



Perth and Kinross Adult Protection Committee

Bi-ennial Report 2018 – 2020



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1. Introduction by the Chair of the Adult Protection Committee

Bill Atkinson

Independent Chair of Perth and Kinross Adult Protection Committee (APC)

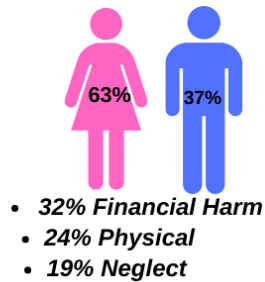
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ASP SUMMARY

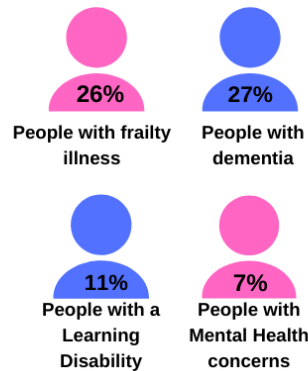
2018 - 20



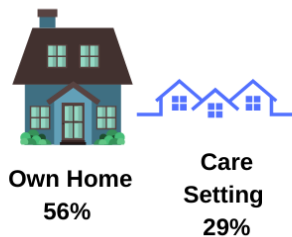
What we found...
3039 total referrals
390 Adult Support and Protection Cases



Who is receiving Support?



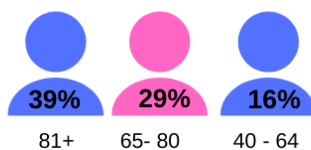
Where does harm happen?



Other Information....

- No Protection Orders
- 41 Case Conferences
- 7 Large Scale Investigations

What age group is most at risk?



Multi-Agency Training

481 people have been trained face-to-face



9270 E-learning sessions for health staff in Tayside



1485 E-Learning sessions for other staff in Perth and Kinross

What was the impact on adults at risk?

- 4% led to criminal proceedings
- 68 people have been supported by Independent Advocacy

What we did 18/20

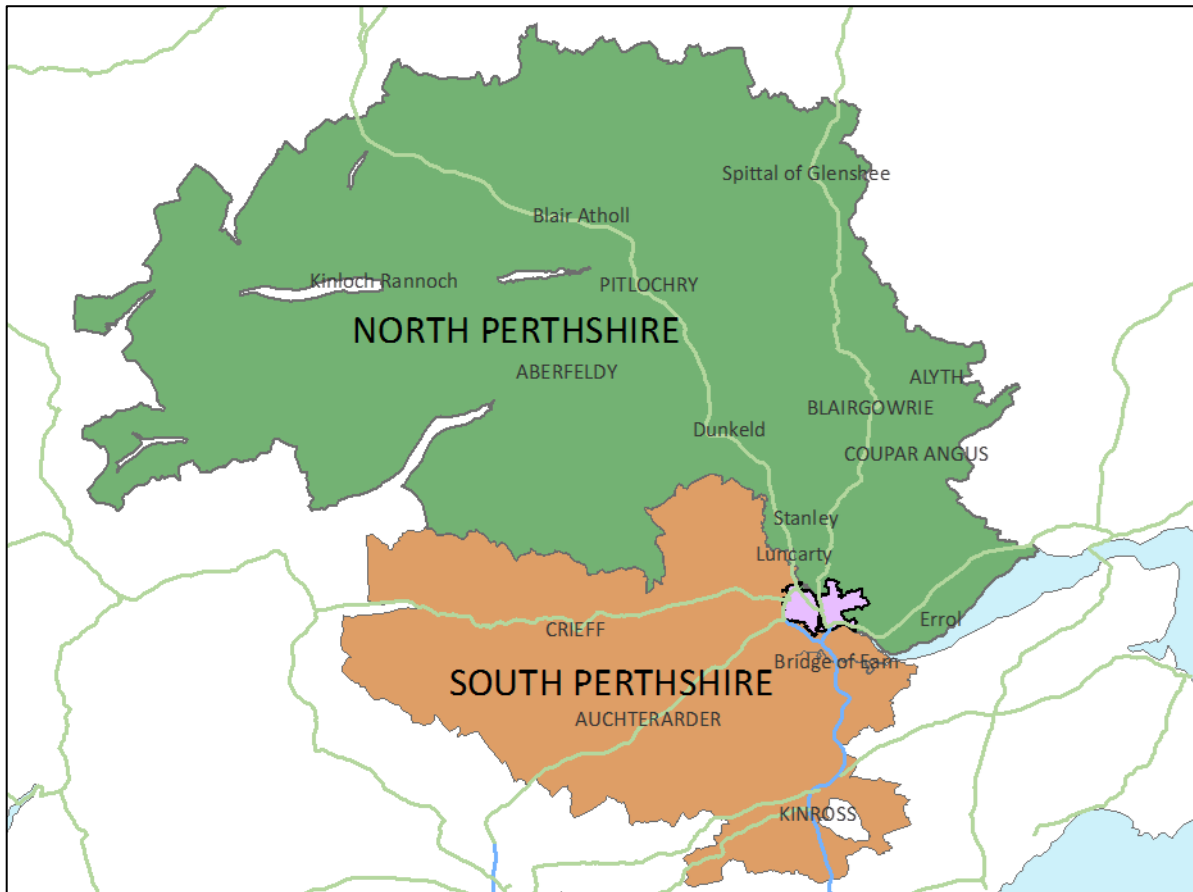
- Responded effectively to COVID 19 across public protection
- Increased referrals from health
- 2 new carer reps and elected member on APC
- Implemented better arrangements for protecting residents in care settings

What are our priorities?

- Increased engagement with adults, families and carers especially with college students, learning disability groups and faith leaders
- Focused audit on people with a learning disability
- Develop practice standards for new ways of working

3. Context

3.1 Perth and Kinross



Perth and Kinross covers an area of 5,286 square kilometers and is the fifth largest area by land mass in Scotland. It is the 6th fastest growing population in Scotland and adults account for 81% of residents. The past decade has seen an increase in the number of people in the older age group (65+) who are resident in Perth & Kinross which is currently 18.1% of the population compared with a national average of 10.6%.

The older age profile is reflected in that the average age of the population in Perth and Kinross is 43 years, slightly higher than the national average age of 40 years.

Perth & Kinross has a population of 151,100 as of 2017. This is made up of 74,187 Males and 76,913 Females.

- There are 24,453 children (aged 15 and under), or 16.2% of the total population.
- There are 91,132 people of working age (aged 16-64), or 61.0% of total the population.

- There are 34,515 older people (aged 65 and over), or 22.8% of the total population.

The geographical distribution of the population across urban, rural and remote areas poses challenges for the planning and delivery of services. The number of ASP cases do differ by locality and can be influenced by the location of key establishments and the rural/urban challenges.

In Perth and Kinross, there are five community planning partnerships:

- Perth City
- Kinross-shire, Almond & Earn
- Strathearn
- Highland and Strathay
- Strathmore

These localities each have a local action partnership made up of elected members, communities, and public services.

Through the local action partnerships, the community planning partnership identifies their particular needs and challenges. Perth & Kinross council has 40 councillors in 12 electoral wards.

NHS Tayside is responsible for commissioning health care services for residents across Tayside and had a combined population of 416,090 based on mid-year 2017 population estimates published by National Records of Scotland. NHS Tayside's Governance includes three major hospitals; a number of community hospitals and also includes over 60 GP surgeries and a variety of health centres staffed by thousands of employees.

The Tayside Division of Police Scotland command area Angus, Dundee and Perth & Kinross.

3.2 Vision

People have the right to live as independently as possible in a safe environment, free from harm, to have their wishes and feelings taken into account and to have the minimal amount of intervention into their personal lives

3.3 Purpose

To support and protect adults who may be at risk of harm or neglect and who may not be able to protect themselves.

3.4 National Context

Adult Support and Protection in Perth & Kinross is set within the wider policy in Scotland and the National Policy Forum.

<https://www2.gov.scot/Topics/Health/Support-Social-Care/Adult-Support-Protection>

The National Strategic Forum

The National Forum provides a strategic and cross sectoral view of what is needed to improve the delivery of adult support and protection across Scotland. The Forum will assist Scottish Government and delivery partners in identifying the workstreams required to improve the assurance and operation of adult support and protection and its interface with existing and developing legislative and policy areas.

The Scottish Government also supports the role of the National Adult Protection Coordinator – this role involves making connections to build stronger local networks and to improve the co-ordination, development and dissemination of best practice, as well as promoting joint working between Adult Protection Committees

The National Improvement Plan has identified 6 main areas

- Assurance and Inspection
- Governance and Leadership
- Data and outcomes
- Policy
- Practice Improvement
- Prevention

3.5 Tayside collaboration of Independent chairs and Lead officer

The Independent Chairs, Lead Officers, Police Scotland and NHS Tayside meet regularly in Tayside to coordinate work that provides consistency for regional partners and identifies common areas of ASP work.

Work ongoing includes

- Completed update of Tayside Multi-agency Operational Guidance (launched February 2020) which includes joint policies in relation to chronologies and information sharing
- A short life working party led by NHS ASP lead and Police Scotland was convened to look at the overlap of processes in relation to adverse incidents and a paper is being presented to all three Chief Officer Groups.
- Learning and Development Framework has been agreed and new courses have been developed that can be accessed by all staff across Tayside.
- Work has commenced on developing a Tayside reporting template for ASP activities which will allow for benchmarking.

3.6 Local Context

The safeguarding, supporting and promoting the welfare of adults at risk is a shared multi-agency responsibility across the public, private and third sectors.

Adult Protection Committee (APC)

The Adult Protection Committee (APC) is a multi-agency group that meets quarterly. The Committee is chaired by an Independent Convener and has a range of statutory, private and voluntary organisations, carers and other relevant people which oversee Adult Support and Protection (ASP) processes in Perth and Kinross. Representation on the APC has been widened to represent a more diverse range of agencies and to reflect the broader public protection agenda and the views of the public. The addition of 2 new carer representatives and an elected member will strengthen this voice. A new reporting framework has been introduced this year that is more outcome focused.

The agenda consists of standing items and encourages partner agencies to submit papers that pertain to ASP performance and issues. At each meeting there is a presentation on either specific areas of interest such as latest research or case studies given by social workers and other staff who are involved in particular cases. The APC find the case studies particularly helpful in raising complex issues and discussing effective management on a multi-agency basis.

Annually the APC compares national data with local data and investigates any differences. In the last 2 years the main areas have been

- Number of referrals for people with learning disability have decreased over the past few years which has led to focused audit.
- Conversion rate from ASP investigation to Adult Protection Case Conference is low compared to national statistics and 20 cases are now being externally audited to ensure decision making is appropriate.
- Number of referrals from Care Homes were high in relation to national average.

National, regional and local Initial Case Reviews and Significant case reviews are presented and learning is disseminated through changes to policies and practice and discussed at professional forums. This has led to the ongoing development of guidance on assessing capacity pathways and commissioning training on power of attorney for all staff including third sector organisations.

There is one combined sub-Committees that meet quarterly and report back to each APC and are allocated any work identified. An improvement plan is updated following each APC with allocated actions and timescales.

The APC is supported by the ASP co-ordinator.

The Adult Support and Protection Committee meets every year with public protection partners at a development day which evaluates progress over the past year and identifies priorities for the next year. New policies developed and disseminated in the last year are:

- escalation and resolution
- Professional curiosity

An APC risk register was developed following a dedicated session in November 2018 and is subject to regular updating.

The APC reports regularly to the Chief Officer Group (COG), the Integration Joint Board and the Community Planning Partnership and produces an Annual Report which is scrutinized by Council, IJB and the equivalent Boards in Police and NHS Tayside.

The Adult Protection Committee is responsible for the ongoing improvement of work related to adult support and protection and monitoring of the improvement plan to ensure that actions are being progressed.

4. Management Information and Performance Outcomes

Evaluation: We are committed to the improvement of multi-agency data that will identify areas for improvement to inform practice

This section covers the main findings from multi-agency management information and performance outcome framework. (Appendix 1)

Interpretation and trends

4.1 Adult Support and Protection (ASP) Activity

In the last 2 years we received a total of 3039 referrals that comprised of 2508 Vulnerable Person Report (VPR) and 531 Adult Protection (AP) concerns. There had been a continuing reduction in the number of VPR over the past few years but this is now rising again. 390 cases progressed to ASP processes.

	2015-16	2016-17	2017-18	2018-19	2019-20
VPR	803	651	838	1155	1353
AP concerns	424	553	421	291	240
Total	1227	1204	1259	1446	1593

Age

Older people, especially those over the age of 81, account for 39% (147) of all ASP cases and are disproportionately represented in relation to other age groups. The other most prevalent age groups are 29% (108) in 65-80 age range and 16% (62) aged 40-64. People over the age of 65 account for 68% of all cases.

In Perth & Kinross we have a relatively high number (37) of Care Homes for older people. In 2018-20, care homes were the location for 29% of ASP investigations.

Females slightly more likely to be at risk

Females account for 63% (237) of ASP cases.

Ethnicity

The majority of people 85% (326) are of a white UK / Scottish background compared with 92% last report.

Client Group

Dementia and frailty are the most prevalent conditions. The percentage of clients with learning disabilities had fallen to 8% in 2018/19 but has increased to 14% in 2019/20 which is in line with the national average.

	2015/16	2016/17	2017/18	2018/19	2019/20
Public Protection	0%	1%	0%	0%	1%
Dementia	39%	36%	25%	33%	22%
Frailty or Illness	13%	18%	28%	23%	30%
Learning Disabilities	18%	27%	29%	8%	14%
Mental Health	4%	0%	4%	6%	8%
Physical Disabilities Including Frailty Due to Old Age	13%	18%	9%	16%	13%
Substance Misuse	1%	0%	0%	3%	1%

Types of harm

Proportion of investigations by nature of harm

Proportion of investigations by nature of harm

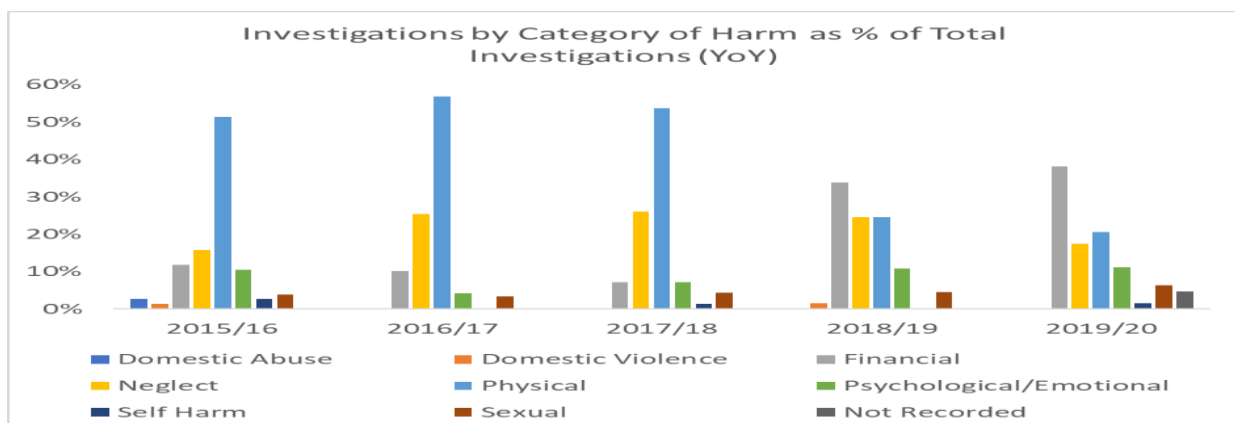


Figure 1: Investigations by category of harm as a % of total investigations

Financial harm cases have increased in the last 2 years and account for 32% (124) of all ASP cases followed by physical harm 24% (94) and neglect 19% (73)

Location of harm

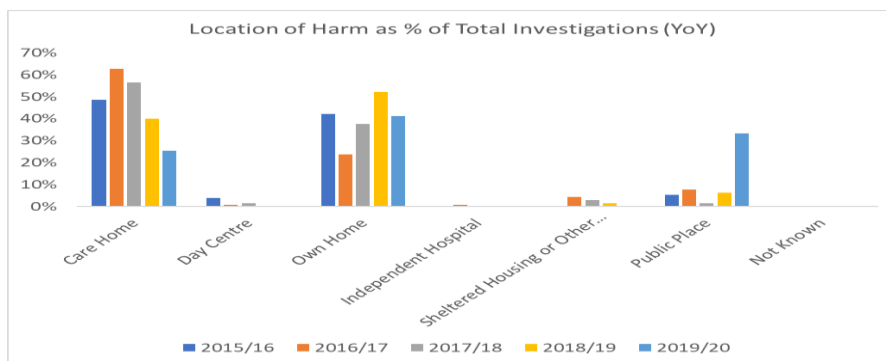


Figure 2: Location of harm as a % of total investigations

Over the last 2-year period the most prevalent location has changed from Care Homes 29% (110) to the home address 56% (214).

This may reflect the work that has been done with Care Homes ,initially to heighten awareness of Adult protection and more recently to offer support and advice to the sector in managing difficult situations.

Who harms

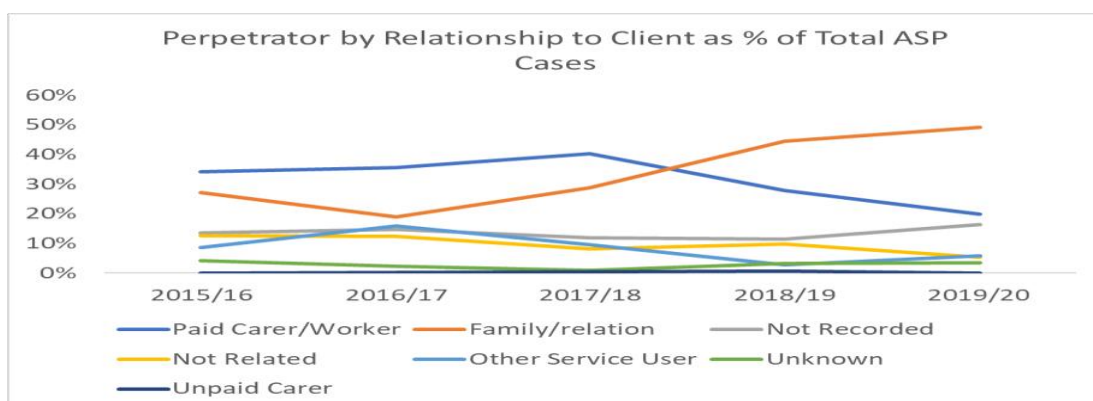


Figure 3: Perpetrator by Relationship to Client as % of Total

Over the last 5 years, a quarter of alleged perpetrators were paid carers/workers. In the 2018/19 this was 23% and 20% in 2019/20.

Relatives were the second most common alleged perpetrator over the 5-year period but the highest in 2018/19 at 38% and rising to 49% in 2019/20.

4.2 Large Scale Investigations (LSI)

	Total	Care Homes	Care at Home	Supported Acc	Daycare
2014/15	22	18	1	3	0
2015/16	18	12	4	1	1
2016/17	18	12	3	3	0
2017/18	12	8	4	0	0
2018/19	4	2	1	1 hospital	0
2019/20	3	3	0	0	0

Over the past 2 years the number of Large-Scale Investigations have reduced significantly from the previous years.

During this we have worked closely with partner agencies which included:

- regular audits,
- nominated mental health staff for each care setting to help re-assess people who behavior is causing concern.
- Introduced a new reporting system with clearly defined thresholds
- early identification of areas of concerns and early input and support from the Care Inspectorate and Commissioning team to negate the need for Large Scale Investigations.

4.3 Protection orders

There have been no protection orders in 2018-20. There were 2 Case Conferences that have discussed if a protection order should be considered. Protection orders are only to be used if no other action could be taken that would result in the same outcome. In both cases other actions were taken under the Adults with Incapacity Act that safeguarded the adult at risk.

4.4 Initial Case Reviews (ICR) and Significant Case Reviews (SCR)

In the last year the APC have had the first ICR since the Act came in. There was 2 ICR reports that were presented to the Chief Officer Group. One progressed to SCR which is currently ongoing. The main issues identified were

- Weight management
- Diabetic management
- Tissue viability
- Discharges between hospital and care settings

This has been a learning process and are now well placed for any future cases.

4.5 COVID 19 Response

The most recent part of the Bi-ennial Report time line was dominated by the response to the COVID 19 pandemic. Adult protection remained a high priority throughout this time and the actions taken were quick and effective.

In response to managing Adult, Support and Protection the Chief Executive Group, along with Services within the community set up a multi-agency Public Protecting Group. This was developed and established very quickly led by both Chief Social Work Officer and independent Chair for Child Protection Committee (CPC) and Adult Protection Committee (APC). One of the main actions of the Group was the development of a Risk-Register and a weekly data set of key information to address the changing landscape brought about by COVID 19. Communication has greatly improved due to the use of Microsoft Teams.

During this time the benefit of stronger links forged between leads from Adult Protection, Child Protection, Violence against Woman and Alcohol and Drug Partnership, to aid the advancement of a protecting people ethos has been felt and will be the basis of future plans shortly to be presented to the Chief Officer Group

A positive action has been the development of a protecting people weekly meeting with a wide representation of partner agencies that allows practitioners to present and discuss complex cases which impacts on the community and requires a multi-agency response.

Adult Support and Protection continues to be priority work. Vulnerable Person Reports being submitted by Police and adult concerns were still being screened within 24 hours although some of the work during COVID-19 has been carried out via telephone support. ASP cases and Large-Scale investigations were risk assessed to determine if visits required especially for those shielding and if so what PPE and precautions were needed. This was done to ensure the protection and wellbeing of both staff and clients.

To respond to the potential demand there was an increased number of staff within the duty access team to meet the potential demand of legal aspects of protecting people but also the increased demand of supporting people with mental health and mental wellbeing and support needed for unpaid carers. Since March 2020, there has been a slight ongoing increase in the weekly number of Police-generated adult concern reports. There is a clear COVID-related theme in these reports, particularly in relation to those self-harming or expressing suicidal ideation.

Whilst some NHS services were paused, many continued to be delivered and were informed by the clinical prioritisation of services and national guidance. (such as PPE and social distancing).

Services, such as Community Mental Health Team's and Community LD services developed and implemented plans to maintain and support safe and effective mental health care and support during the COVID-19 pandemic. Covid pathways within in-patient services were developed where required.

Although guidance for all staff has been adapted and revised in light of the current situation to help protect staff and individuals/families, it is also recognised that there needs to be more work on processes like virtual case conferences and meetings to include all agencies and adults and their families.

Care Home meetings had always been in place but again with the use of video conferencing there has been an increase in attendance to the weekly Care Home meetings. There has been a welcomed strengthening between Public Health, the Care Inspectorate and Care Homes and this relationship has benefited the protecting of people and a better response to testing in relation to COVID-19.

Care at home services implemented risk assessment and criteria to ascertain which clients needed to be visited and adjustments needed to safeguard both clients and staff. Information on COVID was sent to all groups in community and clients.

5. How well do we meet the needs of our stakeholders

This section describes the impact on adults at risk, their families, staff and the wider community.

5.1 Impact on Adult at risk and their families

Evaluation: We are confident that we listen to, understand and respect the rights of adults at risk and their families and that we are helping them to keep themselves safe.

- Independent advocacy is an important consideration in ASP cases to ensure that the client views is represented. The support adults receive is well evaluated and audits evidence that independent advocacy is offered to the majority of adults at risk.
- In 2018-19, there was 38 people supported which consisted of 1 open case from the previous year and 37 new referrals. This is a substantial increase from 14 in 2017/18 which was low but similar to 16/17 figures. Number of people receiving advocacy support have risen in 2019/20 to 74 although 44 were open cases.
- In relation to Adult Protection Case Conferences, independent advocates attended 100% of APCC they were invited to. Independent Advocacy manager

is an active member of the Adult Protection Committee (APC), teams receive regular updates on use of advocacy and there is an advocate that co presents on ASP courses.

Year	Open at year start	New Referrals	Total for year
2015-2016	15	21	36
2016-2017	13	20	33
2017-2018	8	6	14
2018-2019	1	37	38
2019-2020	44	30	74

Feedback from service users and carers

There are different ways in which the APC gains feedback from service users and Carers:

- Questionnaires are completed at Adult Protection Case Conferences (APCC).
- Participation in audits to give their views
- The committee has 2 carer representatives
- Analysis of outcomes on all ASP forms. In order to capture impact of intervention for those cases which did not proceed to APCC, an outcome question was developed to be completed at end of the ASP case. The staff member completes the form with the input of client to check if the intervention has been helpful.

Service user and carer's views are at the centre of the work we do and it remains a priority for the APC. The APC has taken a variety of steps to address this. However this can be complicated because of

- Levels of understanding
- Communication issues
- Conflict within families

Investigations - Has intervention has been helpful?

	2015/16	2016/17	2017/18	2018/19	2019/20
Lacks ability to recall	55%	54%	48%	39%	48%
No	0%	1%	0%	2%	3%
Not recorded	12%	5%	0%	0%	11%
Yes	33%	45%	52%	59%	38%

Over 4 years we have seen an increase from 33% to 59% of adults who have found the intervention to be helpful but this has fallen to 38% in the last year. Only 3% found it was not helpful while a further 48% lacked the ability to understand the event or to be able to give enough information.

Outcomes of Referrals 2018-20

In relation to outcomes of referrals and actions taken there are low numbers that progress to criminal charged or investigations. There are almost half of referrals where the allegation cannot be substantiated which can limit the effectiveness of actions taken although safeguards and supports (e.g. independent advocacy) can be put in place. Allegations not substantiated are usually because of lack of evidence or reliability of information coming from the adult.

Of those cases that were substantiated actions taken were:

- 49% resulted in changes to the care plan
- 17% extra carer support was provided
- 14% resulted in new procedures being implemented
- In relation to staff issues, 2% were dismissed, 6% were disciplined and 9% received additional training
- Legal powers were either removed or applied for in 3% of cases

In the unsubstantiated cases the issues related to:

- Financial concerns in 39% of cases
- Neglect in 12%
- Care concerns in 31%
- Paid carer harm in 7%
- In 11% of cases the client had no capacity to recall the event

Although allegations were not substantiated, all actions were taken in relation to risk assessment and management and care plans updated to ensure adults are safeguarded.

In relation to criminal proceedings 14 cases were investigated and the outcomes are:

Action taken	18/19	19/20
Reported to the Procurator Fiscal	4	4
Not reported to the Procurator Fiscal	1	2
Ongoing investigation	3	0

Adult Protection Case Conferences

There was a **total of 41 Adult Protection Case Conferences**, 19 initial, 18 review, 2 network meeting and 2 Large Scale Investigation meetings

A protection plan is developed following all case conferences that is monitored by the adult social work team. The outcomes have included:

- Legal powers removed/changed or new application submitted

- Change of accommodation for adult at risk
- Changes to financial management
- Provision or increase of care packages
- Changes to care plans
- Re assessment of adult at risk including capacity assessment
- Staff training in specific areas such as restraint techniques

Attendance at Initial Case Conferences varied according to reason and location of residence and type of harm.

Person/Agency	No invited	Nos attended	%
Adult at risk	6	4	32%
Families /Power of Attorney/Guardian	13	12	68%
Carers	5	4	50%
Friend / Power of Attorney	3	3	16%
Police	13	11	68%
Health	16	13	84%
Independent Advocate	6	6	60%
Legal	17	15	89%
Mental Health Officer	8	7	42%
Private agency	7	7	37%
Commissioning Team	5	5	26%
Care Inspectorate	4	4	21%
Housing	5	4	26%

Others who attended included Staff from other local authorities (funding authority), Children's Services, Mental Health Services (voluntary agency) and alleged perpetrators. Legal representatives (both private and Council) were invited to all initial APCC in 2019/20 which may indicate the overlap and complexities of legislation involved in addition to extent of powers under the Adult with Incapacity Act.

In relation to the adult at risk

- Females accounted for 68% of cases (13/19)
- Financial (26%) and neglect (37%) accounted for 63% of harm
- The majority of harm occurred at the home address (53%)
- The most prevalent client group were people with dementia (32%)
- 47% were in the 81+ age group followed by 26% in the 40-64 age
- 53% of alleged perpetrators were family members and 26% were paid carers
- 53% of adults at risk had some impairment of capacity

Qualitative audits

The APC continues to conduct 2 audits per year as a way of quality assurance and identifying strengths and areas for improvements

- a) ***Multi-agency case file & Large Scale Investigation audit*** was combined for first time in 2019 and has continued but using different audit templates. The audit is held in January and the audit team consists of multi-agency colleagues

Out of the 12 individual cases, 7 cases involved family members as the alleged perpetrators, 1 was self-harm, 1 involved a paid carer and 3 involved friends.

In relation to individual cases, all areas rated over 67% with 9 out of the 15 areas scoring 100% which included initial response, risk assessment and management, human rights, information sharing and involvement of adult and family.

Some individual issues were raised in specific cases which was reported back to case holders and managers.

The Large-Scale Investigations (LSI) covered 3 Care at Home organisations and 3 Care Homes. Most areas were rated highly at 100% in areas of strategic discussions, involvement of appropriate agencies including manager of organisation and adherence to process.

The issues raised were

- a) Medication errors
- b) Neglect/lack of care/hygiene issues/poor oral care
- c) Poor documentation
- d) Lack of leadership
- e) Incident reporting
- f) Staff training and induction especially in relation to ASP
- g) Communication between staff
- h) Staff shortages/lack of experience & knowledge, concern about recruitment
- i) Staff culture
- j) Missed visits/key safes

Improvement plans were developed following LSI and were monitored and reviewed by the social work team, Care Inspectorate and the Commissioning team.

Feedback from clients

One client agreed to be interviewed as part of the audit and one of the audit team visited her at home.

The client stated that the support that she received at the time following her hospital admission, during her recovery and the support since discharge has been the right thing. She stated that she wouldn't change anything, and that the support she has right now appears both appropriate and proportionate to her leading a life that she chooses to take, albeit limited but to mobility issues.

Feedback from Organisations

Two managers of Care Home agreed to be interviewed as part of the audit process and these were telephone interviews

Both of the managers who participated in the feedback were not manager at the time of the LSI but had consulted staff who were involved.

Some areas of good practice identified included clear outcomes, staff awareness of how to escalate concerns and the acting manager at time spoke very positively of the LSI experience putting aside the anxiety that is unavoidable when an external team is investigating your service.

Issues in relation to processes were identified and an improvement plan was developed to address the process issues

- b) ***Vulnerable person reports (VPR) /adult protection concerns (AP)*** audit covered 32 cases consisting of 16 VPR and 16 AP concerns for each year. All of the AP concerns progressed to ASP Inquiry and none of the VPD progressed to ASP processes.

The results evidenced that the screening process appears to be working well and within timescales. A number of referrals (50% in 2018/19 and 53% in 2019/20) were open cases. In general most areas were well evaluated above 70% with 1 exception in 2018/19

- Chronologies had been completed in 87% of cases but only 25% were of an acceptable standard.

The action recommended was for chronology training for all staff which was delivered in September and October in 2018, September 2019 and March 2020. In the audit report for 2019/20 chronologies were well rated above 80%.

In 2019/20 the majority of areas were well evaluated above 80% with 1 exception. Only 58% had clearly evidenced if the person was an adult at risk. The ASP coordinator is delivering training to all teams on completion of ASP forms.

NHS Tayside Audit

With the appointment of a dedicated Lead for Adult Protection within NHS Tayside and the introduction of an Adult Concern Referral Form and inclusion within Datix, a single agency audit was identified as good practice as well as providing a baseline by which future performance can be measured.

The audit took place on 30th August 2018 in Ninewells Hospital, Dundee which aimed to facilitate access to both paper based and electronic files.

The audit team consisted of 3 multi-agency staff (2 NHS Tayside staff and 1 Adult Protection Lead Officer from Perth and Kinross Council).

There were 9 cases identified and 8 cases audited that covered referrals across all 3 local authority areas and cases were identified at random via the NHS Tayside Datix system between the period March 2018-August 2018.

The audit focused on key areas such as how recording was completed, involvement of others and communication. As this was the first audit of adult protection within NHS Tayside, it was also an opportunity to test the audit tool which had been developed and identify any amendments to this.

A number of key issues such as chronologies, lack of communication, record keeping and were highlighted during the audit which has formed the basis for an improvement plan.

A follow up audit in 2019 has been deferred to spring of 2020

Other areas of work

- The Independent Chair and ASP Coordinator attended a meeting with learning disability “Keys to Life” group to ascertain if current services and supports are effective in safeguarding adults and if there are any gaps. A questionnaire was formulated of 2-4 questions that could be raised at meeting with adults and their families and carers to gain their views. Questions were agreed and an easy to read version of the questionnaires was disseminated to the group.
- During the 16 days of action for Violence against Women in November 2018, an issue was raised in relation to expectations and attitudes within community and faith groups in relation to protection issues and respect within families. This led to PKAVS convening meetings with community and faith groups and the wider public protection groups to work jointly and communicate a shared vision. This work is ongoing and a leaflet is being developed in 6 languages to give information to promote safety, security and respect within families and communities.
- The APC has a wide membership including a representative from University of the Highlands and Islands (Perth College campus). The campus has students with range of physical and learning disabilities including eye, hearing and speech impairments, mental health issues, learning difficulties and disabilities and physical and mobility issues. It has been agreed to explore this in more detail with support staff at the college.

5.2 Impact on staff

Evaluation: We are confident that we are developing a competent, confident and skillful workforce. Our staff are highly motivated and committed to their

own continuous professional development. We are empowering and supporting our staff with a wide range of evidenced-based multi-agency learning and development opportunities, which are evaluated highly and having a positive impact on practice. The content of these learning and development opportunities take account of changing legislative, policy and practice developments and local challenges.

Staff learning and development

Perth and Kinross continue to deliver awareness and specialist training to all partner agencies to ensure staff can recognise and respond to any identified or suspected harm. This can be online training accessible to all people in Perth and Kinross or face to face training. The online training is an introductory training course in raising awareness for all staff regardless of where they work to recognise and respond to harm.

In relation to on line training offered:

- a) NHS E-learning module - 8411 members of staff have completed the module across Tayside which is a significant increase from the previous years.

2012/13	1600
2013/14	3751
2014/15	4964
2015/16	5473
2016/17	5607
2017/18	5521
2018/19	8411 (out of 14, 871 registered users = 56%)
2019/20	15,787 registered users who should all complete ASP LearnPro every 2years. Up to 31 March 2020, 9, 270 users currently had a valid ASP update (58% of workforce). A new revised module was launched 2 weeks ago

- b) E-learning module hosted by the local Authority - 1485 council staff members have completed the module 872 in 2018/19 and 613 in 19/20.
- c) The e-learning module is also available on the PKC webpage for all partner agencies. While we are unable to monitor who has completed the course, the e-learning page has been accessed 1383 in the last 2 year 440 times in 18/19 and 943 in 19/20.

- d) Face to face training consists of awareness training for all staff and specialist training for those staff involved in ASP cases.

Course	2018/19	2019/20
ASP awareness	65	180
Chronology training	56	19
Enhanced practitioner	6	22
APCC	13	10
Investigative interviewing	13	8
3 Act training	38	51

Evaluation of courses

All courses were positively evaluated with over 95% rated good or excellent. There were many comments relating to opportunities to participate in multi-agency discussions and the value of using case studies to consolidate learning and the application of learning to practice. Participants valued group discussions and sharing of case examples which allowed them to reflect on their own practice.

We have introduced open badges which are digital certificates recognising learning and achievement. By completing open badges staff recognise and evidence their learning, skills, attributes and experience. It was introduced in September 2018 and achievements to date are:

Level	Evidence required	18/19	19/20
Bronze	Attended and participated in ASP awareness course	17	22
Silver	Written a 200 word essay on how it may be implemented in their work	9	17
Gold	Written a 200 word essay on how staff have implemented ASP in practice on cases they are currently working with.	3	8

Trauma Informed Practice

In March 2018 following a Joint Conference (192 multi-agency delegates), we reported upon our ongoing partnership work with RASAC P&K to develop a trauma informed workforce across P&K.

Throughout 2018 – 2020 this work has continued, and we have:

- published and disseminated [P&K Trauma Informed Practice Guidance](#) for practitioners working with children, young people and adult survivors of CSA / CSE;
- held two multi-agency Trauma Informed Managers Briefings; three multi-agency Trauma Informed Practice Training Sessions and two multi-agency Trauma Informed Practice Resourcing Workshops.

In total, 99 multi-agency delegates have attended these partnership training events, which they evaluated very highly. Further partnership work is planned to significantly increase these training opportunities in an attempt to establish a critical mass of trauma informed and aware practitioners across P&K.

Harmful Practices

A workshop was organised on Human Trafficking for staff in Tayside that was delivered by Hope for Justice on 18 March 2019 to raise awareness and inform practice and policies. The policy was updated following this event.

5.3 Impact on Community

Evaluation:

We have developed the APC webpage which provides public information that is accurate and relevant. We are working with Community groups to address issues identified as areas that could impact on our ability to safeguard people

Public awareness

In recent years we have tried to raise awareness in a variety of different ways and different formats e.g. Facebook, Twitter. It has been difficult to gauge impact of these initiatives as they do not necessarily generate referrals but tend to focus on raising awareness more generally.

APC website usage				
Page title	No of Unique Users 2016/17	No of Unique Users 2017/18	No of Unique Users 2018/19	No of Unique Users 2019/20
ASP information page	1476	1617	1367	1413
ASP learning zone	1026	744	440	943
ASP resource library	106	124	158	1426
Adult Protection Committee	190	124	99	284
Totals	2798	2609	2115	4066

6. How good is the delivery of services for adults at risk, their families and our operational management?

Evaluation: We are confident that our adult protection services are robust, effective and focused on vulnerability, risk and need

This section highlights how we are delivering our services to support adults at risk. In relation to the response to concerns raised performance indicators show:

- 97.3% of referrals are screened within 24 hours.
- 73% of ASP inquiries, 84% of investigations and 75% of Large Scale Investigations are completed within timescales
- 71% of initial Adult Protection Case Conferences, 94% of review APCC and 100% of LSI meetings were held within timescales

There has been significant ground-work already undertaken with regard to adult support and protection within NHS Tayside however there is also recognition of the ongoing need to ensure the further development, oversight and implementation of effective adult support and protection arrangements across the organisation.

NHS Tayside

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 lead's 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, 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.
- Development of a Quality Assurance and performance framework for Adult Protection within NHST.

7. How good is our leadership?

Evaluation: We are committed to a collective approach to leadership, direction, support, scrutiny and joint partnership working is effective and robust. We want to achieve better outcomes for adults at risk and their families by continuous improvement through self-evaluation.

7.1 Annual development day 2018 & 2019

The APC holds an annual development day to take time out with the formal committee structure to examine current progress, challenges and planning priorities for the next year. These were held on 21 June 2018 and 7 May 2019

In 2018 there was a presentation and comparison of national and local statistics that identified areas that required further explanation and action.

The workshops focused on 3 main areas

- What has been achieved in the previous 2 years?
- What are the current challenges in Perth & Kinross?
- What are the priorities for the next year?

In 2019 there was 4 mains themes

- Sexual exploitation and trafficking
- Alcohol and drugs in Tayside
- Initial Case Review (ICR)/Significant Case Review (SCR) learning

- Professional curiosity

An action plan was developed, and new processes were developed in response to the learning from SCR

- Professional Curiosity
- Resolution and Escalation

7.2 Learning from Significant Case Reviews (SCR)

As part of continuous improvement, the APC receives reports on national SCR and any actions that can be taken locally from recommendations. As part of this ongoing process a workshop was held in Tayside on 25 January from Glasgow Council in relation to Mrs. Ash and the learning that resulted. Workshop held on the day identified local actions which included developing guidance on assessment of capacity and commission training for AWI especially in relation to Power of Attorneys.

7.3 Learning from ASP Thematic Inspections

During 2017, the Care Inspectorate, Her Majesty's Inspectorate of Constabulary and Health Improvement Scotland inspected adult support and protection services in a number of partnership areas across Scotland. This was the first time any of the Scottish scrutiny bodies had scrutinised adult support and protection. The scrutiny focused on outcomes for adults at risk of harm, the partnership's actions to make sure adults at risk of harm are safe, protected, supported, involved, and consulted, as well as leadership for adult support and protection. The six adult protection partnerships inspected were selected to reflect the diverse geography and demography of Scotland.

After publication of the results and recommendations in July 2018, Tayside organised a visit to North Ayrshire on 12 December 2018 to discuss process, findings and ascertain the learning that could benefit our partnership. Some of areas identified were

- Number of Initial Case Review (ICR)/Significant Case Reviews (SCR)
- Conversion rate from ASP investigations to Case Conference
- Initial Referral Discussion (IRD) process

These areas have been added to the Improvement plan and are being progressed by the APC Sub-group.

7.4 APC Risk Workshop

As part of ongoing evaluation an APC workshop was held on 26 November 2018 to develop a strategic risk register. The 4 areas that were scrutinised were:

- Adult receives a person centred response to concerns about their safety

- Adult receives an effective integrated response to address their needs for support and protection
- Adult Protection Committee provides effective leadership
- Adult Protection Committee works in partnership with service users and wider communities

Actions identified have been progressed and documented within the Improvement plan. A strategic risk register was developed which has been updated recently in to include COVID 19 response.

7.5 Information for elected member and members of Integration Joint Board (IJB)

On 30 November 2018 a session was held for members of the IJB on protecting people that allowed for sharing and exchange of information.

7.6 GP engagement

General practitioners are an essential partner in ASP as capacity remains a key issue. There was a meeting on 30 November 2018 with the GP forum to discuss referrals and ASP issues. It is recognized that we need to enable GP's to actively participate in ASP work given their key role but there are challenges in their workload, cover needed if they attend meetings and the time of notice needed. There is a GP representative on the APC who disseminates information through the GP information network.

Working in partnership

Partner agencies in the private and third sector are an integral part of the safeguarding framework in Perth & Kinross.

There are representatives on the APC from:

- Care homes for elderly
- Care Home for people with learning disability
- Care at home organisations
- Citizen Advice Bureau
- Independent Advocacy
- Perth & Kinross Voluntary Services (PKAVS)

The input and joint working with partner agencies has resulted in:

- New electronic reporting system for reporting of incidents from care agencies to ensure consistency across all areas
- Focus on referrals to Independent Advocacy
- Ongoing engagement with minority ethnic and religious groups
- Reporting, follow up and information in relation to current SCAMS.
- ASP input into Missing people protocol
- Work with financial institutions

- Updating of the Perth & Kinross Adult Support and Protection operational guidance.

8. What is our capacity for improvement?

Perth & Kinross APC is committed to continuous improvement through quality assurance and self-evaluation ensuring that outcomes for adult at risk is the main priority.

Building on our self-evaluation, lessons from SCRs and ASP thematic inspections we have developed an improvement plan 2020-21 which will continue to deliver outcomes.

8.1 Summary of APC priorities for 2020-21

- Monitor progress and evaluate the multi-agency protecting people group that was formed to develop practice standards which changed due COVID 19 including virtual meetings and the involvement and engagement of adults at risk and their families.
- Continue to develop and widen the quantitative and qualitative data from all agencies to inform practice and improvements and identify areas for improvement but focused on outcomes for adults at risk.
- Monitor the improvement of the quality of chronologies by ongoing training, auditing of cases and team leader monitoring.
- Monitor the referrals to Independent advocacy on a quarterly basis and by locality areas.
- Engage with our partner agencies in higher education to ensure all client groups receive the support they need to safeguard themselves.
- Build on the engagement work with ethnic minority and religious groups to promote respect and equality with communities.
- Collate questionnaire information in relation to people with learning disabilities to check that current service provision is meeting needs. Plan a focused audit for people with learning disabilities to ascertain if there is evidence of a robust decision making process in relation to adult support and protection.