



Angus Adult Protection Committee

Annual Report 2014-2015 and Business Plan 2015-16

ANGUS ADULT PROTECTION COMMITTEE
ANNUAL REPORT 2014/15 AND BUSINESS PLAN 2015/16

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FOREWORD

Chief Officers

We are very pleased to present the Angus Adult Protection Committee (AAPC) Annual Report for 2014/15. The report outlines the key achievements of our partnership to improve the safety of adults at risk in Angus over the last year and identifies key priorities and planned developments that will be taken forward in the coming year and beyond. We seek to ensure that the needs of adults at risk of harm are being met and that our services promote better outcomes for vulnerable adults in Angus. The AAPC Business Plan for 2015/16 sets out how we will deliver these priorities and our collective role in supporting and protecting adults at risk in Angus.

This year we have reviewed the role and remit of the Public Protection Executive Group in order to strengthen our governance role. The group provides strategic leadership and oversight of the work of our public protection partnerships; child protection; adult protection; alcohol and drugs; multi-agency public protection arrangements; violence against women and girls and suicide prevention.

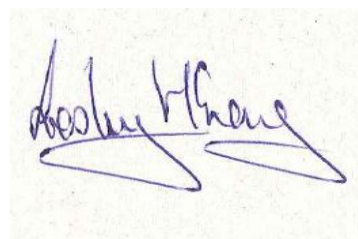
We continue to be encouraged by the commitment, hard work and professionalism of all agencies across Angus in delivering high quality services in what is often difficult, demanding and challenging circumstances. It is however recognised that the only way we will meet these challenges, including the increasing demand on services and the current difficult financial landscape, is to continue to work effectively and collaboratively together in partnership to ensure that the safety and wellbeing of adults at risk remains one of our highest priorities.



Richard Stiff
Chief Executive
Angus Council



Eddie Smith
Chief Superintendent
Police Scotland



Lesley McLay
Chief Executive
NHS Tayside

Independent Chair

The Committee has continued to work together to improve adult protection arrangements in Angus. Of particular note is the recognition of the work of the Financial Harm Sub Committee of the AAPC who achieved a Bronze COSLA quality award for excellent work in this area, in partnership across wide ranging public, private, and third sector services. Partners have supported Police Scotland in key operations (Carpus and Luibeg) to disrupt crimes targeted at vulnerable Angus residents. Multi-agency audit and review of adult protection practice has continued to be a high priority of the practice sub-committee in offering assurance to Committee that identification and support of adults at risk of harm is robust and in highlighting areas for improvement.

Work has continued in a challenging organisational context. Many committee partners continued to face significant changes over the last year including reduction in resources and organisational restructure. Budget restrictions across all agencies have meant role changes, increased areas of responsibility and challenges to workforce capacity. Nonetheless, partners have demonstrated continued commitment to adult protection and partnership through their achievements against the business plan 2014-15. Raising awareness; identifying those at risk; and strengthening protection arrangements for adults in Angus remain the key priorities for the Angus Adult Protection Committee.

A handwritten signature in cursive script that reads "Margaret Wells". The signature is written in black ink and is positioned above the printed name and title.

Margaret Wells
Independent Chair

1 INTRODUCTION

The Annual Report of the Angus Adult Protection Committee (AAPC) for the period April 2014 to March 2015 describes and highlights progress towards outcomes set out in the AAPC Business Plan 2014-15.

This annual report includes:

- A summary of the work of the AAPC and its sub committees with particular reference to progress towards agreed outcomes as per the Biennial Report 2012-14 and related Business Plan 2014-15;
- A review of Adult Protection activity and analysis of trends and impact of the data;
- Next steps in developing multi-agency adult protection policy, procedure and practice over the coming year to achieve the agreed outcomes.

2. THE WORK OF ANGUS ADULT PROTECTION COMMITTEE

Our Vision – “Working together to protect adults at risk of harm in Angus”

2.1 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

2.2. 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

2.3 Local governance arrangements

Within Angus we have adopted a “Public Protection” vision. This means we believe that the best outcomes can be achieved for Angus people by promoting and facilitating links between all of our ‘protection partnerships’.

- Angus Adult Protection Committee
- Angus Child Protection Committee
- Angus Alcohol and Drug Partnership
- Angus Suicide Prevention Collaborative
- Angus Violence Against Women Partnership
- Multi-agency Public Protection Arrangements

Governance arrangements for public protection were reviewed in 2014/15 by the Angus Public Protection Executive Group. Terms of reference for the group were updated and membership streamlined to include executive level membership from Police Scotland, Angus Council and NHS Tayside. A key focus of the group is to promote closer alignment of the work of the strategic protection partnerships working in Angus to ensure an effective interface between all of the above partnerships. The Executive Group convenes quarterly and is attended by the chairs of the partnerships named above.

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

Independent Chair	1 member
Police Scotland	2 members
Angus Community Health Partnership	2 members
Medical Practitioners	2 members
Angus Council People Directorate	4 members
Angus Council Communities Directorate	1 member
Voluntary sector (Angus Carers/Angus Independent Advocacy/VAA)	3 members
Care Inspectorate	Open invitation
Procurator Fiscal	Invited at least annually

The Committee is supported by a Senior Planning Officer, an Adult Support and Protection Reviewing Officer (who are included in the above numbers) and a Senior Clerical Officer.

2.4. Sub Committees

Much of the work of the Committee continues to be delivered through the well developed sub-committee structure in Angus;

- **Practice Sub Committee (PSC)** – Chaired by a team manager from Angus Council Adult Care Services and attended by a variety of members including NHS Tayside, Police Scotland, Voluntary Sector and Legal and Democratic Services. This committee focuses on quality assurance of adult protection practice and links closely with the Training Sub Committee to take forward any learning required;
- **Financial Harm Sub Committee (FHSC)** – Chaired by a police constable with responsibility for crime prevention within Police Scotland and attended by a variety of members including Angus Council Trading Standards; an independent Financial Advisor; and with links to local banks including RBS, this committee focuses on the identification, support and disruption associated with financial harm and takes a partnership approach;
- **Training Sub Committee** – Chaired by NHS Tayside and attended by a variety of professionals including mental health officer, voluntary sector and Police Scotland. This committee attends to both the core and additional training needs of the multi-agency workforce;
- **Policy Sub Committee** – Chaired by the Senior Planning Officer and attended by Police Scotland, NHS Tayside and mental health officer this committee is a 'pop up' committee which forms as and when policies require updating.

2.5 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 more effective engagement 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

Angus Public Protection Executive Group have further agreed that point 1 above, identification of risk; risk assessment; and improving outcomes will form a shared priority for all public protection partnerships.

3 SELF EVALUATION

3.1 Practice Case Review and Audit

During 2014-15, the AAPC Practice Sub Committee undertook 4 multi-agency case reviews and 4 multi-agency case audits using the framework developed by Hogg and May (2011). The reviews and audits highlighted the following:

- Risks to adults are recognised and responded to - there is evidence that AP concerns are recognised and processes invoked to protect adults at risk;
- Initial responses to allegations are effective – timescales are appropriate and proportionate to the risk/allegation, multi-agency working including involvement of Police and medical staff is appropriate;
- Risk management plans are established – all cases reviewed had risk management plans in place although these needed to be SMART(er);
- Individuals wider needs are addressed – there is good evidence of specialist input being requested and implemented to address wider needs;
- The overall quality of the life of the person is improved – there is evidence of increased safety and reduced risk of harm although more work is needed in clearly demonstrating positive outcomes;
- Appropriate intervention is provided during and after the case is concluded – whilst case records are generally well documented, there is a need to record, analyse and use single and multi-agency chronologies in assessment and planning for adults. There is good evidence of signposting and referral to Angus Independent Advocacy although there remains room for improvement on the use of the service.

The reviews highlighted areas for improvement which will inform development activity for the APC:

- Protection plans need to be SMART(er) with a clear focus on outcomes, actions and timescales. There is a need for core groups to consider the protection plan and clearly record progress towards intended outcomes; views of the service users and carers in how effective the plans are and relate this back to the review conference;
- Chronologies of significant events should inform assessment and planning for adults; single agency and multi-agency chronologies should be present. Training is required on a multi-agency basis to ensure a shared understanding across agencies on significant events, single agency and integrated chronologies.

Examples of positive multi-agency interventions are also reported to AAPC:

Case Example 1

A care home had been down graded by the Care Inspectorate and was subject to repeated complaints about the standard of the care and behaviour of some of the care staff and managers. A joint large scale investigation, involving joint unannounced visits was conducted by a specialist adult protection officer from Angus Council and an officer from the Care Inspectorate. An embargo on admissions was imposed by the Council and an action plan agreed to bring standards back to an appropriate level.

Case Example 2

A man with a brain injury and physical disabilities was being pursued for money by a known criminal gang. Intensive support, joint work by social work, alcohol and drug services, police and housing resulted in an initial strengthening of home security, regular monitoring and deterrent visits by police, community alarm and a move of house to a safer area.

3.1.2 Mental Welfare Commission (MWC) Reports

Members of the practice sub committee considered the findings of the MWC report into the circumstances of Mr JL. The recommendations were considered against local practice with particular focus on assessment of capacity (see section 3.2 below).

3.2 GP Survey and Adult Protection Learning

As a result of a report to the AAPC highlighting poor GP engagement with adult protection case conferences, a survey of GP's and Practice Managers was undertaken during 2014 to assess knowledge, confidence and awareness of adult protection processes and procedures. The survey was conducted by a GP (who is a member of the AAPC) which led to a high return rate of 63% of GP's, 57% of practice nurses and 100% of practice managers. Key points from the survey included:

- **62%** felt confident making an ASP referral to Angus Council if they believed there was neglect occurring within a care home/hospital within Angus;
- **30%** of those surveyed felt confident in seeking advice – further work is required on sharing information about making adult protection referrals;
- There is lack of confidence in assessing capacity (**55%** requested further training);

- Time pressure can prevent GP's from attending case conferences with a suggestion being made to hold them at different points in the day to facilitate attendance.

AAPC has taken forward a series of actions to promote confidence and awareness of adult protection including advertising the adult protection referral pathway and key points of contact. Angus CHP focussed a Protected Learning Time (PLT) Event on the 25th February 2015 on 4 key areas;

1. Adults with Incapacity Act Overview
2. Power of Attorney
3. Mental Health Act
4. Adult Protection

20 multi-disciplinary members of the primary care team participated in the event including Practice nurses, mental health officers, health care assistants and 11 GPs (including locums and registrars).

All participants rated the input on adult protection as good (60%) and excellent (40%) and considered it highly relevant to post. The event was used as an opportunity to promote the local referral pathway to adult protection.

3.3 AAPC Committee Self Evaluation

AAPC undertook a self evaluation of committee membership, function and accountability. Committee members completed a survey monkey questionnaire the results of which informed a development day for Committee Members in January 2015.

Overall Committee members felt that there was genuine commitment to ASP supported by good attendance and representation at Committee, a strong sub committee structure and focus on delivering the identified actions on the business plan.

Committee members agreed that the day served to develop and enhance shared understanding of the purpose of the AAPC and the roles and responsibilities of its members. They identified a need for shorter, more focussed committee meetings; improved scrutiny of statistics/information; clear dissemination of learning from case reviews and clearer priorities.

3.4 Care Inspectorate and Healthcare Improvement Scotland Inspection of Services for Older People in Angus

Between April and June 2014, the Care Inspectorate and Healthcare Improvement Scotland carried out a joint inspection of health and social work services for older people in Angus. The resulting report highlighted the following factors: the Partnership had clear guidance for adult support and protection. Guidance was comprehensive and had a clear multi-agency approach. Staff said that they felt

generally confident in dealing with adult support and protection and they were well supported. Social work managers felt that this area was tightly managed with clarity for staff when dealing with protection issues.

There are six recommendations for improvement which are being taken forward in an improvement plan. Recommendation 3 pertains to chronologies and risk assessment/risk management and is supported by the AAPC as part of the business plan.

3.5 Tackling Financial Harm – Angus Financial Harm Sub Committee (AFHSC)



The AFHSC has key local financial bodies as members who deal with many potential scam transactions. This work has resulted in adult protection referrals being received from a range of financial outlets including banks and post offices. Every local financial institution in Angus is supplied with information on the regular visits made by AFHSC partners.

The AFHSC engages with appropriate retailers to reach vulnerable persons. Pharmacists in Angus agreed to enclose a "Scam Free Angus" leaflet with prescriptions and Asda enclose it with home deliveries in Angus, as vulnerable consumers are more likely to use these services.

The adoption, by Angus Council, of a formal policy on financial harm is the first in the UK. This led to a TV news article and was discussed at First Minister's Question Time at Holyrood. Angus Council has also enabled caller identification from its telephone exchanges so that customers recognise Angus Council as the caller.

The AFHSC partners have developed a method of prioritising, contacting, advising and supporting possible victims of financial scams. Operation Carpus was a response to receipt of a list of 193 Angus names of possible victims from the National Scam Hub (a "suckers list"). Most people on that list were visited by the Police and appropriate protective measures were taken by Angus Council staff. The methodology employed has been replicated in other areas and shared with the National Police Adult Protection Group and the National Scam Hub. A full report on Operation Carpus is available at aapc.org.uk

The award winning trialling and testing of call blocking technology with partner local authorities to protect adults at risk from scam phone calls has informed Scottish and UK policy and has enabled manufacturers of these devices to improve the design to meet the particular needs of vulnerable adults.

A recent survey of awareness of the risk of scams was undertaken through the Angus Citizens Panel. 28% of respondents were aware of family members having experienced scams. 75% of respondents were aware of the "No Cold Callers/ Doorstoppers" initiative. 17.5% are already aware of "Scam Free Angus". By raising awareness and protecting those already victimised we expect to reduce the number of people being scammed and the money lost to be reduced.

The use of the phone call blocking technology developed in Angus has been replicated in over 100 other local authority areas and over 18,000 Doorstopper stickers have been distributed since April 2014, adding to previous distributions. Most genuine doorstep sellers will respect the sign and will not call if it will be a criminal offence to do so.

It is not possible to quantify the savings made by the awareness raising and publicity campaign undertaken by the AFHSC. However given that a single person in Angus lost £140,000 in a single scam, the probable savings so far are certainly significant and will have made progress towards preventing some of the estimated £20 million losses a year in Angus. Operation Carpus resulted in police visits to 113 people. The total loss to 16 people who were identified as victims was £155,000. Police Scotland has calculated that the visits, support and preventive measures taken have saved potential and actual victims over £1m.

In 18 months 32 vulnerable adults with call blockers had 98.5% of unwanted telephone calls blocked. This was over 11,500 calls. Of these 15% are estimated to be scam calls with potential savings of over £2 million.

The AFHSC has been awarded a Bronze COSLA award for Service Innovation and Improvement (January 2015) based on the above work and achievements.

Service User Feedback

"I have got my life back. I think "How did I let people get me like this?" Now I can protect myself - it is marvelous!"

4 ADULT PROTECTION PERFORMANCE MANAGEMENT INFORMATION

4.1 Adult Protection Referrals and Inquiries

Figure 1 - Angus Adult Protection Referrals by Source (2012 – 2015)

Source of Referral	April 2012 March 2013	April 2013 March 2014	April 2014 March 2015
Police	462 (88%)	286 (83%)	302 (81%)
Social Work and Health	23 (4%)	29 (8%)	29 (8%)
Family	3	1	2
Member of the Public	5	2	2
Carer	2	8	2
Voluntary organisation	2	0	2
Other care home	3	6	12
Other	3	1	3
Self	9	1	1
Health Acute	1	1	3

Health GP	1	4	3
Health Primary	2	1	1
Local Authority care home	0	0	1
Care at home	2	0	2
Housing	5	3	1
Care Inspectorate	0	2	2
OPG	0	0	1
Fire and Rescue	0	0	2
Friend/Neighbour		0	1
MWC	0	0	0
Total	526	345	372

Percentages are shown for referrals from Police Scotland and from Social Work and Health

Figure 2 - Referral Trend (2009 – 2015)

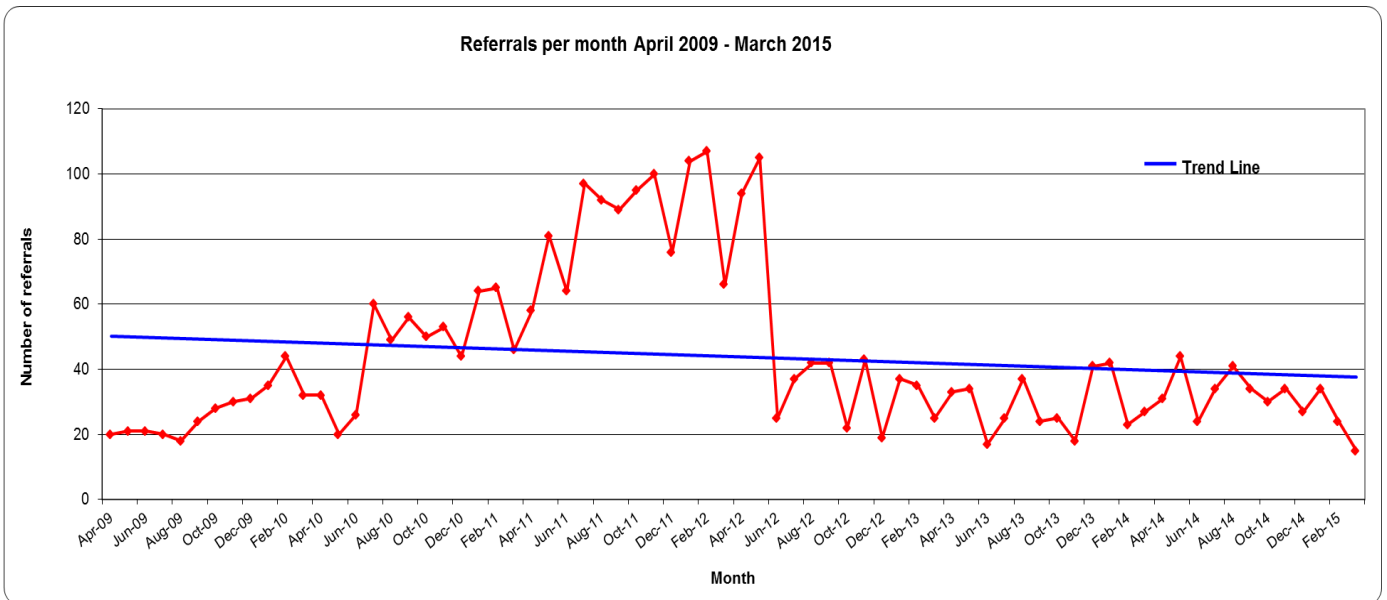
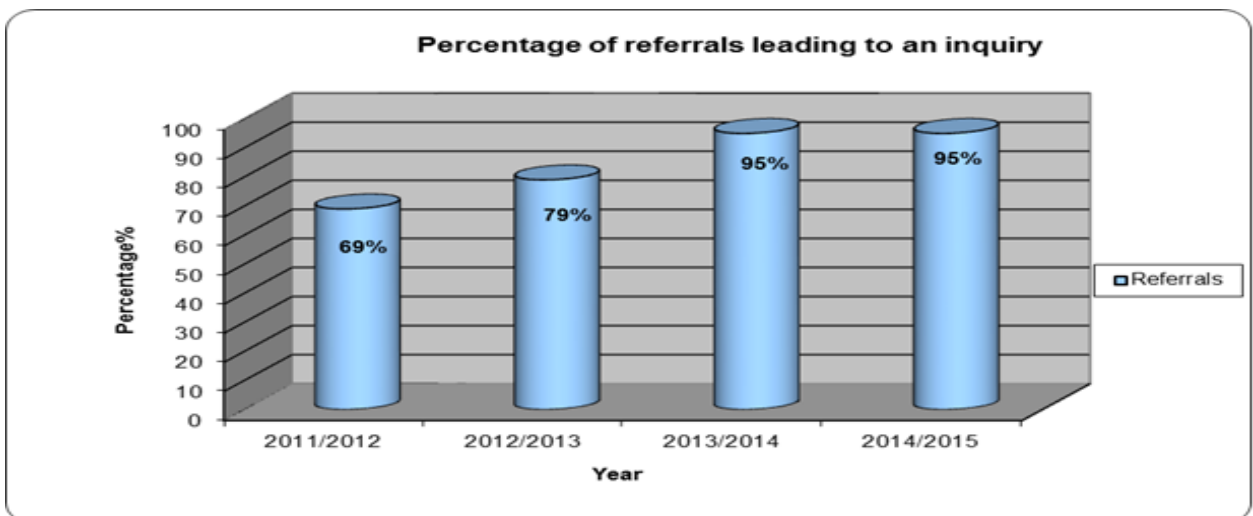


Figure 3 – Conversion Rate of Referral to Inquiry



Referrals and Inquiries

Adult protection referrals are, in Angus, those referrals to adult community care social work and health teams, deemed by the team manager to be "adult protection" i.e. likely to meet the 3 point test required by legislation.

There was a slight increase in the number of referrals in 2014/15. The most significant rise in referrals (doubled comparing 2013/2014/15) is from "other care homes". This rise coincides with the introduction of large scale investigation operational instructions for social work and health staff. The increasing amount of work with care homes where standards of care have become concerning would appear to be continuing in the early part of 2015/16. The reasons for this are not yet clear and will be explored further.

The numbers of referrals fell sharply after 2013. This fall mainly results from a change in the way that police referrals are counted. However, the fact that the proportion of referrals that led to adult protection inquiries has risen from 69% in 2011/12 up to 95% in 2014/15 shows that referrals counted as adult protection are those where there are genuine adult protection concerns.

At the very end of the year 2014/15 a sharp fall in the number of referrals per month is noted. This fall coincides with a change in Police Scotland procedures with the introduction of a 'Risk and Concern Hub' based in Dundee. The move away from local practice towards a more centralised 'hub' may account for fewer adult protection referrals being sent to Angus. Angus found the previous local arrangements to be extremely helpful. Although few of the police reports were assessed as being full adult protection referrals, many of these reports allowed early intervention to be offered and provided for people for example people affected by ill-health, substance misuse or other problems. The Angus Early Screening Group provides multi agency consideration of police adult concern reports, an effective group that has since been replicated in other parts of Scotland. It is planned for the adult protection review officer to discuss the new police system with colleagues from police Scotland to discuss the centralised processes and their implications.

4.2 Investigations, Case Conference and Protection Orders

Figure 4 – Investigations, Case Conference (initial and review) and Protection Orders

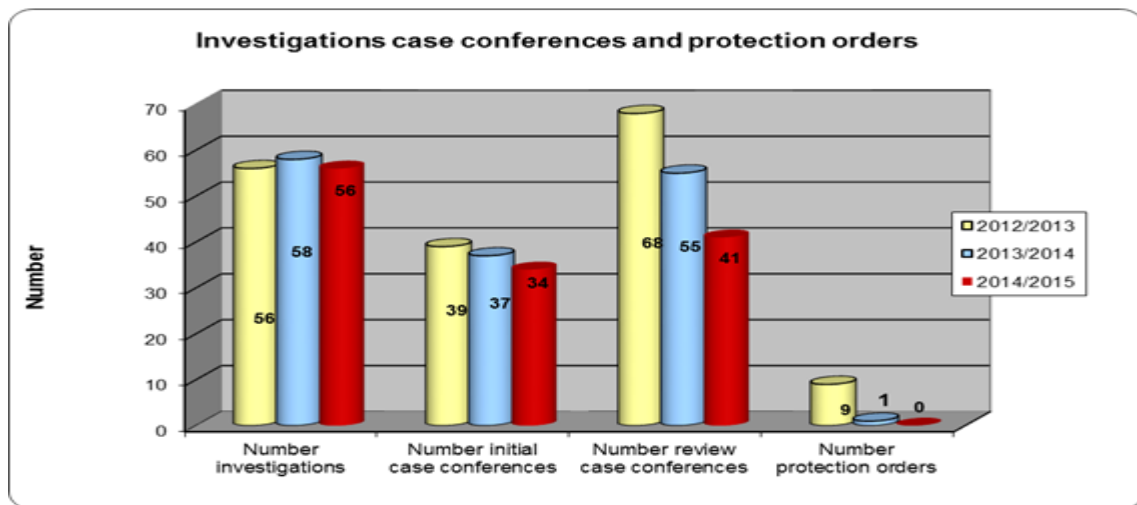
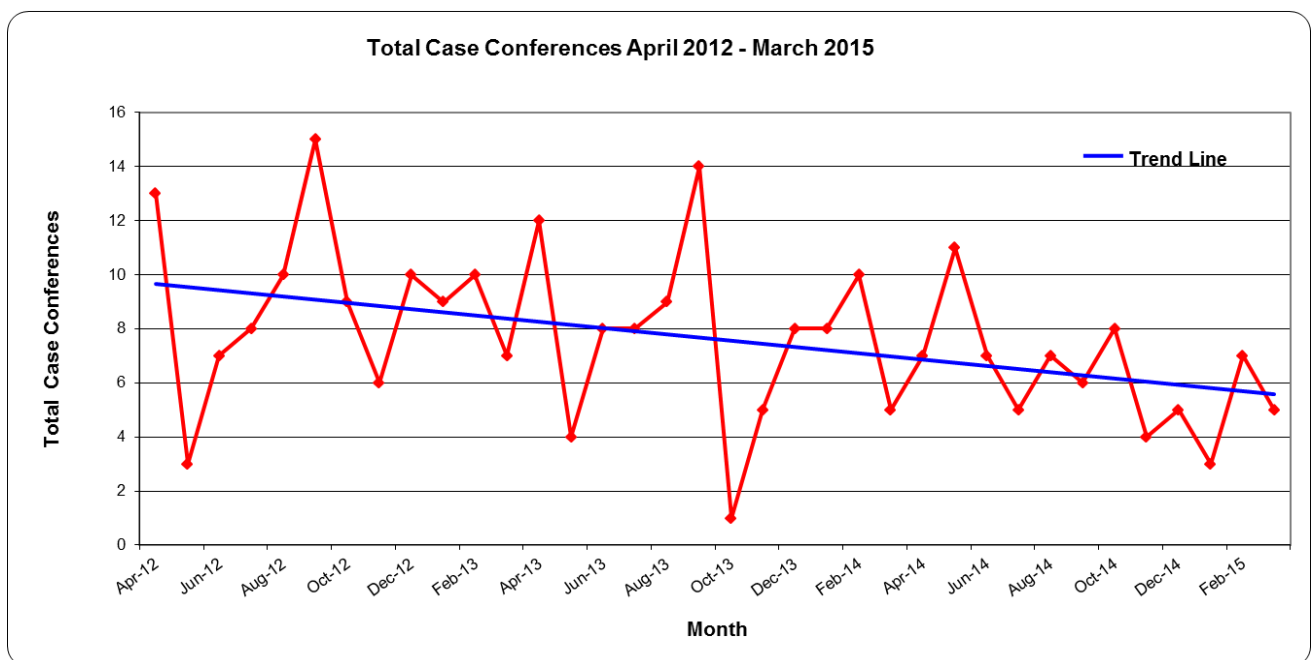


Figure 5 – Number of AP Case Conferences (2012-15)



Investigations and Case Conferences

Numbers of initial case conferences and adult protection referrals have remained steady with no particular trend obviously identifiable. The numbers of review adult protection case conferences has fallen leading to the overall numbers of case conferences falling also. The reason for this is not absolutely clear however it is logical to deduce that there may have been either an improvement in the effectiveness in the work on adult protection cases post initial case conference to allow adult protection procedures to end at the first review; or that strategies are

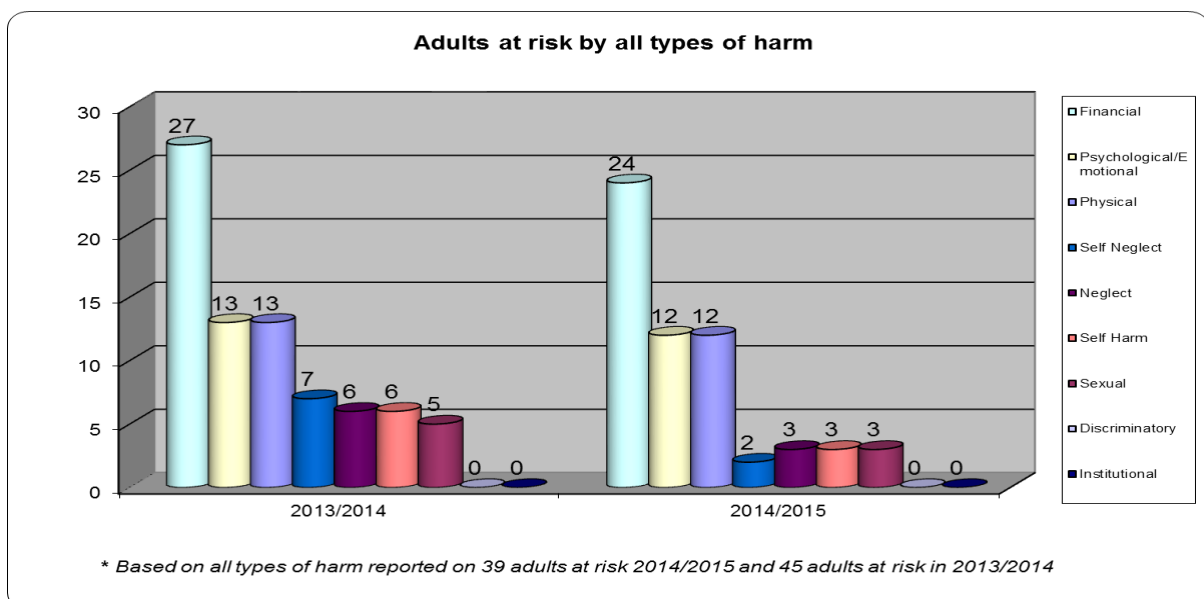
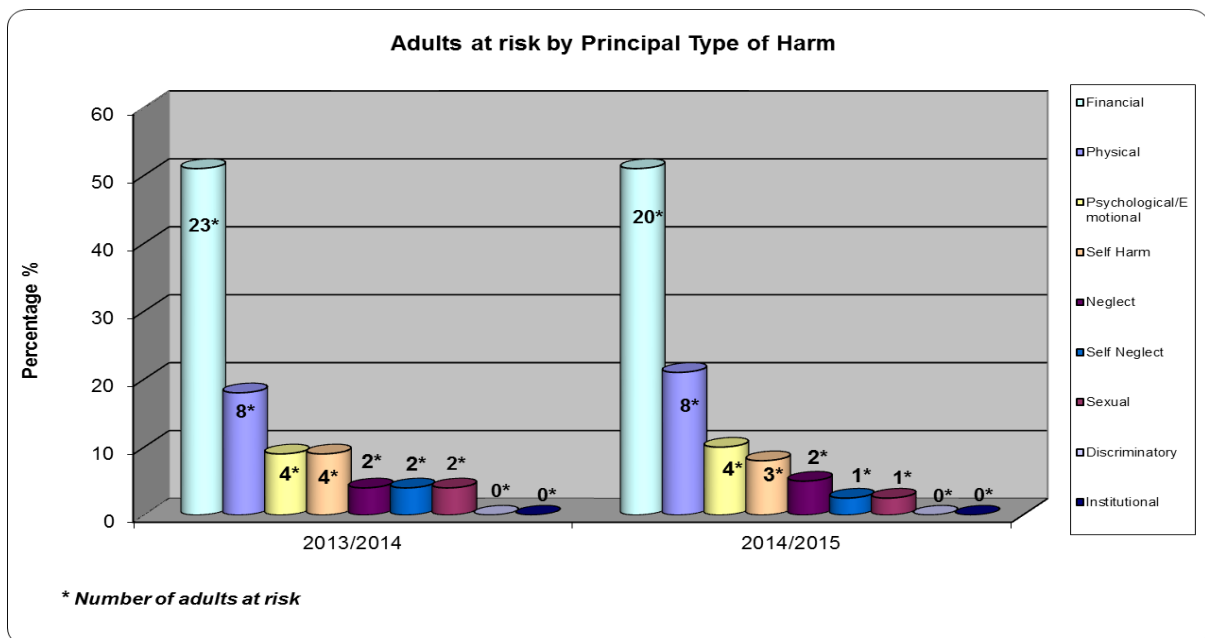
found at initial case conference stages which provide an alternative to continued formal adult protection procedures. More work is necessary to assess this.

Protection Orders

The statistics show that Protection Orders are now used very rarely in safeguarding adults. Soon after the implantation of the Act Angus had relatively high use of banning orders in particular but in 2014/15 there were none. However it is perhaps the case that, as practice has developed alternatives to application for banning orders are very closely considered and implemented.

4.3 Types of Harm

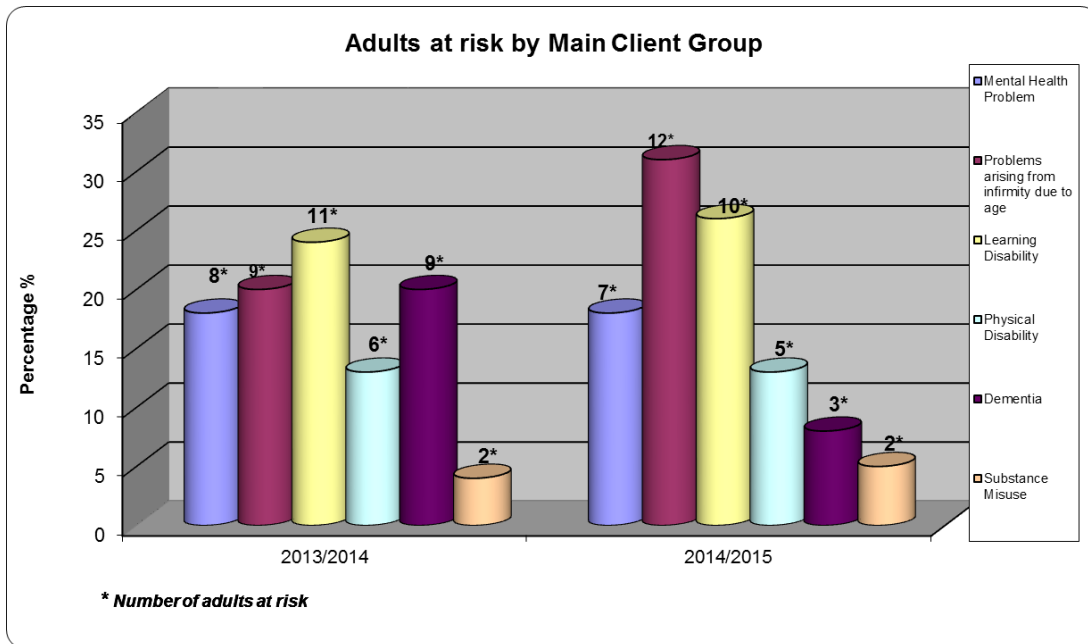
Figure 6 and 7 – Breakdown of Adults at Risk by Types of Harm



Adults at risk by type of harm

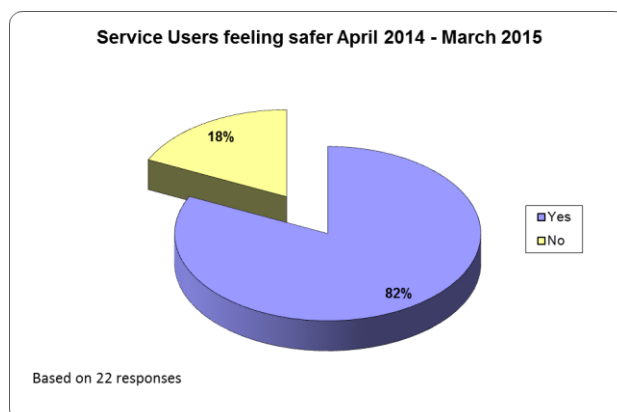
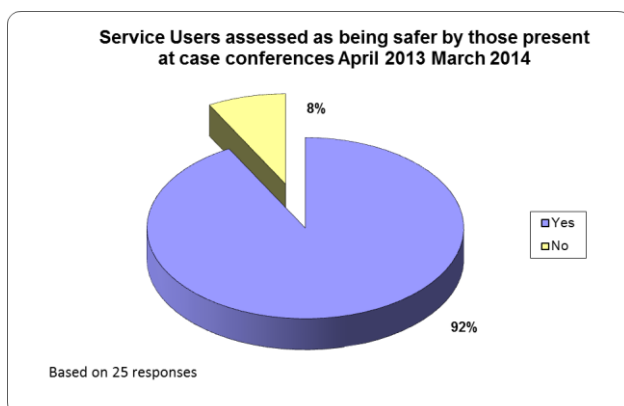
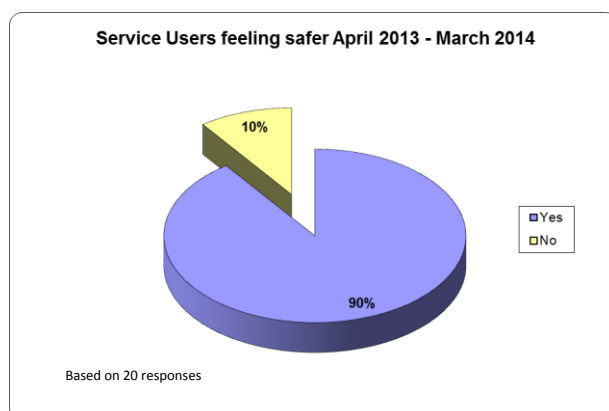
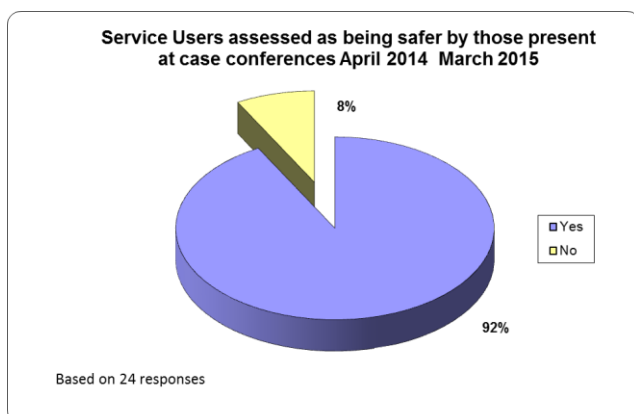
Financial harm continues to be the most common type of harm affecting adults at risk in Angus. This has been the case for the last 7 years. The effects of welfare reform and wider economic problems including budget cuts provides a background that might increase the likelihood of ongoing financial harm occurring.

Figure 8 – Adults at Risk by Main Client Group



The numbers of adults deemed to be at significant risk are so few that no firm conclusions can be drawn from the figures in Figure 8 above. Infirmity due to age and learning disabilities remain the most significant groups of people who are subject to adult protection procedures.

4.4 Service User Feedback



Service User attendance at case conferences

This remains at previous levels. Essentially Angus invites and facilitates attendance at their own case conferences by all service users unless there are compelling reasons (e.g. lack of capacity) not to do so.

Service Users feeling safer

The year on year changes in the percentages are not statistically significant. The very small number of service users not feeling safer include people with learning disabilities seeking maximum independence and not recognising the risk certain people they would like to trust pose to them, such as registered sex offenders.

5 FULLFILLING THE ANGUS ADULT PROTECTION COMMITTEE FUNCTIONS - PERFORMANCE AGAINST THE APC BUSINESS PLAN 2014-15

This section highlights key achievements in 2014/15 and highlights future development for 2015/16.

5.1 Public Information

Efforts have been made to keep the public informed of adult protection issues and what to do when they have concerns.

Key Achievements:

- Visits to builders merchants, banks and building societies have taken place across Angus to raise awareness of financial harm and the dangers associated with doorstep crime;
- Promotional materials have been distributed to promote ACCESSline and Adult Protection; glasses cloths have been issued to all opticians with the Adult Protection and ACCESSline message; financial harm leaflets to supermarkets, pharmacies and health centres;
- Local promotion of the National Awareness Raising Campaign including local press release stating local statistics;
- Fact sheet advising of pension scams has been developed by an independent financial advisor who is a new member of the Financial Harm Sub Committee to advise the public of the new risk of pension scams;
- National Scam Awareness Month has been supported locally by Trading Standards in conjunction with the AFHSC;
- Power of Attorney Campaign across Tayside with an overall increase in applications and enquiries about PoA;
- Angus Financial Harm twitter account has attracted over 200 followers (100% increase on previous year);
- Chair of the AFHSC has a monthly slot on Radio North Angus.

Next Steps

- Develop a communications plan and calendar to include the dissemination of social media messages at key points in the year. Tweets and facebook messages will be issued via Angus Council and partners will be alerted and encouraged to re-post. Messages will include key facts, statistics and case vignettes and will promote the use of Accessline;
- Develop a 'report it' function on the Angus Council website to allow online reporting of concerns and to include an 'anonymous' reporting function;
- Joint promotional campaign between child and adult protection to promote the message 'if you see something - say something'; posters and electronic posters will be developed and included in the communications calendar;
- Continuation of the AFHSC focus on raising awareness of financial scams, pension scams, financial abuse.

5.2 Policies, Procedures and Protocols

Key Achievements

- Review of the role and remit of the Public Protection Executive Group with clear governance arrangements agreed;
- Evaluation of the role and functioning of the AAPC and future improvement plan is formulated;;
- GP Survey completed (see section 3.2) – highlighted key practice issues in relation to making a referral and assessment of capacity;
- In terms of the above, information has been re-issued to GP's on adult protection referral pathways and training on capacity has been delivered (see training section);
- Large Scale Investigations protocol has been launched and used to inform two large scale enquiries in 2014/15;
- Joint work with the Care Inspectorate in respect of the above;
- Care Inspectorate attendance at AAPC;
- Office of Public Guardian attendance at AAPC;
- Review of the AAPC Constitution and sign off at the AAPC;
- Early Screening Group has continued to meet every 2 weeks to form a multi-agency screening group to ensure effective identification and intervention for adults at risk.

Next Steps

- Multi-agency Financial Harm Seminar to take place during 2015 to identify local strengths and weakness in dealing with financial harm and explore the development of a virtual Financial Abuse Support Team (FAST);
- Review of multi-agency protocols for Adult Protection; Joint Tayside Protocol and Angus Multi-agency Protocol to ensure alignment between the documents;
- Development of Significant Case Review Procedure in line with National Guidance on SCR's in Adult Protection (once published by Scottish Government);
- Police Scotland will develop a National Risk and Concern Hub to bring consistency and strength to the way adult protection concerns are screened, identified and action taken. AAPC will continue to work to strengthen links locally and take account of local trends/hot spots of adult protection activity.

5.3 Quality Assurance

Key Achievements

- Inspection of Older People Services in Angus 2014 highlighted areas of positive practice in adult protection;
- MWC report on Mr JL and learning considered by Practice Sub Committee in relation to local practice;
- 4 multi-agency case reviews and 4 self audit reports of adult protection practice were undertaken by the practice sub-committee and reports considered by Committee before being distributed within agencies to ensure dissemination of learning;

- One of the above reviews focussed on an adult in a care home to ensure practice was consistent with adult protection procedures;
- 6 monthly reporting to AAPC of adult protection statistics and trends has continued to inform Committee of local practice;
- Care Inspectorate report into Effectiveness of Adult Protection Arrangements outcomes used to inform development and priorities for 2015/16.

Next Steps

- Practice sub committee will continue to deliver a program of audit and review; ensure cases selected for review provide a wide representative sample of adult protection cases;
- Practice sub committee will lead improvements in SMART care planning;
- Ensure risk assessment and risk management is a focus of audit and review;
- Multi-agency staff will be invited to give their views via survey monkey on confidence to practice in adult protection (training, access to supervision, polices etc).
- Single agencies represented on the Committee will report single agency progress in developing adult protection policy and practice.

5.4 Learning and Development

Key Achievements

- Core Training programme has been delivered as per appendix 1 and evaluated as per appendix 2;
- Series of awareness raising talks on adult protection and financial harm delivered to social work and health teams, local stroke association and a local medical practice;
- Single agency training in local authority on large scale investigations;
- Assessment of training needs in local authority to inform programme of core training;
- Council Officer training delivered by Independent Trainer and evaluated positively; Annual delivery of CO training delivered independently and supported by local practitioner and legal rep is planned;
- MHO input on assessment of capacity to GP's as part of a protected learning event;
- Utilised opportunities to bring training together; i.e. working with hostile and un-cooperative families is training available for both child and adult care staff and involves input from child care and mental health practitioners;
- Chronologies protocol has been developed by Angus Council and shared with partners; multi-agency training will take place before this is rolled out to staff.

Next Steps

- Design and deliver a series of Chronologies workshops to multi-agency staff group;
- Continue to seek opportunities to link child and adult care staff in joint training to promote joint working and seamless services to children and families i.e.

move towards joint chronologies training, working with hostile families, pre-birth risk assessment training, sexual exploitation training;

- Deliver awareness raising presentations to Royal Mail Post Workers to raise awareness of the prevalence and harm caused by postal scams;
- Improve links with the private and voluntary sector via Scottish Care; opportunities to present AP information to a local provider forum, links to care homes and care at home organisations;
- Appointment of a Workforce Development Officer for child and adult protection;
- Launch and promote access to e-learning module 'Protecting People'.

5.5 Involving Service Users and the Public

Key Achievements

- Service User questionnaires are routinely used at the end of adult protection case conferences and findings collated and reported 6 monthly;
- Adults are asked for their views and feelings on safety at the beginning and end of interventions;
- Information on Angus Independent Advocacy (AIA) is routinely promoted in local authority teams with leaflets shared;
- AIA ensure that all adults whose information is subject to review and audit have the opportunity to express their views independently of staff involved in their care. Adults identified are contacted directly by AIA.

Next Steps

- Ensure the views of service users and carers inform the development of adult protection services in Angus by way of ongoing consultation by voluntary service areas including Carers Centre and Angus Independent Advocacy.

6 National Priorities

The five National Adult Support and Protection priority projects linked below informs the work of the Angus Adult Protection Committee and partner agencies:

1. [Adults at risk of Financial Harm](#)
2. [Adult Support and Protection in Care Homes and Independent Hospitals](#)
3. [Adult Support and Protection in A&E settings](#)
4. [Service Users and Carers Involvement in Adult Support and Protection](#)
5. [National Data Collection](#)

Further discussion taking place at local and national levels will continue to inform key areas of work.

7 CONCLUSIONS

Angus APC will maintain a clear focus on working in partnership to achieve better outcomes for adults at risk in our community by delivering a business plan for 2015-16 related to the priorities set out at section 1.5 above; building on achievements; and addressing the areas for improvement identified in this report.

Angus APC will establish clear links with the Angus Health and Social Care Integration Board to ensure that the protection of adults remains a top priority for all services within the new arrangements and will work closely with other public protection partnerships to inform priorities and work streams and to ensure that essential links are maintained and, where necessary, strengthened.



Angus Adult Protection Committee

Business Plan 2015-16

ANGUS ADULT PROTECTION COMMITTEE BUSINESS PLAN 2015 - 2016

No of actions	Completed (G)	On Target (A)	Behind Target (R)
32			

Priorities for the adult protection committee for the year 2015-2016 include:

(THIS NEEDS TO BE UPDATED ONCE THE PLAN IS FINALISED)

- a. Identifying adults at risk of harm, ensuring effective risk assessment and improving outcomes
(actions:) 1.1, 1.2, 1.3, 1.4, 1.5, 1.6, 1.7, 3.1 3.2, 4.1, 4.2, 4.3
- b. Acting to minimise prevalence of financial harm
(actions:) 1.5, 1.7, 2.3, 2.4, 2.5, 4.1, 4.2, 4.3
- c. Promoting and more effectively engaging with service users
(actions:)4.1, 4.10, 5.1, 5.2, 5.3
- d. Reviewing and amending adult protection practice in care homes
(actions:)2.1, 2.2, 3.1, 3.2, 3.3, 4.9
- e. Improving GP engagement with adult protection processes
(actions:) 4.1, 4.4, 4.6
- 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, 4.4
- g. Promoting better links and developing more integrated working between adult protection, child protection and public protection
(actions:) 1.1, 1.2, 1.3, 4.7, 4.8, 4.10.

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 including how to identify adult protection concerns and how to report.	1. Develop Communications Plan for Adult and Child Protection to include a calendar for the dissemination of social media messages at key points in the year.	June 2015	Snr PO/Practice Sub Committee
	2. Develop a 'report it' function on the Angus Council Website for online reporting of child and adult protection concerns including anonymous reporting	December 2015	Snr PO
	3. Undertake a joint promotional campaign for child and adult protection using a joint image and message; "if you see something, say something". (See communications plan).	September 2015	Snr PO/Practice Sub Committee/Coms Team
	4. Continuation and development of the AFHSC focus on raising awareness of financial harm including use of social media, reporting on Radio North Angus, magazines etc as detailed in the AFHSC action plan.	Throughout 2015-2016	APRO/Police/Trading Standards /Financial Harm Sub Committee members

Objective	Specific Action	Timescale	Person/Group Responsible
	5. Promote the use of telephone technology to deter scams locally and support the installation of devices in Angus.	Throughout 2015-2016	APRO / Police/Trading Standards/ Financial Harm Sub Committee members
	6. Undertake public displays at key events in Angus and engage directly with members of the public on how to identify adults at risk and what to do.	June, July and August 2015	Committee Members/SPO/ Police/ Trading Standards
	7. Work in partnership with local agencies such as Rogue Trader, Doorstoppers and Police, to tackle financial harm through awareness raising initiatives.	Throughout 2015-2016	APRO/Training Sub Committee/ Police/Trading Standards

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. Ensure operational protocols exist within and across agencies and ensure they are appropriate and fit for purpose.	Throughout 2015-2016	Snr PO/Practice Sub Committee
	2. Review and ensure that practice standards are met by adult protection services.	Throughout 2015-2016	Practice Sub Committee

Target Outcome	Specific Action	Timescale	Person/Group responsible
	3. Deliver a multi-agency Financial Harm event to 70 local stakeholders to identify local strengths and weaknesses and explore the development of a Virtual Financial Abuse Support Team (FAST).	June 2015	APRO/AFHSC
	4. Support the developments/recommendations from the Financial Harm event (point 3 above) including if a FAST is proposed.	To be determined by point 2.3 above	AFHSC
Ensure that the Angus Adult Protection Committee is fully engaged with all relevant partners in adult protection policies, procedures and protocols	5. Review multi-agency protocols for Adult Protection including Tayside Protocol to ensure alignment between the guidance.	January 2016	Snr PO/Policy Sub Committee
	6. Develop a Significant Case Review Procedure in line with National Guidance on SCR's in Adult Protection (when it is published).	Within 3 months of publication	Policy Sub Committee

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 4 planned multi-agency case file reviews and 4 audits of self evaluations of adult protection cases per year.	April 15 & September 15	Practice Sub Committee
	2. Undertake case reviews of good practice and concerning practice as they are referred by agencies to the practice sub.	As referrals are made.	Practice Sub Committee
	3. Ensure one review of adult protection procedures focuses on an individual in a care home.	March 2016	Practice Sub Committee
	4. Present report of the findings of the adult protection audits to AAPC, provide examples of good practice and practice that can be improved and seek assurance from members on how the learning is disseminated in each organisation.	Following presentation of case file review findings/ June 15 and December 15 Committees	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 2015/2016	Practice Sub Committee

Target Outcome	Specific Action	Timescale	Person/Group responsible
	6. Use nationally available data resulting from statistical returns made to the Scottish Government to develop improved arrangements for benchmarking and analysis of trends. Improve format for Committee scrutiny.	Set timetable when data becomes available.	APRO

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. Design and deliver a series of chronologies workshops to multi-agency staff to promote the Angus Guidance for chronologies.	November 2015	Training Sub Committee/Snr PO
	2. Deliver Council Officer training to local authority staff who are deemed eligible and evaluate the quality of the external training.	October 2015	Training Sub Committee
	3. Deliver a Council Officer 'refresher' workshop to Council Officers	December 2015	Snr PO (Workforce Development Worker once in post)

Target Outcome	Specific Action	Timescale	Person/Group responsible
	4. Review the core training delivered on a multi-agency basis to staff in state, private and third sector in Angus and ensure this continues to be provided.	Ongoing during 2015/16	Training Sub Committee/SPO
	5. Provide adult protection input to the social worker induction course.	September 2015	APRO
	6. Identify learning and development opportunities on an ongoing basis for GP's and practice nurses and managers.	During 2015/16 (report to PSC 6 monthly)	GP Rep/Practice Sub Committee/Training Sub Committee
	7. Launch and promote the Angus e-learning module for public protection and ensure wide access by linking this to the APC website.	September 2015	Snr PO/Angus Corporate Improvement Team
	8. Ensure shared learning and training opportunities are maximised between child and adult protection (i.e. sexual exploitation/working with hostile families/roles and responsibilities)	During 2015/16	Snr PO/Training Sub Committee
	9. Promote links with the 3 rd sector via Scottish Care and promote multi-agency training via the website/presentation to providers forum.	During 2015/16	Training Sub Committee
	10. Undertake a staff survey of multi-agency staff group involved in adult protection work to ascertain views on support/supervision, policy and guidance and training needs.	August – October 2015	Snr PO

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 sought and used to improve adult 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 on a 6 monthly basis.	June/Dec 2015	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.	June/Dec 2015	APRO
	3. Engage 3 rd sector, specifically Angus Independent Advocacy and Angus Carers in consulting carers and service users in how best to involve and have their views represented within ASP practice.	June 2015	Practice Sub Committee/Angus Independent Advocacy/Angus Carers

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
		Snr PO	Senior Planning Officer, child and adult protection
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

Appendix 1 – Training Courses 2014/15

Attendance at Courses 2014 - 2015

Date	Course Name	Angus Council People SW	Angus Council People Education	Angus Council Resources	Angus Council Communities	NHS	Police	Private Sector	3rd Sector	Public Bodies	Total Attendance
16/09/2014	Info Sharing & Communication	11	0	0	0	3	3	4	1	0	22
14/11/2014	Info Sharing & Communication	16	1	1	0	6	0	3	8	2	37
20/03/2015	Info Sharing & Communication	13	3	0	3	6	3	1	4	0	33
Total		40	4	1	3	15	6	8	13	2	92

Date	Course Name	Angus Council People SW	Angus Council People Education	Angus Council Resources	Angus Council Communities	NHS	Police	Private Sector	3rd Sector	Public Bodies	Total Attendance
16/09/2014	Assessing Risk in Adult Protection	14	0	0	0	3	3	4	6	0	30
14/11/2014	Assessing Risk in Adult Protection	16	1	1	0	7	0	3	8	2	38
20/03/2015	Assessing Risk in Adult Protection	13	3	0	3	5	3	1	4	0	32
Total		43	4	1	3	15	6	8	18	2	100

Date	Course Name	Angus Council People SW	Angus Council People Education	Angus Council Resources	Angus Council Communities	NHS	Police	Private Sector	3rd Sector	Public Bodies	Total Attendance
06/03/2015	Roles and Responsibilities	14	0	0	0	5	4	6	3	0	32
Total											
20/03/15	Working with hostile families (joint)										6

Council Officer

Council Officer Training – 2 day course; 7 people completed the Course

Appendix 2 – Training Evaluation

