



Angus Adult Protection Committee

Biennial Report 2012-2014

**ANGUS ADULT PROTECTION COMMITTEE
BIENNIAL REPORT 2012-2014**

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Foreword

The biennial report of the Angus Adult Protection Committee (AAPC) for the period 2012 to 2014 spans a period of almost unprecedented and ongoing change. The introduction of Police Scotland; Angus Council restructuring; development towards a local Health and Social Care Partnership; the implementation of legislation for Self Directed Support; and the impact of welfare reform, are major changes taking place simultaneously and at a time of significant financial pressure on partnership agencies.

Many of the changes are reflected in the changed membership of the Angus Adult Protection Committee (AAPC) and at times reduced capacity has been an issue in progressing the AAPC business and subcommittee action plans, particularly during the past year. It is therefore of credit to the partnership, and a reflection of the hard work of individuals, that the majority of objectives have been achieved as planned over the period 2012-2014.

Importantly, the majority of adults at risk and professionals working with them considered that the adults were safer as a result of adult protection procedures.

Financial harm continues to be a key priority. It is more than 3 times more prevalent than any other type of harm affecting people protected by adult protection measures in Angus. For this reason the AAPC has adopted the local financial harm sub group as a subcommittee of the AAPC and extensive work has been undertaken to establish policy; raise awareness; develop practice in partnership and to tackle financial harm.

Earlier work in the development of wider areas of policy, practice, and training has provided a sound foundation for the committee through this period of change and this is reflected throughout the report in progress towards addressing national and local priorities – the existence of a longstanding, comprehensive data set in Angus being one example. More work is now needed to further progress service user engagement; to improve awareness and stimulate engagement of GPs and care homes in adult protection. The reports of the national priority projects will inform the committee's work in these and other key areas in 2014-2015 and beyond.

The immediate challenge for the AAPC, at this time of change, is to develop in a focused way, and to progress an ambitious but realistic business plan which continues to identify and address priorities to protect adults at risk of harm in Angus.

Strengthened governance and closer partnership working across public protection committees are essential to sustain and increase the capacity and effectiveness of the Angus Adult Protection Committee in the developing environment and to ensure sustained focus on adult protection as a key priority.



Margaret Wells
Independent Chair, Angus Adult Protection Committee

Angus Adult Protection Committee - Independent Chair's Biennial Report 2012-2014

Executive Summary

The Angus Adult Protection Committee (AAPC) has continued to move forward to guide and shape policy and practice to improve the safety of adults at risk of harm in Angus. There have been many achievements in 2012-2014 as the work of the committee responds in this challenging period of change and restructuring.

Referrals and the Early Screening Group (ESG)

An Early Screening Group was established in Angus in 2012 to consider all Adult Concern Reports submitted by Police Scotland, the main source of adult protection referrals in Angus. It is a multi agency group including Social Work and Health; Police; NHS; Housing; and Community Safety; Fire Safety; and Scottish Association of Mental Health (SAMH) representatives. The ESG ensures an informed and appropriate response to adults about whom the police have concerns and enables referrals to be made to the correct community care teams or partnership agencies. It provides a forum to discuss cases where there are serious housing problems, including anti-social behaviour which might indicate significant vulnerability of the adults concerned.

Mainly as a result of the formation of the ESG and subsequent screening of the adult concern reports, there has been a significant reduction (67% between April 2011 and March 2014) in the number of adult protection referrals to social work and health community care teams. This has enabled a better focus on adult protection concerns (95% of referrals led to an inquiry in 2013-2014 compared to 69% in 2011-2012); ensures relevant information is shared by the key adult protection partners; and that actions agreed are both appropriate and proportionate.

Outcomes

There is evidence of improved public awareness of adult protection issues and that most adults feel safer as a result of adult protection procedures. More adults with learning disabilities and more older people were identified as adults at risk in 2012-2014. There has been a significant reduction in the number of statutory orders (39 in 2010-2012; compared with nine in 2012-2014 including only one in 2013-2014). This may be linked to greater awareness of adult protection concerns; associated preventative action; and understanding on the part of previous perpetrators that action will be taken to address harm.

Financial Harm

Financial harm is three times more common than any other type of harm experienced by adults at risk in Angus. A financial harm sub committee was, therefore, established. Its work has been instrumental in raising awareness and taking action to tackle financial harm in Angus and it has contributed to work to address this national priority. The launch of the Angus Council policy on financial harm achieved significant publicity in the press and on national television promoting the work of the Committee and raising awareness of the risks. The sub committee is chaired by Police Scotland. It involves partnership between Angus Council services including Social Work and Trading Standards, and agencies such as Royal Mail; NHS; and the business community. The financial harm sub committee has led on production of "Scam Free Angus" leaflets and liaised with Post Offices and Banks within Angus to ensure distribution to customers.

Wide engagement with service users and visits to many community groups have taken place to raise awareness of the risks. Community police officers, trading standards, and social work staff have carried out over 127 visits to community groups, building merchants, financial institutions and other relevant organisations in Angus to alert as many people as possible to the danger of financial scams, including doorstep, mail, phone and internet fraud. As a result of this the membership of the financial harm sub committee has been extended to include local post office representatives and the RBS area manager. This innovative and committed partnership across public and business sectors is central to the sub committee's ongoing work and achievements.

National Scam Awareness Week was a key initiative. Working with the partnership agencies, the sub committee again ensured wide distribution of promotional materials throughout Angus. The financial harm sub committee continues its participation in local initiatives such as Rogue Traders, Doorstoppers, and Operation Carpus, a Police Scotland response to scam lists of vulnerable adults in Angus.

Training

The training sub committee, chaired by NHS Tayside, is responsible for co-ordinating, commissioning and delivery of adult protection training in Angus.

Multi-agency adult protection training has been redesigned and continues to be delivered on a rolling programme. The senior policy officer from the Information Commissioner's Office is now involved in the delivery of training on Information Sharing and Data Protection. Multi-agency adult protection awareness training is now delivered to community police officers in Angus.

The Dundee University social work degree course now includes a training slot to alert students to the adult protection legislation, policies and procedures and to the links between adult protection and financial harm.

Training in suicide awareness was provided to staff in Minor Injury Units throughout Angus.

Self Evaluation, Audit and Review

The AAPC practice sub committee leads the development of adult protection practice and service improvement; audit and review. It is chaired by Angus Council People directorate and has undertaken six multi-agency case file audits and reviews. This enables staff to identify examples of good practice; informs the improvement plan; and provides valuable learning opportunities for adult protection and community care staff and multi-agency partners.

Professional engagement in Adult Protection Processes

Professional attendance at adult protection case conferences shows high involvement from most key professionals. NHS Tayside referrals are included in integrated team referrals, GPs have received national guidance regarding their role in adult protection and a range of work has been undertaken to engage GPs. Levels of GP referrals and primary care involvement in key adult protection processes are low.

Third Sector Engagement

“Voluntary Action Angus” and “Angus Carers” are now represented on the AAPC and this has provided valuable input and involvement from third sector agencies and promoted the views of service users.

Diversity

The AAPC is represented on the local Hate Incident Multi-Agency Panel to ensure that services in adult protection are responsive to local people and promote good relationships, diversity and tolerance between social groups and communities in Angus.

AAPC Strategic Priorities 2013-2016

In 2013 the following overarching public protection strategic priorities were set by the Executive Group:

Improving Outcomes

Identifying and addressing the impact of:

- Substance misuse on vulnerable individuals
- Domestic abuse on vulnerable individuals
- Problems with mental health on vulnerable individuals
- Promoting and more effectively engaging with service users
- The development of preventative and early intervention services
- Ensuring effective risk assessment

Improving Policies and Procedures

- Promote better links between adult protection, child protection and public protection
- Promote the effective use of chronologies
- Measuring the impact of interventions and their outcomes
- Develop and sustain the corporate governance arrangements for public protection

It was agreed that the partnerships would reflect these strategic priorities in their action plans and this biennial report reflects these priorities.

The Angus Adult Protection Committee has identified the following priorities for 2014-2016:

- Identifying adults at risk of harm, ensuring effective risk assessment and improving outcomes
- Acting to minimise prevalence of financial harm
- Promoting and more effectively engaging with service users
- Reviewing and amending adult protection practice in care homes
- Improving GP engagement with adult protection processes
- Enabling and facilitating referrals of adults at risk from Accident and Emergency departments
- Promoting better links and developing more integrated working between adult protection, child protection and public protection

The Angus Adult Protection Committee Business Plan 2014-2015 sets out planned actions which will take forward these priorities throughout the coming year.

Margaret Wells
Independent Chair, Angus Adult Protection Committee

1. The Angus Adult Protection Committee

Our Vision: "Working together to protect adults at risk of harm in Angus".

The Angus Adult Protection Committee (AAPC) meets quarterly and reports to the Angus Child, Adult and Public Protection Executive Group. The AAPC membership, including co-opted members, is as follows:

Independent Chair	1
Police Scotland	2 members
Angus Community Health Partnership	2 members
Medical practitioners	2 members
Angus Council	4 members
Voluntary sector	3 members
Care Inspectorate	Open invitation
Procurator Fiscal	Invited at least annually

A representative of Angus Carers was co-opted to the AAPC in December 2013. The chairs of the Practice and Financial Harm sub committees are co-opted members.

There have been significant changes in the AAPC membership and in staffing over the period of this report and particularly in late 2013, mainly due to ongoing major organisational change. At the December 2013 meeting seven of the 14 members of the AAPC were new. This includes changes in lead officer; two out of the three sub committee chairs and key support staff. At times significant vacancies; role changes and associated staffing pressures have proved challenging to ensuring that the committee has had the support it needs to take forward its business plan. There is, however, clear commitment to recognise and work through the challenges of change and this is reflected in the achievements over the period 2012-2014.

Planned development:

Given that major change is ongoing, and taking account of changes to date, development and review of the AAPC and the roles and responsibilities of its members is a key focus in 2014.

1.1 Aims of the Angus Adult Protection Committee

The committee aims to:

- Improve the safety of adults at risk of harm in Angus
- Ensure that adults at risk of harm are listened to
- Raise awareness of adult protection
- Provide an integrated approach to the development of adult protection policy and practice
- Ensure staff are confident and competent
- Ensure continuous improvement through audit and review of professional practice

1.2. Objectives of the Angus Adult Protection Committee

The objectives are to:

- Develop policies and strategies and involve service users and carers
- Develop systems to identify adult protection concerns and deal with referrals
- Guide significant case reviews and oversee the implementation of learning
- Devise, implement and evaluate education and training programmes
- Create information sharing policies, procedures and practices
- Monitor, audit and review the implementation and impact of policy
- Monitor performance and report to Scottish Ministers on progress against agreed adult protection outcome measures
- Oversee the publication of public information

1.3 Local governance arrangements

The Executive Group was reviewed in 2012 and developed to include governance and reporting arrangements for other public protection partnerships. It was renamed The Angus Child, Adult and Public Protection Executive Group. The partnerships reporting to it are:

- Angus Adult Protection Committee
- Angus Child Protection Committee
- Angus Alcohol and Drug Partnership
- Choose Life
- Angus Violence Against Women Partnership
- Multi-agency Public Protection Arrangements

The Executive Group is chaired by the chief executive of Angus Council. It meets three times per year and comprises chief officers from Angus Council, NHS Tayside, Angus Community Health Partnership, and Tayside Police (now Police Scotland).

Planned development:

A development workshop is planned for June 2014 to:

- Refine the role and remit of the Executive Group
- Set revised governance and risk management arrangements

- Consider overall strategic direction

1.4 Sub Committees

In 2012 the AAPC reviewed its structure and it was agreed that policy should be developed in short life working groups. There are three Sub Committees which meet quarterly: Practice; Financial Harm; and Training, chaired by Angus Council; Police Scotland; and NHS Tayside, respectively.

Sub committee chairs and the Senior Planning and Review Officer meet quarterly with the Independent Chair to ensure an integrated approach linking audit and evaluation with policy development and the training plan; and to inform sub committee work plans and the AAPC agenda and business plan.

Practice Sub Committee - The Practice Sub Committee is responsible for leading the development of adult protection practice and service improvement; auditing and reviewing adult protection cases; reviewing reports published by the Mental Welfare Commission for Scotland (MWC); and making recommendations to the AAPC about the improvement of practice; procedures; and service delivery.

Training Sub Committee - The Training Sub Committee is responsible for the co-ordination, commissioning and delivery of adult protection training in Angus.

Key Achievement/Activity:

The Financial Harm Sub Committee was established in October 2012. In 2012 financial harm was identified as the most common type of harm experienced by adults at risk in Angus. A local financial harm sub group, chaired by Police Scotland, was therefore formed initially and now reports to the AAPC as a sub committee. This is a key area of initiative for the partnership in policy development; awareness raising and action to prevent and address harm.

2. Engagement

Service user and carer involvement is a national priority project. The views and feedback from adults at risk; service users and carers are central to the AAPC and the case conference processes in Angus. A number of service user and carer awareness presentations and consultation meetings have taken place to inform service users and carers about adult protection and to ask how they would like to be involved in the committee's work.

Arrangements to engage with service users in 2012-2014 included:

- Over 300 people, including members of the public, service users, carers and staff attended the 'Safe and Sound' awareness event in late Spring 2012. Feedback was very positive and informed the 2012-2014 AAPC action plans
- The views of service users are recorded and taken into account at every adult protection case conference
- An information leaflet about the adult protection and case conference process is issued to service users prior to an adult protection case conference

- A questionnaire is given to every adult at risk at the conclusion of case conferences to enable them to give feedback about their experience of case conference attendance
- The offer of referral and facilitation of access to an independent advocate is made to service users during adult protection investigations
- Adult protection case conferences are normally held in a venue as close to the adult at risk's home as possible
- At the conclusion of adult protection case conference procedures the key factor for the adult at risk – whether they feel safer – is always considered
- Council officer training emphasises the importance of service user involvement
- A mentoring system reminds staff to invite and support service users to attend case conferences
- A representative of Angus Carers is a co-opted member of the AAPC

Planned development/improvement:

The perspective of carers and service users is provided at the AAPC and its sub committees by representatives of Voluntary Action Angus (the umbrella body for voluntary organisations); Angus Independent Advocacy and Angus Carers. Earlier proposals to develop a service user sub committee have now been replaced by work to develop civic dialogue and community engagement around a range of issues including adult protection. This links with the wider initiative taking place within the community planning partnership.

Key areas for development are:

- Continuously developing opportunities to further enable service user engagement in, and feedback about, their personal adult protection arrangements
- Improving service user engagement in the AAPC and its work.

3. Outcomes for adults at risk of harm

3.1 Adults at risk and their experience of adult protection case conferences

A questionnaire designed to get feedback from adults at risk about their experience of case conferences was introduced in January 2013. Nine service users have responded to date, and the following outcomes recorded:

- The purpose of the case conference had been explained in advance
- All service users had been given an opportunity to express their views at the case conference
- All had been listened to, and

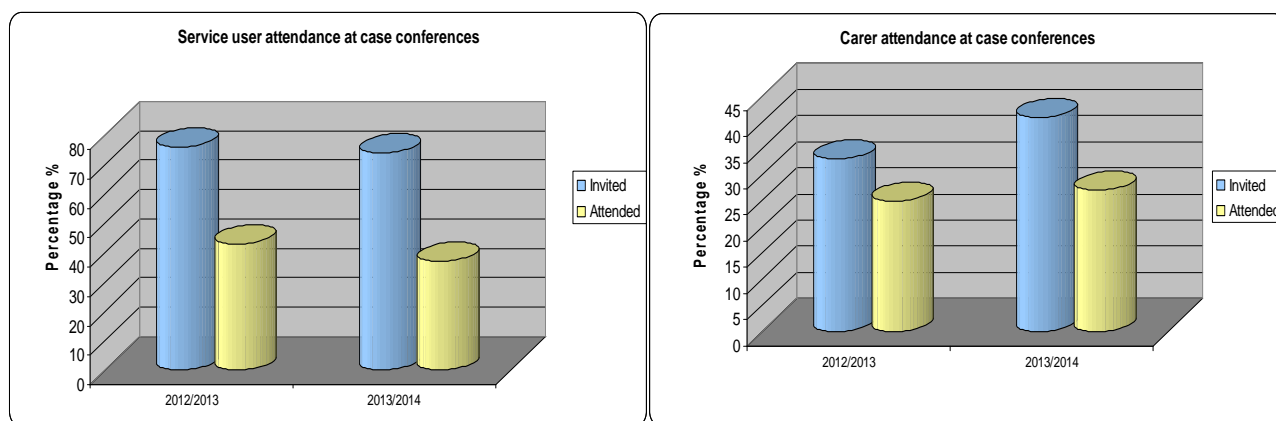
- treated with courtesy and respect

Service user feedback about their experience of adult protection processes will continue to be sought. Ongoing work is taking place to give improved opportunities for service users to provide feedback.

3.2 Adults at risk and/or carers attending Adult Protection Case Conferences

Efforts to fully involve adults at risk in their case conferences have continued. Although invitations have consistently been sent to 80% of adults at risk, actual attendance is less than 40%. The reasons for this were explored and it was found that:

- Some adults choose not to attend and express a preference to have their carer, social worker, care manager or advocate to represent their views
- In some cases it was assessed as inappropriate for the adult at risk to attend as this would be emotionally or psychologically damaging



- Carers of adults at risk attended 27% of case conferences in 2013-2014
- In 2013-2014 55% of case conferences had the service user, an independent advocate or their carer (or all three) in attendance

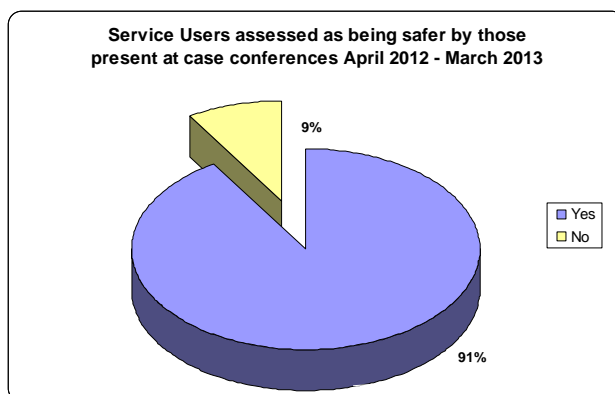
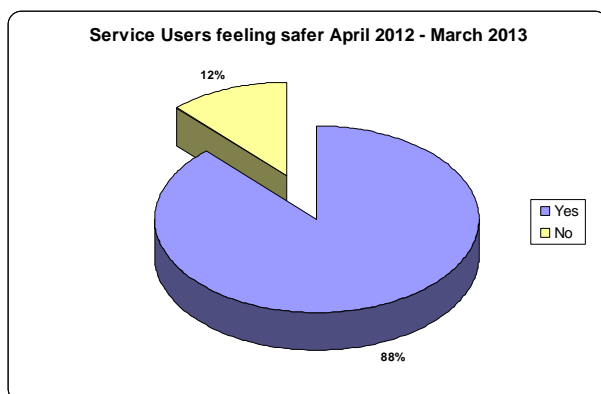
3.3 Adults at risk who felt safer following implementation of an adult protection plan

At the end of every case conference attended by the adult concerned, he/she is asked if he/she feels safer as a result of the adult protection procedures. The professional staff involved are then asked for their view.

Outcomes:

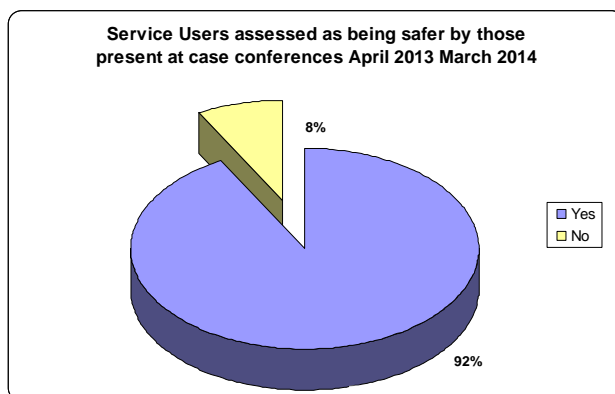
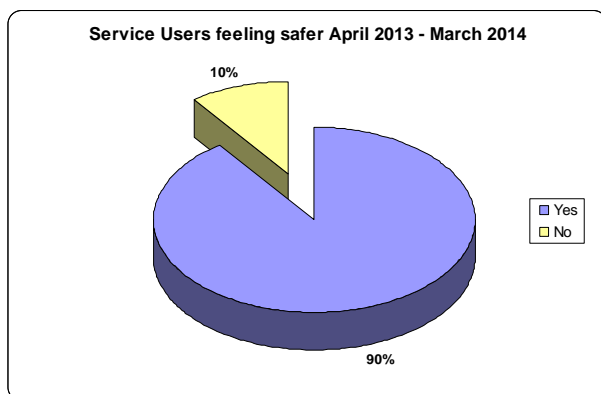
In 2012-2013:

- Most adults at risk felt safer (15 out of 17) as a result of adult protection procedures
- Professionals considered that the adult at risk was safer (in 19 out of 21 cases)



In 2013-2014:

- Most adults at risk felt safer (18 out of 20) as a result of adult protection procedures
- Most professionals considered that the adult was safer (in 23 out of 25 cases)



In the period 2012-2014:

- In four instances adults at risk or professionals felt that safety had not increased
- In a number of these cases self harming patterns of behaviour proved difficult to address, however these cases proceeded under either care management or care programme approach. It was decided at the adult protection case conferences that continuing to act under the adult protection legislation would be inappropriate as these processes were not adding benefit to the action being taken under other legislation.

4. Performance

This section of the biennial report details information provided to the AAPC to inform its business plan; provides an oversight of progress and emerging issues. Information collated and analysed includes the volume of activity; trends; involvement of statutory partners; thresholds for taking action under adult protection legislation and the effectiveness of this action.

Key performance and outcome information from programmes of case audit and review carried out during 2012-2014, which informed the AAPC improvement plan, are outlined later in this section.

4.1 Dataset and trend analysis

Objective:

- Have an overview of information relating to adults at risk of harm
- Receive regular management information reports, including analysis of trends
- Identify and address the implications of these reports
- Ensure that management information is used to inform local priorities

Key Achievements/Activity:

- Six monthly reporting to AAPC on adult protection data; information; and trends
- Six monthly reporting of attendance at adult protection case conferences to partner agencies
- Contribution to the development and implementation of the national data set for adult protection
- Data shared by Police with partners in relation to Early Screening Group Referrals
- Audit and review of six adult protection cases

The development of a national dataset for adult protection activity was a Scottish Government priority work stream in 2013-2014. A trial of the new data sets is taking place between April and June 2014. Angus Council collates comprehensive adult protection statistics which are reported to the AAPC every six months and is in a position to report on the data sets agreed.

Monitoring the numbers of referrals, investigations, and adult protection case conferences is not in itself a measure of the effectiveness of the AAPC. It does however provide key information about performance and the engagement of public sector bodies in respect to their duties to cooperate with a council officer's inquiries and to make adult protection referrals. It also enables trends, questions and concerns to be identified and explored.

Planned development:

- Develop improved arrangements for benchmarking and analysis of trends
- Provide data returns to Scottish Government based on the national data set
- Implement recommendations arising out of the 2014 inspection of older people's services in Angus as these pertain to adult protection.

4.1.1 Referrals

Source of referral - Public Bodies with a duty to refer

Police Scotland continues to be the main source of adult protection referrals with the next highest source of referrals coming from the social work and health integrated community care teams.

NHS Tayside makes more referrals than the statistics appear to show - as partners in the integrated health/social work community care teams

The Office of the Public Guardian (OPG) and **Mental Welfare Commission (MWC)** have not made adult protection referrals, however the OPG has recently adjusted its procedures so this situation may change next year.

The Care Inspectorate has made recent proposals for engagement with adult protection committees. The AAPC welcomes closer engagement and improved opportunity to consider common areas of concern and their implications for referral.

Primary Care The low number of referrals from GPs and other primary care professions has continued to be a concern. Action to address this has not brought about any change.

Referrals	2012/2013	2013/2014
Police	462	286
Social Work and Health	23	29
Health Primary	2	1
Family	3	1
Member of the Public	5	2
Carer	2	8
Voluntary organisation	2	0
Other care home	3	6
Other	3	1
Self	9	1
Health Acute	1	1
Health GP	1	4
Local Authority care home	0	0
Care at home	2	0
Housing	5	3
Care Inspectorate	0	2
OPG	0	0
Mental Welfare Commission for Scotland	0	0
Total	526	345

Key Activity:

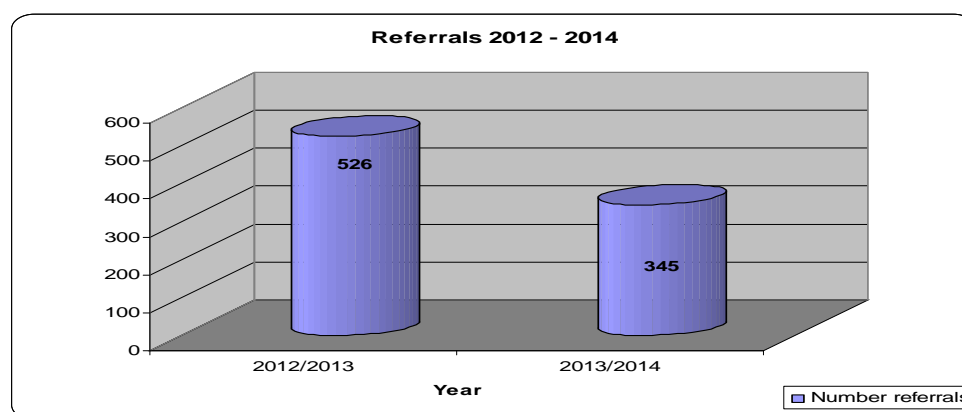
- Training for GPs as protected learning time
- Meetings in primary care settings
- Distribution to all GPs and promotion of the national guidance on the role of GPs in adult protection

- Letter from the chair to all GPs regarding the importance of GP engagement in adult protection

Planned Development:

- Progress work locally and nationally to stimulate GP and Primary Care engagement in adult protection.

Number of referrals



The number of adult protection referrals has fallen significantly between years 2012-2013 and 2013-2014. The overall fall of 181 is accounted for by the reduction in the number of police referrals classified as adult protection.

Key Achievement:

In June 2012 adult protection partners developed a multi-agency Early Screening Group (ESG) to consider the police adult concern reports. Previously all such reports had been counted as being adult protection referrals. Police adult concern reports sent to Angus Council totalled 1116 for 2012-2013 and 1222 for 2013-2014. The ESG also deals with cases of concern to colleagues in community safety and housing as well as cases that are classified by the police as "repeat callers". The group involves community nursing; Police Scotland; community mental health service; social work and health service; alcohol, drug and blood borne virus team and housing.

The overall aims of the early screening group are to:

- Ensure that there is an informed and appropriate response to adults about whom the police have concerns
- Prevent community care teams from receiving referrals about people who do not need any social work and health support
- Target referrals, along with relevant background information, to the community care teams when specific needs are identified, putting adults in need of services in touch with these services in touch with these services at an early stage
- Provide housing and community safety teams with a forum for multi agency discussion of adults who may be at risk of anti social behaviour or eviction

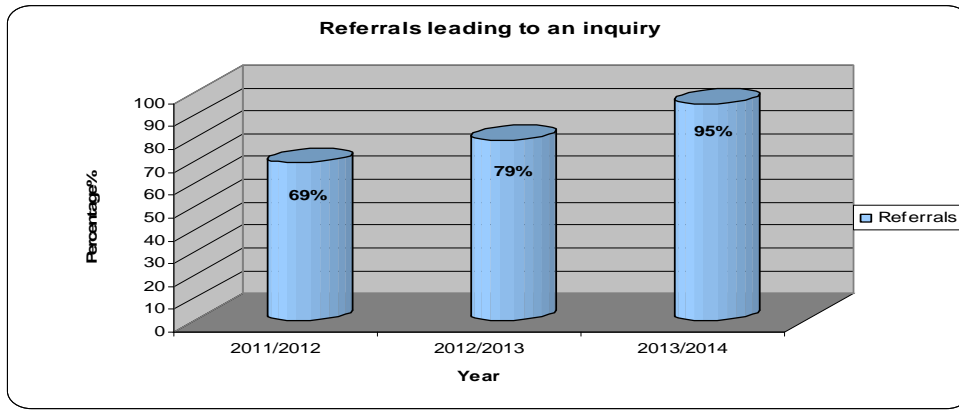
procedures to enable services to be provided that may preclude the need for formal action

Between its inception in June 2012 and March 2014, 457 adult concern/vulnerable person reports were discussed at the ESG. The ESG decided on the following actions regards these 457 reports:

- 106 (23%) were subject of no further action at all
- 214 (47%) had been sent either to an active NHS or social work and health community care team prior to the ESG meeting necessitating no further action by the ESG
- 81 (18%) were sent to the GP with an accompanying letter
- 34 (7%) were sent to specific integrated social work/health community care teams for further action
- 22 (5%) lived outwith Angus had were sent to the appropriate local authority

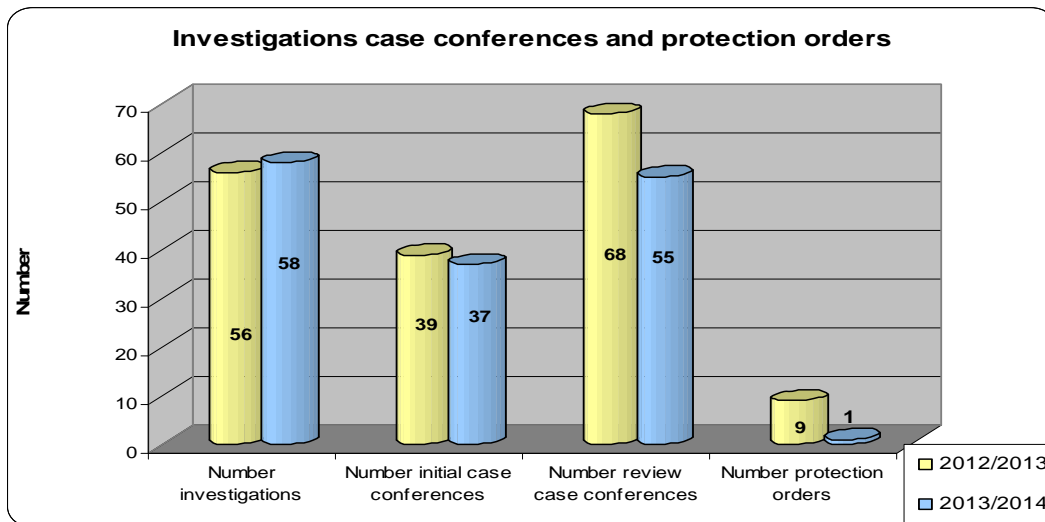
Outcomes:

- The screening of the police reports has led to a decrease of 67% in the number of referrals counted as adult protection referrals between April 2011 and March 2014
- The reduction in the number of reported adult protection referrals does not represent any reduction in the number of police reports to Angus Council but it does mean that the way that police referrals are dealt with has been refined. Police referrals which are not adult protection, but which identify adults in need, are sent to appropriate services by the Early Screening Group
- The ESG identifies patterns or series of concerns about individuals. This should eliminate the possibility of incidents about the same individual being dealt with as unconnected events, preventing the sort of problems highlighted in the "Hidden in Plain Sight Report" regarding disability related harassment
- As a consequence of the introduction of the ESG the integrated social work and health community care teams have been able to better focus on adult protection inquiries
- Concerns about shared thresholds for conducting enquiries have been effectively addressed. Consequently, whereas in 2011-2012 only 69% of referrals led to an inquiry, in 2012-2013 79% of referrals led to an inquiry; in 2013-2014 95% of referrals led to an inquiry



4.1.2 Investigations, case conferences and protection orders

The number of investigations and case conferences has changed very little during the years 2012-2013 and 2013-2014.



The Association of Directors of Social Work adult protection sub committee undertook a survey of the number of adult protection case conferences held in different local authority areas in the year 2012-2013. 14 local authorities participated and of those Angus had the fifth highest number and, when calculated per head of population, the highest rate of case conferences. There are, however, wide variations across Scotland. More work is needed to explain this and to consider the implications.

Further analysis and comparison with child protection data locally showed that in Angus:

- 78% (Scottish average 77%) of child protection initial/pre birth/transfer case conferences decide on a child protection plan (and registration of the child)
- 73% of initial adult protection case conferences in Angus decide to put an adult protection plan in place

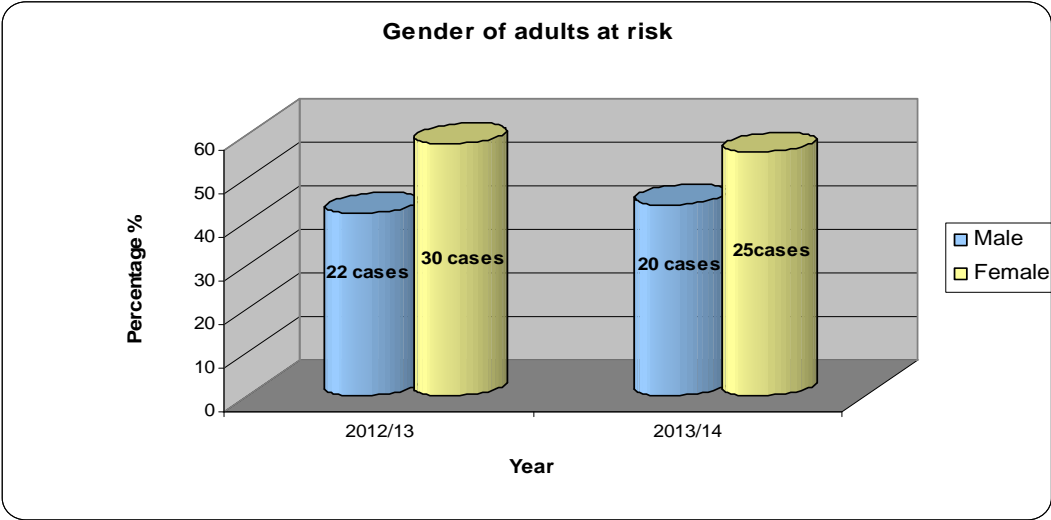
In Angus the rate of conversion from initial case conference to protection plan is similar in adult and child protection. This suggests that the threshold for calling adult and child protection case conferences is comparable.

Protection Orders The numbers of protection orders fell substantially in 2013-2014 from the previous year. Angus successfully applied for 39 orders in 2010-2012 compared with 10 in 2012-2014 (which includes only one in 2013-2014). The reasons for this fall in numbers are unclear. It may relate to improved awareness of adult protection concerns and earlier intervention. Over the same period the AAPC and key partners undertook a substantial programme of awareness raising in respect of adult protection and financial harm. Also, previously Angus had used banning orders successfully to protect adults at risk, especially from financial harm, where substance misuse was found to be a key characteristic of repeat perpetrators. It may be that this acts as a deterrent and that some local perpetrators are now aware that action will be taken to prevent and address harm.

Angus has never had an application for a protection order refused by a sheriff.

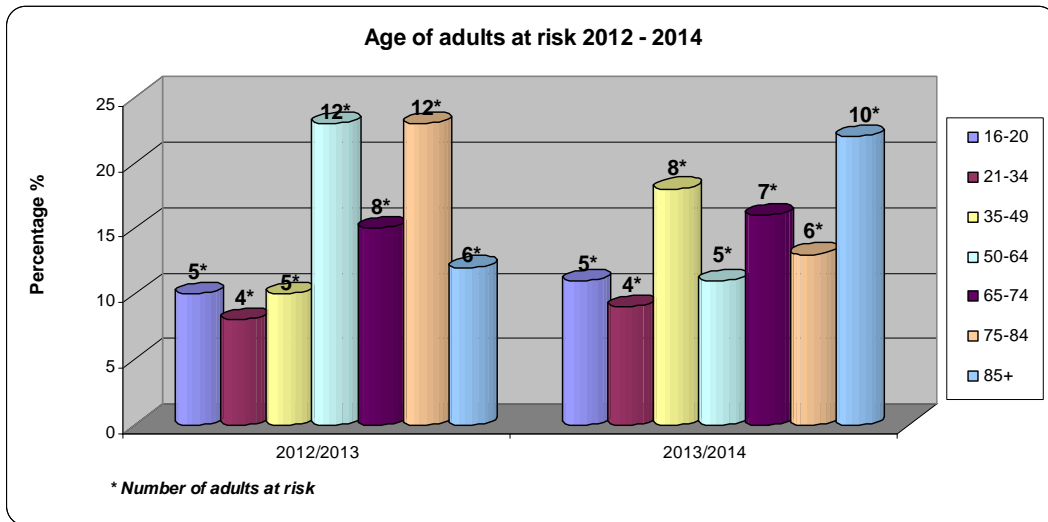
4.1.3 Adults at risk by gender

There does not appear to be evidence of a significant gender difference in adults at risk.

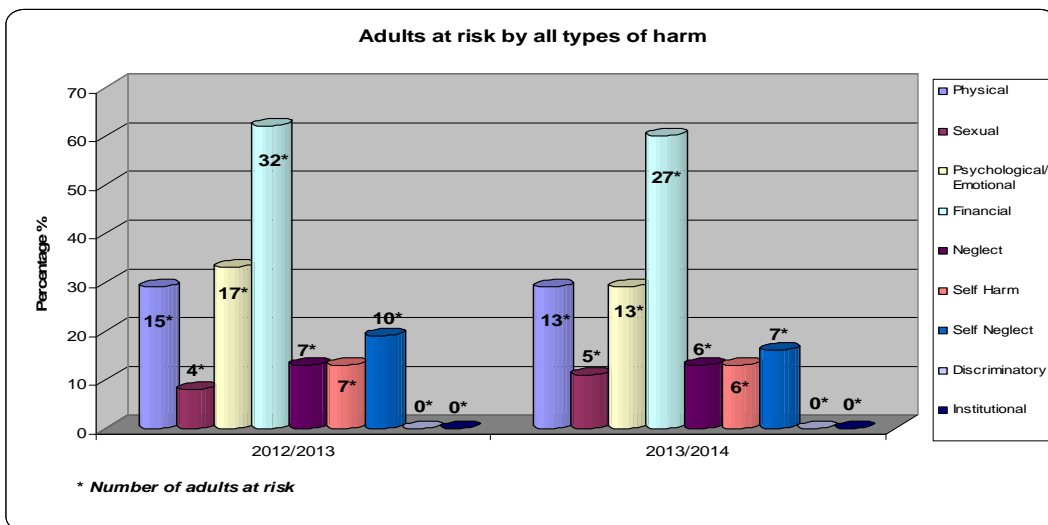
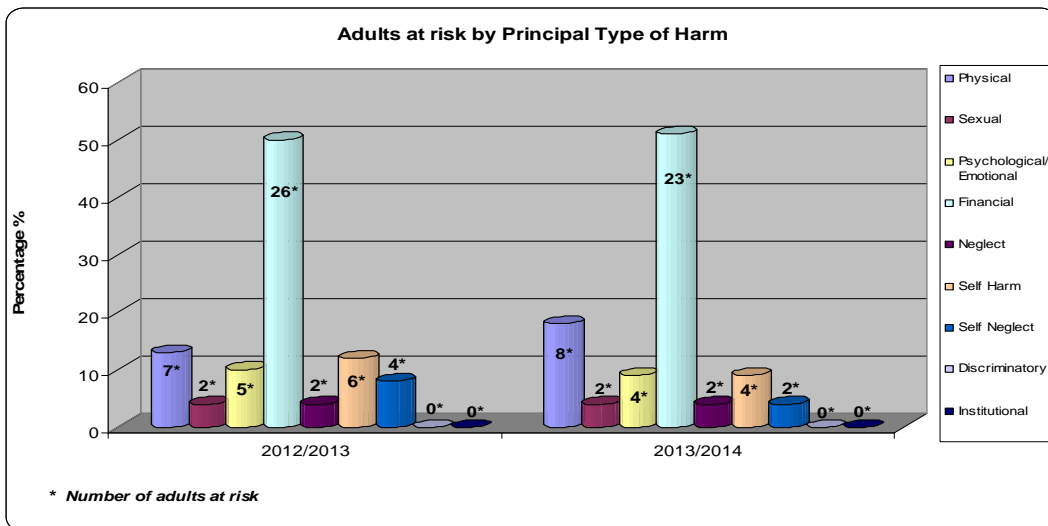


4.1.4 Adults at risk by age

Over the last year the number of adults at risk in the 85+ age group has nearly doubled. The reason for this is unclear but with the demographic trend being for a larger proportion of the population being very old, while the increase in those at risk is very concerning, it is positive to note that this age group is being identified and assisted when a person is at risk of harm. Given increased awareness of the prevalence and incidence of financial harm linked to the local campaign, and the fact that older people are known to be at greater risk of being targeted as victims of financial harm, it may be that heightened awareness is leading to improved identification of older people who are victims of harm.



4.1.5 Adults at risk by type of harm

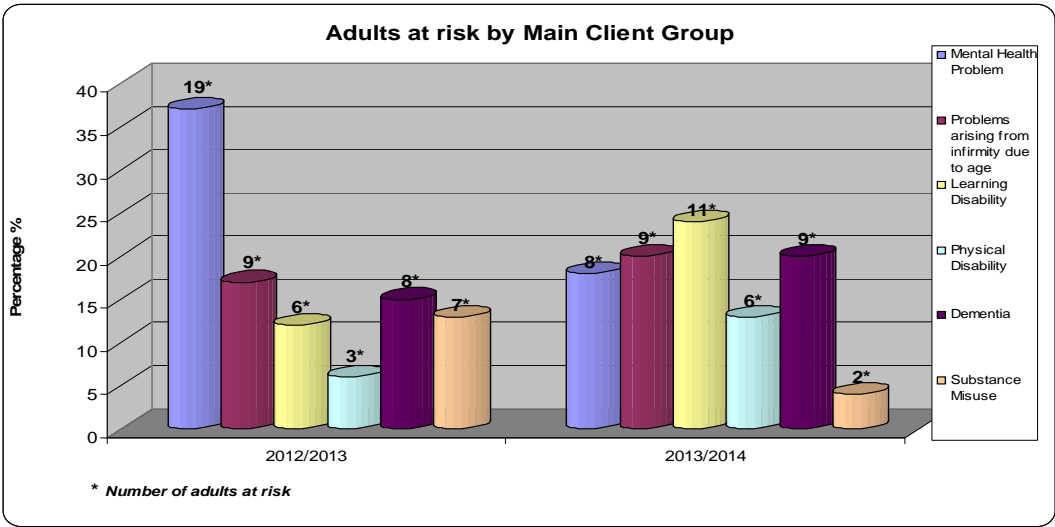


Adults at risk in Angus have consistently been more than three times more likely to have been victim of financial harm than any other type. Financial harm is a significant issue in Angus and has led to innovative work being undertaken.

Key Achievements/Activity:

- Protocol developed between social work and trading standards to address the issue of financial scams and facilitate direct support by trading standards officers to adults at risk
- Adoption of a formal policy on financial harm by Angus Council
- Establishment of a financial harm sub committee of the AAPC (see also section 3.7 for further detail of achievements)

4.1.6 Adults at risk by main client group



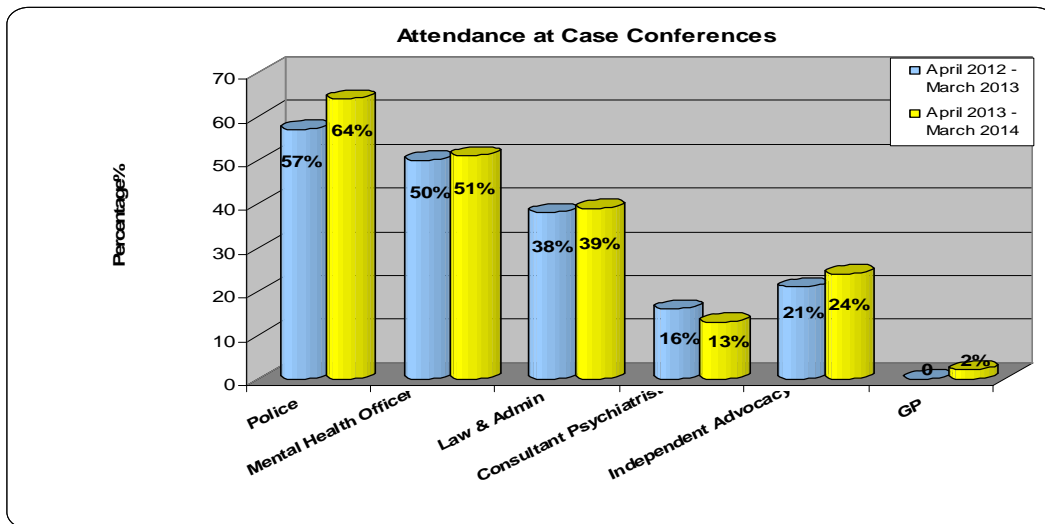
The chart shows that more services users with learning disabilities are entering the adult protection system than previously. This may be associated with greater awareness of adult protection concerns within this staff group. Fewer people open to adult mental health teams have been identified as adults at risk. The total number of adults identified at risk in 2013-2014 was 45. This means that small numerical changes will impact significantly on the percentages.

Planned Developments:

- Care group referral trends will be reviewed with relevant services
- Access to adult protection services for people with mental health problem will be reviewed with Mental Health Services in Angus.

4.1.7 Professional attendance at adult protection case conferences

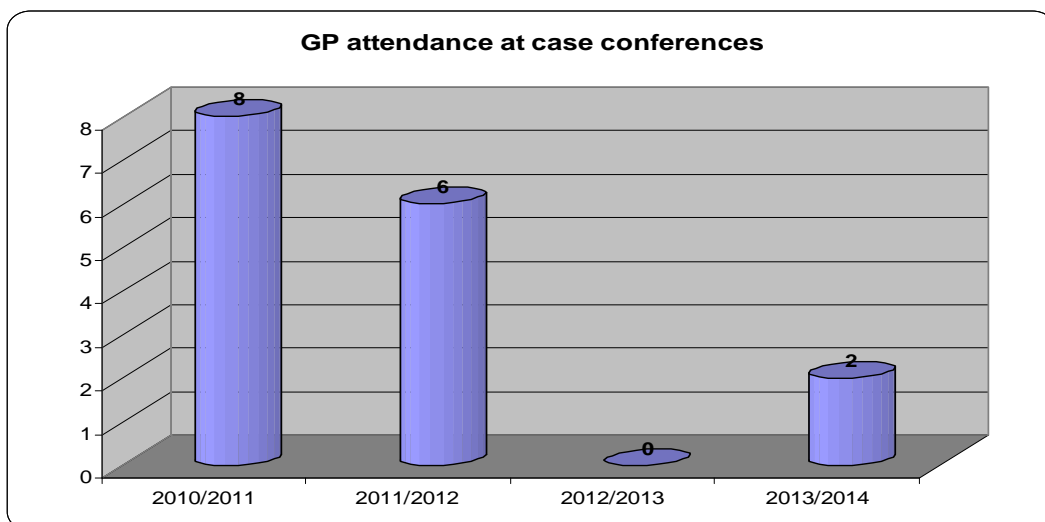
Professional attendance at adult protection case conferences is notable for the high level of involvement of most key professionals.



4.1.8 GP attendance at case conferences

Between 2010 and 2014 GPs in Angus attended 16 adult protection case conferences out of 447 held in that period - an attendance rate of 3.6%.

GPs are invited to attend all initial adult protection case conferences. When invited to review case conferences, the letter of invitation makes it clear when the attendance of a GP might be especially helpful.



Planned development:

- Undertake further work to stimulate GP engagement and attendance at adult protection case conferences

4.2 Raising Awareness

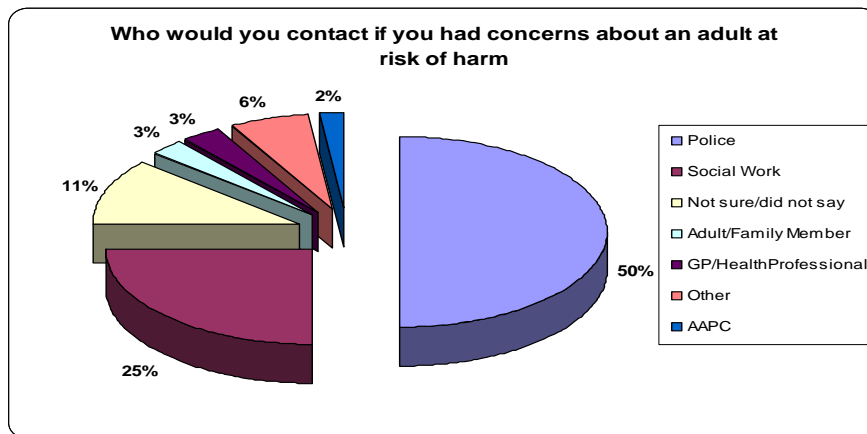
Objective:

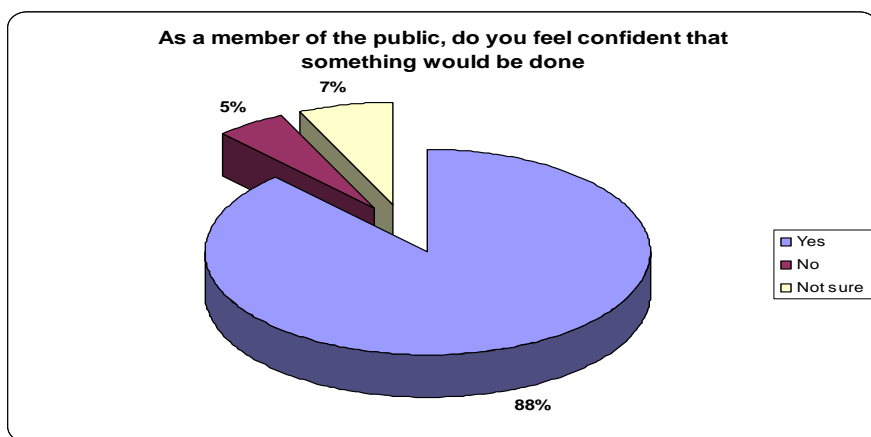
- Raise awareness of adult protection issues within communities and the general public

- Promote the work of agencies in protecting adults to the public
- Provide information about where members of the public should go if they have concerns about an adult at risk of harm

Key Achievements/ Activity:

- Ongoing campaign of professional and public awareness in Angus to raise awareness of the adult protection legislation, and the services available to protect the more vulnerable citizens
- Programme of visits to professional team meetings in housing; social work; across the NHS; and to GP practices
- Extensive awareness raising campaign undertaken by the Financial Harm Sub committee to alert the people of Angus to the risks of financial harm from doorstep callers; mail and phone scammers; and internet fraud. Further detail is provided in section 4.5.
- Joint Adult Protection Committee/Child Protection Committee/Angus Violence Against Women Partnership activity, distributing publicity materials and questionnaires at public events and fairs, such as Glamis Motor Extravaganza and Arbroath Seafest, throughout Angus
- Designed and produced "Scam Free Angus Leaflets" and liaised with Post Offices and Banks within Angus to ensure the leaflets are available to Banks and Post Office customers





Outcome:

- Public Awareness survey in 2013 showed increased awareness from 2011-2012
- Based on 271 survey responses in June 2013, over 75% of people interviewed indicated that they would contact police or social work about an adult at risk
- Almost 90% of people said that they were confident that something would be done if a report was made

4.3 Training and Staff Development

Core training compliments the multi-agency staff guidance and is delivered on a rolling programme.

Objectives:

- Have an overview of single agency adult protection training and consider the implications for interagency training
- Plan review and quality assure interagency training and development activities
- Have in place, and review at least annually, a programme for interagency adult protection training
- Ensure relevant, effective and consistent interagency training is provided for practitioners, managers, non-statutory agencies and for adult protection committee members

Key achievements/ Activity:

- In 2012 the contractor commissioned to provide key multi-agency adult protection training on Managing Risk and Information Sharing retired leaving a gap that proved hard to fill not least because the training was subject to copyright. This training is now provided by Angus Council. The training has been redeveloped; it now focuses on assessing risk and the need to share information between agencies
- The Senior Policy Officer at the Information Commissioners Office (ICO) has been co-trainer in the half day sessions on information sharing. This is a

significant development as the ICO's expertise is reassuring for professionals concerned about data protection breaches when sharing information

- Delivered multi-agency adult protection awareness training especially to the police community officers in Angus
- Established a training slot on the Dundee University social work course to alert students to the adult protection legislation, and procedures and to the link between adult protection and financial harm
- The table on page 25 lists the range and volume of adult protection training provided in Angus in 2012-2014.

Outcome:

- Evaluations for the Assessing Risk and Information Sharing Training have been extremely positive, with 95% of attendees rating the training either good or excellent
- Participation of NHS staff in both the Risk Assessment and the Information Sharing and Communication training has risen by 127% during 2012-2014 compared to the period 2010-2012

Planned developments:

- Deliver core investigative and roles and responsibilities adult support and protection training
- Review multiagency core training with other public protection partnerships
- Deliver chronologies training in partnership with the Child Protection Committee
- Review training needs across agencies

**Angus Adult Protection Committee
Multi-Agency Training
Breakdown of Attendance April 2012 – March 2014**

Training Course	Angus Council Social Work & Health	Angus Council Housing	Angus Council (other)	NHS	Police	Third Sector	Private Sector	Other Public Body	Total
Information Sharing and Communication	26	1	3	25	2	8	0	1	66
Risk Assessment	27	1	3	25	2	8	0	1	67
Council Officer Investigation Training	26	N/A	N/A	N/A	N/A	N/A	N/A	N/A	26
Roles and Responsibilities/Protecting People Training	83	1	0	0	1	0	0	0	85
NHS Learn Pro Internet adult protection awareness raising course	N/A	N/A	N/A	525	N/A	N/A	N/A	N/A	525

4.4 Self Evaluation, Audit and Improvement

Objective:

- Ensure that a quality assurance system, including audit and evaluation, is in place to comply with service standards in professional practice
- Ensure that this system contributes to the improvement of adult protection services
- Ensure that lessons learned inform training and staff development and that good practice is shared as part of promotion of a learning culture

Key Achievements/Activity:

- Between 2012 and 2014, six cases were subject to detailed multi-agency audit and review
- Three MWC reports were considered and their recommendations taken into account in the improvement plan

Areas for improvement identified from MWC reviews, case file audits and case reviews included:

- Sharing information with attendees at case conference
- More efficient referral systems
- Recognising and reporting harm across service areas
- Multi-agency representation at case conference
- Referring agency invited to and represented at case conference
- Understanding of relevant legislation
- Processes around initiating legal action where capacity is in doubt

Improvement actions taken in Angus included:

- Implemented practice improvements from case file audits and reviews;
- New screening system implemented for adult concern reports
- Investigation training delivered to council officers
- Single point of contact for new referrals developed
- Review of operational guidance to reflect changes to procedures
- Training relating to recognition of harm across service areas

- Angus Council Adult Protection Operational Instructions were reviewed and updated

Strengths identified in Angus included:

- Collaborative working within and between agencies was found to be outstanding in some cases
- Service users were safer as a result of adult protection procedures
- In some cases staff went out of their way to involve service users in their case

Planned Developments:

- Audit a minimum of three cases
- Undertake four practice case reviews
- Review compliance with operational protocols and practice standards for adult protection within and across agencies
- Liaise with other partnerships, agencies and services to ensure a consistent approach to adult protection within reviewing processes, including significant incident reviews
- Ensure that findings from audit and review continue to inform development of policy, training and practice

4.5 National Priorities 2013-2014

4.5.1 Financial Harm

Identified at an early stage as an Angus priority, tackling financial harm is now a national priority project. The Financial Harm Sub Committee of the AAPC has been specifically involved in undertaking a range of awareness raising and publicity activities for the people of Angus to ensure they are less susceptible to cons or scams; and have arranged support for individuals at risk including the provision of call blocking devices and implementation of adult protection procedures.

Key Achievements/ Activity:

A range of activities has been undertaken by key partners to prevent financial harm in Angus. These have included overseeing 127 visits, mainly by community police officers and social work and trading standards staff, to community groups, builders merchants, all financial institutions in Angus and other relevant organisations to alert as many people as possible as to the danger of financial scams, including doorstep, mail, phone and internet fraud. These activities include:

- 60+ presentations/talks to a number of local community groups, church groups, community councils and other relevant organisations
- The design of a joint response between social work, police and trading standards to a list of names of possible victims of financial scams

- Successful involvement of two banks (RBS and Clydesdale) in two awareness raising introduction sessions
- Delivery of joint working between Police and Trading Standards on a three week initiative regarding doorstep crime
- Visits to all financial institutions in the Angus area and meetings with the respective Manager and/or supervisor and delivery of material and publications regarding scams to assist with in house training (47 premises)
- Visits to all builders' merchants in Angus regarding doorstep criminals sourcing materials locally for use in the area and to encourage reporting of suspicious activity (11 premises)
- Intergenerational work through Monifieth Children and Learning Partnership (talks/presentation to S4 along with literature)
- Attendance at various public events to distribute scam materials
- Provision of information for development of @ScamFree Twitter account that is relevant and/or local, allowing a steady progress of followers
- Completion of a pilot scheme for the use of telephone technology for intervention/ prevention purposes

Planned Developments:

- Continue to raise public awareness, including young people, through public displays, visits, talks, media exposure and distribution of materials
- Develop feedback process to measure awareness of key messages
- Continue to develop links and work with Post Offices; Royal Mail; Banks; and the Office of the Public Guardian to identify victims of financial harm
- Develop and deliver a project to local businesses to raise awareness of scams
- Report all cases identified as scams to the national fraud authority
- Take account of findings and recommendations of the report of the national priority project on financial harm, when received, to inform the AAPC business plan

4.5.2 Care Homes

Referrals from care homes are low in Angus compared with other areas of Scotland. More work is needed to explain this and to ensure that adult protection concerns are being identified and addressed.

Planned Developments:

- Complete development of operational guideline in 2014 regarding a consistent response to allegations of harm in care homes
- Extend adult protection training provided by Angus Council to private sector care homes
- Closer engagement with Care Inspectorate to consider common areas of concern and their implications for referral
- Take account of findings and recommendations of the report of national priority project on care homes, when received, to inform the AAPC business plan

4.5.3 Accident and Emergency (A&E) Services

NHS Tayside has undertaken significant work in respect to this across the Health Board area during 2012-2013:

Angus has a number of minor injuries units.

Key Achievements/Activity:

- Samaritan posters in prominent areas in A&E and local Samaritan contact cards available for individuals to phone on discharge
- A&E staff proactively give individuals in distress local Samaritan contact cards
- Developing multi-agency links with the Scottish Ambulance Service
- Liaison Psychiatry and Samaritan proactive follow up of those who have demonstrated self harm or overdosed (DSH & OD) and don't meet the criteria for mental health services
- Developing multi-agency agreement/ decision making around adult support and protection and establishing a referral/ information sharing process

In addition A & E in the Tayside area have:

- Established a current state of the number of individuals in distress who attend A&E (DSH & OD)
- Established a current state pathway of individuals in distress high level pathway
- Established baseline information of what individuals in distress are looking for and what prevents them from further accessing services
- Trained A& E staff in suicide awareness
- Trained Minor Injuries Unit staff in suicide awareness
- Take account of findings and recommendations of the report (when received) of national priority project on accident and emergency services to inform the AAPC business plan

4.5.4 Service User and Carer Involvement

Work in relation to the national priorities of service user and carer involvement and the national dataset is detailed throughout this report.

5. Performance against the AAPC Action Plan 2013-2014

Of the 30 Actions agreed in the 2013-2014 Action plan 24 (80%) were achieved in full and six (20%) were not. The significant achievements are detailed throughout the report.

A further key achievement in 2012-2014 not listed elsewhere in this report is the fact that the AAPC is now represented on the local Hate Incident Multi-Agency Panel.

The reason for the six actions not being completed was significant changes to staffing and consequent reduced capacity of the AAPC Sub committees.

- Two planned case file audits and case reviews were not completed
- One of the Mental Welfare Commission reports was not considered by the Practice Sub committee
- An e-learning options paper was not produced by the Training Sub committee
- The questionnaire developed with Angus Independent Advocacy was not reported on
- Chronologies training to partner agencies was not delivered

Planned developments

The AAPC business plan for 2014-2015 is appended to this report. Both the training and practice sub committees have reviewed priorities for the coming year, with the Practice Sub Committee in particular refreshing its remit.

The business plan for 2014-2015 does detail actions with revised priorities to assure service quality through case review, audit and consideration of reports of the Mental Welfare Commission for Scotland and reflects the planned development to deliver chronologies training in partnership with the Angus Adult Protection Committee.

6. Budget

Adult Protection services in Angus have continued to operate within the prescribed budget. There has been an underspend in 2013-2014 due to changes to the staffing provision in the strategic planning arrangements and some vacancies. Adult Protection has also been required to make savings within the overall budget.

The budget for adult protection services, including the committee, for 2012/13 and 2013/14 was £295,000 and £297,000 respectively. The actual expenditure per annum was as follows:

	<u>Expenditure</u> <u>to 31st March 2013</u> <u>£'000</u>	<u>Expenditure</u> <u>to 31st March 2014</u> <u>£'000</u>
Staff	237	187
Property	0	0
Travel	4	4
Supplies and Services	12	4
Third Party Payments	12	12
Income	<u>(5)</u>	<u>(2)</u>
Total	<u>260</u>	<u>205</u>

7. Strategic Priorities 2013-2016

In 2013 the following overarching public protection strategic priorities were set by the Executive Group:

Improving Outcomes

- Identifying and addressing the impact of substance misuse on vulnerable individuals
- Identifying and addressing the impact of domestic abuse on vulnerable individuals
- Identifying and addressing the impact of problems with mental health on vulnerable individuals
- Promoting and more effectively engaging with service users
- The development of preventative and early intervention services
- Ensuring effective risk assessment

Improving Policies and Procedures

- Promoting better links between adult protection, child protection and public protection
- Promoting the effective use of chronologies
- Measuring the impact of interventions and their outcomes
- Developing and sustaining the corporate governance arrangements for public protection

It was agreed that the public protection partnerships would reflect these strategic priorities in their action plans and this biennial report sets out achievements and planned actions.

The Angus Adult Protection Committee has identified the following priorities for 2014-2016:

- Identifying adults at risk of harm, ensuring effective risk assessment and improving outcomes
- Acting to minimise prevalence of financial harm
- Promoting and more effectively engaging with service users
- Reviewing and amending adult protection practice in care homes
- Improving GP engagement with adult protection processes
- Enabling and facilitating referrals of adults at risk from Accident & Emergency departments
- Promoting better links and developing more integrated working between adult protection, child protection and public protection

The attached Angus Adult Protection Committee Business Plan 2014-2015 sets out planned actions which will take forward the above priorities throughout the coming year.



ANGUS ADULT PROTECTION COMMITTEE

BUSINESS PLAN 2014 -15

ANGUS ADULT PROTECTION COMMITTEE BUSINESS PLAN 2014 - 2015

No of actions	Completed (G)	On Target (A)	Behind Target (R)
44			

Priorities for the adult protection committee for the year 2014-2015 include:

- a. Identifying adults at risk of harm, ensuring effective risk assessment and improving outcomes
(actions:) 1.1 – 1.13, 2.1 – 2.12, 3.1 – 3.5,
- b. Acting to minimise prevalence of financial harm
(actions:) 1.1 – 1.10, 1.12, 2.9, 3.4
- c. Promoting and more effectively engaging with service users
(actions:) 1.1, 1.3, 1.5 - 1.9, 1.13, 2.2 – 2.3, 2.7, 2.12, 3.1 - 3.2, 3.4, 5.1 - 5.4
- d. Reviewing and amending adult protection practice in care homes
(actions:) 1.5 – 1.6, 1.10 – 1.11, 2.1 – 2.3, 2.5, 2.8, 2.11, 3.1 – 3.5, 3.8, 4.1, 4.3, 4.7
- e. Improving GP engagement with adult protection processes
(actions:) 1.10, 2.7, 2.11
- f. Enabling and facilitating referrals from A&E of adults at risk
(actions:) 1.5, 1.10, 2.1 – 2.2, 4.1, 4.3
- g. Promoting better links and developing more integrated working between adult protection, child protection and public protection
(actions:) 1.1, 1.4, 1.7 – 1.10, 1.12 – 1.13, 2.1 – 2.4, 2.7 – 2.8, 3.1 – 3.4, 4.1 – 4.5.

1. Public Information

Aim: Adult protection committees are required to produce and disseminate public information about protecting adults at risk

- *To raise awareness of adult protection issues within communities and with the general public.*
- *To promote the work of partnership agencies in adult protection.*

Objective	Specific Action	Timescale	Person/Group Responsible
To raise public awareness of adult protection issues	1. To use press releases and articles to raise awareness about adult protection issues and in particular financial harm and financial scams.	Throughout 2014-2015	APRO/Financial Harm Sub Group of the AAPC/Trading Standards
	2. Give at least one lecture per annum to University social work students to educate them about adult protection.	One per annum	APRO
	3. Ensure any person assessed as "more vulnerable" by Trading Standards is offered a call blocking device.	Trading Standards to report progress at the December meeting of the AAPC	Trading Standards
	4. Visit builders' merchants, banks, and building societies to raise issues regarding the danger of doorstep crime.	Throughout 2014-2015	APRO/Police/Trading Standards /Financial Harm Sub Committee members

Objective	Specific Action	Timescale	Person/Group Responsible
	5. Undertake talks to staff teams, and community groups across Angus.	Throughout 2014-2015	APRO / Police/Trading Standards/ Financial Harm Sub Committee members
	6. Undertake public displays at key events in Angus.	May and Summer 2014	SPO/ Police/ Trading Standards
	7. Report on the police led response to the list of Angus citizens identified as possible victims of financial scams.	Before December 2014	Police/ APRO
	8. Ensure distribution of promotional materials in relation to financial harm across the community.	Throughout 2014-2015	APRO/Police/ Trading Standards and Training Sub Committee
	9. Raise public awareness about financial harm and financial scams through visits and talks to community groups and press releases.	Throughout 2014-2015	APRO /Angus Council Communication Services
Promote the work of partnership agencies in adult protection	10. Develop and distribute a questionnaire to assess the needs of Primary Care Staff in Angus.	Throughout 2014-2015	SPO/ GPs/ Training Sub Committee
	11. Ensure care home providers are aware of the need for, and provision of, adult protection procedures training.	December 2014	Training Sub Committee
	12. Work in partnership with local agencies such as Rogue Trader, Doorstoppers and Police, to tackle financial harm through awareness raising initiatives.	Throughout 2014-2015	APRO/Training Sub Committee/ Police/Trading Standards

Objective	Specific Action	Timescale	Person/Group Responsible
	13. Fire safety checks will be offered to every adult referred to the Angus Adult Early Screening Group.	By October 2014	Adult Early Screening Group

2. Policies, Procedures and Protocols

- *Ensure adults at risk are protected from of harm in a consistent and comprehensive manner.*
- *Ensure that the Angus Adult Protection Committee is fully engaged with all relevant partners in adult protection policies, procedures and protocols.*

Target Outcome	Specific Action	Timescale	Person/Group responsible
Ensure adults at risk are protected from harm in a consistent and comprehensive manner	1. Review and ensure that coherent operational protocols exist within and across agencies.	Throughout 2014-2015	SPO and Practice Sub Committee
	2. Review and ensure that practice standards are met by adult protection services.	Throughout 2014-2015	Practice Sub Committee
	3. Complete the guidance for staff in respect to harm in care homes (Large Scale Investigations).	Before September 2014	APRO overseen by Practice Sub Committee
	4. Participate in a public protection workshop planned by the Chief Executive of Angus Council to: <ul style="list-style-type: none"> • Review the role and remit of the Executive Group • Review governance and risk management arrangements 	16 June 2014	Independent Chair of AAPC/Angus Council Lead Officer/APRO
	5. Review and evaluate the adult protection committee and the roles and responsibilities of its members.	December 2014	Chair/Lead officers/SPO
Ensure that the Angus Adult Protection Committee is fully engaged with all relevant partners in adult	6. Engage with the Contact Manager from the Care Inspectorate and agree a minimum of annual attendance at AAPC.	December 2014	Chair/APRO

Target Outcome	Specific Action	Timescale	Person/Group responsible
protection policies, procedures and protocols			
	7. Further plan to engage with GPs with a view to reviewing GP attendance at case conferences and ensure relevant GP referrals.	December 2014	CHP Lead Officer/AAPC members
	8. Police Public Protection Unit to provide a single officer to service to both adult and child Early Screening Groups to ensure oversight of child and adult protection concern reports in Angus.	From April 2014	PPU (Police Scotland)
	9. Take account of findings and recommendations of the report of the national priority project on financial harm, when received, to inform the AAPC business plan.	Before end March 2015	AAPC/ Financial Harm Sub Committee
	10. The AAPC will review the procedure for serious case reviews and clarify the links with NHS and other relevant significant case review procedures.	Before December 2014	AAPC/SPO/NHS
	11. Care group referral trends will be reviewed with relevant services.	Before March 2015	SPO
	12. Access to adult protection services for people with mental health problem will be reviewed with Mental Health Services in Angus.	Before December 2014	APRO CMHS Management

3. Quality Assurance

- *Ensure a quality assurance system, including audit and evaluation, is in place to comply with service standards in professional practice ;*
- *Ensure that this system contributes to the improvement of adult protection services;*
- *Ensure that lessons learned inform training and staff development and that good practice is shared.*

Target Outcome	Specific Action	Timescale	Person/Group responsible
To sustain a quality assurance system to ensure professional practice complies with service standards	1. Undertake 3 case file audits and self evaluations and 4 practice case reviews per annum.	March 2015	Practice Sub Committee
	2. Undertake 4 multi agency adult protection case reviews per annum.	March 2015	Practice Sub Committee
	3. Ensure one review of adult protection procedures focuses on an individual in a care home.	March 2015	Practice Sub Committee
	4. Present report of the findings of the adult protection audits to AAPC and provide examples of good practice and practice that can be improved.	June 2014 and March 2015	Practice Sub Committee
	5. Consider the implications of any reports produced by the Mental Welfare Commission for Scotland and for adult protection practice and agree any relevant consequent actions.	Throughout 2014/2015	Practice Sub Committee

Target Outcome	Specific Action	Timescale	Person/Group responsible
	6. Provide statistical information to the Scottish Government.	First return to be sent before 1 September 2014	APRO
	7. Using nationally available data resulting from statistical returns made to the Scottish Government, develop improved arrangements for benchmarking and analysis of trends.	Before end March 2015	SPO
	8. Liaise with other partnerships, agencies and services to ensure a consistent approach to adult protection within reviewing processes, including significant incident reviews.	Before end March 2015	SPO

4. Training and staff development

- *Ensure staff in Angus from statutory, private and third sector bodies are effectively trained in adult protection*
- *Ensure relevant Angus Council staff are afforded opportunities to use and develop skills in adult protection*

Target Outcome	Specific Action	Timescale	Person/Group responsible
Ensure staff in Angus from statutory, private and third sector bodies are effectively trained in adult protection	1. Report on the evaluations of the adult protection training delivered in Angus to the AAPC including the Assessing Risk and Information Sharing Training.	December 2014	APRO
	2. Review the Investigation training for council officers in Angus and ensure this continues to be provided.	March 2015	SPO
	3. Review the basic awareness training delivered on a multi-agency basis to staff in state, private and third sector in Angus and ensure this continues to be provided.	March 2015	Training Sub Committee/SPO
	4. Provide adult protection input to the social worker induction course.	September 2014	APRO
	5. Provide basic awareness session for palliative care volunteers as requested by the Palliative Care Clinical Lead (RN) of the Angus Community Health Partnership.	June 2014	APRO
	6. Deliver chronologies training in partnership with the Angus Adult Protection Committee.	Before end March 2015	SPO

Target Outcome	Specific Action	Timescale	Person/Group responsible
	7. Review multi agency core training with other public protection partnerships and training needs across agencies.	Before end March 2015	Training Sub Committee

5. Involving service users and the public

Aim: The guidance for adult protection committees makes it a requirement to engage people who use services in:

- *Staff training*
- *Development of policy*
- *Influencing practice*
- *Development of services*

Target Outcome	Specific Action	Timescale	Person/Group responsible
Ensure the views of service users are engaged in adult protection processes	1. Seek the views of service users in respect to their experience of adult protection case conferences and report the findings to the AAPC.	From April 2014	APRO
	2. Report on whether adults at risk felt safer at the end of a period when a plan for their protection has been put in place.	From April 2014	APRO
	3. Ensure service users are fully engaged and involved in audit processes where appropriate.	From April 2014	Practice Sub Committee/Angus Independent Advocacy
	4. Ensure the views of the public, as reflected in the work of Voluntary Action Angus (VAA), are reflected in the work of the AAPC	Throughout 2014/15	AAPC/Chief Executive VAA

Key			
AAPC:	Angus Adult Protection Committee	MWC:	Mental Welfare Commission
A & E	Accident and Emergency	OPG:	Office of Public Guardian
APRO:	Adult Protection and Review Officer	PPU:	Public Protection Unit
ESG:	Angus Adult Early Screening Group	SAMH:	Scottish Association for Mental Health
ICO:	Information Commissioners Office	CMHS:	Community Mental Health Service
Case Audit	A case "audit" will require the worker to complete a self evaluation of practice and provide a chronology and submit this to their service manager	Case Review	A case review will take place when there has been a multi agency involvement in a complex case of particular interest