

**ITEM No ...2.....**

**REPORT TO: COMMUNITY SAFETY AND PUBLIC PROTECTION COMMITTEE -  
12 FEBRUARY 2018**

**REPORT ON: ADULT SUPPORT AND PROTECTION COMMITTEE –  
INDEPENDENT CONVENORS ANNUAL REPORT**

**REPORT BY: CHIEF OFFICER HEALTH & SOCIAL CARE PARTNERSHIP**

**REPORT NO: 47-2018**

**1.0 PURPOSE OF REPORT**

The purpose of this report is to advise Committee that the Independent Convenor of the Adult Support and Protection Committee has produced his Annual Report for the for the period April 2016 - March 2017 which includes a summary of the work undertaken and the priorities recommended for the coming year.

**2.0 RECOMMENDATIONS**

It is recommended that the Community Safety and Public Protection Committee:

- 2.1 Note the contents of the Independent Convenor's Report.
- 2.2 Note the progress that has been made in developing an effective partnership response to Adult Support and Protection issues in the city.
- 2.3 Note the progress achieved in response to the Independent Convenor's recommendations for 2016 – 18 (section 4.4).
- 2.4 Note the Independent Convenors commitment to bring regular updates on progress to the attention of the committee (section 4.5.3).

**3.0 FINANCIAL IMPLICATIONS**

- 3.1 None

**4.0 MAIN TEXT**

- 4.1 In response to serious shortcomings in the protection and safeguarding of adults at risk of harm in Scotland, the Scottish Government introduced the Adult Support and Protection (Scotland) Act 2007. In line with the requirements of the Act, the Dundee Adult Support and Protection Committee was established in July 2008. Colin McCashey was appointed as Independent Convenor in November 2013.

The main aim of the Adult Support and Protection (Scotland) Act 2007 is to keep adults safe and protect them from harm.

The Act defines an adult at risk as people aged 16 years or over who:

- are unable to safeguard their own well-being, property, rights or other interests; and

- are at risk of harm; and
- because they are affected by disability, mental disorder, illness or physical or mental infirmity, are more vulnerable to being harmed than adults who are not so affected.

This is commonly known as the 3 point test. For an adult to be at risk in terms of the Adult Support and Protection (Scotland) Act 2007, the adult must meet all three points above.

- 4.2 Section 46 of the Act requires the Independent Convenor to prepare a Biennial Report outlining the activities of the Adult Support and Protection Committee and more widely the progress made in Dundee in protecting adults at-risk of harm. The report is organised around a number of themes agreed by the Adult Support and Protection (Scotland) Act 2007 Code of Practice (Revised April 2014). The last Biennial Report was published in 2016 with the next due summer 2018.
- 4.3 In addition to the biennial report required by statute, the Independent Convenor of Dundee Adult Support and Protection Committee produces an annual report noting the progress of the identified priorities.
- 4.3 The report contains updates on the commitment to ensure that the protection of people of all ages is a key strategic priority, as well as wider developments to strengthen multi-agency responses to Protecting People concerns. It outlines how the Adult Support and Protection Committee has continued to work closely with all relevant partners, including the Integrated Joint Board, the Community Safety Partnership and relevant Strategic Planning Groups, to ensure strategies and priorities are aligned and coordinated.
- 4.4 The Independent Convenor's Biennial Report 2016-2018 set out seven recommendations to progress a range of aspects of multi-agency work regarding adult support and protection. During the period 2016-2017 progress has been made in addressing these recommendations, including the following key developments:
- Whilst referrals from GP's remain low links have now been formed with Ninewells Hospital and Medical school which allows medical students set for general practice to participate in awareness raising and training sessions for Adult Support and Protection.
  - In February 2017 work commenced on a Health and Social care Partnership(HSCP) Public Protection Quality Assurance Plan which resulted in the formation of a Health and Social Care Partnership Quality Assurance Group. The improvement of communication between the HSCP and GP's features in this plan.
  - NHS Tayside has now established effective representation on the Adult Support and Protection Committee. They have also developed strategic and delivery groups to progress adult protection work, including developing and promoting ASP work within the NHS, improving communication and sharing information effectively.
  - Independent interviews were undertaken by Dundee Independent Advocacy Service (DIAS) during 2016 to evaluate the effectiveness of advocacy services provide to adults at risk.
  - Links have been established with the various Strategic Planning Groups (SPG's) which were formed in response to the integration of Health and Social Care. The ASP convener has been invited to each SPG and, conversely, SPG members are now represented on the ASP Committee.

- Dundee Alcohol and Drug Partnership is developing a strategy that explicitly sets out how services are linked with the HSCP, including adult protection responsibilities.
- A Frailty Strategic Planning Group has been established with a focus upon how local practice links to the National Strategies, and early intervention across Dundee.
- The ASP Reporting Framework has been updated to reflect learning from self-evaluation and reporting on outcome of audits and the impact on service users, carers and communities is now in place.
- Work has continued to progress in implementing and revamping current information in regards to the Early Indicator of Concern (EIC) tool, including implementation of the EIC tool within Dundee Care Homes.

#### **4.5 Areas for Further Improvement and Recommendations**

- 4.5.1 At the time of writing Dundee is one of six local authorities participating in the first thematic inspection of adult support and protection undertaken by The Care Inspectorate and Her Majesty's Inspectorate of Constabulary in Scotland. This will focus upon specific areas, namely, outcomes, key processes and leadership.
- 4.5.2 The strengths and areas for development identified by the inspection process will, together with the ongoing recommendations from the 2016-18 Biennial Report will be the focus of short to mid-term activity undertaken by the committee, inform the content of the fifth Biennial Report covering 2016-18 and influence further recommendations to keep adults in Dundee safe today and into the future.
- 4.5.3 The Independent Convenor will inform members of further progress in developing response to adults at risk through the Community Safety and Justice Executive Board.

#### **5.0 Policy Implications**

- 5.1 This report has been screened for any policy implications in respect of Sustainable Development, Strategic Environmental Assessment, Anti-Poverty, Equality Impact Assessment and Risk Management.
- 5.2 There are no major issues

#### **6.0 Consultations**

- 6.1 The Chief Officers Group (Protecting People), Council Management Team and the Dundee Adult Support and Protection Committee have been consulted in the preparation of this report.

#### **7.0 Background Papers**

- 7.1 None

**DAVID W LYNCH,**

**CHIEF OFFICER HEALTH & SOCIAL CARE PARTNERSHIP**

**31<sup>st</sup> JANUARY 2018**



# **City of Dundee Adult Support & Protection Committee**

## **Independent Convenor's Report to the Dundee City Council Community Safety and Public Protection Committee**

**April 2016- March 2017**



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**With thanks.**

As Independent Convenor of the Dundee Adult Support and Protection Committee, I am pleased to present my midterm report as convenor for the period 2016/17 to the Community Safety & Public Protection Committee.

I am required by statute to prepare a Biennial Report outlining the activities of the Adult Support and Protection Committee and more widely developments made in Dundee in protecting adults at-risk of harm. This annual report provides midterm continuity between my biennial reports but also an opportunity to review the progress of the recommendations made in 2016.

I am pleased to note the continued development of Adult Support and Protection issues within the NHS and the shared responsibility maturing within the Health and Social Care Partnership.

The review of early screening and subsequent improvement plan has contributed to earlier intervention and timely and proportionate responses to concerns of risk.

The work undertaken by the committee by Dundee Independent Advocacy Service (DIAS) into the experience of adults at risk is informing the development of existing and commissioning of future services.

I would like to express my gratitude to members of the Committee, and to individuals within the Agencies with whom I work, for the support they have provided to me, and for their demonstration of exceptional levels of professionalism and commitment. I think it would be fair to say that collectively we have worked hard to support and protect adults at risk of harm in Dundee.

Furthermore, there is clear evidence that the work of the agencies goes far beyond the statutory definition of vulnerable people, and this I welcome.

Colin McCashey  
Independent Convenor  
City of Dundee Adult Support and Protection Committee





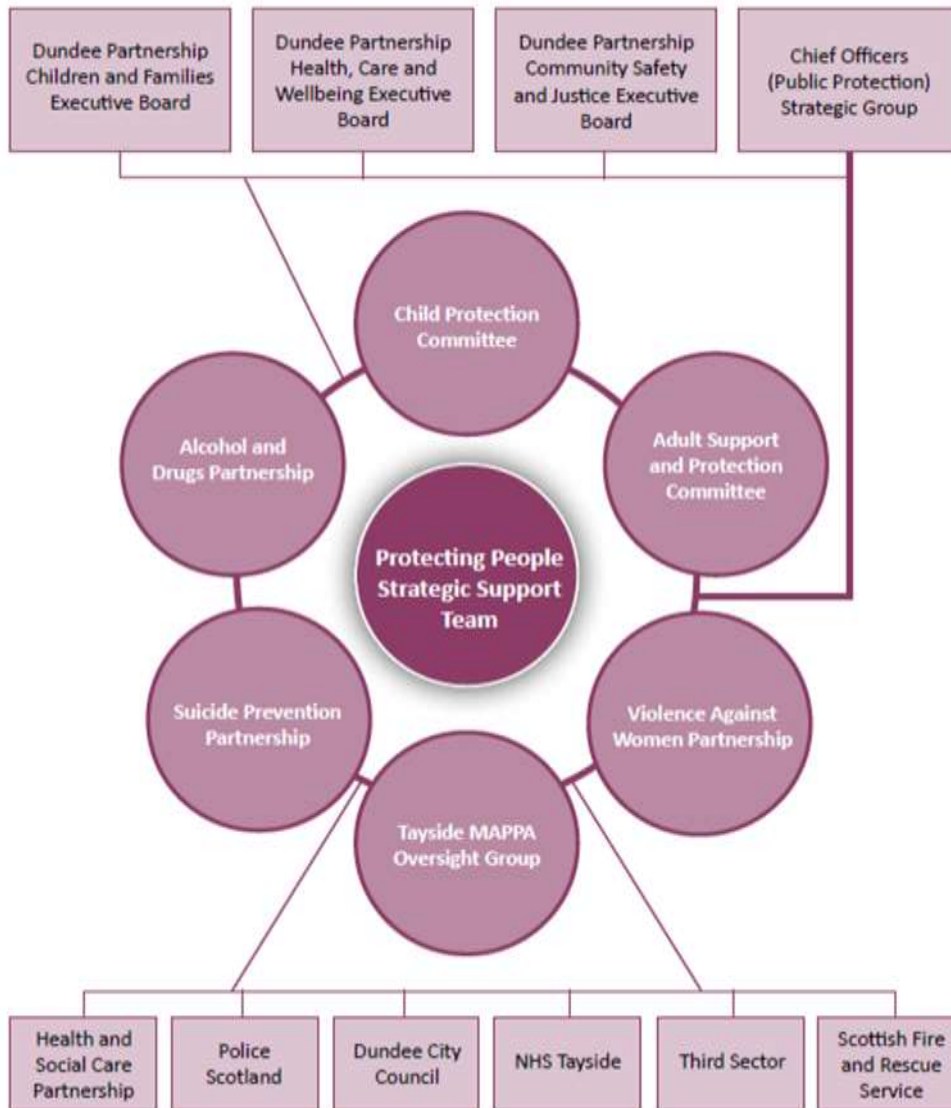
## 1. INTRODUCTION AND CONTEXT

The Adult Support and Protection Committee sits within the work of Protecting People which covers Adult Protection, Child Protection, Violence Against Women, Alcohol and Drugs and Multi Agency Public Protection Arrangements (MAPPA). There are three Protecting People groups which consider Self Evaluation, Communication and Learning and Workforce Development.

The Chief Officers of Dundee City Council, NHS Tayside and Police Scotland Tayside Division, individually and collectively, lead and are accountable for, the development of work in the area in relation to Protecting People Services. This includes ensuring the effectiveness of each of the component committees/partnerships. This places the work in a more holistic framework in which protection is undertaken in an integrated fashion.



The Chief Officer Group is the strategic forum for public protection in Dundee with responsibility for shaping the operational development of the public protection arrangement. As such it will work through public safety and partnership committees statutory and otherwise to assess risk and to work to reduce it. The image below illustrates the relationship between the various bodies and groups to protect the people of Dundee.



The delivery of Adult Support and Protection processes in Dundee is administered by a team who arrange Adult Support and Protection meetings, manage referrals, minute meetings and collate performance data. This team continues to work efficiently, flexibly and effectively in delivering these key supporting tasks.

The role of Lead Officer to the Adult Support and Protection Committee was set up in July 2013 and focuses on progressing the work of the Committee through its subgroups and the Protecting People meetings. Now entitled “Lead Officer protecting People” post provides an effective link between relevant agencies as well as co-ordinating within these agencies and with the Independent Convenor. There are currently three subgroups: Financial Harm, Policy, Procedures and Practice Task Group and a Stakeholder’s Group. The work undertaken by these groups is detailed in subsequent sections.

The past year has been a period of considerable change in the landscape of the main statutory bodies for Adult Support and Protection: Councils, Health and Police.

This report covers the first full year of operation of the Dundee Health and Social Care Partnership (HSCP). Adult Support and Protection work is one of the areas where local authority functions are delegated to the HSCP and the Integrated Joint Board is ‘host agent’ for the Protecting People Team in Dundee.

The structure of the new Partnership, the role of the Integrated Joint Board and the role of staff within the joint services has been the focus of much work in respect of Adult Support and Protection with the Chief Officers Group committed to ensuring that the protection of people of all ages continues to be a key Strategic Priority, as are the Strategic Priorities of Early Intervention/Prevention, Person Centred Care and Support, Models of Support, Pathways of Care, Health Inequalities and Managing our Resources Effectively, all of which will strengthen multi-agency responses to Protecting People concerns. The Adult Support and Protection Committee will continue work closely with all relevant partners to ensure our strategies and priorities are aligned and coordinated. In response to this a review was undertaken of the membership of the committee to ensure we had the right partners, represented in order to deliver for the people of Dundee.

*“At a local level the protection of the adult population in Dundee from financial harm, and from the many other forms of adult abuse, is one of the priority areas which the Health and Social Care Partnership, in support of the work of the Adult Support and Protection Committee, will increasingly require to address in the coming years”. (Dundee Health and Social Care Strategic and Commissioning Plan, 2016)*

The changes to Policing in Scotland in recent years has presented opportunities and challenges as eight forces have been united into one – Police Scotland. Alongside the national changes there have been local changes with the development of the Risk and Concern Hub and the consolidation of the role of Police, Health and Social Work in the Early Screening Group. This has been managed positively locally, with good continuity of staffing, which has helped sustain this model of working. Adult Concern Reports are ‘triaged’ by a Detective Sergeant, before going forward to the Early Screening Group, and referral pathways, other than health and social work, this has led to a reduction in the number of adults being referred for statutory adult protection procedures such as Initial Referral Discussion but has contributed to others being proportionately supported by the right services at the right time.

Other areas of Scotland have different ways of managing Police Referrals, and it is hoped that best practice from others can inform the continuing work in Dundee. This features a Recommendation 7 in last year’s biennial report.

## 2. ANNUAL DATA

### Referrals

The total number of Adult Protection referrals in 2016/17 was 918. Of these;

734 came from Police Scotland,

50 from Social Work, 2 of which were other LA areas

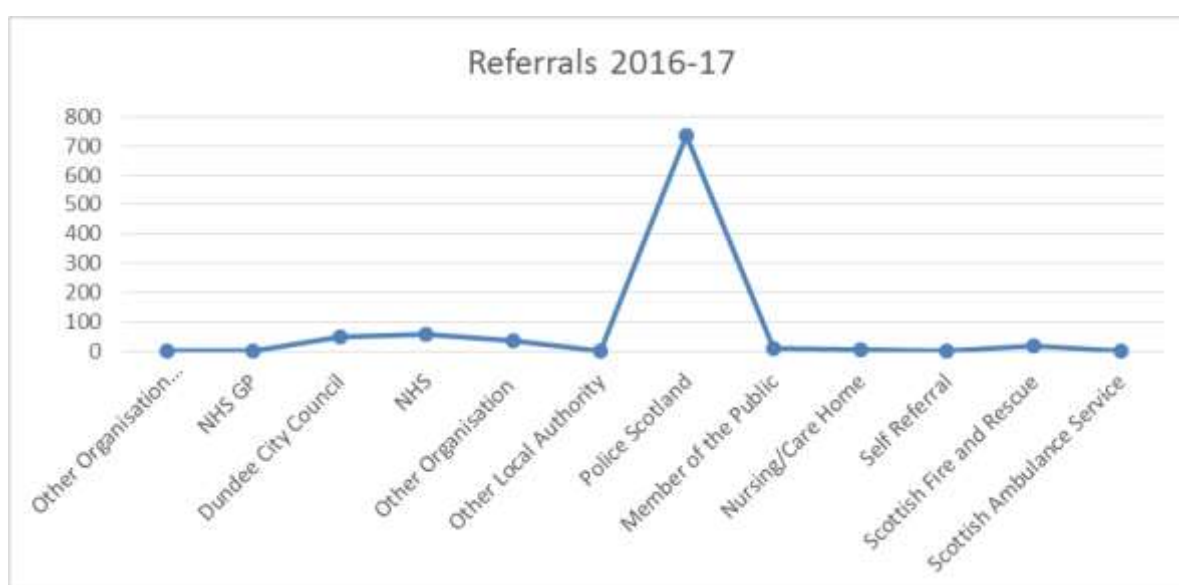
37 from other organisations

57 from NHS (though none from GPs)

20 from Scottish Fire and Rescue

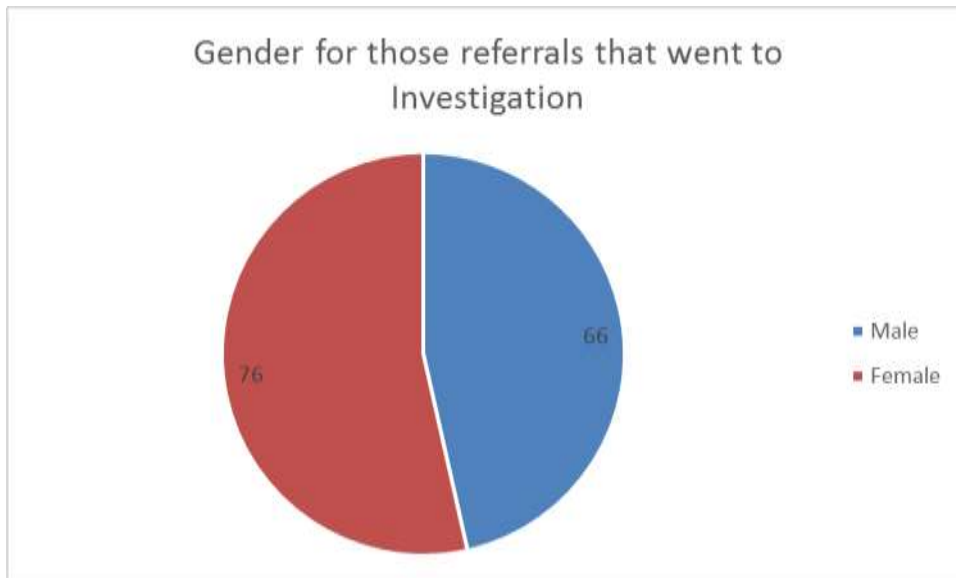
7 from Nursing Home

Others, in small numbers, came from family, friends, or other members of the public (9) and a self-referral (1), Scottish Ambulance Service (1)



### Investigations

From these referrals there were 142 investigations (12.28%) under Adult Support and Protection procedures (66 males and 76 females)

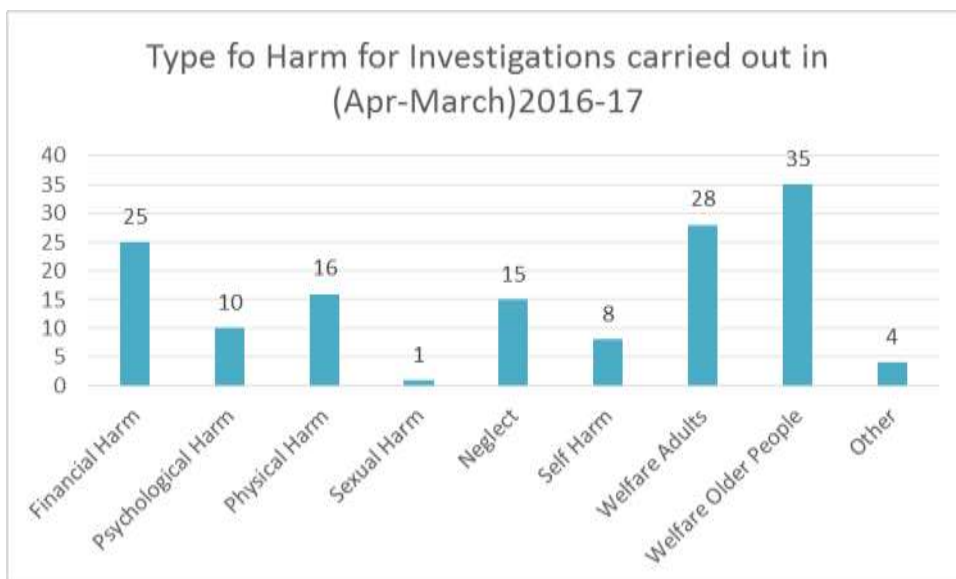


**Types of Harm**

**For the 142 Investigations:**

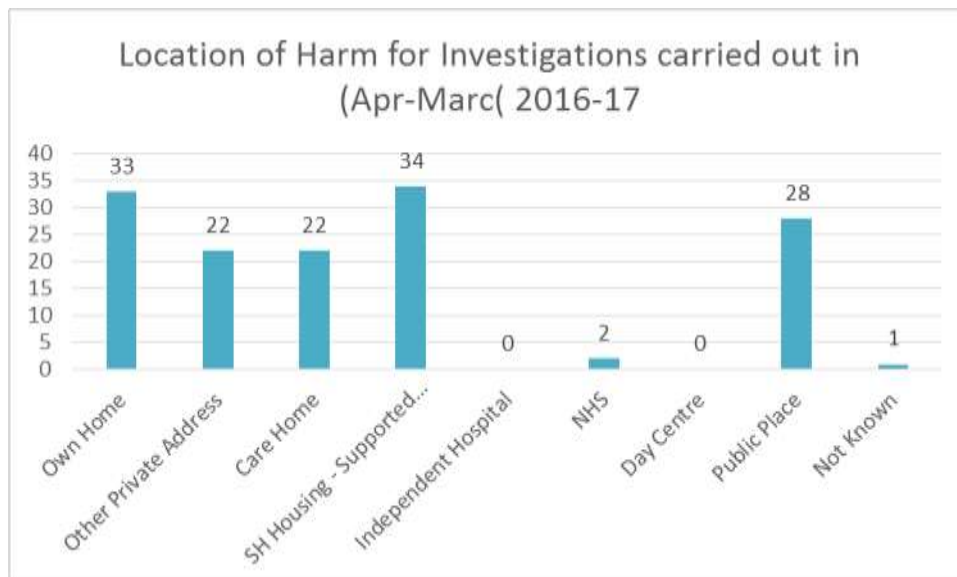
In terms of harm (4) were described as ‘other’, physical (16) and financial harm (25).

Others included: Domestic Abuse (2), Fore Safety Risk (1), harassment (1)



**Location of Harm**

In 33 of the investigations, the harm took place at home, 28 in a public place, 34 in sheltered or supported accommodation, 22 in a care home, 22 at another private address, and 2 in NHS premises.



Following the 142 investigations, 60 case conferences were held. (37% of investigations resulted in case conferences)

Type of ASP Case Conferences	Number of ASP Case Conferences
Initial ASP case conference	49
Review ASP case conference	of the 49 CC's 24 of these went onto further reviews (however - 44 review meetings in total took place - this include more than one review for some clients)
<b>Total</b>	<b>93 CC/Review meetings in total took place.</b>

Six large scale inquiries were completed in this time.

### 3. PROGRESS IN RECOMMENDATIONS FROM BIENNIAL REPORT 2014

<b>Recommendation 1</b>	Ensure more effective linking and sharing information between the Committee and GPs as, despite more work having been undertaken with GPs over the past two years, this has not translated into increased referrals.
<b>Recommendation 2</b>	Continue to forge and maintain an effective link with NHS Tayside to ensure the ASP work within this area is facilitated, communication is improved, and information shared efficiently.

Although the nature and level of referrals from GP's has not changed there are three primary areas

in which progress has been achieved in respect of this recommendation.

- i) In early 2017 a number of medical students set for general practice participated in an awareness and training session for Adult Support and Protection. Feedback from this will inform future development opportunities and it is intended to repeat this for subsequent graduates.
- ii) The Head of Service, Deputy Chief Executive's Department, NHS Tayside is now a member of the Adult Protection Committee and a number of strategic and delivery groups. Part of the focus of their work is to progress more effective linking and sharing information between the Committee and GPs.
- iii) In February 2017 work commenced on a Public Protection Quality Assurance Plan which resulted in the formation of a Health and Social Care Partnership Quality Assurance Group. Membership includes key representatives from a variety of NHS departments who will lead on the identified workstreams and deliver on the relevant recommendations. Although governed through the Health and Social Care Partnership, the group reports directly to the Adult Support and Protection Committee.

The above actions are key to progressing recommendations 1 & 2 specifically ensuring that the ASP work within this area is facilitated, communication is improved, and information shared efficiently.

<b>Recommendation 3</b>	Gather more qualitative data around the experience of service users who go through Adult Support and Protection services with a view to ensuring their voices are influential in improving the experience. <i>(This will be piloted from July 2016 with the support of Dundee Independent Advocacy Support and findings reported to the Committee with recommendations).</i>
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To understand the impact of Adult Support and Protection on Adults at Risk of Harm, Dundee Independent Advocacy Service (DIAS) agreed during 2016 to undertake independent interviews of Adults who had experienced Adult Support and Protection.

The interviews highlighted that Adults felt that the Adult Support and Protection intervention and experience has made a positive difference to their lives in that they feel safer and generally healthier, more settled, less worried, and three are looking to making plans for the future. All service users said they felt included, listened to and involved in decision-making.

Areas for improvement based on learning from the interviews were identified as...

- Organizing a method of gaining Adults and Carers who have experienced Adult Support and Protection interventions views on a systematic and regular basis so that their views and experience inform ongoing improvement activity.
- Ensuring that Adults are aware of the referral and ASP Meetings and have support and information to understand what this means and what supports are available through the process so that any response is personalized to the Adults circumstances.
- Ongoing promotion of independent advocacy as a means of supporting Adults to provide their views and participate in the decision making process in a meaningful way.

A number of recommendations arose from this activity, specifically;

- To commission an independent agency to gain Adults experience of Adult Support and Protection activity so that their views and experience can be gained on a systematic basis and used to inform ongoing improvement activity.
- That a service user and carer engagement strategy should be developed which supports the engagement of service users and carers in Adult Support and Protection developments and activity.
- To adapt Mosaic (Social Work Recording System) to gain wellbeing outcomes of Adults at Risk of Harm.

<b>Recommendation 4</b>	Ensure the Committee has a clearer cognisance of work being undertaken with Adults (<65) and Older People (65<), in terms of the Health and Disability Characteristics of those who are referred under specific areas of concern: 4a – Dementia/Alzheimer’s: including how local practice links to the National Strategies, and early intervention across Dundee 4b - Mental Health and; 4c – Alcohol and Drug misuse: including how supports and services are linked effectively between the Health and Social Care services and the Alcohol and Drug Partnership strategy.
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Links have been established with the various Strategic Planning Groups (SPG’s) which were formed in response the integration of Health and Social Care. The ASP convener has been invited to each SPG and, conversely, SPG members are now represented on the ASP committee.

Dundee Alcohol and Drug Partnership is developing a strategy that explicitly sets out how services are linked with the HSCP.

A frailty Strategic planning group has been established with a focus upon how local practice links to the National Strategies, and early intervention across Dundee.

In February 2017 work commenced on a Public Protection Quality Assurance Plan which resulted in the formation of a Health and Social Care Partnership Quality Assurance Group. Membership includes key representatives from a variety of stakeholder groups who will lead on the identified workstreams and deliver on the relevant recommendations. Although governed through the Health and Social Care Partnership, the group reports directly to the Adult Support and Protection Committee. This, coupled with the changes planned in relation to the Adult Support and Protection reporting Framework will contribute to delivering on this recommendation.



<b>Recommendation 5</b>	<p>Ensure the recommendations from the Thematic report – from past Case Based Self-Evaluations and Minutes Audits - are progressed and practice improves in these areas, with regular updates to the Committee: Advocacy, Risk Assessment and Protection Plans, Training access for wider services and Recording:</p> <p>5a - Increase the early uptake of Independent Advocacy across the city, pursue more consistency around how advocacy is explained and offered to service users, and review the information available to service users.</p> <p>5b - Review Risk Assessment and Protection Plans, ensure these are of good quality, available in every case and timeously for meetings, especially Case Conferences.</p> <p>5c - Ensure training for wider services continues to be available, and is actively encouraged, for all services,</p> <p>5d - Review and improve recording of case information</p>
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The initial Adult Support and Protection Reporting Framework was approved by the Adult Support and Protection Committee in August 2015 until September 2017. It has undergone a period of review which is detailed as follows...

The initial framework sought to bring together the range of statistical information requested into one framework and to create a culture of openness and transparency in how data is used to inform improvements.

Since the initial framework was completed, significant learning has taken place about a systematic approach to reporting on:

- Local and national required statistical data in a manner that enables identification of strengths and improvement actions.
- Outcomes from case conferences and IRD's
- The involvement of service users, family members, carers, advocacy and legal proxies in ASP Processes and an assurance that procedures are being followed.
- The impact of Adult Support and Protection on Adults at Risk of Harm and their experience of the process.
- Quality of our ASP processes including provision of required documents and adherence to timescales.

Alongside this, significant learning has taken place regarding means of recording and collecting data which both ensures best practice and accuracy of information recorded. This is so that valid and quality data is used to inform reporting and analysis of information.

In addition to this learning, locally arrangements have changed with the integration of health and social care, introduction of mosaic (social work recording system), development of Local Outcome Improvement Plans and Dundee Health and Social Care Partnership Clinical, Care and Professional Governance Forum and Group.

The ASP Reporting Framework has been updated to reflect this learning, new arrangements and to include a standard report template, frequency of reporting, reporting on outcome of audits and reporting on impact on service users, carers and communities.

It is anticipated that the planned updates to mosaic will enable the required data to be gathered in a systematic way from October 2017 onwards.

In Dundee, our self-evaluation programme consists of a series of linked activities which include a focus on both quantitative and qualitative indicators. It involves a range of complimentary methods

and approaches which, when applied together, help us to continuously reflect, learn, act and further improve outcomes for communities and service users, or jointly understand barriers to progress and develop realistic, achievable plans. The diagram below illustrates the local component parts of continuous improvement.



<b>Recommendation 6</b>	The development work in terms of the Early Indicators of Concern training to be remitted to the Health and Social Care Partnership and taken forward to include residential staff. Consideration to be given to its relevance for staff within community settings: e.g. sheltered housing, community multiple occupancy settings.
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Work has continued to progress in implementing and revamping current information in regards to the Early Indicator of Concern (EIC) tool and, as a Partnership how we can raise awareness of the EIC tool within Dundee Care Homes.

Following workshops convened in March, a scoping exercise was undertaken to explore how to raise awareness of the EIC tool in order for care homes to take a more proactive role in developing training materials which could be used in practice.

Two briefing sessions were arranged in June and July, managers from all care homes within Dundee were invited and a total of 12 care homes attended these sessions. The sessions were pitched in such a way as to promote awareness and show the benefits of using the EIC tool. As a follow on from the briefing sessions it was agreed that a focus group would be arranged with home managers to explore and develop new training materials that could be used by all the care homes within Dundee.

The main themes identified from the briefing sessions were:

- Larger care home companies had their own ASP training and were happy for EIC information to be emailed to them to incorporate information. There was a reluctance from these homes for co-production in developing updated training.
- These companies also felt information could be sent out as guidance with EIC tool attached and this then would be incorporated into practice within own homes through team meetings, CPD etc.

- Smaller standalone care homes with limited resources were more interest in working with Dundee Health and Social Care Partnership and being part of a co-produced training programme. This information could be delivered using train the trainer's format.

Following this, a number of visits were made to care home managers who were unable to attend the briefing sessions to raise awareness of the EIC tool and to encourage participation in the focus groups.

Focus groups convened in February 2017 were not well supported by providers and in March the plan was revised to explore options and engagement of care homes

<b>Recommendation 7</b>	Due to the continuing rise in Police Scotland Adult Concern Reports in Dundee, the ASP Committee requests that Dundee Health and Social Care Partnership and Police Scotland explore best practice in screening and managing Police referrals in other areas of Scotland and implement any effective learning.
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Dundee HSCP have provided update on Benchmarking Activity Police Scotland are progressing this agenda, it is recognised however that comparison with other areas is not without its challenges due to differences in approach and practice. As part of the work of the Public Protection Quality Assurance Group, a strategic support officer will undertake a benchmarking exercise with other Partnerships to explore models of ASP Practice, Service Delivery and Strategic Support and in particular make recommendations for developments in Dundee based on learning elsewhere.

Within Dundee to ensure an ongoing learning and improvement approach to the Early Screening Group a evaluation was undertaken during 2016 as a partnership with Police Scotland and Fire and Rescue. The purpose of the evaluation was to consider areas for further improvement and development in relation to the ESG and in doing so have a consistent focus on the support and protection of Adults.

The evaluation used feedback gained from case file audit, stakeholder discussion, review of statistical data, self-evaluation using Tayside Clinical, Care and Professional Governance Framework, reference to the ASP Biennial Report and consideration of the wider developments in relation to Public Protection and integration of health and social care.

An ESG improvement plan was implemented based on the evaluation.

It was identified that a key strength of the ESG is its multi-agency approach to screening of Adult Support and Protection referrals. Through this multi-agency approach it has enabled the development of positive working relationships between services involved.

This approach has supported a focus on responding to other forms of harm such as fire safety and scams and enabled development of and building links with substance misuse, mental health and neighbourhood services.

However, through statistical analysis it was also identified that a significant number of people are referred through the ESG who do not meet the criteria for formal intervention through Adult Support and Protection, Adults with Incapacity (Scotland) Act 2000 or Mental Health (Care and Treatment) (Scotland) Act 2003.

Risks subsequently identified through the evaluation and were that:

- There is no clear pathway for individuals who do not meet the threshold for formal intervention or health and social care supports but there remain concerns over risk of harm to self or others.
- Adults were not aware of discussion through ESG, outcome of decision making and due to this impact of ESG is not known on individuals.
- Inconsistent recording of inquiries and outcome of ESG and FCT decisions.
- Threshold of decision making and responses where repeat referrals are made.

In response to these risks, a multi-agency group consisting of representatives from Police Scotland, Fire and Rescue and Dundee Health and Social Care Partnership considered the current protocol so that models can be developed so that Adults referred to the ESG are supported and protected.

The Early Screening Group procedures were subsequently revised so that:

- Adults are made aware of Adult Support and Protection concerns received by Dundee Health and Social Care Partnership and outcome of ESG discussions.
- All referrals received for Adult Support and Protection where the Adult is not active to any Health and Social Care Partnership Team will be referred to the Early Screening Group.
- Risk management arrangements or Adult Support and Protection procedures as appropriate will be implemented where a person is referred more than three occasions to the Early Screening Group and/or where there are concerns identified in order to proactively prevent harm and respond to risk.
- Appropriate recording and information sharing arrangements are in place so that decisions made at ESG are accurately recorded.
- There is systematic recording of Adults outcomes so that better understanding is gained about the impact of the ESG on Adults.

It is anticipated that by implementing this change of model that a shift towards preventative approaches, which reduce risk of harm and improve outcomes for individuals will be realised.

## **4 SIGNIFICANT CASE REVIEWS**

Protocols for convening and conducting a *Significant Case Review (SRC)* and *Practice Review* are in place. A *Protecting People Protocol for Conducting a Significant Case Review* has been agreed also which covers adult protection cases.

A Significant Case Review was undertaken throughout 2016. The recommendations from this review have reported to both the ASPC and Chief Officers Group and the resulting Action Plan is continuing to be progressed.

## **5 ADULT SUPPORT AND PROTECTION SUB GROUPS**

### **5.1 Financial Harm Group**

The group consisting of representatives from Police Scotland, Trading Standards, Community Safety Team, Social Work, Communication Division, the Lead Officer for the Adult Support and Protection Committee, Environmental Protection and the Citizen's Advice Bureau meet six times per year.

This group has developed and implemented an action plan.

In conjunction with the Protecting People Communication Group, a Calendar of Action was established including regular inputs on scams and rogue traders in local newsletters/LCPP, on the joint Facebook page with the Community Safety Partnership which was launched in April 2015 and on the ASP website <http://www.dundeeprotects.co.uk/>

Leaflets relating to financial harm and scams have been developed and distributed at events such as Police Doorstep Crime/Rogue Traders/National Consumer Week, scams packs given out in a local shopping centre, Citizen's Advice Bureau Scams awareness month in May 2016, Elder Abuse Day in June 2016 at the Farmer's Market.

Work has continued with local banks with some bank branches and post offices involved in the Police Doorstep crime information stalls.

As in other areas, Dundee receives a list of people who have possibly been scammed and Trading Standards complete the follow ups to the majority on the list who weren't open cases to the Social Work Department or known to Police. Trading standards also have a role in speaking to local postal workers, who are in a good position to identify excessive scam mail.

The group has also been active in identifying vulnerable people who may be helped by the installation of a 'call blocker'.

The remit and membership of the group has recently been reviewed in order to identify those most at risk and target information and resources more effectively.

### **5.2 Stakeholder's Group**

Recommendation 1 of the 2012 Biennial Report stated that "an adult support and protection stakeholder group should be formed, properly prepared and with a clear remit as to its role and relationship to the ASP Committee".

The Stakeholder's Group was set up in October 2013 and is made up of representatives from services for adults across the city including: BME groups, Older People, Advocacy, Mental Health, Sensory, Learning Disability and Autism, Physical Disability, Carers, Hate Crime, Violence Against Women.

The original chair was from Dundee Carer's Centre and after the first year this was changed to the Advocating Together. Meetings have taken place regularly across 2016/17 and the main focus of the work of the group has been their three priority areas: Self Directed Support, Hate Crime and Financial Harm.

Members have been active in helping with the events arranged by the Protecting People Communication and Awareness raising group including the Self-Directed Support Carer's event and Elder Abuse Farmer's Market stall.

In 2016 the group undertook a survey on Dundee's progress in terms of the 2011 'Hidden in Plain Sight' report on the harassment of disabled people and produced a report for the ASP Committee.

Future plans for the group include a focus on advocacy and increased involvement in communication and awareness raising.

### **5.3 Policy, Procedures and Practice Task Group**

This task group is arranged as and when needed to consider any new policies, both single and multi-agency, and how these might impact on existing policies and practice. In the past year the group have considered the multi-agency Harmful Practices Protocols on Forced Marriage, Female Genital Mutilation and Honour base violence, and the single agency procedures from Health.

Additionally, the Health and Social Care Partnership developed single and multi- agency procedures and guidance which were considered by the group.

## **6. PROTECTING PEOPLE GROUPS**

Three Protecting People groups serve the Adult Support and Protection Committee, Child Care and Protection Committee and the Dundee Violence Against Women Partnership, with the recent addition of Suicide Prevention. The three groups, Self-Evaluation, Communication and Learning and Workforce Development, are designed to reduce duplication and bring about a more joined-up and consistent multi agency approach across the Protecting People areas of Child Protection, Adult Support and Protection, Violence Against Women Alcohol and Drug Partnership and Multi-Agency Public Protection Arrangements (MAPPA).

### **6.1 Protecting People Self Evaluation Group**

The Protecting People Self-Evaluation Reference Group is concerned with the coordination of self-evaluation of activity. The group has a key role in the leadership and coordination of multi and single agency activity across the statutory and third sectors, reporting to the COG and respective Committees. This encourages a focused approach, involving the reference group overseeing and reporting on:

- Planned self-evaluation activity informed by past findings
- Targeted self-evaluation activity on a single quality indicator, process or area of concern
- Themed self-evaluation activity covering shared aspects of each of the 4 groups
- Areas of focus to be determined by the relevant Committee

The main focus of self-evaluation activity will be at a single agency level, including the continued internal coordination of case file audits by members of the reference group. It encourages the involvement of practitioners in carrying out self-evaluations and for the findings of all activity to be cascaded to relevant staff in order to promote learning and continuous improvement. One-off, multi-agency activities, including case based evaluation, practice reviews and significant case reviews, will continue at a multi-agency level and focus on multi-agency aspects of practice, such as information sharing.

The Chief Officers Group has endorsed a Balanced Scorecard approach towards organisational development and performance improvement. The Balanced Scorecard was designed to align strategic direction with current and future internal and external processes and communications, in order to more efficiently, effectively and continuously improve performance and outcomes. The

model offers opportunities for the COG to;

- Communicate its vision and intended destination for Protecting People
- Be very clear and consistent about what it considers to be the key strategic priorities
- Help translate plans into day-to-day measurable activities within services
- Drive integration between partnerships with shared or inter-related objectives
- Promote continuous learning and improvements in systems, practice and outcomes
- Involve all stakeholders in the ongoing development and implementation of strategy

Reports have been presented to the ASP Committee and Chief Officers Group throughout the year and have helped inform the review of the Adult Support and Protection Reporting Framework.

## **6.2 Protecting People Communication and Engagement Group**

Before the setting up of the Protecting People Communication Group in 2013, various activities had been carried out to raise awareness of protecting people issues and of the role of the respective strategic, multi-agency fora. However, in the main, these activities had been done on a 'stand alone' basis and were not part of a coordinated campaign or programme developed as part of an overall plan.

The communications strategy aims to address these issues as well as achieving the aims set by the Scottish Government. It therefore seeks to:

- emphasise the importance of reporting concerns;
- clarify and simplify, as far as possible, the channels for reporting concerns; and
- reassure the public about confidentiality, anonymity and that concerns are always treated seriously.

To this end, the Communication group have concentrated on raising public awareness through attendance at public events, such as the Dundee Farmer's Market in June, and the Dundee Flower and Food Festival every year.

Partners from the Celebrate Age Network and Dundee Pensioner's Forum work with the Committee on the Elder Abuse Awareness event each June. 2016 also saw the involvement of Police Scotland Youth Volunteers at events.



The Protecting People Team and Celebrate Age Network at this Year's Farmers Market.

The Communication group has also joined with Dundee Community Safety Partnership to set up a Facebook page since June 2015 and initiatives and information are posted there.

[Protecting People of All Ages](#) in Dundee is a booklet which provides information for people who have concerns about harm and ensures they are directed to the right public protection agency. It was revised and published as an easy read version during the Summer of 2016. The booklet was put together with the involvement of community representatives of the 8 Local Community Planning Partnerships (LCPP's) in Dundee. It is supported by 4 key protecting people forums: Dundee Child Protection Committee (CPC), Dundee Adult Support & Protection Committee, Dundee Violence Against Women Partnership and Tayside Multi-Agency Public Protection Arrangements (MAPPA).

In March 2017 The Protecting People Communication and Engagement Strategy and Action Plan was completed. This will continue to be progressed through future ASP committee and Chief Officers Group.

### **6.3 Protecting People Learning and Workforce Development Group**

Learning & Workforce Development Framework

This group started work under the auspices of Protecting People in August 2014 although



considerable work had already been progressed by the Social Work Learning and Workforce Development team and the three Learning and Workforce Development task groups which existed previously.

The Learning and Workforce Development Framework is hosted on the Dundee Protects website available and accessible to all managers and staff. They can use this interactive tool to identify which of the contact groups they belong to and what core competencies, knowledge and skills they require to meet their responsibilities to Protect People. The three levels as detailed in the Framework are; General contact workforce; Specific contact workforce; Intensive contact workforce.

Through the Framework staff can access information about Learning and Development Opportunities (e.g. training, workshops, e learning, post graduate courses, self-directed reading), the expected outcomes and how they can book/access these opportunities.

Earlier this year the Protecting People Virtual College E Learning modules were developed in partnership with Dundee City Council. The Dundee Chief Officer Group and partner agencies have given their commitment to continuous learning and development of all staff and volunteers working with the people of Dundee. Five E Learning courses are now available to those working with Children, Young people and adults. All courses are free and easy to access after a simple registration process.

## **7. CONCLUSIONS, RECOMMENDATIONS AND FUTURE PLANS**

At the time of writing Dundee is one of six local authorities participating in the first thematic inspection of Adult Support and Protection undertaken by The Care Inspectorate and Her Majesty's Inspectorate of Constabulary in Scotland.

This will focus upon specific areas, namely, Outcomes, Key Processes and Leadership.

The strengths and areas for development identified by the inspection process will, together with my previous recommendations, inform the content of Dundee ASPC's fifth Biennial Report covering 2016-18 and influence further recommendations to keep adults in Dundee safe today and into the future.

