



**REPORT TO: HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD – 28 AUGUST 2018**  
**REPORT ON: JOINT INSPECTION OF ADULT SUPPORT AND PROTECTION**  
**REPORT BY: CHIEF SOCIAL WORK OFFICER**  
**REPORT NO: DIJB29-2018**

## **1.0 PURPOSE OF REPORT**

The purpose of this report is to inform the Integration Joint Board (IJB) of the outcome of the Joint Inspection of Adult Support and Protection of the Dundee Community Planning Partnership and of the participation of the Health and Social Care Partnership in the Transforming Public Protection Programme, including commitment of IJB resources.

## **2.0 RECOMMENDATIONS**

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

- 2.1 Notes the outcome of the inspection (detailed in section 4.3).
- 2.2 Notes the participation of the Health and Social Care Partnership in the Transforming Public Protection Programme (section 4.4 and Appendix 1).
- 2.3 Instructs the Head of Finance and Strategic Planning to submit a report detailing progress in this area to the Performance and Audit Committee no later than 31<sup>st</sup> December 2018.

## **3.0 FINANCIAL IMPLICATIONS**

The cost of implementing the Transforming Public Protection Programme will be funded through additional resources identified by Dundee City Council.

## **4.0 MAIN TEXT**

### **4.1 Adult Support and Protection Overview**

4.1.1 The Adult Support and Protection (Scotland) Act 2007 seeks to protect and benefit adults at risk of being harmed. The Act requires local authorities and a range of public bodies to work together to support and protect adults who are unable to safeguard themselves, their property and their rights. The Act defines adults at risk as people aged 16 years or over who:

- Are unable to safeguard their well-being, rights, interests, or their property;
- Are at risk of harm (eg physical harm, psychological harm, neglect, financial harm or sexual harm); and,
- Because of a disability, mental disorder, illness of physical or mental infirmity, are more vulnerable to being harmed than adults who are not so affected.

4.1.2 Community Planning partners have a range of responsibilities for the protection of vulnerable groups which are discharged through operational and strategic arrangements for adult support and protection, alcohol and drugs, child protection, humanitarian protection, the management of high risk of harm individuals, suicide prevention and violence against women. This area of work is led by the Chief Officers Group (COG) supported by the multi-agency Committees/Partnerships which correspond to the areas of public protection. The COG is

chaired by the Chief Executive of the Council and comprises senior representation from health, police, fire and rescue, chairs of the various committees and key officers, including the Chief Officer of the Health and Social Care Partnership and the Chief Social Work Officer. This group individually and collectively is responsible for leadership, scrutiny and direction of public protection.

- 4.1.3 Over the last two years (2016-18) there have been 1,855 adult protection concerns referred to the Health and Social Care Partnership for screening alongside partner agencies. In the same period 7% of these referrals were assessed as meeting the 'three-point test' and proceeded under the Adult Support and Protection legislation.

## 4.2 Adult Support and Protection Thematic Inspection Overview

- 4.2.1 Between July and December 2017 the Care Inspectorate, working jointly with Her Majesty's Inspectorate of Constabulary Scotland and Healthcare Improvement Scotland, undertook a joint thematic inspection of adult support and protection arrangements in six local community planning partnerships across Scotland, including the Dundee Community Planning Partnership. This activity was focused on three quality indicators:

- Outcomes for adults at risk of harm and their unpaid carers.
- Key adult support and protection processes.
- Leadership for adult support and protection.

- 4.2.2 Inspection activity included two distinct phases; a range of pre-inspection self-assessment returns (including analysis of adult protection referrals) and an on-site activity (including case file reading and a series of interviews/focus groups with key stakeholders).

- 4.2.3 A report of the findings of the thematic inspection was published together with evaluations (using a six-point scale evaluation for each of the three quality indicators) on 3 July 2018. An assessment of each Community Planning Partnership inspected was included, alongside an overview chapter highlighting key themes from across Scotland. The inspection report can be read in full at:

<http://www.careinspectorate.com/images/documents/4453/Review%20of%20adult%20support%20and%20protection%20report%20April%202018%20Interactive.pdf>

## 4.3 Assessment of Adult Support and Protection Arrangements in Dundee

- 4.3.1 The Dundee Partnership was assessed as:

Outcomes for adults at risk of harm and their unpaid carers	ADEQUATE (strengths just outweigh weaknesses)
Key adult support and protection processes	WEAK (important weaknesses)
Leadership for adult support and protection	ADEQUATE (strengths just outweigh weaknesses)

- 4.3.2 The inspection report recognises that multi-agency partners work well together to deliver positive outcomes for adults at risk of harm and their carers. It acknowledges that as a Community Planning Partnership we respond timeously to adult protection referrals and adults at risk of harm; work hard to support all vulnerable people; carry out effective work on financial harm; and, support involvement and inclusion of adults at risk of harm and unpaid carers. The involvement of the full range of Community Planning partners, including the third sector, fire and rescue service and banking sector in adult protection activity was recognised as an area of good practice by the inspection team. The inspection team were also supportive of programmes of improvement led by the Health and Social Care Partnership in areas such as the introduction of the 'lead professional' model, development of the Early Screening Group and Inter Agency Referral Discussions/case conference practice.

- 4.3.3 Whilst the report confirms that adults at risk in Dundee are safer, have enhanced wellbeing and an improved quality of life as a result of adult support and protection processes the inspection team found a number of areas of the Dundee Partnership's key processes that require significant improvement. On this basis the report makes three specific recommendations for improvement:

- 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.

4.3.4 The report highlights that, following recent self-evaluation activity, partnership leaders had already identified that further improvements were required in these areas. Many of the areas for improvement for the Dundee Partnership are also in the overview section of the inspection report as shared challenges across Scotland.

#### **4.4 Transforming Public Protection Programme**

4.4.1 The areas for improvement highlighted within the inspection report have some similarities to those from the Joint Inspection of Services for Children and Young People (published in 2016) and findings within Significant Case Reviews completed during the last two years. This suggests that a focused programme of improvement and transformation is required across operational and strategic public protection processes.

4.4.2 The Transforming Public Protection Programme (attached as Appendix 1) will be focused on embedding safe systems of practice that are resilient to changing resource pressures and promote consistency of practice and quality across all protection responses. It will include aspects of practice development and improvement, service re-design and organisational development. The programme will be supported by the Care Inspectorate who will provide advice and the involvement of their staff in activities. In the initial 3 month planning period, their focus will be on supporting co-production with the workforce to develop a detailed project plan informed by the experience and expertise of the workforce and other relevant stakeholders, including groups representing the views and interests of people at risk and their carers.

4.4.3 Officers from the Health and Social Care Partnership will also be working with the Adult Support and Protection Committee to identify any specific improvement actions that can be progressed in the short-term in relation to multi-agency adult protection processes.

4.4.4 A report on the Transformation Programme was considered by the Policy and Resources Committee of Dundee City Council on 20<sup>th</sup> August 2018 where agreement was reached to establish two additional posts to generate additional capacity to deliver the programme. The cost will be £58,000 in 2018/19 and £100,000 in a full financial year. The posts will be at grade 11 and grade 12 with costs met from the Council's General Contingency. The expectation is that any further resource implications will be shared by relevant community planning partners.

#### **5.0 POLICY IMPLICATIONS**

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

#### **6.0 RISK ASSESSMENT**

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

#### **7.0 CONSULTATIONS**

The Chief Finance Officer, the Clerk, Professional Advisors, and Head of Service - Health and Community Care were consulted in the preparation of this report.

#### **8.0 DIRECTIONS**

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	✓
	2. Dundee City Council	
	3. NHS Tayside	
	4. Dundee City Council and NHS Tayside	

**9.0 BACKGROUND PAPERS**

None.

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Chief Social Work Officer

6 August 2018

Kathryn Sharp  
Senior Manager

## Transforming Public Protection Programme Outline Proposal - July 2018

### Context

The recent Inspection of Adult Support and Protection identified a number of strengths with three key recommendations for improvement:

- 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 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.

There are similarities to findings from the Joint Inspection of Services for Children and Young People (2016) and findings in other Local Authority areas. Whilst ICT implementation was not a feature in the Children's Services Inspection it is accepted that elements of Children and Families are also experiencing challenges in achieving full implementation.

Social Work Services typically work with more vulnerable people and play a lead role in relation to the development and co-ordination of protection processes. Good practice in the assessment and management of risk is dependent upon an effective multi-agency approach and whilst there should be a clear focus on practice relating to service users with higher levels of risk and needs, practice relating to those presenting with concerns which do not require statutory interventions also needs to be consistent and defensible. A focused programme of improvement and transformation is required, initially in relation to social work practice to address key elements of practice and decision-making, specifically in relation to:

- Use of chronologies;
- Joint and defensible risk assessment;
- Targeted risk management/protection plans;
- Timely and well attended decision making meetings; and
- Service user and carer involvement, including through independent advocacy services.

Scrutiny activity highlights that change has not been progressed at sufficient scale or pace and, from a leadership perspective, Chief Officers (Public Protection) Strategic Group (COG) and Protecting People Committees/Partnerships and their Chairs need to operate in a way that supports continuous improvement providing an appropriate level of scrutiny and accountability.

### Transformation Programme

A targeted two year programme is required to ensure sustained improvement on a range of distinct but interlinked priorities focusing on three key areas of transformation:

#### 1 Driving culture change within services towards continuous improvement and quality assurance, including embedding a culture of expectation of excellence including:

- Development programme for operational managers to support a culture of continuous improvement and quality assurance.
- Programme of practice improvement with frontline staff across social work functions and relevant multi-agency partners with a focus on:
  - Improving understanding of, and adherence to, protection processes;
  - Collaborative working at points of transition;
  - Service user and carer involvement; and,
  - Embedding a culture of quality assurance and improvement.
- Development of a programme of single and multi-agency case file auditing/case-based self-evaluation.

- Ensuring that ICT implementation addresses the needs of protection processes and performance reporting and enhancing the use of digital technologies.

## **2 Significantly enhancing leadership support and scrutiny for public protection issues including:**

- Ensuring Protecting People Committees / Partnerships and COG focus on scrutiny and quality assurance, including:
  - Development of Committee / Partnership risk registers;
  - Enhanced provision of data and analysis,
  - Reviewing reporting mechanisms to Committees/ Boards, as well as participation of members in strategic protecting people activities.
- A programme of communication

## **3 Re-design of protection processes to ensure streamlined and co-ordinated processes that respond flexibly to the inter-linked needs of vulnerable people and families including:**

- Exploring options to more closely align approaches across children and adults in terms of screening and addressing immediate responses to concerns.
- Review co-ordination of key protection processes to more clearly align and integrate functions such as chairing of case conferences.
- Full consideration of the implications of General Data Protection Regulations (GDPR) for protection processes and remedial action where required.

### **Governance Arrangements**

The programme will be overseen by the COG. The CSWO, as professional lead for social work, will also have a key role in leadership and oversight of the transformation programme. Detailed governance arrangements for the programme will be developed during the first three months and a performance monitoring framework which evidences the impact of transformation activity against targets for improvement will be developed to support the approach.

The Care Inspectorate have committed to act as a “critical friend” by providing both advice and the direct involvement of their staff. They will also help to identify appropriate national improvement bodies to support specific actions and Community Planning Partnerships where examples of best practice are available.

### **Phased Implementation**

The programme will last for 2 years and the advice from the Care Inspectorate is that there should be a phased, targeted approach with clearly articulated priorities.

In the first 3 months the focus will be on driving cultural change with Care Inspectorate input focusing on co-production with staff to develop a more detailed project plan. Staff will work alongside Care Inspectorate Improvement Advisors to establish statements of ambition for each work stream. At the end of the planning phase a detailed plan will be agreed by the COG; this will provide the work plan for the designated programme lead and form the basis of the improvement plan submission for the adult support and protection inspection which is required by October 2018.

Work in relation to enhancing leadership and scrutiny will be phased in over the following three months, however preparatory work has started with COG and Committee/Partnership members. Redesign of protection processes will be planned and implemented from 2019/20, with some preparatory work being undertaken prior to this.

### **Initial Resource Investment**

Investment will be required over 18/24 month period as follows:

- A dedicated Lead Officer Post will be established, on a temporary basis, in the Protecting People Team to drive the programme forward; and,
- An additional senior officer will be established, on a permanent basis, in the Protecting People Team to enhance data and analytical capacity to support service redesign, quality assurance and the work of Committees/Partnerships.

A range of other resource issues may arise as planning and implementation progresses which will be fully scoped. Some elements of this work may, in the longer term, result in efficiencies for re-investment to address current resource pressures. The programme will also require commitment of resources from partner agencies and flexibility in application of these resources to support the aims, objectives and outcomes of the programme. This will include:

- protected learning and organisational development capacity;
- IT support, beyond Mosaic implementation within Dundee City Council / Dundee HSCP, to support increased investment in digital technologies; and,
- Collaborative working with support services across to support practice improvement.

