

REPORT TO: HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD – 24 FEBRUARY 2021

REPORT ON: ADULT SUPPORT AND PROTECTION COMMITTEE – INDEPENDENT CONVENOR'S BIENNIAL REPORT 2018-2020

REPORT BY: CHIEF OFFICER

REPORT NO: DIJB1-2021

#### 1.0 PURPOSE OF REPORT

1.1 The purpose of this report is to advise the Integration Joint Board that the Independent Convenor of the Dundee Adult Support and Protection Committee (ASPC) has produced their Biennial Report for the period April 2018 to March 2020. The report includes a summary of the work undertaken during the reporting period and the priorities recommended for the coming year (2020/21).

#### 2.0 RECOMMENDATIONS

It is recommended that the Integration Joint Board (IJB):

- 2.1 Note the contents of the Independent Convenor's Biennial Report (attached as Appendix 1).
- 2.2 Note the progress achieved in response to the recommendation made by the Independent Convenor in the Biennial Report 2016-18 and the mid-term report 2019 -20 (section 4.4).
- 2.3 Note the development of the Adult Support and Protection Committee delivery plan for the current year (2020/21) (contained within Appendix 1).

#### 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. Elaine Torrance was appointed as Independent Convenor in April 2018.

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:

- 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 Act), the adult must meet all three points above.

- 4.2 The Dundee Health and Social Care Integration Scheme (available on the Partnerships website at <a href="https://www.dundeehscp.com/publications/all?field\_publication\_type\_tid%5B0%5D=20&page=2">https://www.dundeehscp.com/publications/all?field\_publication\_type\_tid%5B0%5D=20&page=2</a> ) includes the delegation of a range of operational functions and functions relating to the operation of Adult Support and Protection Committees from Dundee City Council to the Integration Joint Board. The Partnership maintains a specific Adult Support and Protection Team who have responsibility for the co-ordination of multi-agency adult protection activities (such as adult support and protection case conferences), with screening of adult at risk concerns being led by the First Contact Team and a range of other operational teams managing the assessment and planning for adults at risk on an ongoing basis.
- 4.3 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 2018 (Article III of the minute of the Community Safety and Public Protection Committee held on 7 January 2019 refers).
- 4.4 The biennial report, attached as Appendix 1, 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 Dundee Health and Social Care Partnership, the Community Safety Partnership and relevant Strategic Planning Groups, to ensure strategies and priorities are aligned and co-ordinated.

#### 4.4 Progress on Previous Recommendations in Biennial Report 2018-2020

- 4.4.1 Progress made in relation to recommendations made in the previous Biennial Report is reported in detail in the full report. Key areas of progress include:
  - significant improvement in the collation and use of data by Dundee Adult Support and Protection Committee and Chief Officers Group, as well as establishent of arrangements for regular quality assurance of duty to inquire activity;
  - completion of a case file audit focused on transitions that identified strengths in relation to multi-agency communication, assessment, recording of case conference activity, completion of core processes and involvement and consultation with adults at risk. Areas for improvement were identified as chronologies, quality of risk assessment, recording of core processes, enabling access to independent advocacy and assessment of capacity, and management oversight. A number of these areas are being progressed through the Transforming Public Protection Programme and those that are not have been incorporated in the Committee's delivery plan for 2020/21;
  - collaborative work with the Improvement Service to undertake a variety of self-evaluation activities focused on the core business on the Adult Support and Protection Committee leading to the development of thematic agendas and a revision of the terms of reference for the committee;
  - continued progression of the Transforming Public Protection Programme, with a focus on improving risk assessment practice and recording within adult support and protection;
  - continued contribution of people with lived experience to the Adult Support and Protection Committee and its activities;
  - the active participation of frontline practitioners through the Council Officer Forum in the development of learning and workforce development approaches and policy development;
  - the continued delivery of a range of learning and development opportunities, including in collaboration with Tayside partners, and the launch of a new rolling programme of adult support and protection learning programmes in August 2019; and,
  - integration of the lead professional approach for vulnerable adults who do not meet the three-point test into the Housing First programme.

4.4.2 This biennial report covers the period from 1<sup>st</sup> April 2018 to 31<sup>st</sup> March 2020 and therefore does not reflect the adult support and protection response to the COVID-19 pandemic in any level of detail. The Independent Convenor's mid-term report for 2020/21 will report on the response provided and the impact that this had on adults at risk, their families and communities. This will include an overview of the wide range of adaptions that have been made to support continued delivery of adult support and protection processes and supports, the rapid redesign of service delivery models to protect the health and wellbeing of both adults at risk and the workforce inline with public health guidance, and the commitment and flexibility of the multi-agency adult support and protection workforce throughout the pandemic response.

#### 4.5 Conclusions, Recommendations and Future Plans.

- 4.5.1 All Adult Support and Protection activity needs to be considered in the context of the strengths and areas for improvement identified by external scrutiny reports, the Transforming Public Protection Programme and the content of the Convenor's Biennial Report.
- 4.5.2 The Independent Convenor has identified the following as priority areas for further development and inclusion in the Adult Support and Protection Committee's (ASPC) delivery plan for 2020/21:
  - Further development of multi-agency datasets, the identification of priority indicators for reporting the ASPC on a quarterly basis and developing enhanced arrangements for the analysis of data, focus on outcomes data and use of data to inform service improvements.
  - Further development of the role of the stakeholder group in representing the views of people and groups at risk and further review of advocacy services for people and carers subject to adult support and protection activity.
  - Implementing approaches to support consistent recording of outcomes as part of core adult protection activities.
  - Further audit activity focused on individuals who do not meet the three-point test, evaluation of Early Screening Group activity and developing mechanisms to embed learning from significant case reviews published by other ASPCs within the Dundee context.
  - Ensuring that the findings of self-evaluation activities inform the review and development of policies, procedures, instructions and guidance.
  - Further strengthening the ASPC by adoption of a shared vision, continuing to implement improvements identified in work undertaken with the Improvement Service, developing the Protecting People Strategic Risk Register and implementing the Transforming Public Protection Programme.
- 4.5.3 Work has already progressed to address a number of these recommendations, including through collaboration with the other Adult Support and Protection Committees across Tayside. The full participation of the Dundee Health and Social Care Partnership in multi-agency working is critical to the full implementation of the Independent Convenor's recommendations over the forthcoming two-year period. Officers from the Partnership are active participants in multi-agency Adult Support and Protection governance and strategic planning structures, provide leadership of single and multi-agency operational arrangements for the protection of adults at risk and the Chief Social Work Officers provides professional oversight and advice regarding the protection of adults at risk.

#### 5.0 POLICY IMPLICATIONS

5.1 This report has been screened for any policy implications in respect of Equality Impact Assessment. There are no major issues.

#### 6.0 RISK ASSESSMENT

6.1 This report has not been subject to a risk assessment as it does not require any policy or financial decisions at this time.

#### 7.0 CONSULTATIONS

7.1 The Chief Finance Officer, Head of Service – Health and Community Care / Chief Social Work Officer, members of the Dundee Adult Support and Protection Committee and the Clerk were consulted in the preparation of this report.

#### 8.0 DIRECTIONS

8.1 The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in sections 26 to 28 of the Public Bodies (Joint Working)(Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Dundee City Council and NHS Tayside.

Direction Required to Dundee City Council, NHS Tayside or Both	Direction to:	
	1. No Direction Required	x
	2. Dundee City Council	
	3. NHS Tayside	
	4. Dundee City Council and	
	NHS Tayside	

#### 9.0 BACKGROUND PAPERS

9.1 None.

Vicky Irons Chief Officer DATE: 12 January 2021

Andrew Beckett Lead Officer, Protecting People

Kathryn Sharp Service Manager, Strategy and Performance



Adult Support & Protection **Committee Dundee** 

# Independent Convenor's **Biennial Report**

April 2018 - March 2020





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# Independent Convener of Dundee Adult Support and Protection Committee

# This report summarises the work of the Adult Support and Protection Committee (ASPC) for the year 2018-2020.

It has been a particularly busy and productive period for the Committee and the report details the significant progress that has been made with many of the key actions set out In the last biennial report. This has included a self-evaluation exercise of the core activity of the Committee which resulted in a refocus on the role of the Committee, audit and risk assessment and this has informed our delivery plan for the coming year.

The collation and analysis of regular statistical data is now considered by the Committee and is informing key areas for future work and focus. An induction framework for new members of the Committee has been developed and a comprehensive training programme continues with the introduction of a Council Forum being particularly well received.

There remains more to be done and a robust delivery plan has been agreed for the coming year. This includes the work underway on leadership, risk assessment and chronologies being undertaken as part of the Joint Transformation programme between the Care Inspectorate and Dundee Chief Officers Group. The delivery plan will continue to be progressed and monitored by the members of the Committee.

I would like to take this opportunity to thank all the members of the Committee and other key stakeholders for their dedication and commitment to continue to support and protect all adults across the City of Dundee.

The next 2 years will also require a continuing focus on managing the response to the impact of COVID 19 which has resulted in loneliness, social isolation for many people some of whom have been struggling with their mental health. The Committee has met more regularly to manage any identified risks, share information and solutions across agencies always with a focus to identify and provide appropriate support for adults who may be at risk and their families. I would like to add my thanks to all the staff who continue to work in challenging circumstances

With thanks.



Elaine Torrance Independent Convenor Dundee Adult Support and Protection Committee



# Introduction and Context 1



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.

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. The Chief Officers Group are 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 to work closely with all relevant partners to ensure our strategies and priorities are aligned and coordinated.

In response to this the Committee conducted a number of improvement related activities during the period covered by this report.

"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 an increase in risks identified and individuals being proportionately supported by the right services at the right time.



# **ASP Key Performance Data 2**



# The following section outlines key performance data relating to Adult Support and Protection.



During the period covered by this report there has been a significant rise in concerns reported an increase of 621 / 40% in 2019 and a further increase of 586 / 27% in 2020. The vast majority of these concerns are reported by Police Scotland. It is acknowledged that this is influenced by operational practice and the ASP pathway being the only agreed means of reporting concerns. This is identified as an area for development in the coming year.





OTHERS	2016 - 17	2017 - 18	2018 - 2019	2019-2020
Scottish Ambulance Service	1	0	0	1
Scottish Fire & Rescue Service	20	5	8	29
Office of Public Guardian	0	0	2	2
Mental Welfare Commission	0	0	0	0
Healthcare Improvement Scotland	0	1	0	0
Care Inspectorate	18	10	13	9
Other organisation	20	56	39	33
Other Local Authority	0	0	3	0
Self (Adult at risk of harm)	5	5	2	3
Family	4	15	9	11
Friend/Neighbour	1	7	1	1
Unpaid carer	0	0	0	1
Other member of public	0	2	1	0
Anonymous	4	1	2	3
Nursing / Care Home	3	14	6	6
Others	0	0	9	22
Total Others	76	116	95	121

Police Scotland continue to be the main referrer of concerns with the number significantly increasing from 704 in 2017-18 to 1327 in 2018 -19 and then again to 1822 in 2019-20 Referrals from other parts of the council have increased significantly during this period as have concerns noted by NHS Tayside and Scottish Fire and Rescue. This is considered to be indicative of focused joint working, awareness raising and training across the partnership.

All concerns reported will be subject to the statutory duty to inquire undertaken by a designated council officer, only a very small minority will progress beyond this stage as they do not meet the criteria for further Adult Support and Protection Activity as described in the act. Many are either offered direct support or are referred to a partnership agency whereas some are subject to multi-agency screening by way of the Early Screening Group (ESG).

Since March 2020 the outcome of all duties to inquire have been monitored with dip sampling undertaken of follow up actions. A summary of this activity is detailed on the next page.



#### **Outcomes of concerns not progressing beyond Duty to Inquire from March 2020**

#### Screening outcome key

- Existing support services have been informed of the concern and will manage appropriately (Least restrictive approach)
- MFA Required Inappropriate Referral to ASP
- Conduct appropriate follow-up for community care needs (Social Work)
  - Advice and information given and signposted to appropriate services /support

Regular analysis takes place of the screening undertaken by both the Risk and Concern Hub and First Contact Team. Whilst this is considered proportionate to the level of risk the follow up activity associated with the outcome key (left) is identified as an area for development over the coming year.

Concerns that cannot be addressed effectively at the Duty to Inquire stage may be subject to multi-agency screening by way of the Early Screening Group (ESG). The percentage of all concerns considered by the ESG had been consistent up until the past year. The decrease in cases considered by ESG is due partly in to an increase in number in the previous year and the development of robust screening processes within both the Risk and Concern Hub and First Contact Team detailed above.



### Number of Concerns Discussed by ESG for year (01 April - 31 March)

Source of Concerns Discussed by the ESG for Year (01 April - 31 March)



#### Other Sources of ACR's Discussed by the ESG

	Scottish Fire & Rescue Services	Other	Ambulance Service Organisation	Other	Self-Referral
2016-17	15	0	1	4	0
2017-18	5	0	0	3	0
2018-19	8	4	3	7	0
2019-20	13	1	0	3	0

As previously noted, there is evidence to support that the rise in referrals from Fire & Rescue Services is indicative of closer partnership working and awareness raising.



### Type of Harm for ACR's Discussed by the ESG for Year (01 April -31 March)

Although reducing in number, self-harm and adult welfare remain the most prevalent type of harm discussed by the early screening group.

Other	Discrimination/ Harassment		Fire Safety Risk
2016-17	2	4	4
2017-18	0	2	2
2018-19	3	3	7
2019-20	2	0	7

Other types of harm

The reduction in domestic abuse discussions and increase in Fire Safety Risk is attributed to better awareness raising and signposting. i.e. Domestic Abuse concerns may not be referred as an adult concern or directed to an appropriate service / support. at an earlier stage.





■2016-17 ■2017-18 ■2018-19 ■2019-20

Independent Convenor's Biennial Report April 2018 - March 2020

# **Inter-agency Referral Discussions (IRD)**

Adult concerns that are not effectively addressed by earlier screening processes may be subject an Inter-agency referral discussion to determine how best to proceed in terms of investigation. Not all concerns that proceed to an ASP investigation will be subject to an IRD.



% of All Concerns that had an IRD meeting for year (01 April -31 March)



The relatively small number of inter-agency referral discussions convened have been identified as an area for further development over the coming year.

# **ASP Investigation**

In order to establish how best to keep people safe it may be necessary to undertake an Adult Support and Protection Investigation.



In 2018 – 19 there were **71** investigations (5%) under Adult Support and Protection procedures (**31 males and 40 females**). In 2019-20 there were **81** investigations (4%) under Adult Support and Protection procedures (**30 males and 51 females**).

The conversion rate of concerns to investigations continues to decrease in spite of the number of concerns increasing significantly.

Data relating to age, gender, type and location of harm is detailed in Section 8 of this report?

2019- 2020 saw a significant increase in females under the age of 40 being investigated under Adult Support and Protection procedures. This prompted greater analysis of the data summarised in the next section of this report.

People with learning disabilities, mental health issues and physical disabilities continue to be the client groups that make up the majority of investigations.

Financial harm and welfare issues continue to be the primary types of harm resulting in investigations. There has been a sharp rise in investigations relating to self-harm. 80% of harm investigated occurred in the persons home.

# **Case Conferences**



The number of concerns that resulted in a Case Conference has remained consistent over the past four years despite the significant increase in Adult Concern Reports. The ASP Committee has sought re-assurance from the partnership that the concerns addressed at earlier stages of the screening process effectively recognise and respond to risks identified without formal statutory intervention.



# Scrutiny of Multi-Agency 3 Data, Quality Assurance and Evaluation Activity, Service Review and Identified Learning



A number of factors have contributed to the better use of data, quality assurance and evaluation activity in respect of ASP in Dundee.

The appointment of an Interim Lead for Adult Protection for NHS Tayside in June 2017 coupled with the creation of the post Senior Officer (Information), Dundee Protecting People, towards the end of 2018 has built upon the already established partnership working with the Adult Support and Protection Team, Health and Social Care Partnership, Police Scotland Risk and Concern Hub and wider partnership.

The Dundee ASP Business Plan 2019-20 made commitment to improve the quality and scrutiny of data available to Committee on Quarterly Basis commencing 1st June 2019.

This has been the driving force for an increase in quality assurance and evaluation activity which, in turn has identified areas for development for the coming year.

# **Vulnerable Person, Adult Concerns and Screening Activity**

Dundee ASP Committee queried the figures that indicated Adult Concerns reported as part of the Vulnerable Persons Database demonstrated an increase of 621 / 40% in 2019 and a further increase of 586 / 27% in 2020. However, the number of concerns being discussed by the Early Screening Group was decreasing both in number and percentage. Moreover, figures relating to further ASP actions were broadly the same, Investigations 4-5% and Case Conferences 2-3% of all concerns reported.

Scrutiny and investigation of the practice and processes behind these figures acknowledges that Police Scotland recognise that the vast majority of adults subject to vulnerable person reporting would not be considered "at risk" in terms of Adult Support and Protection legislation. However, in Dundee there is currently only one pathway for recording such concerns, hence a figure of around 95% of all concerns do not warrant further action in terms of the legislation.

The Committee then sought assurances that those being "screened out" for statutory intervention were receiving a response in keeping with their needs and outcomes commensurate to the assessed risk.

In early 2020 an analysis was undertaken of the screening by both the Risk and Concern Hub and First Contact Team which concluded that, whilst this was considered proportionate to the level of risk the follow up activity associated with supporting these individuals was somewhat inconsistent. This is an area identified for development in the coming year with a focus upon community supports as opposed to statutory intervention.

### Actions arising from this activity include:

- Proposed standardisation of Interagency Referral Discussion (IRD) process across Tayside taking into account the national review of IRD processes.
- Further review of Early Screening Processes.
- Consultation on a multi-agency Protecting People /Adult Protection Hub
- Follow up activity relating to non-statutory responses to reported concerns.

# **Transforming Public Protection**

The scrutiny process undertaken during the Joint Thematic Inspection of Adult Support and Protection resulted in three 'recommendations for improvement':

- The partnership should make sure that full implementation of its ICT system is achieved in order to meet the user needs of council officers and other users to record all adult protection information clearly and effectively;
- The partnership should make sure that its key processes for adult support and protection follow a clearly defined path, which council officers and other staff fully understand; and,
- The partnership should make sure that it prepares risk assessments and risk management plans for adults at risk of harm who require them.

The Dundee partnership has embarked upon a focused programme of improvement and transformation across operational and strategic public protection processes to ensure that recurring areas for improvement are effectively addressed and that this improvement is sustained over the long-term.

#### The three main areas for development were identified as

- 1. Driving culture change within operational services towards continuous improvement and quality assurance, including embedding a culture of expectation of excellence across all protection services
- 2. Significantly enhancing leadership support and scrutiny for public protection issues
- Transformative re-design of 'front-end' protection processes to ensure streamlined and coordinate processes that respond flexibly to the complex and inter-linked needs of vulnerable individuals and families

Nine workstreams have been progressing different aspects of this with the Learning Disabilities Service of the Health and Social Care Partnership leading on the development and delivery of a risk assessment tool for all adults.

# ASP Multi-Agency Casefile Audit January 2020

Available data noted a significant increase in younger adults being the subject of concern reports. Following discussion with Health and Social Care Partnership colleagues, the Adult Support and Protection Committee commissioned a focus on transitions case file audit. This provided an opportunity to learn about transitions in Dundee using a structured approach which focused on practice. Transitions had been the focus of previous Chief Officer learning events and was identified as an area for further development.

The audit focused on transitions both from children to adult support services (ages 16–24) and from adult services to older adult services (ages 63-75). The sample consisted of those within these age categories who have had a Duty to Inquire, IRD or Case Conference occur within the last 2 years.

The audit accessed a random sample of cases based on principles of best practice.

The audit included case files from social work, health and police.

Children and families and community justice records were accessed where necessary.

# **Casefile Readers**

The audit had thirteen case-file readers, who were all staff members from NHS, Health and Social Care Partnership, Children & Families Services, Community Justice Services, Police Scotland, and Education. Readers worked in pairs to audit files, and submitted a single joint assessment for each case file.

# **Summary of Key Findings**

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# **Areas of Strength**

#### Communication

Key Findings indicate that information sharing was a strength and that across the partnership there was evidence maintained in the documents of all partners of appropriate communication. Correspondence from NHS and Police were present in all Social Work files.

#### Assessment

The majority of cases contained a Person-Centred Care Needs outcome focused assessment where the level of recording was appropriate and in keeping with the needs of the individual. In 9 of the 16 cases, the primary care and support plan followed was SMART (Specific, Measurable, Achievable, Reliable and Time-bound).

### **Case Conference Notes**

Where a case conference was held all the recordings were considered to be "good" or better.

#### **Core Processes**

There was evidence that core processes were completed within agreed operational timescales and in keeping with the supported person's needs.

#### **Involvement and Consultation**

In the majority of cases there was evidence that partners sought to take into account the individuals views and there was evidence that all dealings with the adult at risk of harm had adequately addressed all potential barriers.

# **Areas for Development**

### Chronologies

The audit process highlighted inconsistencies in practice regarding where chronologies are recorded within social work records and what they contain. From the 16 cases, 5 cases were reported to have an identifiable chronology in an expected location and in 11 cases they did not. When assessing the quality of chronologies, the following issues were highlighted:

#### **Risk Protection**

There was significant variation of the identification and assessment of risk recorded in the files. Risk assessments were found in just over half of the casefiles audited. Of these, most were rated good or better. However, an equal number were considered to be weak, unsatisfactory or could not be located.

### **Recording of Core Processes**

A number of inconsistencies were identified in how certain core processes were recorded within MOSAIC including chronologies, assessments, and plans.

### **Capacity and Independent Advocacy**

In 7 of the 16 cases there was evidence that the client was offered independent support or advocacy. In 9 there was not. Although capacity issues were identified in 11 cases a formal assessment of capacity was applied in 7. The pathway to assessing capacity varied widely as did both the outcome and recording of the assessment.

#### **Management Oversight**

The majority of files did not evidence management oversight of the case. In 13 instances there was no evidence in the case file that the line manager had periodically read the records. There was 1 case where this had been evidenced and regarding the remaining 2 cases, the answer was left blank.

### Actions arising from this activity include:

- Development and delivery of chronologies standards for Adult Protection (roll out December 2020)
- Roll out of risk assessment tool developed by LD service (commencing October 2020)
- Development and delivery of core processes guidance (commencing October 2020)
- Consultation on development of Capacity Pathway (commencing August 2020)

The improvement activities identified by the audit are at various stages of completion. These form the basis of the ASP delivery plan 2020-21.

# **Case Reviews**

There were no ASP case reviews undertaken during the period of time covered by this report.

In 2019 NHS Tayside hosted a learning event in respect of a Significant Case Review (SCR) undertaken in Glasgow in respect of "Mrs Ash". This led to an improvement plan being developed across Tayside.

In addition, the national ASP guidance on SCR's has been implemented in Dundee and has been used to inform recent ICR activity in the City.

7 minute briefings outlining learning from reviews undertaken in other authority areas are regularly shared across the partnership and these, in turn, contribute to service improvement.

### Actions arising from this activity include:

Significant Case Review training planned for Senior Management Team.

# **ASP Council Officer Forum**

In 2018 and 2019 development work was carried out with practitioners who have specific functions under Adult Support and Protection. This included consultation and engagement activity which has led to the development of an Adult Support and Protection Practitioner Forum and new learning and development opportunities for the wider workforce.

Consultation and engagement activity included focus groups in November and December 2018 and a practitioner survey. In total 69 practitioners were involved, of which, 5 were Mental Health Officers and 10 Team Managers.

The Forum was launched in March 2019, and runs on a monthly basis with representation from all service areas within Dundee Health and Social Care Partnership as well as Out of Hours practitioners and Community Justice.

Practitioners from the Forum have been involved in re-designing Council Officer Training for practitioners with Council Officer duties, designing an ASP open learn resource and piloting other learning opportunities. Since the launch, the forum has gone from strength to strength, enabling practitioners the opportunity for peer mentoring, Action Learning Sets, bespoke training and information sessions and shadowing.

The forum has adapted to the challenges of COVID-19, with the first digital forum taking place digitally via MS Teams in September 2020. The forum continues to meet on a monthly basis, with a newly developed monthly digital bulletin to support managers and practitioners who are unable to attend.

#### Actions arising from this activity include:

- Increased involvement in front line practitioners in the development and delivery of services.
- Monthly digital bulletin to support managers and practitioners

# **NHS Tayside Activity**



The appointment of an Interim Lead for Adult Protection in June 2017 has made a positive impact on developing a public protection approach within NHS Tayside and the links with our key partners to continue to establish a safeguarding culture across NHS Tayside which supports all staff to be alert and responsive to the potential risks of harm for our patients. NHS Tayside is developing a public protection approach under the leadership of the Nurse Director and this will include developing the Adult Protection infrastructure whereby funding for 2 Adult Protection Advisors has been agreed.

Over the last 2 years, areas of development have included:

An increase in both referrals and engagement across NHS services in relation to adult protection.

The Lead role provides strategic, professional and clinical leadership across the organisation working in collaboration with locality leads on all aspects of NHS Tayside's contribution to protecting adults.

Increase in completion of the NHST ASP Learnpro course as well as providing a regular programme of face to face briefing sessions along with advice and consultancy.

First NHST single agency ASP audit undertaken with plans to undertake a further audit in 2020.

This lead role supports adverse incident reporting in adult protection at all levels and in all areas across NHS Tayside and works with service leads to ensure appropriate action plans are developed to reduce reoccurrence and inform learning and best practice.

The Lead for Adult protection role supports the broader adult protection agenda including MAPPA, Violence Against Women (VAW), Human Trafficking, Missing patients and Appropriate Adults

Review of NHS Tayside Missing Patient Policy completed and a range of improvement actions to support this including introduction of Return Discussions and briefing sessions within acute hospitals led by Police Scotland.

### Mrs Ash SCR Learning Opportunity was held on 25 January 2019

NHS ASP Leads network established across Scotland with the first meeting held on 29 November 2018 and the group has continued to develop and represented at national meetings.

In collaboration with Tayside Locality ASP Leads, a range of work to develop good practice guides, learning from ICRs and SCRs, Minimum Learning Standards for ASP, IRDs and Capacity Assessments have been progressed.

### Consistent NHS representation on the ASPC.

Development of a Quality Assurance and performance framework for Adult Protection within NHST.

All of the above have has led to an increase in the number of adult concern referrals from NHS, including acute services as well as increased engagement on this agenda with multiagency partners. Input from acute staff into various protection processes has increased as a result and includes Inter-Agency Referral Discussions and case conferences.

NHS Tayside has also contributed a developing a Minimum Learning Standard Framework for ASP across the multiagency partnership as well as a variety of other locality and Tayside wide improvements.

# Adult Support and Protection Learning and Development Activity

# April 2018 - 31 March 2020



Over the period covered by this report there has been a significant increase in Adult Support and Protection learning and development opportunities available to the workforce on a single, multi-agency and Tayside partnership basis.

In 2018 and 2019 development work was carried out with practitioners who have specific functions under Adult Support and Protection. This included consultation and engagement activity which has led to the development of an Adult Support and Protection Practitioner Forum and new learning and development opportunities for the wider workforce.

Consultation and engagement activity included focus groups in November and December 2018 and a practitioner survey. In total 69 practitioners were involved, of which, 5 were Mental Health Officers and 10 Team Managers.

The Forum was launched in March 2019, and runs on a monthly basis with representation from all service areas within Dundee Health and Social Care Partnership as well as Out of Hours practitioners and Community Justice.

Practitioners from the Forum have been involved in re-designing Council Officer Training for practitioners with Council Officer duties, designing an ASP open learn resource and piloting other learning opportunities.

ASP Council Officer Consultation and Engagement			
	Participant no.	Role	
Focus Group 1	11	1 MHO, 1 Team Manager, 9 Designated Council Officers	
Focus Group 2	25	4 MHOs, 3 Team Managers, 14 Designated Council Officers, 4 Home Care assessors	
Completed Survey Responses	33	7 Team Managers, 26 designated council officers/ social workers	

Post Graduate Certificates/MHO Award			
	2018/19	2019/20	
ASP PG certificate	3 completed (academic year September 18 to June 19)	4 candidates currently undertaking the award	
MHO Award	1 completed (award November 18 – July 19)	<ul> <li>1 full time applicant</li> <li>2 conversion award from Approved Mental Health Practitioner (England)</li> </ul>	

E-learning (Dundee City Council Only)			
Course	No. completed 1 April 18 – 31 March 19	No. completed 1 April 19 – 31 March 20	
Protecting People Awareness	174	220	
Adult Support and Protection Introduction	74	91	
Human Trafficking	77	110	
Prevent (Protect Against Terrorism)	43	94	

# **TurasLearn – Tayside Protecting People E-learning resources**

All Dundee, Angus and Perth & Kinross Council protection e-learning modules (including child protection) have been uploaded to the Turas platform. This will enable access to all protection e-learning across the wider multi-agency workforce. This includes e-learning access to voluntary and private sectors, carers and supported people in Dundee. The Dundee Turas Platform is currently (November 2019) ready to go live by end of December 2019.

ASP/Protecting People Multi-agency Workshops				
Course	1 April 2018 – 31 March 2019		1 April 2019 – 31 August 2019	
	No. of workshops	No. of participants	No. of workshops	No. of participants
Protecting People Awareness	11	167	2	41
ASP Roles and Responsibilities	9	144	5	146
ASP Protecting Adults at Risk of Fire	3	46	4	62

New ASP Learning and development opportunities			
(Rolling programmes launched August 2019)			
What	Learning Outcomes/content		
ASP Defensible Decision Making	This is a full day multi-agency workshop developed and delivered on a Tayside Partnership basis covering;		
	ASP legislation		
	Risk Assessment and Management		
	Chronologies		
	Learning from Significant Case Reviews		
ASP 2nd Interviewer Training	This is a full day multi-agency workshop developed and delivered on a Dundee and Angus partnership basis.		
Dundee and Angus Council Officer Programme	e The programme includes two days of investigative interviewing and council officer training, agreed shadowing and the completion of an Open Learn resource.		
Tayside Crossing the Acts Workshop	This is a full day programme delivered on a Tayside partnership basis by Mental Health Officers.		

# Single Agency Workshops/Events

- Council Officer Training --14 New Designated Council Officers (29 & 30 October 2018)
- Dundee Carer Centre Protecting People Awareness Session 11 February 2019
- Dundee and Angus Foster Carer Event (25 September 2019) half day training event codelivered by a Dundee Mental Health Officer covering adult legislation from Self-directed Support to ASP, Mental Health Care and Treatment & Adults with Incapacity Acts
- Protecting People; Homecare Service Training plan to deliver 6 bespoke sessions, training 70 workers, from November 2019 January 2020

Independent Convenor's Biennial Report April 2018 - March 2020

# Face to face workshops

Since March 2019, a number of new Tayside wide ASP full day learning workshops were developed and piloted. After evaluation, these became part of an ongoing rolling ASP programme launched in August 2019.

In October 2020, access to new digital technology enabled many of the ASP workshops to be adapted and delivered as blended learning programmes, this has supported the workforce to continue to connect and embed their learning to current practice.

ASP face to face workshops Course/Programme Learning Outcomes/Content How has this been adapted post-COVID-19? **ASP Defensible Decision** This is a full day multi-This programme has been adapted Making agency workshop developed to be delivered as a blended and delivered on a Tayside learning programme over a three Partnership basis covering; week period. • ASP legislation Participants will have face to face Risk assessment, digital learning sessions for 2 1/2 enablement and hours each week facilitated on management MS Teams. The blended learning programme includes some self-• Chronologies and directed reading, MS Teams significant events group work and direct delivery of Learning from SCR's • learning. Crossing the Acts This is a full day case study This programme has been adapted based programme delivered to be delivered as a blended on a Tayside partnership basis learning programme over a three by Mental Health Officers. It week period. covers the following; Participants will have face to Human Rights and face digital learning sessions Convention on the Rights for 2 ½ hours, each session will of Persons with Disability be delivered by Tayside Mental • Adults with Incapacity (S) Health Officers. Act 2000 The blended learning programme • Mental Health (Care and includes the completion of an Treatment) (S) Act 2003 open learn resource and case Adult Support and study based reflective practice. Protection (S) Act 2007

Current available programmes include the following;

ASP Second Interviewer Training	<ul> <li>This is a full day multi-agency workshop developed and delivered on a Dundee and Angus partnership basis covering;</li> <li>key stages of ASP Inquiry and investigation</li> <li>ASP legislation</li> <li>Introduction to investigative interviewing</li> <li>Roles and responsibilities of first and second interviewer</li> </ul>	A digital open learn resource is currently being developed to reflect the key roles and responsibilities of the Second Interviewer. Participants will have the opportunity to work through this resource and meet over a 2 sessions on MS Teams. This training involves practical skills based elements of conducting a mock investigative interview, this is currently being considered for delivery on MS Teams in the interim.
ASP Council Officer Programme (Angus and Dundee City Council)	The programme of for practitioners with council officer functions under the ASP Act, it includes two days of investigative interviewing and council officer training, agreed shadowing and the completion of an Open Learn resource.	An adapted council officer programme will be delivered over a six week period in February 2021. This will include weekly MS Teams sessions and a recall day in August 2021. Dundee is currently sharing the council officer open learn resource with the National Adult Protection Coordinator, a short life working group has been set up to share this with other local authorities and adapt the resource at a national level. Newly Qualified Social Worker will be supported through a Newly Qualified Social Worker CP and ASP programme in partnership with Angus Council.

Throughout 2019 work progressed on the revision of the Tayside Multi-Agency Adult Support and Protection Protocol. This was launched in February 2020.



# New multi-agency blended learning courses available from November 2020

### **Protecting People Overview Programme**

This is a three week multi-agency programme underpinned by Trauma Informed Practice across the lifespan. This course is grounded in values and principles of Human Rights, impact of trauma, individual, organisational and community and role of protection. Following themes are covered;

- Trauma Informed Practice
- Human Rights
- Rights vs Protection dilemmas
- Protection across the lifespan
- Key protection themes such as Child Protection, ASP, Violence Against Women, Suicide Prevention, Public Protection
- Roles and responsibilities in protection
## **Multi-agency Introduction to ASP**

This is a 2.5 hour MS Teams briefing, participants will complete an open learn resource before attending the face to face workshop. This course focuses on the following

- Background of ASP
- Key definitions of 'unable to safeguard', and 'more vulnerable'
- Understanding Harm and Abuse
- Case dilemmas
- Multi-agency roles and responsibility

## Introduction to Hoarding and Self-Neglect Learning from Evidence Based Practice

This work shop will run over sessions on consecutive days. Each session will be two hours. The course is based on the evidence and presentation from the National ASP Coordinator, Paul Comley. It will cover the following;

- Different types of hoarding
- Multi-agency approaches
- Hoarding and assessing risk
- Research and best practice



# **Progress with Recommendations from Biennial Report 2016-18**



The **Independent Convenor's Biennial Report 2016-18** outlined the priority areas identified by Dundee Adult Support and Protection Committee for development.

The following section considers these recommendations and progress relating to these.

## **Recommendation 1**

We will improve the integrity, collation and presentation of data to the Adult Support and Protection Committee and Chief Officers Group to better inform decision making and monitor progress.

There has been a significant improvement in the collation and use of data by Dundee Adult Support & Protection Committee and Chief Officers Group, some of which is summarised in this report.

The appointment of a Senior Officer – Information, to the Protecting People Team has complimented the work already progressed across the partnership. NHS colleagues have developed a reporting framework and partners across Dundee continue to contribute to both the collation and analysis of data.

The delivery plan for the coming year outlines the areas for quality and performance improvement that will form the basis of quarterly reporting to the Committee.

6

## **Recommendation 2**

# We will undertake a review of roles, core functions and membership of the Adult Support and Protection Committee.

In partnership with the Improvement Service, Transformation, Performance and Improvement Team Dundee Adult Support and Protection Committee undertook a variety self-evaluation activity of core business. This has led to the development of thematic agenda revision of terms of reference. Work is ongoing in the development of a corporate risk register in respect of Protecting People which reflects Adult Support and Protection needs.

Other actions from this activity are incorporated in the ASPC delivery plan.

## **Recommendation 3**

We will implement the Recommendations from The Thematic Joint Inspection of Adult Support and Protection through the Public Protection programme and monitor and evaluate progress with regular reports to the Committee. Specifically: The partnership should make sure that full implementation of its Information and Communication Technology (ICT) system is achieved in order to meet the user needs of council officers and other users to record all adult protection information clearly and effectively. The partnership should make sure that its key processes for adult support and protection follow a clearly defined path, which council officers and other staff fully understand and implement. The partnership should make sure that it prepares valid chronologies, risk assessments and risk management plans for adults at risk of harm who require them.

In partnership with the Care Inspectorate the Chief Officers Group (Public Protection) has embarked upon an ambitious two year transformation programme. The Adult Support and Protection Committee is an integral partner in this. A summary of this work is detailed in this report.

In addition, the continued development of the council officer's forum ensures that practitioners make a significant contribution to this recommendation.

## **Recommendation 4**

We will further develop effective ways to ensure that the views of supported people and their carers are collated and heard and contribute to the evaluation and development of core Adult Support and Protection processes. Dundee Adult Support and Protection Committee commissioned a review of advocacy services across the city which is due to report later this year. Three people with lived experience are represented on the Committee are supported to contribute and meet regularly with the chair and lead officer. In addition, consistent recording of outcomes is to be included in key ASP activities alongside the coproduction of ASPC carers strategy with carers organisations.

## **Recommendation 5**

We will undertake a review of multi-agency Learning and Organisational Development activity relating to adult protection to ensure it meets the needs of the workforce and people in need of protection. Initial focus in respect of council officer role, broadening out to the wider workforce.

Progress relating to this is detailed in the Learning and development Activity section of this report.

## **Recommendation 6**

We will ensure that learning from Initial and Significant Case Reviews are applied in the context of Adult Support and Protection across Dundee.

This continues to be a key area of development now being progressed by the Chief Officers Group.

## **Recommendation 7**

We will evaluate the impact of the Adult at Risk lead professional model on individuals who do not meet the three point test and ensure that learning from this contributes to the development and delivery of practice across the city.

Evaluation is due to report later this year.

## **Recommendation 8**

We will evaluate early Screening Activity across the partnership to be assured that the recognition of and response to adults at risk is consistent and proportionate.

Evaluation is due to report later this year.



# Dundee Adult Support 7 & Protection Delivery Plan 2020-2021



Dundee Adult Support and Protection Committee is committed to reviewing and improving its activity in relation to keeping people safe.

To this end, a delivery plan has been developed for the coming year.

An analysis has been undertaken identifying key issues, strengths and areas for improvement from the following sources;

- Former Balanced Scorecard and associated Adult Protection datasets
- Preventative work undertaken across the partnership including those not generally considered to be Adult Support and Protection.
- Case file audit outcomes and action plans
- Learning and workforce development activity
- Work carried out by the Improvement Service
- Areas of development identified from the Thematic Inspection.
- The findings of SCRs and ICRs
- Protecting People Transformation Programme.
- Council Officers Forum.

The plan compliments improvement work being undertaken elsewhere across the partnership.

Five priority areas have been identified, namely;

- 1. What key outcomes has Dundee Adult Support and Protection Committee achieved?
- 2. How well does Dundee Adult Support and Protection Committee meet the needs of our stakeholders?
- 3. How good is Dundee Adult Support and Protection Committee's delivery of services for adults, carers and their families?
- 4. How good is Dundee Adult Support and Protection Committee's operational management?
- 5. How good is Dundee Adult Support and Protection Committee's leadership?

Each section considers a priority area, considering the extent which Dundee Child Protection Committee can demonstrate key outcomes, what evidence may be used and proposed actions to support the plan before detailing objectives, actions, leads, timescales success criteria and measures / indicators.

As summary of the priority areas is included in the following section.

# 1. What key outcomes has Dundee Adult Support and Protection Committee achieved?

This section is about the real difference and benefits that services are making to the lives of vulnerable adults. It focuses on the tangible results partners are achieving in relation to making and keeping adults safe.

#### To what extent can we demonstrate:

- Adults are kept safe from harm and have improved wellbeing across a range of indicators
- Dundee has a confident and supported workforce delivering best practice to adults, their carers and families
- Dundee ASPC is assured and can provide assurance that key processes are delivered effectively and services are operating in line with up to date policies, procedures and guidance.

## **Evidence to support plan.**

## Strategic Planning and Continuous improvement – including through mutual accountability and scrutiny

- Policies, procedures and guidance
- Data and evidence
- Learning and development
- ICRs / SCRs
- Practice improvement / development
- Planning
- Local, regional and national interfaces.

## Data to Committee on Quarterly Basis commenced 1st June 2019

## Proposed Action(s): 2021

Further develop multi-agency data set.

Committee to agree on priority indicators. Committee will be provided with data on a quarterly basis and analysis of scrutiny questions.

Further development of multi-agency analysis of data, focus on outcomes and inform development and delivery of services.

# 2. How well does Dundee Adult Support and Protection Committee meet the needs of our stakeholders?

This section is about the experience and feelings of adults in need of care and protection and their carers. It relates to the differences services are making to their lives and their life chances. It includes the impact of services in optimising the wellbeing of individual adults... It considers how vulnerable adults are helped through compassionate, supportive and empathic engagement with staff. It focuses on the extent to which individuals and families are helped to build resilience and meet their own needs.

## To what extent can we demonstrate:

- Adults feel listened to and that their views are taken seriously when decisions are being made.
- Adults feel that staff have taken the time to get to know them, the impact of their previous experiences and understand their strengths and needs.
- Adults enjoy good relationships, built up over time, with consistent individuals who they trust enough to talk to when they need help.
- Adults feel that they are in the right place to experience the care and support that they need.
- Adult's wellbeing is improving across and risk is effectively managed.

## **Evidence to support plan:**

- Feedback from adults in all forms, including digital communication.
- Focus groups.
- Recording of adults views in case records.
- Contributions from Adult Support and Protection case conferences.
- Use of independent advocacy services.

## Proposed Action(s): 2021

Further develop role of stakeholder group in representing views of people and groups at risk.

Review of advocacy services for people and carers subject to adult support and protection activity.

Consistent recording of outcomes to be included in key ASP activities.

# **3. How good is Dundee Adult Support and Protection Committee's delivery of services for Adults at risk?**

This section is about processes for service delivery. It considers the effectiveness recognition and initial response to adults at risk when there are concerns about their safety. It considers the quality of plans to reduce risk, meet needs and improve wellbeing. It takes account of the effectiveness of arrangements for reviewing progress, looks at timely and effective intervention and considers the extent to which adults, carers and families are informed, included and enabled to take part meaningfully in assessment, planning and intervention according to individual needs / life experience.

#### To what extent can we demonstrate:

- Systems are in place for receiving and recording information from anybody who is concerned about the safety or wellbeing of an adult (including outside office hours).
- Staff, including those who work with children, are alert to and recognise the signs that Adults at risk may need help or protection from harm. This includes patterns of concern over time and cumulative harm.
- If a concern is raised about an adult at risk which requires further exploration, staff have the skills to gather relevant information, know what the other sources of information are and how to get them.
- Staff confidently analyse the information gathered to reach an initial assessment.
- Appropriate consideration is always given to arranging initial referral discussions involving the minimum of police, health and social work.
- Initial referral discussions (IRDs) always take place in response to Adult Support and Protection concerns including when new concerns arise for people already receiving a service.
- A clear system for recording IRDs is used by partners and clearly outlines the rationale for decision making.
- Staff take appropriate action to ensure that no adult at risk is exposed to continued risk of harm.

## **Evidence to support plan:**

- Feedback from adults at risk.
- Results of previous scrutiny.
- Relevant plans and policies.
- Information sharing guidance and protocols.
- Adult Support and Protection procedures.
- Public information.
- Relevant performance management data.
- Review of records for individual adults at risk.
- Audit of initial referral discussion minutes.

## Proposed Action(s): 2021

Audit activity to be undertaken to focus upon individuals who do not meet the three point test.

Evaluation of Early Screening Activity across the partnership.

Develop and apply mechanism by which learning from SCR's (out with Dundee) can be demonstrably considered and applied in a Dundee context.

# 4. How good is Dundee Adult Support and Protection Committee's operational management?

This section is about operational and strategic management of services for adults at risk. It considers the extent to which Adult Support and Protection and corporate parenting policies, procedures and the use of legal measures link to the vision, values and aims and support effective joint working. It looks at the effectiveness of Adult's services planning, the Adult Support and Protection Committee, in improving outcomes for children and young people. It focuses on how well adults, carers, families and other stakeholders are involved in service planning and development. It gives attention to how well Adult's rights are promoted. It relates to the effectiveness of performance management and quality assurance to ensure high standards of service delivery. It takes account of how well selfevaluation is informing improvement and service development.

## To what extent can we demonstrate:

- Policies and procedures are consistent with the strategic vision.
- Policies and procedures carefully consider and reflect local partnership arrangements to ensure cohesion across structural boundaries.
- Policies and procedures are equality impact assessed, effectively implemented and regularly evaluated and reviewed.
- A cohesive suite of policies are in place to ensure we have no significant gaps.
- Policies and procedures reflect a focus on outcomes.
- Effective communication and management systems are in place to ensure that employees understand and implement policies and procedures.
- Single and multi-agency policies and procedures fit well together and enhance partnership working.
- Best practice is promoted through the development of new policies and procedures.
- Legal measures are always appropriately considered when making decisions about the care of adults at risk.

#### **Evidence to support plan:**

- Strategic and operational plans.
- Committee reports and board papers.
- Procedure manuals.
- Guidance for employees.
- Guidance or handbooks for carers.
- Employee newsletters, bulletins and other communications.
- Individual records of adults at risk subject to legal measures.
- Minutes of case conferences, reviews and other decision-making meetings for adults at risk.
- Equality impact assessments.
- Disability equality duty policy.
- Other equality policies.

#### Proposed Action(s): 2021

Ensure that single and multi-agency self-evaluation activity informs the review and development of policies, procedures, instructions and guidance. Develop regular seven minute briefings relating to development activity

# **5. How good is Dundee Adult Support and Protection Committee's leadership?**

This section is about the commitment and effectiveness of leaders in striving for excellence in the quality of services to keep children safe and achieve sustained improvements in the lives of adults at risk in need of care and protection. It focuses on collaborative leadership to plan and direct the delivery of services for adults at risk linked to the shared vision, values and aims. It also examines how well leaders are driving forward improvement and change. It takes account of how well leaders are adapting to new environments and negotiating complex partnerships.

#### To what extent can we demonstrate:

- Partners place improving outcomes for people using services at the heart of their vision.
- There is a shared vision for protecting adults at risk which is ambitious and challenging.
- There is collective ownership of the ambitions and aspirations of the partnership.
- Partners understand and demonstrate their commitment to equality and diversity.
- Partnerships include all the right people to meet the identified objectives of protecting children and meeting corporate parenting responsibilities.
- Working in partnership with others is actively considered where this could add value to existing or planned services.
- Leaders have a clear understanding of the local and national priorities that drive Adult Support and Protection and corporate parenting services.
- Leaders take a long-term view in setting the strategic direction.
- There has been wide enough consultation about future options and risks and the best way forward for Adult Support and Protection and corporate parenting services.
- Plans contain a proper analysis of needs and gaps and what needs to change.
- There is purposeful leadership of strategy and commissioning with sound implementation and monitoring arrangements.
- There is clarity about the resource contribution that each partner makes to the partnership and about governance.

## **Evidence to support plan:**

- Plans including the local outcome improvement plan, Adult's services plan, HSCP
- Senior managers' communication with the workforce about professional standards.
- Examples of how senior managers have communicated their vision for Adults at risk
- Employee surveys that demonstrate employees understand the vision.
- Communication from adults demonstrating that they have been involved in developing the vision, values and aims.
- Feedback from engagement with adults at risk, families, staff and community members.

## Proposed Action(s): 2021

Dundee ASP adopts a shared vision.

Further develop actions identified from Improvement Service Activity.

Further develop Corporate Risk Register for Protecting People.

Further progress Transforming Public Protection



# Appendices

## Adult Support and Protection Statistical Report Reporting Period 1st April - 31st March 2016-17, 2017-18, 2018-19, 2019-20

## 1. Introduction and Summary

## Chart 1

Dundee Single Outcome Agreement (Annual Report) - Indicators: Number of Referrals to Social Work, considered under ASP which proceeded to:

a) Initial Management Discussion (IMD – all concerns reported have an IMD so this is also the total number of referrals received)

Scottish Government National Data Collection - How many ASP referrals were received?



Number of Concerns Received for Year (01 April - 31 March)

Dundee Single Outcome Agreement (Annual Report) - Indicators: Number of Referrals to Social Work, considered under ASP which proceeded to:

#### b) Initial Referral Discussion (IRD)





• 2016-17 • 2017-18 • 2018-19 • 2019-20

## Chart 3

Dundee Single Outcome Agreement (Annual Report) - Indicators: Number of Referrals to Social Work, considered under ASP which proceeded to:

c) Case Conference (CC)

Scottish Government National Data Collection – How many cases were subject to an ASP Case Conference?







Scottish Government National Data Collection - Source of Principal Referral - Dundee Adult Protection Committee Balance Scorecard



OTHERS	2016 - 17	2017 - 18	2018 - 2019	2019-2020
Scottish Ambulance Service	1	0	0	1
Scottish Fire & Rescue Service	20	5	8	29
Office of Public Guardian	0	0	2	2
Mental Welfare Commission	0	0	0	0
Healthcare Improvement Scotland	0	1	0	0
Care Inspectorate	18	10	13	9
Other organisation	20	56	39	33
Other Local Authority	0	0	3	0
Self (Adult at risk of harm)	5	5	2	3
Family	4	15	9	11
Friend/Neighbour	1	7	1	1
Unpaid carer	0	0	0	1
Other member of public	0	2	1	0
Anonymous	4	1	2	3
Nursing / Care Home	3	14	6	6
Others	0	0	9	22
Total Others	76	116	95	121

## Source of Concerns by Year (01 April - 31 March)

Scottish Government National Data Collection - Number of Investigations commenced under the ASP Act

19%



## **Chart 6a Males**

Scottish Government National Data Collection – How many investigations commenced for people by gender and age group.



MALE - Number of Investigations by Age Group for Year (01 April - 31 March)

## **Chart 6b Females**



FEMALE - Number of Investigations by Age Group for Year (01 April -31 March)

## Chart 7

Scottish Government National Data Collection – Number of Investigations commenced for people by Ethnicity Group.



#### Ethnicity for Investigations by year (01 April - 31 March)

## Chart 8a

Scottish Government National Data Collection – How many investigations were commenced for clients by primary main client group?



## Chart 8b. Other client groups:

Other	Acquired Brain Injury	Palliative Care/ Progressive Illness	Visual/ Hearing Impairment	No Client Group
2016-2017	2	4	0	3
2017-2018	0	0	0	4
2018-2019	0	0	0	9
2019-2020	0	0	0	10

## Chart 9a

Scottish Government National Data Collection – Type of principle harm which resulted in an Investigation.



#### Type of Harm for Investigations by Year ( 01 April -31 March)

## Chart 9b

	Fire Safety Risk	Harassment	<b>Domestic Abuse</b>	Exploitation
2016 - 17	1	1	1	0
2017 - 18	1	0	0	0
2018 - 19	0	0	1	1
2019 - 20	0	0	5	0

## Chart 10

Scottish Government National Data Collection – Where did the principle harm take place which resulted in an investigation?



Public Place Includes:

- Public Buildings such as Shops and Libraries
- Business Premises such as Banks/Post offices
- Public Parks
- Bridges
- On public Streets and Roads

## 11

Scottish Government National Data Collection – How many Protection Orders were granted? 1 renewed

Dundee Adult Protection Committee Balance Scorecard – No of Protection orders that are currently in effect? 1

#### 12

Scottish Government National Data Collection - Number of large scale investigations commenced - 1

## Early Screening Group (ESG) Report for

## Chart 1

Number of Adult Concern Reports (ACR's) discussed by the ESG by Financial Year 01 April – 31 March 2016-2020

% of All ACR's discussed by the ESG For Year (01 April - 31 March)



## Chart 2

The source of the ACR's discussed by the ESG.

Source of Concerns Discussed by the ESG for Year (01 April - 31 March)



	& Rescue	Member of the Public/Other family member			
2016-17	15	0	1	4	0
2017-18	5	0	0	3	0
2018-19	8	4	3	7	0
2019-20	13	1	0	3	0

Other Sources of ACR's Discussed by the ESG

## Chart 3

#### The Client Group for the ACR's discussed by the ESG



Client Group for ACR's Discussed by the ESG for Year (01 April - 31 March)

Other	No H&D Characterisitic
2016-17	54
2017-18	85
2018-19	145
2019-20	114



#### The Principle Type of Harm for the ACR's discussed by the ESG.

**Domestic Abuse Fire Safety Risk** Other **Discrimination**/ Harassment 2016-17 2 4 4 2 2 2017-18 0 2018-19 3 3 7 2 2019-20 0 7



The outcomes for ACR's discussed by the ESG.

Reasons for No Further Action:

- No Further Action Inappropriate Referral to ASP
- Adult Lives out with Dundee area Concern passed to Appropriate Local Authority
- After initial inquiry by a Designated Council Officer the adult declined support.
- Advice and information given and signposted to appropriate services / support.
- Concern passed onto GP for information and support.
- Concerns are being investigated by Police Scotland.

# What I nee( from y

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