

# Moray Adult Protection Committee Biennial Report 2010-2012



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## **INDEPENDENT CONVENER'S FOREWORD**

As Independent Convener of Moray Adult Protection Committee, in accordance with Section 46 of the Adult Support and Protection (Scotland) Act 2007, I present the second Biennial Report of the Committee, covering the period 1 April 2010 - 31 March 2012.

I was privileged to be appointed Independent Convener in November 2011 and I acknowledge the work of my predecessor, Mo Ramsay, under whose Convenership part of the content of this Report relates to.

The Report aims to describe much of the activity of the Moray Adult Protection Committee during the reporting period, together with future plans. It will also address the comments and observations contained in the Ministerial response to the first Biennial Report submitted in 2010.

Overall, the Ministerial response commented favourably on the work of the Adult Protection Committee in Moray and when I was appointed in November 2011, I was impressed by the process in place to welcome, induct and support new members and the willingness of the statutory bodies to participate, collectively and individually, in this arrangement.

Supporting and protecting adults at risk of harm requires a strong partnership approach across agencies and, in my view, this is the case in Moray with statutory and non statutory bodies working together in an open and collaborative manner. While compliance with legislative requirements and statutory procedures underpin adult support and protection, of more importance, in my opinion, is the passion, desire and commitment of those involved in this work and I have been impressed by this in Moray. Expanding the network of partners involved in adult support and protection is important, I believe, and it is something I would wish to further develop over the next reporting period.

The strength of partnership working is not confined, however, to the geographical boundaries of Moray and great effort has been made to work collaboratively with other Local Authorities in the north east of Scotland, Aberdeen City and Aberdeenshire, as well as Grampian Police and NHS Grampian whose responsibilities span all three Local Authority areas. There is a history of effective partnership working between public bodies in the north east of Scotland and this is evident in Adult Support and Protection. Perhaps the most notable example is the Grampian Working Group on Adult Protection, and other short term Working Groups, all of which are sub groups of the Adult Protection Committees, where common policies and procedures, applicable to all partners, are considered, developed and implemented. Not only is this an effective and efficient use of resources but it enhances the strength of the collaborative approach and builds mutual trust, respect and understanding. It also goes some way to ensuring a degree of consistency for the citizens of the north east of Scotland who use Adult Support and Protection services.

As working arrangements have become embedded over the course of this reporting period, a particular focus has been on referrals by statutory bodies. In relation to referrals by the Police, a more streamlined process has been developed and implemented which has resulted in appropriate referrals being made to the Adult Protection Unit, while still allowing those individuals who do not meet the criteria of being an adult at risk of harm to be appropriately referred elsewhere for help and support. The referral process from the NHS has proved to be more challenging, however. Referral rates have remained low and more work must be undertaken to improve upon this and to streamline reporting and recording mechanisms. The willingness of senior members of NHS Grampian to address this is welcomed, and with their continued support, work will continue over the next reporting period to seek the improvement I refer to.

Of course, the support and protection of adults at risk of harm is everyone's responsibility and while advertising and media campaigns have been held nationally and locally to raise public awareness, it is my view that there remains much to be done to inform the public about what adult protection means and how to report any concerns they may have. Over the next reporting period, this is an area of work which the Committee will seek to address.

Progress has been achieved over the past two years and the following pages of the report will describe some of this. There remains much more to do however, as collectively, we seek to support and protect those adults in our society who are vulnerable and at risk of harm.

Finally, I wish to record my thanks and appreciation to members of the Committee, and to the staff who fulfil the administrative roles, for their work and their continued support.

Albert J Donald  
Independent Convener  
October 2012

## 1. INTRODUCTION AND CONTEXT

### Demographics Of Moray

With a population of some 87,260<sup>1</sup>, Moray is one of the smaller Councils in Scotland, though it covers a wide geographic area and is the 8th largest Council in terms of area<sup>2</sup>. Compared with the rest of Scotland, Moray has a smaller proportion of its population living in an urban situation<sup>3</sup>. Although the traditional industries of farming, fishing and forestry continue to contribute to the Moray economy, more recently other industry sectors, such as food and drink manufacturing, have overtaken the traditional industries and are thriving. Moray is the heartland of the Scotch Whisky industry with around half of Scotland's distilleries located in the area<sup>4</sup>, and also food producers Baxter's of Speyside and Walkers of Aberlour, which are internationally recognised brands and major employers. The dominant sector of employment in Moray is 'public administration, education and health', which employs around 34.6% of the total workforce. This dominance is due to a high concentration of public bodies in the Moray area, including two large military bases, The Moray Council, Moray College and Doctor Gray's Hospital<sup>5</sup>.

The median gross weekly wage of full-time workers in Moray is £467.30 placing Moray 19th in Scotland (1<sup>st</sup> being the highest). The Scottish Index of Multiple Deprivation (SIMD) suggests that 11.4% of Moray's population is income deprived, accounting for around 10,030 people<sup>6</sup>.

The working age population accounts for approximately 60% of the total population<sup>7</sup> and around 81% of the working-age population are economically active<sup>8</sup>. Compared with Scottish norms, more people work part-time and more are self-employed.

In 2008-10, life expectancy for males in Moray was 76.9 years, above the national average of 75.8 years. Life expectancy for Moray's female residents for the same period was 81.3 years, also higher than the national average of 80.4 years<sup>9</sup>. Moray's general health is good with 93% of the population reporting good or fairly good health and just 7% reporting not good health<sup>10</sup>.

Overall, Moray is one of the least deprived areas in Scotland, as defined by the Scottish Index of Multiple Deprivation (SIMD), having just one data zone, in Elgin, in the 15% most deprived. A further three of Moray's data zones are in the 20% most deprived, two of which are in Elgin, the other is in Buckie<sup>11</sup>.

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<sup>1</sup> Mid-year population estimates 2011 – NRS <http://www.gro-scotland.gov.uk/index.html>

<sup>2</sup> Ibid

<sup>3</sup> Scottish Settlements Urban and Rural Areas in Scotland – NRS <http://www.gro-scotland.gov.uk/index.html>

<sup>4</sup> "This is Moray" website, under About Moray – Moray Business & Industry [www.thisismoray.com](http://www.thisismoray.com)

<sup>5</sup> Ibid

<sup>6</sup> Scottish Government website, SIMD 2009 annual updates <http://www.scotland.gov.uk/simd>

<sup>7</sup> Mid-year population estimates 2011 – NRS <http://www.gro-scotland.gov.uk/index.html>

<sup>8</sup> Nomis Official Labour Market Statistics, Moray Labour Market Profile <http://www.nomisweb.co.uk/default.asp>

<sup>9</sup> Life Expectancy for Areas in Scotland, 2008-2010 – NRS <http://www.gro-scotland.gov.uk/index.html>

<sup>10</sup> Census 2001

<sup>11</sup> Scottish Government website, SIMD 2009 <http://www.scotland.gov.uk/simd>

Over the next twenty five years Moray's population is projected to grow by 10%. However, the working age population is projected to grow by just 3% while the pensionable age population is projected to grow by 27%. The population aged 75 years and over is set to rise by 88%. Based on 2010 population estimates, by 2035 the proportion of the population of Moray that is of working age will have fallen from 63% to 54% while the proportion of the population of pensionable age will have risen from 19% to 28%<sup>12</sup>.

In 2010 approximately 6% of people aged 65 years and over were receiving home care services in Moray, a drop of 2% from 2005, representing a fall of 18% in the number of home care clients aged 65 years and over. However, the proportion of that group that was receiving 10 hours or more of home care per week rose from 19% to 30%<sup>13</sup>.

In 2011, there were 472 adults with learning disabilities known to the Moray Council, which equates to 6.6 per 1,000 population aged 16 years and over. The median for Scotland is 6.15 per 1,000 population aged 16 years+. Of the 472 adults 94 (20%) have an autistic spectrum diagnosis, the median for Scotland is 12%<sup>14</sup>.

## **Background**

This is the second biennial report submitted to the Scottish Government by the Moray Adult Protection Committee (MAPC). It outlines work that has been undertaken in Moray to support and protect adults at risk of harm from 1 April 2010 to 31 March 2012.

The MAPC was established in April 2010, following the implementation of The Adult Support and Protection (Scotland) Act 2007 (ASP Act). MAPC is a constituted Committee. Its constitution (see Appendix B) details the membership of the group, frequency of meetings, accountability and governance arrangements. The MAPC is responsible for developing, implementing and monitoring the strategic approach to the management of the protection of adults at risk of harm in Moray. The Committee ensures appropriate co-operation between agencies, creating a culture of awareness that it is everyone's responsibility to protect adults at risk and improving the skills and knowledge of those with a responsibility for their protection.

## **Current Working Of The Committee**

The MAPC constitution sets out its membership, roles and responsibilities and the purpose and function of the Committee. The way in which the Committee operates is continually reviewed and the current constitution is being revised.

The aim of MAPC is to:

- Continue to promote and raise awareness of adult protection
- Promote and improve communication between partners
- Oversee progress made on the implementation of the Act locally
- Drive forward the adult protection agenda
- Monitor compliance with current procedures
- Ensure the protection of adults at risk of harm

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<sup>12</sup> 2010-based Population Projections – NRS <http://www.gro-scotland.gov.uk/index.html>

<sup>13</sup> Community Care Statistics

<sup>14</sup> Adults with learning disabilities - implementation of 'The same as you?' Scotland 2011. <http://www.sclid.org.uk/sclid-projects/essay/publications-and-resources/statistics-releases>

## Frequency Of Meetings

During the reporting period the Committee convened on sixteen occasions. The meetings were originally scheduled to take place every 6 weeks but this was considered to be too frequent to allow sufficient time for accomplishment of tasks. Therefore, the meeting scheduling was changed in January 2012, to every 8 weeks.

All members of the Committee may submit agenda items for consideration and the following are standing items which are discussed:

- Update from Moray Adult Protection Unit (any operational issues that should be brought to the attention of the Committee, and any learning from current practice)
- Updates from Partner Agencies
- Public Protection Updates
- APU National Dataset Statistics
- National meetings (sharing information from the Independent Conveners' meeting, and from the ADSW Adult Protection Sub-group)
- Training

Additional items, including for example, discussion on national publications or The Mental Welfare Commission (MWC) reports are presented and discussed as appropriate and any actions recorded.

The table below shows the percentage of attendance at the MAPC by each agency.

Moray Council	100%
Grampian Police	90%
Grampian NHS	91%
Advocacy	45%
Third Sector	82%
Care Inspectorate	73%
Independent Convener	100%
Local Councillor	64%
Legal Services	73%

## Sub Committees

In order to progress the work of the Committee, the MAPC established several short life working groups, each chaired by a member of the Committee having relevant knowledge to progress the work. The groups have covered the following areas:

- Annual Work Plan for the Committee
- Consultation of service users
- Information sharing protocol
- Significant Case Review Protocol
- Self Directed Support
- APU Service Improvement
- Drug and alcohol/self harming pathways to services
- Hidden in Plain Sight Report
- Training issues

The Grampian Working Group is a sub group working across all three Local Authority areas in Grampian and its partner agencies. The group consists of representatives from Aberdeen City, Aberdeenshire and Moray Councils with partners in Grampian Police, NHS Grampian and originally the Care Inspectorate. The work of the Group is directed by the APCs. Its role is to encourage and promote joint working and the sharing of good practice across the multi disciplinary context.

### **Support Arrangements**

The Adult Protection Unit Administrator provides administrative support to the Committee including preparation and distribution of all relevant documentation.

### **Accountability And Governance**

APCs have a significant role in ensuring co-operation and communication within and between agencies to promote appropriate support and protection for adults at risk of harm. This statutory requirement relates to the establishment, membership and functions of all Adult Protection Committees across Scotland and provides a general framework for how APCs should operate. The three Councils in Grampian have jointly contracted an Independent Convener, Albert Donald, who is responsible for chairing the Adult Protection Committees of each Council. He assumed the role of Independent Convener in November 2011, taking over from Mo Ramsay.

In order to identify the challenges they faced, the MAPC held a development day to assess how it could overcome these. This was held in September 2010 and outcomes from that event were:

- Review membership structure and function of the group
- Gather information and audit quality information
- Develop information sharing protocols
- Consider tasking sub groups to lead on activities
- Identify a vision for the Committee
- Clarify the relationship with Grampian Working Group

Following this event, the MAPC devised a work plan to provide structure to its activity. Membership turnover and significant re-design of leading agencies caused challenges to the compliance and implementation of this plan, however, and a new plan was introduced in 2012.

In January 2011, MAPC became members of the Moray Public Protection Forum, a multi-agency arrangement that includes representatives from Children and Families Services, Criminal Justice, Anti-Social Behaviour Unit, Partnership Development, Grampian Police, and Community Care. The Forum is chaired by the Corporate Director for Education and Social Care, Moray Council.

The Public Protection Forum in turn reports to the Community Planning Partnership and this arrangement is currently under review to have more formal processes in place.

Grampian wide, the Chief Officers' Public Protection Group meets on a quarterly basis. It has representation from Chief Officers of NHS Grampian, Aberdeen City, Aberdeenshire and Moray Councils and the Chief Constable of Grampian Police. The Independent Convener presents a report to this group identifying any current trends, issues and developments which he considers needs to be brought to their attention.

The Moray Council has discretion in appointing other representatives who can bring expertise to the Committee, and it was agreed that two Elected Councillors should be core members of the Committee. These Councillors are pro-active in seeking out peoples' views with regard to



ASP services and are able to influence and work with others in solving problems while supporting the work of the Committee, thereby enabling wider public views to be represented.

### **Ministerial Feedback**

The first MAPC Biennial Report was submitted to the Scottish Government in October 2010. Feedback from the Minister was positive regarding the work that had occurred between 2008 and 2010. (Appendix A).

Feedback also noted the following points:

#### **The value of there being a formal channel for adult at risk concerns to be raised.**

One of MAPC's major strengths is the establishment of the Adult Protection Unit which is a single point of contact for all ASP referrals, thereby removing the ambiguity over whom to contact when in need of advice and guidance on ASP matters. This contact provides a direct link to a specialist in ASP work ensuring appropriate support or assistance is available to colleagues.

#### **Continued development work with the Drug and Alcohol (Studio 8) Counselling Service**

Studio 8 is a service provided by Turning Point Scotland, which has been commissioned by Moray Alcohol and Drug Partnership (MADP) to provide a single access service for people over 16 years for assessment and onward referral. Services available at Studio 8 include a drop in centre, single access and arrest referrals

#### **Police Concern Forms and the referral process**

Concern Forms received from Police colleagues involving drug or alcohol issues are screened by either The Moray Council Access Team or Drug and Alcohol Social Work Team. Screened referrals are then passed to Studio 8 which within 72 hours, will send a letter to all who have been referred offering an appointment for support and assessment.

Those who engage with this process are seen by Studio 8 staff, who will conduct an holistic assessment and complete a single shared assessment. The assessments are then taken to a joint allocations meeting, which are held three times a week and involves Social Work, Studio 8, NHS Grampian, and Moray Council on Addictions. These services, statutory and voluntary, provide the full range of drug and alcohol treatment and services available in Moray. At this meeting, the case will then be allocated to the service that best meets the identified needs of the individual. All cases are then reviewed at 3 months using Outcomes Star, a drug and alcohol recovery focused review tool.

Between 7 January 2011 and 31 March 2012, it is estimated that there have been a total of 345 people referred to Studio 8 for initial assessment. Of these, it is estimated that around 10% went on to engage with the services and receive an intervention.

#### **Adult at risk of harm activity is outcome focussed**

The Moray Council has established systems to monitor the effectiveness of adult protection work through Adult Protection Forums and multi agency post inquiry investigation learning events. These provide the opportunity for staff to share knowledge and experience on managing risk whilst considering the outcomes that matter to the individuals they work with. A separate but complementary process, of

case file audits and face to face semi structured interviews is in place, seeking service users' views on their experience of services.

### **Continued emphasis on multi-agency partnership working**

The main features of the multi-agency approach are its development of an inter-agency policy, joint protocols for the sharing of information, joint training strategy developed and delivered by partners, agreed systems for the referral of an adult at risk of harm and a shared understanding on who is an adult at risk of harm. Work will continue in the next reporting period to further develop and strengthen multi agency partnership working.

## **2. USERS AND CARERS**

The Committee has considered a range of options on how best to consult with people who have become subjects of adult protection intervention

### **Users and Carers Representation on MAPC**

MAPC initially recruited service users as members in September 2010. An evaluation of this after 12 months indicated there were difficulties for the representative in engaging in and informing the work of the Committee. This was predominantly associated with there being no immediate local mechanisms for achieving involvement/representation across the range of service users and carers. Although there are a range of user and carer organisations and networks for adults, representing a wide range of views, there was no one grouping which brings these together locally which could have been used by service user representatives to gather or disseminate information. Therefore in consultation with the service user representative, a decision was taken for them to step down, which they did in September 2011.

### **Involvement of Advocacy**

The interests of service users and carers are represented on the MAPC by 'Advocacy North East', which is the main advocacy service, funded jointly by the Local Authority and NHS Grampian. Users and carers and advocacy groups have clear interests in adult protection, and Advocacy North East is often directly involved with people who fall within the scope of Adult Protection. The Manager of Advocacy North East maintains strong links with the Lead Officer who has met on an annual basis with the advocacy team to continue to strengthen these links, share learning and problem solve.

### **Users and Carers involvement in Case Conference**

Over the past 2 years, there has been a focus on the involvement of service users in Case Conferences and in supporting them to contribute. There is a presumption that the adult at risk will attend the Case Conference unless there is good reason for this not to happen. There have been 5 Case Conferences in Moray over the last 2 years, all of which were attended by the service user and all of which were supported by Advocacy North East.

### **Users and Carers Feedback following involvement in the ASP process**

Moray Council developed a post-involvement questionnaire to provide feedback to the ASP service on individuals' experiences. Where appropriate, the individual involved in an adult protection concern was sent a questionnaire and asked to complete and return it to the APU but none of these forms were ever returned. During January 2012, a revised form was developed in consultation with Advocacy North East. It was agreed that these forms would be introduced and completed in a face to face interview, supported by an advocacy worker. Negotiations are still underway to formalise this process.

In the interim, it has been decided to carry out a small pilot on obtaining service users feedback, again via face to face interviewing, with the objective of gathering information on service user experience and engagement with this process. 2 staff have been identified to carry out this work, 1 from a Social Work background and the other from research and quality assurance. They have agreed the methodology and devised the questionnaire, and a small number of individual service users willing to be interviewed

have been approached. These interviews are scheduled to begin in August 2012 and analysis of results will be available in the next reporting period.

### **Engaging with Users and Carers**

Guidance has been developed by a Speech and Language Therapist for use by Police when supporting a person with communication difficulties, and a guide, available in hard copy as a Z card, providing information on recognising and reporting harm, has been further developed in to a web accessible guide. This will support NHS staff and partners so as to enable engagement with service users requiring support from ASP services and will act as a teaching aid promoting understanding of ASP with specific client groups. The original hard copy Z card version remains in high demand for events and public distribution.

Within Grampian, there are also plans to use appropriately trained NHS staff to deliver training on 'Talking Mats™', to assist with supporting the communication needs of service users.

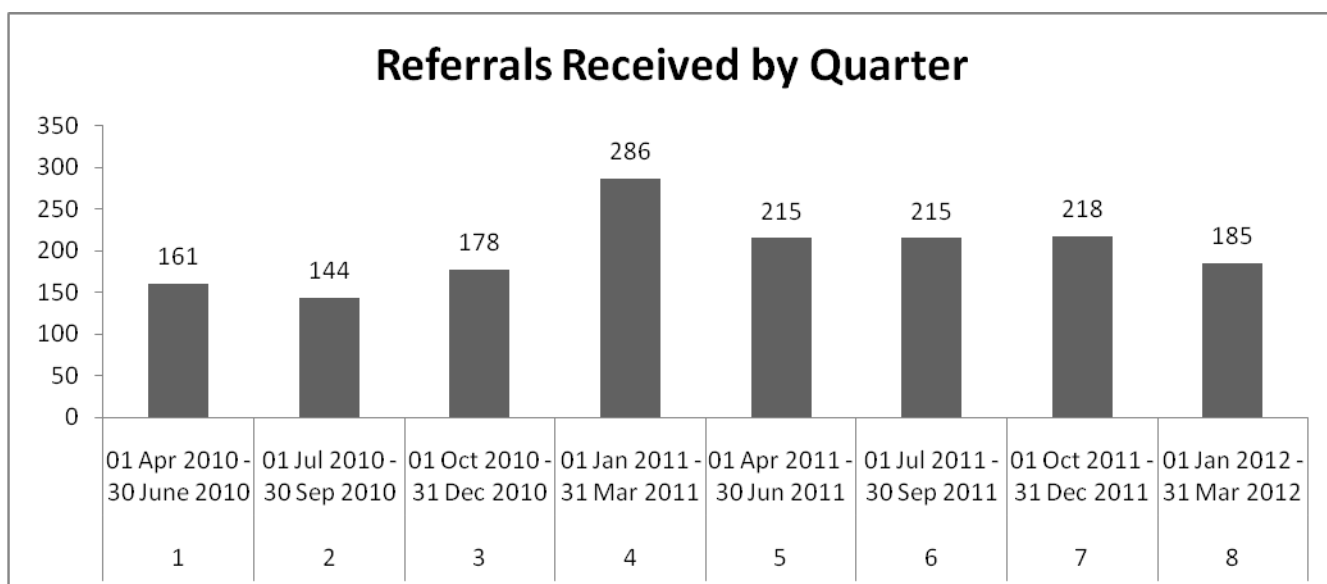
### 3. MANAGEMENT INFORMATION

Moray has a designated Adult Protection Unit which provides a single point of contact for reporting Adult Protection concerns. Part of the role and function of that Unit is to screen reports and co-ordinate and manage action in line with policy.

During the period April 2010 to June 2010, a new system of data collection was introduced which represents a reliable and consistent method of collation of data upon which the following analysis is made.

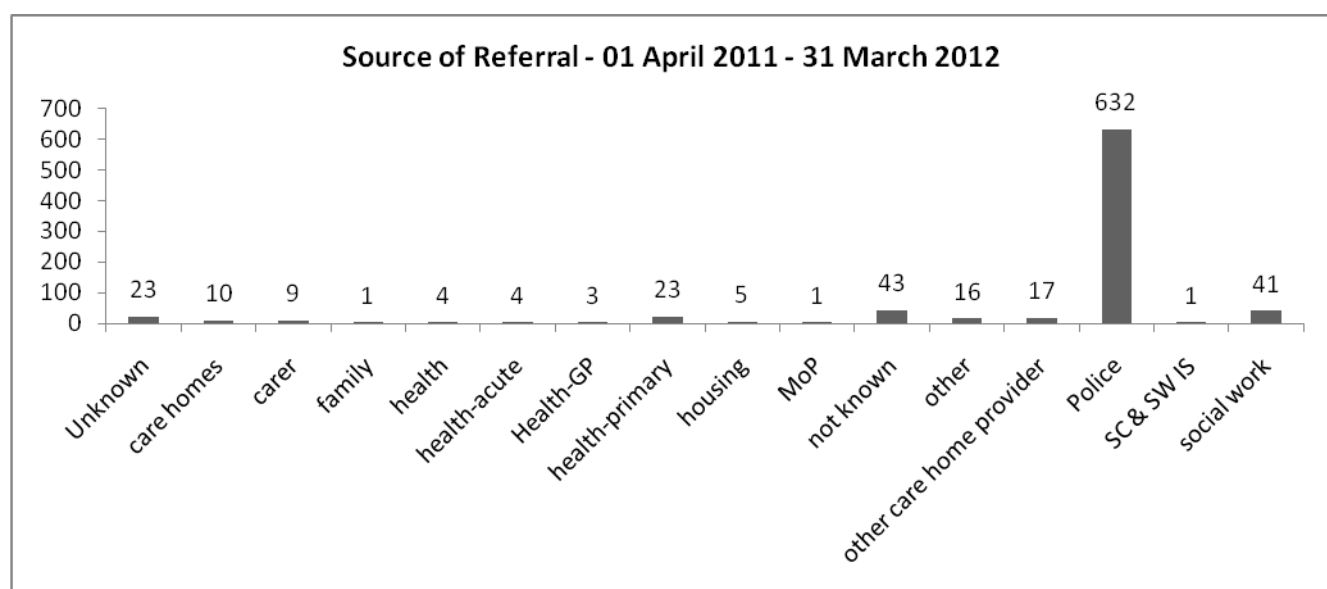
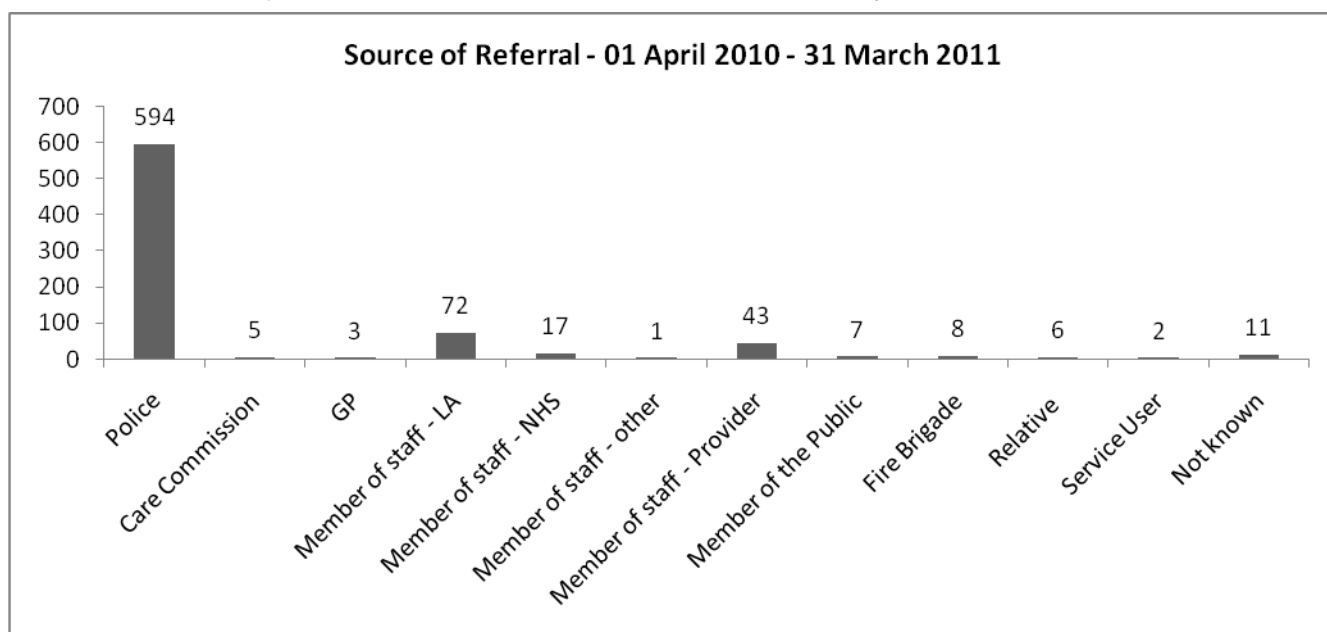
#### Analysis of Trends

Total referrals to the Adult Protection Unit (APU) over the reporting period were 1,602. The average quarterly figures for 2010 were 161, increasing to an average of 233 per quarter for 2011. During 2012, there was a decrease in referrals on the previous quarters. This represents a change in the reporting process whereby only those cases pre-screened against the 3 point criterion are referred to the Unit, further explained later in this document under Workforce Issues. During the previous reporting period April 2008 to March 2010, there had been 522, giving an average quarterly referral rate of approximately 130. There has therefore been a steady increase in overall referral rates on the previous reporting period.



Consistent with the previous reporting period, source of referrals over the same time period showed no significant changes in regards to the source of the referral. Highest referrers remain Grampian Police at 1,226 (76%) followed by the Moray Council at 114 (7%), the Third Sector at 70 (4.3%) Health acute and primary care 48 (2.9%), Family 7 (0.46%) and G.P's 3 (0.19%)

The table below provides an overview of source of referral activity



Outcome of referrals as a percentage has remained reasonably consistent over the period with 1,111 (69%) screened as requiring no further action under Adult Protection procedures. Although these adults do not fit the Adult Protection criteria, they are still considered to be vulnerable, necessitating an assessment of needs under other Social Work legislation or in need of other agency support. These cases are normally signposted to a more appropriate service. Around 294 (18%) resulted in an inquiry under Adult Protection. Of those, 25 (8.5%) cases went on to require further investigation.

### Inquiries and Investigations

Quarter	Dates	Total No of Referrals	Not ASP	Inquiries	Investigation	Ongoing
1	01 Apr 2010 - 30 June 2010	161	111	46	4	0
2	01 Jul 2010 - 30 Sep 2010	144	110	31	3	0
3	01 Oct 2010 - 31 Dec 2010	178	132	36	3	5
4	01 Jan 2011 - 31 Mar 2011	286	182	51	6	40
5	01 Apr 2011 - 30 Jun 2011	215	66	24	1	124
6	01 Jul 2011 - 30 Sep 2011	215	175	25	2	13
7	01 Oct 2011 - 31 Dec 2011	218	177	32	3	6
8	01 Jan 2012 - 31 Mar 2012	185	158	24	3	0
<b>Total</b>		<b>1602</b>	<b>1111</b>	<b>269</b>	<b>25</b>	<b>188</b>
<b>Percentage %</b>			<b>69%</b>	<b>17%</b>	<b>2%</b>	<b>12%</b>
<b>Total Enquires and Investigations</b>				<b>294</b>	<b>18%</b>	

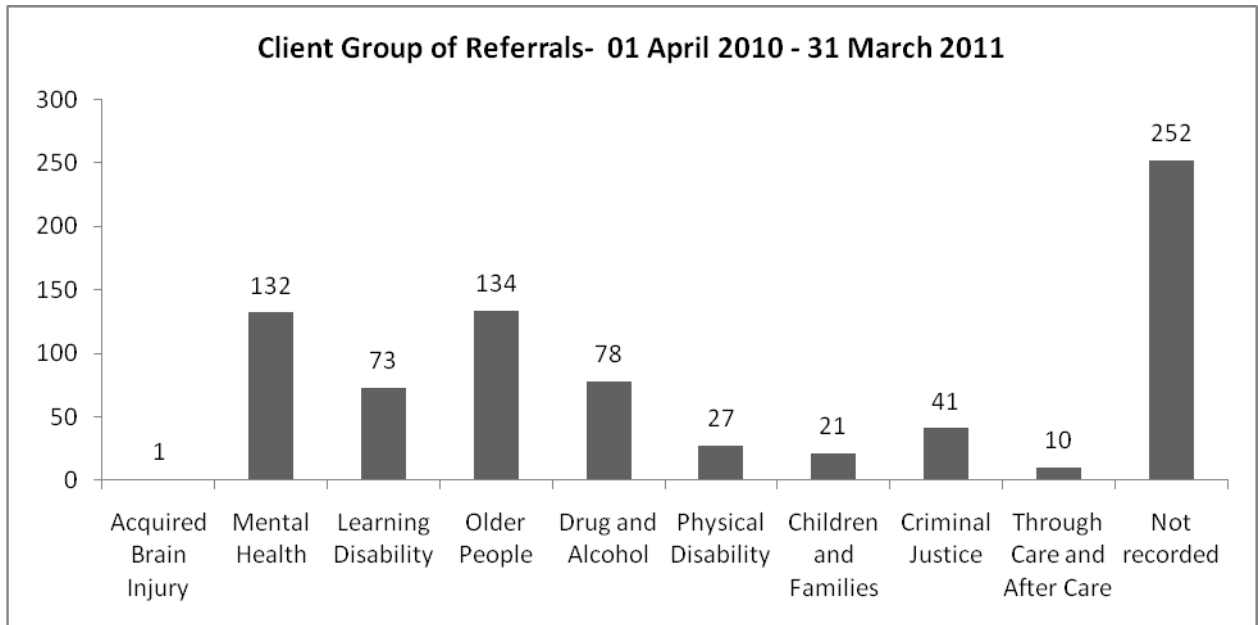
### Outcomes of Inquiries and Investigations

Quarter	Dates	Total Inquiries/ Investigations	No Further ASP Action	Adult Protection Meeting	Inquiry/ Investigation ongoing	Case Conference	GP referral
1	01 Apr 2010 - 30 June 2010	50	9	0	41	0	0
2	01 Jul 2010 - 30 Sep 2010	34	20	6	14	0	0
3	01 Oct 2010 - 31 Dec 2010	39	17	7	21	0	0
4	01 Jan 2011 - 31 Mar 2011	57	15	8	35	0	0
5	01 Apr 2011 - 30 Jun 2011	25	1	6	17	4	2
6	01 Jul 2011 - 30 Sep 2011	27	8	5	12	0	2
7	01 Oct 2011 - 31 Dec 2011	35	1	4	30	0	1
8	01 Jan 2012 - 31 Mar 2012	27	0	11	25	1	0
<b>Total</b>		<b>294</b>	<b>71</b>	<b>47</b>	<b>195</b>	<b>5</b>	<b>5</b>
<b>Percent %</b>			<b>24%</b>	<b>16%</b>	<b>66%</b>	<b>2%</b>	<b>2%</b>

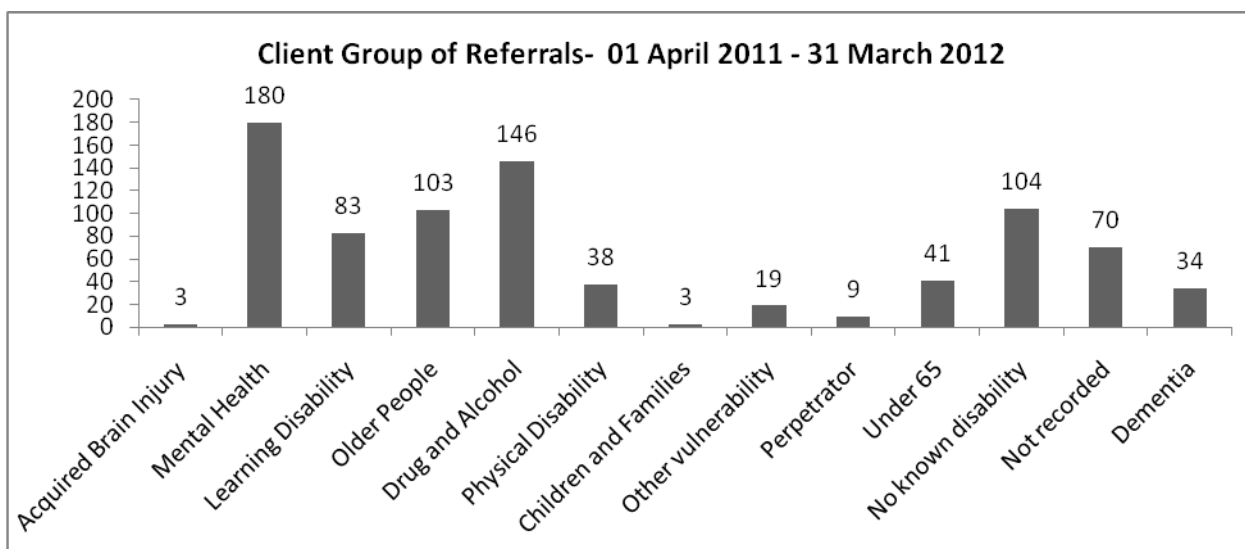
## Client Group of Referrals

During this reporting period, those with mental health issues have the highest referral rate. This equates to 312 (19%) individuals and remains consistent with the previous reporting period. Misuse of alcohol continues to play a significant role in these cases and the predominant type of harm is that of behaviour putting self at risk, and self harm which is also associated with this client group. Outcomes for this group tend to focus on assessing the problem and finding appropriate intervention. However, a small percentage of this group remain reluctant to engage and present particular challenges. Where no alternative resources can be found, staff often have to wait until a situation presents itself in order to bring about change. Rather than wait for a crisis referral, Moray Council, along with its partner organisations, has instigated Core Group meetings which consist of a group of professional staff and, if appropriate, a family member/advocate who meet as frequently as is necessary to support and co-ordinate effective multi agency interventions with the ultimate aim of making sure that the adult is safe.

Older people reflect the next highest known client group. In keeping with the previous report, victims are still more likely to be female and to be physically and psychologically harmed.







Additional work is still needed to refine data collection that is compatible with other Local Authorities and further clarification on this from the Scottish Government would be helpful. It is anticipated that Moray Council's newly established single point of contact for all community and Adult Protection concerns will assist with reducing referrals of a non ASP nature. The Adult Support and Protection Unit will therefore deal with fewer referrals and those they will deal with will have been pre-screened against the 3 point criterion. Over the next reporting period, it is anticipated that the Unit will see a reduction in overall referrals with a higher percentage of those referred going on to require Adult Protection intervention.

### **ASP Multi Agency Meetings**

Over the reporting period, 270 (18%) of referrals were assessed as requiring intervention under Adult Support and Protection legislation. The Adult Protection Unit was responsible for chairing and organising 47 Adult Protection Meetings (Multi-agency initial referral discussions) and held 5 case conferences where protection measures were considered.

### **Protection Orders**

During the reporting period there have been no applications for an Assessment Order, Removal Order or Banning Order, however in 1 case it was considered least restrictive to provide increased support while in 4 cases, a Banning Order was considered. 3 of these were rejected, while in 1 case, the process was instigated but as the situation changed, it was decided that guardianship offered better protection.

### **Lessons From Activities Recording**

Moray Council developed an ASP database using Access software, which provides an accessible data information system able to give relative accurate information for the Conveners' Dataset. However, there are still some difficulties on the interpretation of various activities, such as the difference between an enquiry and an investigation or how individuals record an IRD meeting and a Case Conference. Further work is required on a common understanding and recording of data in order to improve analysis of trends.

#### **4. CRITICAL CASE REVIEWS**

A Significant Case Review (SCR) multi-agency protocol is in place and is a shared protocol with other Local Authorities and lead agencies covering the Grampian area. This document was adapted from the Child Protection and MAPPA SCR protocols. To date, no significant case reviews have been required in relation to adult protection work. SCR training is scheduled to take place in September 2012, with all lead agencies being involved.

The Committee receives reports regarding reviews of ASP case work. These come from multi agency learning events arising locally, which ensure lessons are learned and shared. The recommendations from these learning events are linked into the ASP multi-agency training agenda. Any changes to practice are actioned by the appropriate agency. These events also highlight areas of good practice.

National critical inquiries and reports have also featured on the Committee's agenda, ensuring that consideration is given to them, thereby facilitating the development of multi-agency approaches to the lessons learned.

Any recommendations made by the Mental Welfare Commission relating to the Police will be formally communicated to the Chief Constable. Should any recommendations require to be discussed at national level, this will take place within the Adult Support and Protection Working Group of the Association of Chief Police Officers in Scotland(ACPOS).

## **5. PUBLIC INFORMATION**

### **Awareness Campaigns**

A number of initiatives have been taken forward to raise public awareness of the nature of Adult Protection and we continue to engage in awareness raising activities along with Grampian partners. Raising the public consciousness around the issue of adults at risk of harm remains a priority. Evaluating the effectiveness of any awareness raising activities will continue to be a challenge, as increased referral rates may not necessarily be an accurate measure.

Moray Council, along with other Scottish Local Authorities, committed funding towards the national TV campaigns which were organised by Renfrewshire Council and ran for 2 weeks in August 2011 and March 2012. The media campaign itself produced no significant rise in referrals, however the campaign was seen as the starting point of this process and it is believed that it will take some time to establish a public understanding of an adult at risk of harm as a concept within our communities. As a way of reinforcing this message, the video of this TV campaign is now used on the Council's website and at training events, where appropriate.

A Grampian wide event was held in September 2011. The event, supported by the three Adult Protection Committees in Grampian, was aimed at raising awareness of the financial harm of vulnerable older people in the north east of Scotland. It offered an opportunity to get the adult support and protection message across to professionals and members of the public.

A radio campaign which ran for two weeks on Moray Firth Radio during November 2011, was also aimed at raising awareness of the financial harm of vulnerable older people.

Grampian Police have included information about financial harm, linked to the 'Tell Someone' campaign, in local community bulletins published throughout the Force area.

Development of a new Council run internal campaign to amalgamate Child Protection, Adult Protection, domestic abuse and Forced Marriages induction awareness is under development and information and analysis will be available over the next reporting period.

During 2011, NHS Grampian took the lead and worked with local partners to establish links with The Scottish Ambulance Services. Briefing information was circulated to all Ambulance staff within Grampian, and NHS Grampians e-learning training tool was shared with the Scottish Ambulance Service with permission for further development by them.

### **Website**

Moray Council's website hosts a specialised screen for Adult Protection. Embedded in this site is a short video used in the Scottish TV campaign, giving information on adults at risk of harm, contact details, links to other relevant sites and to the legislation. Referral forms can also be downloaded from this site.

### **Promotional Materials**

NHS Grampian assisted in the production of an easy read "Keeping Safe From Harm" leaflet advising service users on harm and what to do. It was developed in collaboration with adults with learning disabilities and speech and language therapy, to support adults

with communication difficulties

Existing marketing materials have been updated and re-printed, including leaflets, posters and Z cards. Pop up display stands for use by Grampian partners have been developed and are used at public awareness raising events and training events.

Despite significant investment in all the above activity, there has been little or no increase in self or public referrals. An analysis suggests that the activities did not generate enough interest to encourage the public to take action, or the target audience was not reached. It is the Committee's intention to address this shortcoming over the next reporting period.

## **6. MANAGEMENT OF SERVICES AND STAFF**

### **The Moray Council**

The impact for the Local Authority of the ASP Act is evident within all adult care teams across Moray, brought about by an increase in referrals, which impacts on the Local Authority workload as the lead agency with the duty to inquire. Therefore, the Scottish Government funding continues to be used to augment front line staffing levels, providing 3 additional Social Work posts within Community Care to take into account the extra work which is generated from adult protection procedures.

In addition to the augmentation of teams, an Adult Protection Unit exists in Moray. It has a small dedicated staff team consisting of 3 staff members:

- APU Consultant Practitioner (1 whole time equivalent (wte))
- APU Administrator (1 wte) and
- APU Training Officer (0.5 wte)

The Adult Protection Consultant Practitioner is a newly created post and combines the roles of operational and strategic lead officer and the previous co-ordinator role. The Consultant Practitioner undertakes the chairing of Adult Protection Case Conferences and has lead responsibility for Adult Protection activities in Moray, providing advice, guidance and support to Council staff and external organisations and has an overview of the quality of ASP work. This post is directly managed by the Head of Community Care.

The APU has a dedicated administrator who is line managed by the Consultant Practitioner and provides centralised administrative support for Adult Protection activities within Moray. The administrator undertakes the recording of statistical information, co-ordination and minuting of all Case Conferences and Adult Protection meetings, and the provision of administrative support to the Independent Convenor and the MAPC.

The APU continues to employ a dedicated Training Officer who builds on existing multi-agency training arrangements, offering a 3 module training approach targeted at groups of staff across all partner agencies including the Third Sector. A multi-agency training strategy is in place to ensure an awareness and understanding of the procedures for staff to follow in relation to adults at risk in Moray. As well as leading on the multi-agency training, the ASP trainer provides single agency training to Council Officers including training on chairing Case Conferences and on investigatory interviews.

In 2011 and 2012, the Consultant Practitioner undertook the post-graduate Certificate in Adult Protection and Safeguarding at the University of St Andrews. 3 experienced Social Workers have enrolled on the 2012-2013, Stirling University post-graduate course in Adult Protection.

### **Grampian Police**

Grampian Police employs a full time Adult Protection Co-ordinator who is responsible for supporting the development of policy and practice within the organisation and raising the awareness of staff in Adult Protection issues within the Force. The Force Adult Protection Co-ordinator is also responsible for liaising with partner agencies and sits on MAPC, while also representing Grampian Police on the Grampian Working Group, Grampian Trainers' Group and any short life working groups.

Adult Protection issues in Moray are overseen by an officer of Inspector rank. The Family

Protection Unit (FPU) receives Concern Reports submitted by Officers in that Division. They are screened a Detective Sergeant and, if appropriate, forwarded to the Access Team of The Moray Council. Staff from the FPU attend Adult Protection Meetings and Case Conferences.

The Detective Superintendent of the Public Protection Unit (PPU) is the Force Lead for Adult Support and Protection. He is also Chair of the ACPOS Adult Support and Protection Working Group and a member of the Scottish Government's Adult Protection Policy Forum.

The Adult Protection Co-ordinator is the secretariat for both the ACPOS Adult Support and Protection Working Group and the ACPOS Mental Health Sub-Group and this has led to her having a significant input into the forthcoming Police Service of Scotland National Standard Operating Procedures in Adults at Risk of Harm, Mental Health and Place of Safety.

### **NHS Grampian**

The NHS Grampian ASP lead sits with the Associate Director of Allied Health Professionals who is proactive in supporting and developing collaborative and partnership working between NHS and Grampian's key multi-agency ASP partners as well as:

- Ensuring collaborative and partnership working between NHS/Health agencies eg NHS 24; Scottish Ambulance Service; Pharmacy; GPs etc
- Representing NHS on Grampian Interagency ASP Working Group
- Representing NHS Grampian, on Local Authority Adult Protection Committees
- Identifying key areas to be addressed within NHS Grampian in response to ASP
- Providing a single point of contact for any concerns relating to NHS Grampian's response/action to any matter
- Advising/mentoring NHS staff involved with complex ASP cases

## **7. BUDGET SUMMARY**

Moray Council was allocated £264,000 in 2010/2011, from the Scottish Government to assist with the implementation of the ASP Act. The majority of the funding, £232,495 (88.06%), was allocated to staff costs to support additional tasks associated with Adult Protection activity. Allocation to Moray in 2011/2012, was £260,000 and £249,200 (95.85%) of this was again taken up with staffing costs. Although most of the ASP training costs have been met through staffing costs associated with the dedicated ASP Training Officer post, additional training by outside providers in 2010/12 represented a spend of £2,867(1.09%) of the overall budget. The remaining budget was associated with administrative costs, including cost of awareness raising and printing.

Grampian Police was allocated £41,669 in the financial year 2010/11, of which £37,283 (86%) went towards staff costs and the production of an Adult Support and Protection 'Aide Memoir' card which was distributed to Officers. The remainder of the funds were allocated to the development of systems to support the running of Adult Protection activities. In the financial year, 2011/12, £46,169 was allocated, £27,192 (59%) of which was allocated to staff costs, with the remainder being consumed by running costs and the partial payment towards the development of a Vulnerable Persons Database, which when live, will allow Police Forces to share information on adults who are deemed to be at risk, as well as other vulnerable persons.

## 8. COMMUNICATION AND CO-OPERATION BETWEEN AGENCIES

In Moray, there is a history of strong partnership working. Moray Community Health & Social Care Partnership is a whole system approach aimed at improving health, social wellbeing and more efficient Health and Social Care services. The Partnership brings together all NHS services in Moray: Primary Care, Acute Services/Dr Gray's Hospital, and Health Improvement, with Social Work services for all Community Care groups. This provides a recognisable means of co-operation between the partner agencies

There is also significant co-operation between the three major public bodies with responsibility in the field of Adult Protection, Grampian Police, NHS Grampian and Moray Community Care. In addition, there are noticeable co-operations between the 3 Grampian Adult Protection Committees which has led to common approaches to policy and procedures, training and awareness raising. To help support this approach, there is in existence an established Grampian Working Group. This group consists of representatives from Aberdeen City, Aberdeenshire and Moray Councils with partners in Grampian Police, NHS Grampian and initially the Care Inspectorate. All major agencies are committed to inter-agency approaches to Adult Protection demonstrated by the joint approach to the development of:

- Joint ASP information sharing protocols
- Joint SCR procedures:- standardising SCR procedures across Grampian
- Multi-agency policy procedures. The Grampian inter-agency police and procedure for the support and protection of adults at risk of harm was compiled in 2010 and launched in September 2011. This document is an example of the collaboration of the NHS, Police and the three Local Authorities
- The development of a Grampian Large Scale Investigations Policy, which clarifies responsibilities amongst partner agencies for overseeing Large Scale Investigations in Grampian
- The development of easy read information for clients with communication difficulties. It was developed with direct support from Speech and Language Therapists
- Joint training strategy
- A response to the Hidden in Plain Sight Report - this report was circulated to APC members and discussed in all APC's. A sub-group of the Grampian Adult Protection Working Group was tasked with taking forward the ASP issues for Grampian
- Within NHS Grampian, training has taken place with senior nursing staff who have been identified as the point of contact for requests to access information from health records and to facilitate any requests where information may require to be collated from a number of sources as part of an ASP investigation

Part of Operation Moravia run by Grampian Police, in partnership with The Moray Council, NHS Grampian and Studio 8, was to offer referrals to people who have substance misuse issues and who may also be adults at risk of harm.

Grampian Police works in partnership with Moray Council's Social Work Department, and the Third Sector in a voluntary referral scheme for people who are under the influence of drugs or alcohol when taken into custody. The aim of the scheme is to reduce drug and alcohol related offending by allowing individuals to discuss their drug or alcohol issues with a Custody Referral Worker and undergo an assessment in order to identify appropriate services required to meet their needs.



Multi agency co-operation has also proved invaluable when finding solutions to deal effectively with people who frequently call the Force Service Centre but who do not need the services of the Police.

A multi-agency ASP Information Sharing protocol was approved by all 3 Adult Protection Committees in October 2011. To allow Grampian Police to share information more effectively with partners, Officers were briefed in the importance of gaining consent to share information from potential adults at risk. The Concern Forms were then updated to capture this information, thereby allowing Force Referral Unit staff, who are screening the forms for referral, to make a more informed decision.

Following a consultation exercise on a proposed multi-agency protocol for medical examinations in the Grampian area, the Multi-Agency Protocol for Adult Support and Protection Medical Examinations was approved by all 3 Adult Protection Committees in December 2011. This outlines the process for the provision of medical examinations both where a crime is, and is not, suspected in Adult Protection investigations. The document is a local interim solution pending the Scottish Government introducing national guidance.

## 9. STAFF AWARENESS, TRAINING AND WORKFORCE DEVELOPMENT

Crucial to the continued implementation of the Act is the need for staff training. This is a cornerstone in ensuring that staff, both in their professional capacity and as citizens, are aware of their roles and responsibilities in relation to supporting and protecting adults at risk.

In Grampian, resources have been shared with the Grampian Trainers' Group, which meets bi-monthly to develop and review learning opportunities on a continuous basis. The Group has adopted a collaborative approach through effective and efficient use of resources. A Learning and Development Strategy has been developed and agreed by the 3 APCs in Grampian.

Awareness training has been revised to take account of the following wider public protection agendas:

- Gender Based Violence
- Hidden in Plain Sight Report
- Forced Marriage
- Honour Based Violence
- Radicalisation

Grampian Police continue to assist in the delivery of Module 2 training and Advocacy North East assist with the delivery of Module 3.

Such is the size of the training agenda, it is difficult to ascertain the volume of staff who have received training. As a result, an audit is to be undertaken to establish the level of training activity across voluntary and private sector social care organisations. Currently, service providers are obliged, contractually, to provide Adult Protection training to all their employees via Service Level Agreements with the Local Authorities.

A number of agreed recognised options are available across the sector and these are summarised below:

Course/ Level/ Duration	LEARNING OUTCOMES	TARGET GROUP
E-learning  Level 1	<ul style="list-style-type: none"> <li>• Have an awareness of what is meant by 'adults at risk' and responsibilities in relation to their protection</li> <li>• Identify the alert signs and indicators of potential harm and know to whom to report concerns</li> </ul>	<ul style="list-style-type: none"> <li>• Staff who have indirect contact with adults at risk but no direct care role eg library staff, cooks, cleaners, porters, environmental services, housing</li> <li>• Support staff from the Local Authority, Police and NHS</li> </ul>
Distance Learning  Level 1	<ul style="list-style-type: none"> <li>• To develop a practical understanding of Adult Protection legislation</li> <li>• To understand the statutory obligations placed on the Police</li> <li>• To understand the practical application of the Act</li> </ul>	<ul style="list-style-type: none"> <li>• All Police Officers</li> </ul>

Course/ Level/ Duration	LEARNING OUTCOMES	TARGET GROUP
Tell Someone  Level 1	<ul style="list-style-type: none"> <li>• To develop a practical understanding of Adult Protection legislation</li> <li>• To understand the statutory obligations placed on the Police</li> <li>• To understand the practical application of the Act</li> </ul>	<ul style="list-style-type: none"> <li>• Staff who have hands on caring role with adults who may be at risk but who have no management responsibilities</li> </ul>
Awareness of Risks and Responsibilities  Level 1 2.5 Hours	<ul style="list-style-type: none"> <li>• Have an awareness of what is meant by adults at risk and of responsibilities in relation to protection</li> <li>• Identify the alert signs and indicators of potential harm and know to whom to report concerns</li> </ul>	<ul style="list-style-type: none"> <li>• Staff who have hands on caring role with adults who may be at risk but who have no management responsibilities</li> </ul>
Module 1  Level 1  2.5 Hours	<ul style="list-style-type: none"> <li>• Identify the alert signs and indicators of potential harm and to whom to report them</li> <li>• Have a knowledge of practice, organisational and attitudinal issues which may perpetuate harm</li> <li>• Have an awareness of the Grampian inter agency policies and procedures to be followed by people working in health and social care settings</li> </ul>	<ul style="list-style-type: none"> <li>• Staff who have hands on caring role with adults who may be at risk but who have no management responsibilities Home Carers, Support Workers, Auxiliaries, Care Assistants, Community Wardens</li> </ul>
NHS Grampian  Level 2  1 Hour	<ul style="list-style-type: none"> <li>• Identify the alert signs and indicators of potential harm and how to report concerns</li> <li>• Have an awareness of the Grampian inter agency policies and procedures to be followed by people working in health and social care settings</li> <li>• Have an awareness of Adult Protection legislation</li> </ul>	<ul style="list-style-type: none"> <li>• Mandatory training for ALL NHS Grampian Staff</li> </ul>
Module 2  1 Day	<ul style="list-style-type: none"> <li>• Identify the alert signs and indicators of potential harm</li> <li>• Have an awareness of practice, organisational and attitudinal issues which may perpetuate harm</li> <li>• Have a detailed knowledge of the Grampian inter agency policies and procedures to be followed by people working in health and social care settings</li> <li>• Have an overview of Adult Protection legislation, the role of Police, the role of an Appropriate Adult and the inquiry process</li> <li>• Have an awareness of the role of other agencies</li> </ul>	<ul style="list-style-type: none"> <li>• Staff who have direct care role, a requirement to be professionally qualified and/or a management responsibilities</li> <li>• Social Workers, Care Managers, Occupational Therapists, Physiotherapists, Speech &amp; Language Therapists, Senior Support Workers, Registered General Nurses</li> </ul>
Module 3  2 Day	<ul style="list-style-type: none"> <li>• Participants follow the investigative process, based on the Grampian inter agency policy, from taking a call about an Adult Protection concern, through the inquiry/investigation, to holding a case conference, undertaking a risk assessment and producing an Adult Protection plan</li> </ul>	<ul style="list-style-type: none"> <li>• All professionally qualified and registered Social Work and NHS staff identified as likely to be involved in Adult Protection Inquiries</li> <li>• Care Managers, Social Workers, Occupational Therapists</li> </ul>

Course/ Level/ Duration	LEARNING OUTCOMES	TARGET GROUP
Module 4 2 Day	<ul style="list-style-type: none"> <li>Detailed knowledge of the Adult Support and Protection (Scotland) Act and associated Code of Practice - the requirements of implementation, and an understanding of its practice implications</li> </ul>	<ul style="list-style-type: none"> <li>Staff employed by Local Authority identified as meeting the legal requirements of Council Officers</li> </ul>

The following chart identifies the training attendance in The Moray Council area, for the above identified standard courses. Alternative customized courses were provided to Police, NHS staff and others which are reported below:-

Module	Moray			Grand Total
	Council	Private	Vol. Org	
Module 1	305	62	40	407
Module 2	57	5	1	63
Module 3	21			21
Module 4	13			13
Public Protection Session	62			62
Training for Trainers		8		8
<b>Grand Total</b>	<b>458</b>	<b>75</b>	<b>41</b>	<b>574</b>

For the first time in Moray, a series of Public Protection courses was delivered to The Moray Council staff who are employed to transport people of all ages to and from services. This course incorporated key skills around recognising and responding to abuse/harm in both children and adults and was an integration of the common themes across the two different agendas.

A 3 day Constructive Decision-Making skills course aimed at senior staff who chair Adult/Child Protection Case Conferences/meetings was provided in September 2011 and 10 managers from across services attended.

Adult Protection Practice Development Sessions, hosted jointly by the Training Facilitator and the Consultant Practitioner, continue to take place 4 times a year and are open to any Council Officer. The focus for these sessions has ranged from case presentations by practitioners, discussion of journal articles, navigation of the legislation, recording skills and interviewing skills. This provides a forum for practitioners to address ongoing issues as they arise and further develop their practice.

In November 2011, a learning event was facilitated involving the professionals from Health and Social Work who were involved in a specific, complex and protracted Adult Protection investigation. This was a constructive and useful event in terms of evaluating which interventions and actions went well and which could have been better. The lessons from this event formed the basis of an Action Plan that has been taken forward by respective parties. It is the plan that this model be used in the future to evaluate practice on an ongoing basis.

The Training Facilitator, along with her NHS colleague, continues to deliver training aimed at NHS Grampian staff. Alongside this, all General Practitioner (GP) practices in Moray have been invited to participate in training and a number have taken up this offer. The Training Facilitator, along with her NHS colleague, also provided information on Adult

Protection and Adults with Incapacity to a meeting of the Royal College of General Practitioners held in Aberdeenshire.

It is planned to deliver a 2 day interview skills training course for Council Officers in Moray in late 2012.

Progress continues to be made in creating external links with the proposed National Adult Protection Learning and Development Network.

As experience in Adult Support and Protection activity builds, so does practitioner knowledge, skills and confidence. It is the ongoing remit of Learning and Development staff to continue to provide activities that meet the needs of all staff working within Adult Protection at all levels.

### **Grampian Police**

Grampian Police continues to deliver on the training strategy, with all staff undertaking e-learning on commencement of employment. There are 3 e-learning modules, tailored to the requirements of Police Staff, Police Constables and Supervisory Staff. Further to this mandatory training, staff in specific roles are given additional training in Adult Protection issues, as are staff who have been promoted. These include:

- Custody Officers who receive Mental Health Training delivered by staff from Robert Gordon University
- Force Service Centre Staff who receive additional training and have a call handling document that provides further guidance on dealing with a caller reporting someone who is at risk of harm

The Detective Superintendent is a member of the Public Protection Inter-Professional Education group. This group teams Robert Gordon and Aberdeen Universities with Grampian Police to address higher and police education in relation to public protection inter-professional education. This brings Medical, Nursing, Social Work, Pharmacy, Physiotherapy and Occupational Therapy Students and Police Officers together to share a better understanding of their roles and responsibilities in relation to public protection.

To support the better understanding of Adult Protection inter-professional working, Grampian Police has supported the School of Nursing and Midwifery at Robert Gordon University in the development of a virtual police custody suite. This learning tool assists student nurses in their understanding of Adult Protection issues and inter-professional planning.

Grampian Police continually aims to raise the awareness of staff to issues they deal with when undertaking their daily duties and is considering undertaking joint training with NHS Grampian on dealing with people who have specific mental health issues.

## NHS Grampian

NHS Grampian has continued to provide ongoing training to staff in Grampian and in relation to Moray, the following table gives details of the staff trained over the reporting period.

Area	Headcount of staff	No of staff attended at 31/03/12	% trained at 31/03/12
Moray	508	175	34

Note:

- This does not include those members of staff who were trained prior to the legislation

Anecdotal evidence would indicate there is a direct relationship between the delivery of training and the referral rate of Adult Protection concerns from NHS staff to the Council.

After the implementation of the legislation, training was prioritised and targeted at those NHS staff groups who were most likely to be in contact with high risk 'vulnerable' patients/clients.

Targeting and priority was given to:-

- Unscheduled care, particularly A&E Departments in all main hospitals and small community hospitals
- Community teams which support high risk 'vulnerable' people eg Learning Disability, Mental Health and Older People
- In-Patient wards were initially a priority, particularly in Learning Disability, Mental Health and Older People, before moving on to Acute In-Patient and Out Patient settings
- Professions providing high level support to high risk 'vulnerable' groups eg Podiatry, Community OT etc
- Protected Learning Time was utilised to deliver training in Primary Care. Over the reporting period, all the sessions were held on NHS sites, with 18 being held in Primary Care settings. There is an on-going need to focus on Medical/GP Staff, given that only 6% to date have received training

Since June 2011, Adult Protection has been included in NHS Grampian's Corporate Face to Face Induction with 177 staff having attended. While this is a brief input, it is made clear staff have a duty to report concerns to the Council.

Engagement with Senior Managers and Unit Nurse Managers, in particular, was essential to achieve organisational support. Also important was the link between incident reporting systems (DATIX), Adult Protection systems and the availability of training. DATIX includes a prompt to ensure staff report their concerns to the Council.

Across Grampian, an e-learning package was commissioned and developed and can be accessed by any member of staff across Social Care and support services in the statutory, voluntary and private sectors. To date, 2006 staff have completed this awareness training. In addition, an e-learning package is about to be launched for all NHS Grampian staff, which will be mandatory, either as awareness raising for staff who

have not completed face to face training or as a refresher for staff who have already attended training. The Learning Management System e-learning package will pre-populate all NHS Grampian staff's eKSF Personal Development Plan for completion. The e-learning is very focused on the individual roles and responsibilities of staff in relation to Adult Protection and in particular their duty to report concerns. It is the intention to share this training with the Scottish Ambulance Service and Grampian Fire and Rescue. It will also be shared with the 3 Local Authorities with a view to being adapted for use by Non-Social Work staff.

NHS Grampian has negotiated with Robert Gordon University in Aberdeen to ensure that the under graduate curricula in Nursing, Occupational Therapy, Physiotherapy and Radiography includes Adult Protection training. In collaboration with Aberdeen University and Robert Gordon University, preparations are in hand for an 'Inter Professional Education' event to be held in Spring 2013, which will involve Student Doctors, Nurses, Social Workers and Pharmacists, along with probationary/recently recruited police officers. Following this pilot, it is intended it will become an annual event.

Service user training, across all community care groups, is to be developed based on the experience of delivering the accessible information 'Talking Mats' training. Sessions will be delivered to service providers to enable them to roll out the training within their services.

A 2 day Multi Agency Significant Case Review training course is planned for Summer 2012. The training will be interactive focussing on the use of root cause analysis tools. Representatives from Aberdeen City Council, Aberdeenshire Council, Moray Council, NHS Grampian and Grampian Police will be in attendance.

The sheer volume of staff requiring awareness training remains the greatest challenge, as well as releasing staff to training activities, however a blended approach with a number of learning options appears to continue to be the way forward.

## 10. WORKFORCE ISSUES

During 2010 to 2012, the increase in public and agency awareness has had a significant impact for the Local Authority and in particular on the Adult Protection Unit as the first point of entry to the system. 85% of the referrals made to Adult Protection did not require Adult Protection interventions, however most would meet other criterion for intervention under other Community Care legislation. The Moray Council has always taken the view that not meeting the three point criterion should not be a barrier to allocation of appropriate resources.

In discussions with Grampian Police, it was identified that the vast majority of the concerns passed on were of relevance, identifying that some form of assessment for support was required. It was agreed that it would be inappropriate to curtail these referrals therefore alternative methods of dealing with the referrals needed to be found. Other external referral agencies also identified that a 'one stop shop' approach to referrals for all adults would be welcomed.

Therefore The Moray Council, as part of its re-design of Community Services, decided to form an 'Access Team' as a first point of contact with effect from April 2012. The effect of this will be assessed over the next reporting period.

Although The Moray Council initially developed the role of Adult Protection Co-ordinator, this post was reviewed in 2011, taking on lessons learned from audit activity practice gained over a 2 year period and Community Care changes. The Adult Protection Co-ordinator post was re-developed to incorporate strategic and operational responsibilities and quality and performance improvement activities. The post was re-graded and re-titled to that of Consultant Practitioner Adult Protection with a clear focus on developing competency in Adult Protection activity.

In order to further support and equip Council Officers to undertake ASP activities, it was decided to fund an Advanced Practitioner post in Adult Protection. This newly created post was designed to support practitioner development in ASP work, and it provided the opportunity for an individual to focus exclusively on Adult Protection work thereby increasing confidence and skill in investigating, risk management and decision making. The Consultant Practitioner provided direct supervision and training. The post was operational from November 2011 until May 2012, when the post holder returned to their substantive post in the Community Team. This was a welcome development which increased Moray's ability to respond to Adult Protection work and is to be repeated in late 2012.

An Adult Protection Practice Development Forum has been established to allow information sharing on local and national issues affecting Adult Protection. This forum allows local practitioners to share their experiences of carrying out Adult Protection investigations and it provides a channel to ensure updated and current information on changes to Adult Protection practice or legislative issues are known and implemented. It also takes account of the practitioner view in the re-design and development of Adult Protection services, provides an opportunity to examine the quality and consistency of Adult Protection activities, looks at training needs and an evaluation of outcomes.



## 11. FORMAL EVALUATION

### National Self-evaluation

MAPC agreed to participate on a limited basis in piloting the System of Self-evaluation of Adult Support and Protection Activity in Scotland, developed by Professor James Hogg and Dr David May, at the University of Dundee. 3 cases were audited on Quality Indicator 1 by the then Lead Officer for Adult Support and Protection and Adult Protection Co-ordinator. In July 2010, a report with recommendations was submitted to the MAPC and to Professor Hogg. The audit was predominantly carried out to test this model of auditing, however even on this limited scale it was useful in identifying where improvements in practice needed to be made. To do the remaining indicators even on a limited number of cases would be helpful but presented barriers in terms of resources.

### Single Agency Case Unit

The Consultant in Adult Protection, Community Care team manager, Service Managers and Head of Services at Moray Council act as auditors to regularly carry out single agency case file audits of Local Authority records on adults who have been subjected to adult support and protection intervention, the aim being to establish a baseline for the development of performance indicators.

The auditor completed a quality indicator template for each case based on the Social Work Inspection Agency<sup>15</sup> self assessment template. Council Officers responsible for investigating were notified of the adults identified and records were requested. The auditors met with the relevant Council Officer to discuss the case and provide feedback on the file audit. Anonymous information on all auditing activity is collated and presented to Moray Council's Community Care Practice Governance Board which provides a feedback loop into practice governance within the Council across all areas of Community Care.

The views from the auditors were that, overall, there was evidence of good, committed, effective work in protecting adults in Moray by staff of all agencies. On the basis of the evidence in the records audited, there were a number of areas identified where there was scope to improve practice. It was particularly felt that Adult Protection work could be more effective if the allocated Council Officer was not normally or not regularly involved with the service user or their family. It was clear also that staff were often working in complex and challenging situations, with varying levels of engagement from the individual.

An Action Plan was developed from the auditing activities which centred on identifying and recording risk and an understanding of the use of chronologies. Training was provided to all Council staff in these areas over 2011 and a subsequent improvement has been noted.

Areas for improvement:-

- A need for support in collating chronologies from all agencies rather than single agencies
- Support to produce Adult Protection risk assessment and risk management plans

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<sup>15</sup> Now Care Inspectorate

- Support to develop outcomes focussed support and protection plans

### **Multi Agency File Audit**

MAPC is considering ways to jointly audit case files and is anticipating adapting Moray's Child Protection multi-agency file auditing process, link into Professor James Hogg's Self-evaluation of Adult Support and Protection Activity in Scotland tool and include experience from the recent pilot with service user consent and engagement. A small working group is to be convened to pilot this tool and develop an Action Plan for taking forward joint agency auditing activity. This is planned to take place in late 2012.

### **MAPC Evaluation Of Performance**

Further work is still required to audit the effectiveness of multi-agency working at the strategic level. A small working group was identified in 2011, with the aim of developing a self-auditing tool to evaluate the MAPC. Due to continued changes in representatives of various agencies, this group was never fully operational. It is planned that this important area of work will be completed over the next reporting period.

## **12. CONCLUSION, RECOMMENDATIONS AND FUTURE PLANS**

MAPC believes that this second biennial report illustrates its commitment to work together at all levels from policy to practice in order to make a positive difference to the outcome for adults who are at risk of harm. There continues to be steady progress against a broad and often complex agenda, however there is still much more to be achieved. This will be strengthened by collaborative implementation of the following intention, together with those objectives shown in the MAPC Action Plan (Appendix C).

### **Public Engagement And Information**

MAPC has made considerable effort to raise public awareness of adult protection issues using a variety of media approaches. The question of how effective this has been remains unanswered as evaluation methods of increased referrals by the public are considered crude and unreliable. Most relevant, is that advertising serves no useful purpose if there is no feedback loop. Recent research shows that engaging and interacting with the public is a better option and further research and the development of a marketing strategy is to be considered

### **Audit**

The focus of auditing activities over this reporting period has been on establishing current skills and knowledge of staff engaged in enquiries and investigation activities. The focus for the next reporting period will be on establishing joint auditing mechanisms appropriately tailored to the needs of each agency and evaluating partnership working at the strategic level of the MAPC.

### **Data Collection And Retrieval**

Recent improvements and changes in the information storage and retrieval system has brought with it new challenges. Tools designed to enhance data collection and information processing still requires to be fine-tuned. Successful implementation of further changes will, however, require investment of resources and closer working between data input and retrieval personnel. Better clarity regarding benchmarking criterion will go some way to facilitating reliability of any analysis.

### **Public Protection And Community Planning**

A range of cross cutting policy streams in the Public Protection arena provide Moray with both the challenge and the opportunity to develop coherent approaches that connect to good practice and deliver better outcomes for communities. The Public Protection Forum will complement and support the excellent work being progressed by the different parts of the wider planning system, providing an overarching strategic and systemic view of all the elements that promote public safety. MAPC will continue to strengthen its links with the Public Protection Forum with the aim of improving outcomes for adults at risk of harm.