risk, coordinated decision-making and clearer responsibility for adults with multiple and interconnected needs.

Launch and embed Dundee's refreshed Adult Support and Protection Learning and Development Framework, aligned with the new national framework, to support consistent, accessible and high-quality learning across the workforce.

5.3 Children at Risk Committee

Launch the Dundee Young People's Hub at Crichton Street to strengthen coordinated support for older young people and improve transitions into adulthood.

Strengthen Dundee's approach to contextual safeguarding and child sexual exploitation, using children and young people's experiences, local evidence and external inspection findings to improve coordinated responses to online and community-based harm beyond the family home.

Implement updated Care and Risk Management arrangements to provide a clearer and more consistent multi-agency approach to assessment, planning and risk management.

5.4 Alcohol and Drug Partnership

Put the Charter of Human Rights into practice, further embedding dignity, respect and compassion across health and care services for people affected by substance use.

Strengthen the multi-agency response to near-fatal overdose and drug-related harm, improving overdose prevention, access to harm-reduction support and coordinated support for people experiencing both mental health and substance use needs.

Improve support for people affected by harmful alcohol use and non-opioid drugs, including cocaine, by developing more accessible and coordinated pathways.

Expand digital inclusion for people affected by substance use, focusing on harm reduction, women and the Dundee Residential Rehabilitation Pathway, to improve access to digital tools, information and opportunities that support engagement, recovery and inclusion.

5.5 Community Justice Partnership

Continue strengthening early intervention, diversion, Bail Supervision and Bail Accommodation as credible alternatives to custody.

Implement the Community Justice improvement and audit programme, using performance information, quality assurance and feedback to strengthen practice and outcomes.

Modernise Unpaid Work and strengthen links with adult learning, employability and community opportunities so that placements provide visible community benefit while helping people build skills, confidence and routes towards positive destinations.

Continue to Improve throughcare, health, housing and reintegration pathways for people leaving custody.

Develop a new Memorandum Of Understanding with the Scottish Prison Service at the Bella Centre informed by the findings of the **Care Inspectorate Thematic Inspection of Prison Based Social Work**.

Afterword

Working together across services, communities and partnerships remains central to protecting people in Dundee. The evidence and learning set out in this report will help us build on progress, focus on what matters most to people and continue improving how we prevent harm and provide support.

Appendix 1.

Protecting People in Dundee

We envision a Dundee where every individual - child, young person, and adult - is safe, supported, and empowered to thrive within inclusive, resilient communities.

What is Protecting People in Dundee?

Protecting People (PP) is the term that we use in Dundee to describe the work undertaken to protect children, young people and adults from abuse, neglect and harm. Our approach to PP includes:

- Child protection
- Adult support and protection
- Addressing violence against women and girls
- Addressing alcohol and drug use
- Suicide prevention
- The management of sexual and violent offenders (Multi-Agency Public Protection Arrangements)
- Community Justice

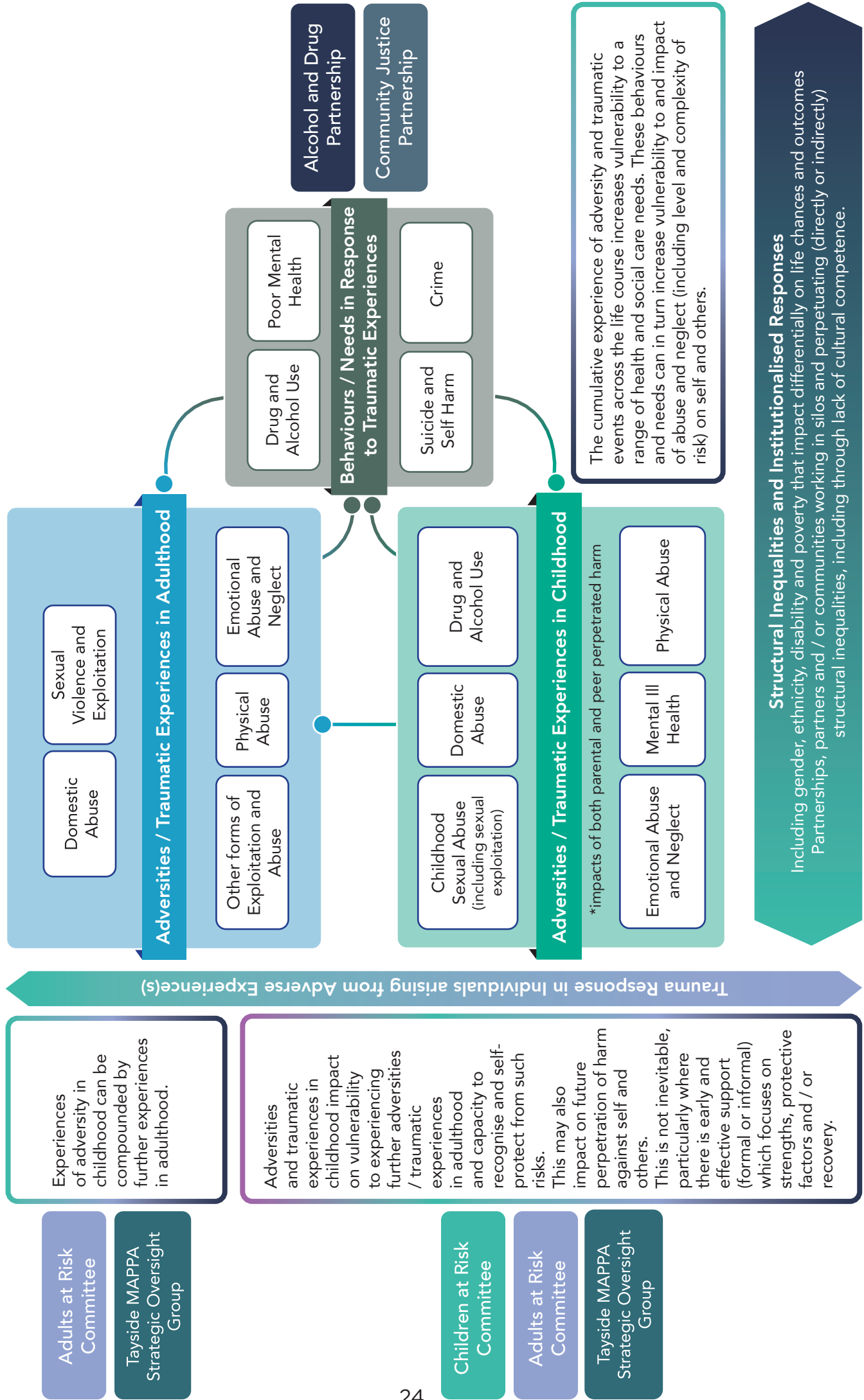
By working together, agencies from across the public sector (Dundee City Council, NHS Tayside, Police Scotland, Scottish Fire and Rescue Service), third sector (voluntary and community organisations) and independent sector (social care providers) aim to:

- Improve arrangements for identifying and supporting people who have been harmed or are at risk of harm. This includes involving people who have experienced harm and who have been supported through public protection services in helping to improve services and supports.
- Raise awareness of PP issues across communities, including signs that people might be at risk of harm and how to report this.
- Work together with communities to help prevent harm happening in the first place.
- Support the workforce who deliver PP service, including through learning and development activities; and
- Monitor data and other types of information about the impact services and supports have on vulnerable people so that services can learn from what is good and work together to change to things that need to be improved.

Services also work together across Tayside, and with national organisations to share learning, resources and best practice.

Why Have a Protecting People Approach?

In Dundee, an integrated PP approach informs all our work to protect people at risk of harm. We know that many people in Dundee have multiple, complex and changing needs which typically arise from experiences of abuse, neglect and trauma throughout their lives. The graphic below describes the interconnected nature of PP work and how experiences of trauma can impact life experiences and outcomes.

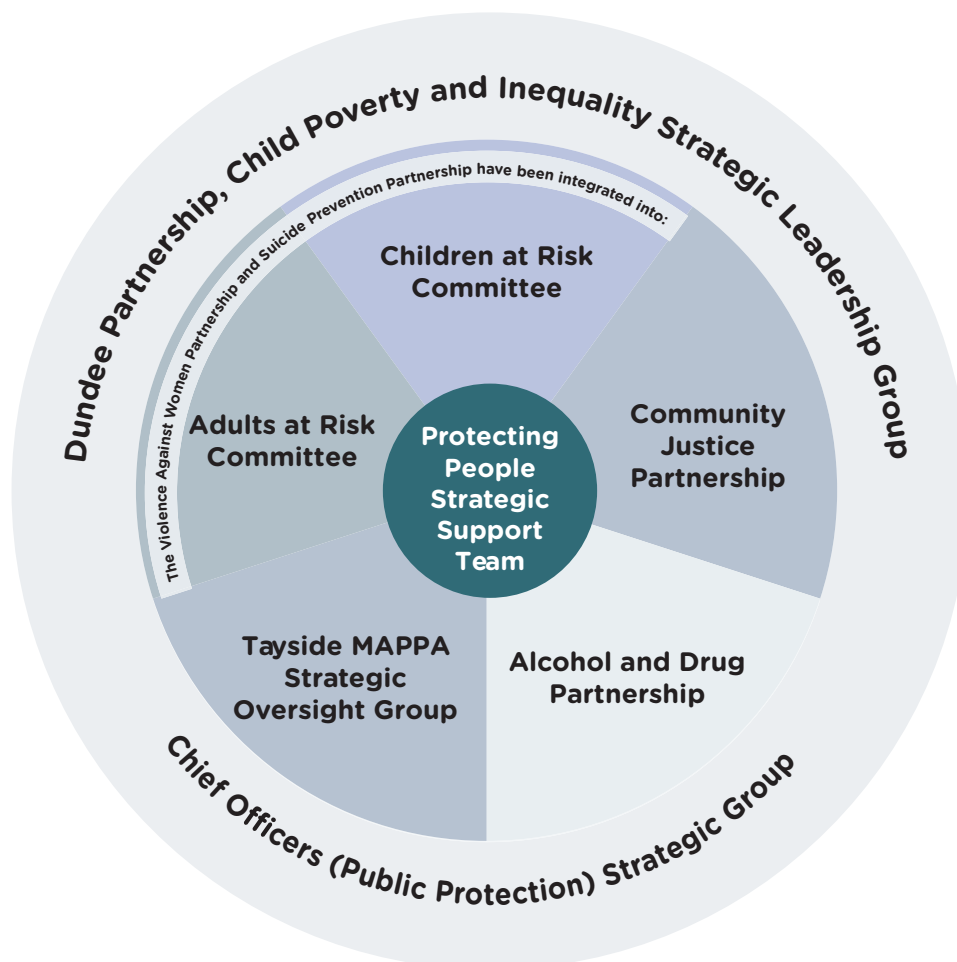


What are the Protecting People Committees?

The PP Committees are the groups where agencies come together to lead, plan and evaluate their work to protect people from harm. These groups have a strategic focus. This means the Committees:

- Take an overview across all arrangements in Dundee for PP.
- Look for key themes and priorities.
- Identify where good practice can be spread across services.
- Highlight where there are gaps and areas for improvement.
- Focus on multi-agency working.

Despite the partnership being multi-agency, each individual service will also have their own internal arrangements for making sure their PP responses are in place and are of a good quality.



Each of the Committees is led by an Independent Chair. This is someone who does not work for local agencies and has significant knowledge, skills and experience in specific areas of PP, as well as experience of leading services, change and improvement. They have an important role in supporting and leading improvement work, as well as challenging local agencies where they think improvement is needed.

The Committees bring together people from public services, voluntary and community organisations, and independent care providers. They include senior leaders and, on some Committees, community representatives who have personal or family experience of harm and support services.

The PP Committees are supported by a number of smaller working groups that cover all PP areas of harm which bring together staff from across local services to contribute to sharing good practice, plan improvements and put agreed changes into action.

Protecting People Transition and Cross-Cutting Working

During 2024-25, the Protecting People structure began its transition from separate Committees focused on individual types of harm to a cross-cutting, integrated model. The Children at Risk (CAR) and Adults at Risk (AAR) Committees now bring together work previously led through child protection, adult support and protection, violence against women and girls, and suicide prevention. This is intended to support a more joined-up, holistic, whole-family and trauma-informed response to risk, vulnerability and harm in Dundee. This will enable us to create a system that provides greater outcomes and demonstrates our impact rather than activity.

The transition continued during 2025-26 with the launch of integrated sub-groups to deliver priorities set by the Committees. The Protecting People Chief Officers Group (COG) also assumed governance oversight of the Community Justice Partnership. MAPPA, The Community Justice and the Alcohol and Drug Partnership continue to operate as distinct partnerships, while working alongside the wider Protecting People structure.



A Committee development session in April 2026 confirmed strong support for Dundee's integrated Protecting People approach. Partners reported better collaboration, broader ownership of shared priorities and a stronger understanding of how different forms of risk and harm connect. The shared sub-groups have also improved links between evidence, learning and action. During 2026-27, the structure will aim to be streamlined further, with clearer roles, stronger links to operational services and improved accountability between the Committees and their sub-groups.

Protecting People Integrated Strategy and Delivery Plan 2025-2026

In response to the transition, the Protecting People Integrated Strategy 2025 and accompanying Delivery Plan were developed to provide a shared, multi-agency framework for the Adults at Risk and Children at Risk Committees and the Alcohol and Drug Partnership. Covering September 2025 to August 2026, the Strategy brought together previously separate priorities and improvement activity within a more streamlined, collaborative and whole-system approach to preventing harm and protecting people in Dundee.

The Strategy drew on national priorities, local data, strategic risks, inspections, audits, learning reviews, workforce feedback and the views of communities and people with lived experience. It identified cross-cutting challenges including poverty and socioeconomic deprivation, mental health and substance use, gendered patterns of harm, intergenerational and early-life trauma, and increasing demand for coordinated multi-agency responses. The evidence highlighted the need to strengthen risk assessment, communication and collaboration, workforce support, performance and quality assurance, and the involvement of people with lived and living experience.

Six priorities shaped the Strategy and Delivery Plan:

- embedding shared Protecting People values across all areas of work;
- strengthening public, community and lived-experience voice;
- improving performance through data, audit, self-evaluation and learning reviews;
- strengthening the identification, mitigation and monitoring of risk;
- driving continuous practice improvement; and
- prioritising prevention.

Together, the Strategy and Delivery Plan set out how partners would work together, use evidence and experience to improve services, and help prevent harm to people and families across Dundee.

