

North Lanarkshire  
Adult Protection  
Committee

# Biennial Report



**Rab Murray**  
**Independent Chair**  
**October 2018**

## **Contents**

Preface .....	3
1. Introduction .....	5
2. Performance Information .....	7
3. National Priorities and Improvement Plan .....	12
4. Partnership Working.....	18
5. Key Responsibilities of the Adult Protection Committee .....	21
6. Skills and Knowledge .....	24
7. Mental Health Services .....	27
8. Outcomes .....	28
9. Challenges .....	32

## **Appendices**

Appendix 1 – Improvement Plan .....	33
-------------------------------------	----

## PREFACE

This is the fifth Biennial Report of the North Lanarkshire Adult Protection Committee and covers the period April 2016 to March 2018.

The Committee continues to focus on discharging its key responsibilities as outlined in legislation and guidance, including:

- Ensuring staff training
- Raising public awareness
- Maintaining an oversight of adult protection activity
- Engaging with communities of interest including service users and carers and providers

Of these raising public awareness and extending public understanding of issues of adult protection remains an area of particular challenge.

The Committee has also maintained a particular focus on three areas:

- Adult protection in registered care establishments
- Improving awareness of adult protection within Care at Home Services
- Disability Hate Crime

The Committee has continued to focus on the five national priorities, and work in this area is outlined briefly in the Biennial Report.

We continue to meet every six weeks and though the membership of the Committee has been relatively stable, with a high level of consistency, this past year has witnessed an increased turnover in membership primarily as a result of staff retirement and public sector reorganisation

The Committee has sought to maintain an overview of adult protection activity and performance and this has been assisted by developments in the social work information system and by the publication of the national data set. This has again highlighted that North Lanarkshire continues to have a high level of referrals and a high rate of referrals subject to investigation. Historically, there has been a very high rate of increase in referrals year on year - on average a 50% increase each year. Inevitably this has not been matched by a concomitant increase in resources and has created significant pressures within the key public agencies, particularly social work services.

Over the past two years we have seen a very slight decrease in referrals year on year in comparison to previous years, however referral number remain high although not at the same rate as previous years. This is an area that the Committee continued to monitor closely and have noted that while adult protection referrals have decreased there has been a marked increase in the number of "concern" reports received from Police Scotland. Concern reports are submitted where Police Scotland have concerns for the adult they are referring but they do not meet the criteria for adult protection. Social work response has been to manage those referrals similar to the adult protection referrals and this in essence has increased the demands on their service significantly.

Over the period of the Report, the Committee has again carried out a self-evaluation review of its structure, leadership and performance. This has led to the development of an Improvement

Plan which is in the process of being implemented and will represent a significant element of the Committee's workload moving forward. The Improvement Plan is attached as Appendix 1.

In addition the Committee has sought to extend its work to give a greater emphasis to evidencing outcomes for individuals subject to adult protection as well as gaps in the service. To this end we have carried out a number of exercises over the reporting period aimed at providing a more solid evidence base. This has included a Case File Audit of adult protection cases; a review of both statutory and third sector members on their awareness of adult protection and identified gaps and a review of referrals where “psychological harm” was the main reason for referral. These are referenced in the report.

The Committee faces a number of challenges including:

- Maintaining a focus on adult protection within increased demand on services and particularly in light of increasing financial and service constraints.
- Extending public awareness and understanding of adult protection
- Increasing adult protection awareness within acute NHS Services, Homelessness and Addiction Services
- Risk threshold and risk enablement and practice within adult protection

There is strong evidence of a continuing commitment to the work of the Committee by members and across the public services generally. There is a high level of engagement and collaboration. The Chief Officer Group continues to provide an additional mechanism for accountability and support.

All supporting information for this biennial report can be accessed on the North Lanarkshire Adult Protection Committee website at [www.northlanarkshire.gov.uk/protectingadults](http://www.northlanarkshire.gov.uk/protectingadults)

**Rab Murray**  
**Independent Convenor**

**North Lanarkshire Adult Protection Committee**  
**October 2018**

# 1. Introduction

## 1.1 North Lanarkshire – Profile

- 1.1.1 North Lanarkshire is situated in the central belt of Scotland and is the fourth largest Health and Social Care Integration Partnership in Scotland with a current population of 339,960. More than two thirds of the population live in the six main areas of Airdrie, Bellshill, Coatbridge, Cumbernauld, Motherwell, and Wishaw with the remainder living in smaller towns, villages and rural areas. In 2014 the population was increased in a transfer from NHS Greater Glasgow & Clyde and this expansion along the Northern Corridor resulted in the population increasing by an additional 20,450 people. The ethnic breakdown of North Lanarkshire is White 97.9%, Mixed 0.2%, Asian 1.6%, African 0.2%, Caribbean/Black 0.1%, Other 0.1% (Source 2011 Census).
- 1.1.2 The makeup of the population differs slightly from Scotland nationally as there are more people under 16 (18.6%) and fewer people of pensionable age (16.6%). The shorter life expectancy of men in the area is illustrated by the fact that only 15% of the male population are aged over 65 while 21% of females are in this age group though this gap is narrowing.
- 1.1.3 North Lanarkshire continues to have a higher than average level of unemployment at 4.3% compared to the national average of 5.1% (Jul 2017 –Jun 2018). Fewer people have achieved educational qualifications than nationally and the gross weekly and hourly rates of pay are lower than the Scottish average<sup>1</sup>. 15.5% of the population live in income deprived households and North Lanarkshire which covers 6.4% of the 6505 data zones in Scotland has 22% of the population living in one of the 15% most deprived areas in Scotland.
- 1.1.4 The impact of these socio-economic factors on the health and wellbeing of the population is significant. Some examples of this are that drug, alcohol dependency and suicide, particularly amongst men aged 35-50, are a concern. Alcohol related deaths are higher for both men and women than nationally. In the 2011 census, 22% of the population described their health as fairly bad, bad or very bad compared to a national average of 17%. Around 12% have a disability or health condition which limits their daily activities a lot, compared to 10% nationally. There is an increase in a number of long term conditions including chronic heart disease, respiratory disease and diabetes and an increase in the number of people who experience more than one long term condition. There has been a 29% increase in cancer in the past decade and this is expected to rise by 35% over the next 20 years.
- 1.1.5 We calculate there are 49,000 carers in North Lanarkshire, who make a significant contribution to the people they care for though this is often at the cost of their own economic and educational activity.

---

<sup>1</sup> NOMIS

- 1.1.6 As with the rest of Scotland North Lanarkshire faces a substantial demographic change, with a projected increase in those aged 75 age and over. By 2041 this group of people will increase by 83% and represent 13% of our total population.
- 1.1.7 Health and Social Care North Lanarkshire (H&SCNL) formally came into existence on the 1<sup>st</sup> April 2016 and is built on the strong and comprehensive history of joint working between North Lanarkshire Council and NHS Lanarkshire. The North Lanarkshire Integration Joint Board has responsibility for planning, commissioning and overseeing the delivery of community health and social care. The membership of the Board includes representatives of people who use services, carers, North Lanarkshire Council, NHS Lanarkshire, third and independent sectors organisations.

## 2. Performance Information

### 2.1 Statistical Information

2.1.1 Quarterly statistical reports are submitted to the Monitoring, Reporting and Audit Subcommittee and to the Adult Protection Committee. Annual reports are submitted to the Chief Officers Public Protection Group (COPPG).

2.1.2 The majority of the information provided for Committee emanates from the Social Work Information System (SWIS). Information on referrals is also submitted by NHS Lanarkshire, Police Scotland, Scottish Fire & Rescue Service and North Lanarkshire Council Enterprise and Housing Resources quarterly to the Monitoring, Reporting and Audit Subcommittee.

2.1.3 North Lanarkshire Council continue to update their SWIS systems to reflect adult protection activity, which not only informs the Committee of the number of referrals, nature of harm and other relevant information but also help to inform future learning and development needs of the workforce and areas for discussion at the local practitioner forums.

#### 2.1.4 National Data -

2.1.5 Since 2016 the Scottish Government had not produced a national report on the annual data forwarded to them from each of the local authorities. While we recognise there have been some challenges in how this information is collated, due to definitional and recording differences, it did provide an opportunity for an overview of the adult protection activity across Scotland.

2.1.6 Following a revision of the guidance, the Scottish Government produced a national data report in August this year.

2.1.7 Some of the key findings both nationally and within North Lanarkshire are:

- Nationally there continued to be variances on how referrals are counted
- 5% increase in investigations commenced from 2015-16
- 6% increase in case conferences taking place
- 46% increase in protection orders granted
- North Lanarkshire continues to carry out the highest number of investigations per 100,000 adults
- In most other areas North Lanarkshire are in line with the Scottish national statistics

### 2.2 Adult Protection Referrals

2.2.1 Data shows that North Lanarkshire Social Work received 2317 ASP referrals for the period 2017-2018 compared to 2334 for the previous year. This is a 1% decrease and is now the third year in a row, since the introduction of the 2007 Act, that we have seen a decrease in referral rates. See attached report for more information. [Statistical Report](#)

2.2.2 While statistics show a reduction in the number of adult protection referrals, social work have reported a significant increase in the number of Police “Adult Concern” reports received this year within the localities.

2.2.3 Police ‘Adult Concern’ reports are not subject to the same legislative requirements and timeframe as ASP referrals; they are often screened using the same duty process. This process allows social work to decide whether the threshold for adult protection has been met.

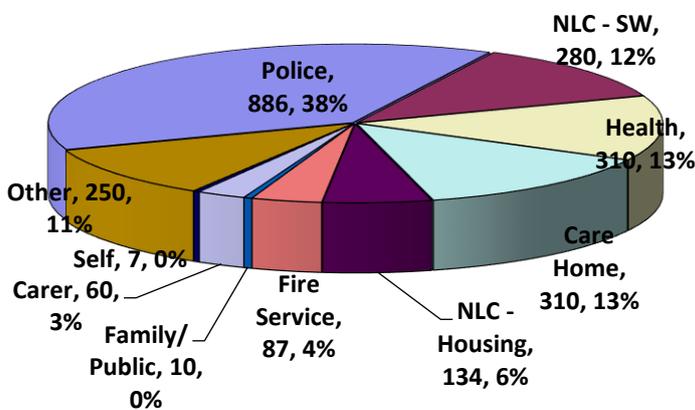
2.2.4 The data reveals that in addition to the 2317 ASP referrals, there were 3023 Police ‘Adult Concern’ Reports submitted across localities. Therefore the total number of adult safeguarding activity across North Lanarkshire for 2017-18 was 5340. Since the same reporting period last year we have seen a 13% reduction in police ‘adult concern’ reports (3023 to 3477) which despite the small reduction, still has significant resource implications for social workers and administrative staff, particularly in light of current financial constraints.

2.2.5 Further review of the Police ‘Adult Concern’ process commenced in September 2018 with the Senior Officer co-ordinating a meeting with representatives from each Locality to map out the terms of reference. The analysis of this review should provide insights into the thresholds between agencies and localities, and raise questions as to how data analysis can improve inter agency working locally.

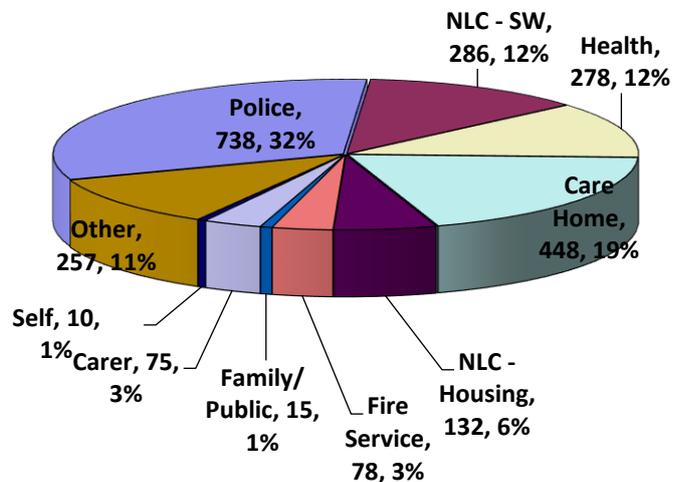
**2.3 Source of Referral**

2.3.1 Police Scotland continue to be the highest referrer group proportionally (32% of all ASP referrals received in 2017/18) and this has remained unchanged throughout our reporting periods. Three years ago Police Scotland replaced their local reporting system with a central ‘Concern HUB’ which covers both North and South Lanarkshire. We initially saw a significant increase in the number of adult protection referrals; however following a review of their screening processes there has been a steady decline in adult protection referrals and this is replicated again for 2017/18 with Police referrals down 17% from the same time last year (886 to 886).

**Referrals In Period by Referral Source 2016/17**



**Referrals In Period by Referral Source 2017/18**



2.3.2 As you can see police continue to be the main source of referrals with health and social work referrals remaining fairly consistent over the past 2 years.

2.3.3 There was a slight decrease in the number of referrals received from Health (310 to 278) with 61 referrals passed to other services, and 119 assessed as no further action under ASP following inquiry stage. In percentage terms, Health ASP referrals made up 12% of total referrals received and are one percentage point lower than the same time last year (13% to 12%).

- 2.3.4 Social work measured the same percentage terms as last year (12%) submitting 286 ASP referrals with 42 passed to other agencies and 100 assessed as no further action under ASP following an inquiry.
- 2.3.5 Housing Services submitted a similar amount of ASP referrals as last year (134 to 132) representing 6% of total referrals received. Fire & Rescue Services saw a 1% reduction (87 to 78) in ASP referrals submitted compared to last year.
- 2.3.6 For the second year running, the data reveals an increase in ASP Care Home referrals annually (310 to 448 or 44%), though the data between quarter 3 and quarter 4 2017-18 measured a decrease (120 to 85 or 33% reduction) in ASP referrals submitted by Care homes. This finding could indicate a levelling out of total referral numbers despite the annual increase. The scrutiny role of the social work quality assurance team, which includes quarterly reporting submissions combined with the Care homes access to ASP multi agency training could be factors as to why there is an increasing trend in ASP Care Home referrals across North Lanarkshire. As one of the Committee's priority areas this year, may also have been an influencing factor.
- 2.3.7 The highest number of ASP referrals received were for adults over the age of 65 years rather than under 65 years (1192 and 1125 respectively), which is a trend over the last two yearly reporting periods. This represents an over 65 – 52%, under 65 – 48% split, in percentage terms with particular spikes in the data for those aged 40-64 (641) and 75-79 (300).
- 2.3.8 Statistics show that men are more likely to be referred when under the age of 65 years (354 as against 596) with women more likely to be referred for above the 65 year age range (699 as against 692), with both findings consistent with last year's figures.
- 2.3.9 In 2017/18, adults with mental health issues were represented in 37% of total ASP referrals received and were as such the main primary group referred. This finding is consistent with 2016/17, with adults who have disabilities next, and then older adults. This only reinforces the importance of key service developments such as Distress Brief Intervention and social work investment in delivering ASP training for those organisations who deliver services at home to our most vulnerable service users.
- 2.3.10 Over this Bi-ennial reporting period we continue to see an increase in the number of referrals for psychological harm (1,191 or 51% of total referrals received.) There was a concern that psychological harm may be used as a "catch all" category and therefore may be disguising other underlying forms of harm. As part of the ASP Social Work procedures review, clearer guidance was offered in terms of harm definitions and with this, what actions and circumstances may constitute a psychological harm type situation. In addition to this, Senior Social Workers will be responsible for checking the primary harm judgment selected when the ASP referral is logged upon the SWiS recording system to ensure this is congruent to the harm being experienced by the adult. It is hoped both measures will improve recording accuracy and encourage more robust harm trend analysis in future.
- 2.3.11 Consistent to the previous year, physical assault harm (427 or 18%) featuring as next highest category, followed by neglect (297 or 13%) and financial harm (166 or 7%). Historically financial harm has been a high category of referral, however this has shifted recently which the committee have recognised and as a priority area has plans to reinforce awareness and impact of financial harm to frontline staff and the general public.
- 2.3.12 There continues to be a high number of referrals that progress to no further action under adult protection legislation (1109 or 48%) and this may be for a number of reasons i.e. the adult may not meet the three point criteria under the 2007 Act and/or the adult may be better supported by another care agency etc. Despite many ASP referrals progressing to no further

action under the legislation there is still a legal requirement on the council to carry out initial inquiries. This places responsibility on the locality social work teams to respond to every referral received and undertake detailed work to ensure that the right decisions are made. This can often result in lengthy involvement from social work staff as the adults circumstances evolve and risks change. Some of those referrals may require ongoing work to take place over a long period of time to ensure that the adult's welfare, finances, rights and/or property is safeguarded and they are supported to manage the risks they face.

2.3.13 Few referrals come directly from the public and this is an area where the Committee has continued to raise awareness with the support of our third sector providers. As a Committee we will continue this work over the next two years.

## **2.4 Investigation**

2.4.1 We have seen a 3 % decrease (538 to 472) in the number of investigations taking place over 2017-18, however this still marks a 20% conversion rate from Inquiry to Investigation and as we know from the ASP National Data set circulated in 2016, North Lanarkshire carries out more investigations than other councils throughout Scotland.

## **2.5 Case Conference and Reviews**

2.5.1 There were 106 ASP initial case conferences and 74 ASP review case conferences held for 2017-18. Both data sets are similar to last year and when considering the slight decrease in overall ASP referrals, this marks a small percentage increase comparison. Anecdotal evidence from localities reports that a number of additional case conferences and reviews took place. With the introduction of the updated Adult Protection Social Work procedures and the accompanying locality briefing sessions, there will be opportunities to reinforce the importance of robust recording practices.

## **2.6 Statutory Orders**

2.6.1 For the period 2017-18, North Lanarkshire Council, as part of Health and Social Care North Lanarkshire, applied for and obtained nine ASP Protection Orders with the breakdown of these as follows:

- 2 Removal Orders
- 4 Banning Orders
- 3 Temporary Banning Orders

2.6.2 In comparison to the previous year, North Lanarkshire Council, as part of Health and Social Care North Lanarkshire applied for and obtained an additional two (2) ASP Protection Orders (7 to 9).

### 3. National Priorities and Continuous Improvement

3.1 The APC remains committed to supporting the five national priorities identified in August 2012 by the Adult Protection Policy Forum. While the national sub groups have been concluded North Lanarkshire Committee has continued to focus on many of the areas identified.

#### 3.2 Adults at risk of financial harm

3.2.1 The Committee has worked in close collaboration with South Lanarkshire APC and put a considerable effort into extending awareness of the circumstance and implications of financial harm. This has focussed both on the work of the main public agencies so that they are more alert to the likelihood of financial harm and more able to respond effectively to it, and also importantly, on the work of the key financial organisations particularly banks and the post office. We have seen a significant increase in awareness across the financial sector and a higher level of collaborative working with the public agencies. Notwithstanding a number of initiatives aimed at extending public awareness of financial harm, referrals in this category did not increase significantly over the period.

3.2.2 Over this reporting period we have seen a steady decrease in the number of referrals received for financial harm. This may be due to referrers focusing and reporting on psychological harm and placing less emphasis on areas of financial harm themselves.

3.2.3 The Committee's recently undertook a self-evaluation and produced their improvement plan for 2018-20. One of our main priority areas identified is to reinvigorate awareness around financial harm by reviewing and updating our literature and to hold a local awareness raising event.

3.2.4 Within North Lanarkshire the Committee and its partners continued to raise awareness on financial harm and other areas of harm during the National Adult Protection Awareness Day by:

- Press releases across North Lanarkshire
- Regular posts on Facebook and Twitter across the partners
- Presentations delivered at our voluntary sector interface - Voluntary Action North Lanarkshire (VANL's) six locality network events
- Promotional posters and leaflets delivered across North Lanarkshire

3.2.5 The information materials on financial harm that were designed Pan Lanarkshire will be updated later this year. The Criminal and Civil Law booklet for staff and a prevention information leaflet developed in October 2015, highlighting steps the public can take to prevent financial harm continues to be circulated widely across Lanarkshire to raise local awareness. [Adult Protection Finance and Property Harm Booklet - 3rd Edition](#) and [Whose Money is it Anyway? - Prevention Leaflet](#).

#### 3.3 Adult Support and Protection in Care Homes and Independent Hospitals

3.3.1 North Lanarkshire APC has maintained a particular focus on adult protection in Care Homes following a number of concerns relating to a high level of adult protection referrals in a few care establishments. We have developed procedures for multi-agency monitoring of adult

protection activity in designated care homes and established joint working arrangements to improve relationships and effect improvement.

- 3.3.2 Adult protection in Care Homes and registered establishments is a standing item on the APC agenda and we have extended the focus to Care at Home over 2017/18. The Committee also highlight issues of concern around Care Homes losing their past history when they change ownership or name. Work with the Care Inspectorate has resulted in them taking further advice and have now amended their policy so that a care establishment's previous history can now be accessed via the Care Inspectorate website.
- 3.3.3 Both North and South Lanarkshire APC's recognised that a move into a Care Home can be a difficult transition for both the adult and their families. It is therefore crucial that this transition is planned (where possible) and supported throughout. It is acknowledged that adults should be kept safe from harm and adhering to these principles means that they should receive the right support at the right time; this is especially relevant in all adult protection cases.
- 3.3.4 Both Committee's reported that ASP referrals were increasing within their respective areas annually and therefore set out to explore ASP referrals within Care Homes to identify any trends as well as outcomes for the adults concerned (both positive and negative).
- 3.3.5 A joint North and South Lanarkshire self-evaluation of adult protection in Care Homes was undertaken in March 2018. The framework of Quality Indicators provided by the Care Inspectorate helped both Committee's reflect on practice and identify strengths and areas of strategic improvement. [Joint Self Evaluation of Adult Protection in Care Homes - March 2018](#)
- 3.3.6 An audit of 50 cases was undertaken and we found that 74% of the adults reviewed were subjected to a physical assault and in 72% of cases the source of harm related to resident on resident harm. Both Lanarkshire's found that in the majority of cases dementia was a primary feature and related to both the adult at risk and the perpetrator.
- 3.3.7 The audit results concluded that the outcomes for adults at risk within Care Homes could be improved. It would appear that the same risk management strategies are being applied in most cases which are not always effective.
- 3.3.8 A report was submitted to both Committees' for further discussion and a joint North and South Lanarkshire Event will take place on 6<sup>th</sup> November 2018. The event will focus on the outcome of the audit, how best to keep people safe while in a care setting and share innovative practice which is taking place across both councils.

#### **3.4. Services Delivering Care at Home**

- 3.4.1 How care provision is delivered has changed significantly over the years. With the increased uptake of Self Directed Support, we are seeing an increase in people receiving care at home and the Committee identified this as one of our priority area for 2016-18.
- 3.4.2 North Lanarkshire care at home services are provided predominately in house although a significant amount of the service is delivered out with.
- 3.4.3 Training and organisational support are key elements in helping staff deliver a quality service to individuals within their own home. The importance of learning skills in delivering personal care and practical daily living tasks safely cannot be minimised, however the impact of

recognising and reporting harm to the appropriate authority can significantly enhance an adult's wellbeing and quality of life.

- 3.4.4 In light of the above, North Lanarkshire Adult Protection Committee along with North Lanarkshire Social Work Services agreed that two hourly adult protection awareness sessions would be developed and all their Care at Home employees would attend.
- 3.4.5 The first part of the awareness session briefly gave a legislative overview of the Act and highlighted links to Adults with Incapacity (Scotland) Act 2000 and the Mental Health (Care & Treatment) (Scotland) Act 2003 legislation. Participants were then asked individually and as a group to view six scenarios to consider thresholds of harm as well as look at individual values.
- 3.4.6 The final part of the session focussed on Mr J.L, a significant case review carried out by the Mental Welfare Commission for Scotland, which involved homecare staff. This helped participants to identify adult protection, areas of harm and when to report their concerns. This session also reinforced the participant's roles and responsibilities as an individual and an employee of the council.
- 3.4.7 The training programme will take approximately 12 months to complete and is broken into two phases. The first phase started in February 2018 and focussed on staff employed by North Lanarkshire Council. This was completed on 22<sup>nd</sup> June 2018 and 1057 members of staff were trained, including 54 Managers.
- 3.4.8 Phase two will begin in October 2018 and predominately focus on Care at Home staff employed by the independent sector. It is proposed that this phase will include additional mop up sessions for NLC staff who were unable to attend phase one and the full programme will be completed by February 2019.
- 3.4.9 Pocket size information cards on how to recognise and report adult protection concerns were developed and provided to all Care at Home staff for reference.
- 3.4.10 The impact of the training, through auditing referrals, will be undertaken on the completion of both phases.

#### 3.4.11 **Large Scale Investigations**

- 3.4.12 North Lanarkshire Council did not undertake any large scale investigations (LSI) over the past two years and are in the process of updating its Contracted and Commissioned Services Procedures to support Care Home managers when raising adult protection concerns.

### 3.5 **Service User and Carer Involvement**

#### 3.5.1 **Representation**

- 3.5.2 The North Lanarkshire Service User and Carer group has been in existence since 2010. The Committee had looked in detail at how they could engage with service users and carers. There was a wish to avoid arrangements that could appear as tokenistic, and which would not afford a firm platform for effective influence on the working of the Committee.
- 3.5.3 Following consideration of the views expressed at the consultation event, the Committee adopted a position of engagement at a range of levels, which includes:
- 3.5.4 **a) A service user and carer group** constituted by the APC. The North Lanarkshire Adult Protection Co-ordinator chairs this group.

- 3.5.5 The purpose of this group is as a formal mechanism whereby information can be shared and exchanged. The service user and carers' organisations are kept up-to-date with the work of the APC, and relevant matters are forwarded by the organisations to better inform the work of the APC.
- 3.5.6 **b) Attendance at Adult Protection Committee meetings** - that member representative from each of the service user and carer groups attend one meeting of the APC per annum when the agenda would include topics raised by members within the groups.
- 3.5.7 **c) Attendance by the Chair and representative Committee members** once yearly at individual meetings of the four service user and carer organisation meetings.
- 3.5.8 **d) An annual event** held for a broad range of service users and carers. This event provides an opportunity for people to be informed of developments and to participate in discussion.
- 3.5.9 This structure has been in operation since 2010 and has been periodically reviewed.

### 3.5.10 Annual Event

The group had raised concerns at the lack of preparation prior to discharge from hospital while some of their members had enjoyed a more positive experience. It was agreed that the annual event held on 6 October 2017 would focus on "Hospital Discharge" and use this opportunity to listen to service users & carers' experiences as well as promote some of the new innovations taking place across Lanarkshire and the focus on capacity building with all partners.

[Service User and Care Annual Report - October 2017](#)



- 3.5.11 The event was very well evaluated with many participants feeling they were more aware of services available to them prior to discharge, they expressed a feeling of being listened too and were happy that all the relevant public bodies fully participated.

### 3.5.12 Disability Hate Crime

Following the Hidden in Plain Sight report and work previously carried out with the Scottish Consortium for Learning Disabilities on disability hate crime, Universal Comedy were commissioned by the Adult Protection Committee to work with a group of 30 people from across the six localities to develop a range of comedy sketches around disability hate crime.

- 3.5.13 Members of the working group were aware that disability hate crime causes a great deal of distress and fear and that it is also an area vastly under reported. It was agreed that the aim should be not just to raise awareness of those people who may be victims – but also raise awareness across local communities, and people who may be bystanders and for many reasons either not wish, or not feel able, to do something. The message would be not only to recognise disability hate crime – but to report it.

- 2.5.14 From 2014 until 2016 the project has over three phases produced a variety of events to promote awareness of disability hate crime.

2.5.15 Phase two planned and delivered an event held in 2015 “There’s no harm in being protected” which focussed on three scenarios based on actual cases of individuals in North Lanarkshire at risk of harm and subject to adult protection procedures. The case studies were represented in dramatic form highlighting key issues of protection and safe guarding. Following each case study small group discussion took place which sought to identify concerns and highlight possible courses of action to provide protection. [Service User and Carer Report 2015](#)

3.5.16 Phase three was undertaken in 2016 when additional funding was secured through the Chief Officers Group, North Lanarkshire Education Department and the Adult Protection Committee. A series of workshops involving eleven people with disabilities from NL localities who were previously involved in phase 1 and 2 of the project, and several fourth year pupils



from Airdrie Academy worked alongside Universal Comedy to produce a hard hitting play, which sent a clear message around raising awareness of hate crime. The performance was showcased at The Edinburgh Fringe on 17<sup>th</sup> August 2016 in the Gilded Balloon. The audience was very mixed and as was some of the reactions. Most people found it very informative and thought provoking while some

found it less comfortable and quite challenging. The group reassured the audience that while the performance may make some people uncomfortable this is the experience of many folk on a daily basis and that to challenge this behaviour is important.

3.5.17 The group subsequently delivered a performance to Principle Teachers of Pupil Support and Deputy Head teachers and it was agreed that seven performances would take place across Airdrie Academy, Taylor High School and Bellshill Academy and the target group would be pupils in S.3 and above. It was felt that S.3 pupils who are aged 14 years and above would be the target group as they would be more able to understand the performance and offer the most participation. The group performed in front of approximately 700 pupils across the three schools.

3.5.18 The performance comprised of professional comedy advising how to respond to abuse, the group completing a number of situations where hate crime can take place e.g. on a bus, in a shop and in more formal settings and an interactive element where the audience could get involved in providing their own responses as to how they would react if confronted with abuse, as well as a Q & A opportunity.

3.5.19 The response of volunteers was excellent with many of the pupils keen to participate. During the performance the audience were often shocked at the language used by the group but also knew that it was frequently used by people who subject adults to hate crimes.

3.5.20 Due to the success of the play it was agreed by North Lanarkshire Education Department and the Adult Protection Committee that a DVD would be commissioned and local schools now use the DVD as part of their educational curriculum on tackling disability hate crime and

support their Mentors in Violence Prevention programme. The DVD is also available to a wide range of public body staff members, peer groups and community groups.

3.5.21 Voluntary Action North Lanarkshire, Scottish Government's Third Sector Interface for the local area, organise the VOSCAR's on behalf of North Lanarkshire Voluntary Sector Partnership Group. The performers, with support, submitted a nomination to the "VOSCARS 2016" which is a unique Hollywood-style awards ceremony to recognise the outstanding efforts of local volunteers, voluntary sector organisations and champions of the community. They were successful in their nomination and came fourth in their group of "Protecting Safer Communities Sector".

3.5.22 At the ceremony two of the pupils who were involved in the performances highlighted that "the project had went well. One pupil had explained "she had never spent time with anyone with a disability and after the first few rehearsals no longer noticed the 'disability' and treated everyone the same as a performer. A service user reiterated his views that he was really concerned about working with school pupils and that the project had changed his mind. He realised that not all pupils were the same as those who had subjected him to hate crime in the past.

## 4. Partnership Working

### 4.1 Public Protection

4.1.1 The North Lanarkshire Chief Officers Public Protection Group is responsible for ensuring that their agencies, individually and collectively, work to protect communities of North Lanarkshire as effectively as possible.

4.1.2 The roles and responsibilities of the group include:

- Individually and collectively, to demonstrate leadership and accountability in respect of public protection work and its effectiveness on behalf of their agencies.
- To coordinate and oversee strategic developments within the public protection arena.
- To provide assurance to North Lanarkshire Council, North Lanarkshire Partnership and other relevant strategic partner bodies on delivery of all aspects of public protection.
- To keep under review the structures and processes which support public protection to ensure their effectiveness and relevance.

4.1.3 The group has specific governance responsibilities in relation to Child and Adult Protection Committee's, the Violence Against Women Group (VAWWG) and the MAPPA Steering Group.

### 4.2 Joint North and South Lanarkshire Annual Event

4.2.1 North and South Lanarkshire Adult Protection Committees deliver an annual joint learning event. This year the event focused on the interaction between the " Three Acts' i.e. Adult Support and Protection ( Scotland) Act 2007, The Adults with Incapacity (Scotland) Act 2000 and the Mental Health (Care & Treatment) (Scotland) Act 2003.

4.2.2 Managers and practitioners from partner agencies were invited to attend this event to increase their knowledge of the Three Acts, share experiences and knowledge across agencies and reflect on challenges in service delivery.

[The Three Acts Event Report - August 2017](#)



### 4.3 North Lanarkshire Child and Adult Protection

4.3.1 Joint Adult and Child Protection Committee meetings take place annually to consider common issues for both Committee's and agree how best to progress these. This includes areas of multi - agency working, shared priorities and practice issues. Both Committees' share their minutes and these are circulated to all members and discussed at each Committee, when necessary.

4.3.2 The joint Adult and Child Protection Committees delivered an event on 1 September 2017 which focused on the ethics of care that can arise when providing support at home.

4.3.3 We were delighted to have Professor Anne Gallagher, University of Surrey as our key note speaker. Last year Professor Gallagher undertook research on “Interventions that Promote Ethics in social care (RIPE) Project” and was able to share the finding of her research at the event.



4.3.4 Managers from partner agencies were invited to attend this event; the purpose of which was to help them consider how they ensure that high ethical standards of care are delivered to service users (adults and children) in residential and community settings.

4.3.5 The event was very well received and Rab Murray, Chair of the APC hoped that participants would take back to their workplace the information provided and support staff to think about how ethics plays an important role in their decision making. He also reinforced how high ethical standards shape interventions, minimize risk and produce better outcomes for the adult involved. [Ethics in Care Report - September 2017](#)

#### **4.4 Adult Support and Protection - A&E**

4.4.1 NHS Lanarkshire has been actively involved in developing and delivering multi-agency adult protection training alongside social work and other partners. This has been targeted at NHS staff both in Emergency Departments (ED) acute services and in community services and aimed at building on their knowledge, competence and skills in adult protection. Performance information highlights that health staff are the third highest source of referrals for adult protection and this is growing each year.

4.4.2 Medical Education training for consultants builds on professional development and is part of the medical revalidation process. The NHS Lanarkshire training representative with support from North/ South Lanarkshire ASP Co-ordinators been involved in delivering adult protection training twice a year to this group of medical staff. This is across the three E.D and acute care sites in Lanarkshire and has helped to drive investment and confidence in staff reporting adult protection.

4.4.3 We have revised procedures on information sharing in adult protection and developed practice guidance for both health and social work staff.

#### **4.5 Police Scotland and Trading Standards**

4.5.1 Both Police Scotland and Trading Standards have worked closely to promote and actively challenge some of the financial harm taking place across Lanarkshire.

4.5.2 Both North and South Lanarkshire Committees and NHS Lanarkshire are working closely with Police Scotland to develop protocols to support the implementation of the Missing

Persons Strategy. This will provide support to staff making referrals from Care Homes and local hospitals.

## **5. Key Responsibilities of the Adult Protection Committee**

### **5.1 Policies, Procedures and Improving Practice:**

### **5.2 Guidance on the Protection for Adults within Registered and Contracted Services**

5.2.1 As indicated earlier the Committee has worked with proprietors of registered services on guidance for the Protection for Adults within Registered and Contracted Services. This is now being applied and will be kept under review.

### **5.3 North Lanarkshire Adult Protection Website**

5.3.1 The APC members have developed their own website which has been updated to allow people to view it through their mobile or tablet device. It has also been coded to allow analytical reports to be run for information. As well as the website being updated the opportunity was also taken to refresh the layout and design throughout the website. Work continues to keep the website current and include a wider range of information relating to violence against women, public protection and ASP information for service user, carers and staff.

### **5.4 Public Protection Newsletter**

5.4.1 A copy of the first North Lanarkshire e-bulletin Public Protection Newsletter (PPN) was circulated to staff across social work, police and health in April 2017. There continues to be monthly editions circulated highlighting the work undertaken by the public protection co-ordinators and their Committee'. The PPN has received positive feedback from staff and is growing annually in membership.

### **5.5 Information and Public Awareness Strategy and Work Plan**

5.5.1 The Information and Public Awareness Strategy and Work plan has been updated and continues to be a working document. Commitment from all the partners to engage in awareness raising and the development of materials for distribution to the general public and services is very good. While there are several work streams in place for example reviewing how we implement and identify current and future developments and promote information on adult protection, the main focus is on reviewing a range of materials, including easy read materials that are currently available for various audiences with a view to expanding on them.

5.5.2 The Information Sub-Committee are working closely with third sector partners who support young people aged 16-25 years to develop adult protection information that will be more appealing to them. Statistics show that referrals relating to this age group are very low and while many will not meet the criteria, there are a number of young people who are very vulnerable through homelessness, addiction or mental health issues. We hope by making information more user friendly that we will be able to improve support and advice to this age group.

5.5.3 The Sub-committee undertook a survey early 2018 which assisted us to benchmark the learning of the workforce who participated across health, social work and the general public. It also provided some interesting suggestions on how we can progress ASP learning in the future and particular areas that we need to target within the local community. Some suggestions from community participants were the need to provide easier access to information through literature and the Adult Protection Website.

5.5.4 Currently the Sub-committee are reviewing all the written materials used for public awareness, how we can distribute this more robustly and we have plans in place to review

and again update the website.

- 5.5.5 Multi agency training has been updated in light of the learning from our SCR and continues to take place on a regular basis. Recommendations provided within the survey in relation to refresher training and awareness sessions were also reviewed and are now in place.
- 5.5.6 The Sub-committee are also in the process of developing a DVD using British Sign Language, which helps adult to recognise harm, how to reports it and what happens next. This will be available late autumn.
- 5.5.7 Information stickers which promotes child and adult protection information and contact details have also been developed and circulated to staff during the ongoing awareness raising events for housing services.

## **5.6 Revision of Notification of Significant Incidents Protocol**

- 5.6.1 In addition to receiving quarterly statistical reports, the Committee also has in place agreed guidance for the public bodies in respect of the notification of significant incidents.
- 5.6.2 The initial guidance was completed in September 2011 and has regularly been reviewed and updated. The guidance also indicates the process for member organisations seeking consideration of initiating a Significant Case Review.
- 5.6.3 Notification of Significant Incidents from the partner agencies to the APC Chairperson enables the APC to have an overview of how agencies are monitoring their performance and managing practice or organisational situations. The Notification of Significant Incidents Protocol is again due to be updated, however in light of the Scottish Governments consultation on national guidance on SCR we have put this on hold until the end of the year. [Notification of Significant Incident Guidance - March 2016.](#)
- 5.6.4 The APC commissioned a Significant Case Review in 2015, which was taken forward by an Independent Reviewer. The report was completed along with an action plan and submitted to the Chief Officers Group. The Committee has continued to oversee the implementation of the action plan and it was fully completed this year with the exception of one action. The difficulty of accessing capacity assessments within a reasonable timeframe was the area outstanding, however as this is an area currently being reviewed within the Adults with Incapacity (Scotland) Act 2000 consultation we agreed this could be followed up following the outcome of the review.

## **5.7 Public Protection**

- 5.7.1 Joint Adult and Child Protection Committee meet annually to consider common issues for both Committee's and agree how best to progress these. This includes areas of multi - agency working, shared priorities and practice issues. Both Committee's share their minutes and these are circulated to all members and discussed at each Committee, when necessary.
- 5.7.2 Along with the Violence Against Women, Co-ordinator we have produced guidance and delivered training on Female Genital Mutilation and Forced Marriage.
- 5.7.3 Since the increase in significant incidents relating to adults subject to MAPPA, a growing elderly population and the links to adult protection, both North and South Lanarkshire ASP and MAPPA Co-ordinators met with Justice Services and developed a Joint Operating Protocol. The aim of the protocol is to establish a framework for MAPPA and ASP to work together to enhance public protection, the reduction of reoffending and the risk of harm to

adults, whilst recognising the principal differences between MAPPA and ASP. [MAPPA and ASP Joint Operating Protocol](#)

## **5.8 Embedding Adult Protection in Practice**

5.8.1 With the growing demands on the public agencies the committee members agreed to accept the opportunity to embed adult protection within the main activity of their organisation and thereby reduce the requirement of specialist activity. This required each of the public agencies to examine their current practice arrangements to maximise the opportunities for embedding adult protection. Each agency has produced an action plan on how they plan to embed adult protection in main stream activity and annually provide reports to the APC.

## **5.9 North Lanarkshire Social Work Adult Protection Procedures**

5.9.1 Each of the public agencies has developed their own adult protection procedures which are subject to scrutiny and approval at the APC. Social work adult protection procedures have been updated to reflect the changes in policy and practice.

5.9.2 As noted earlier psychological harm is the primary reason for referral and often minimises other areas of harm. The updated social work adult protection procedures offer information as to what constitutes psychological harm type incidents, as well as responsibility for the Senior Social Worker to screen the referral to ensure the primary harm judgment is accurately reflected in the information recorded. It is hoped both measures will increase the accuracy of primary harm statistics.

## **5.10 Learning from Good Practice and Significant Case Reviews (SCR)**

5.10.1 The APC as standard practice receives and gives consideration to local and national reports including MWC reports and Significant Case Reviews. These are used to inform the work of the Committee and the practice of the public agencies. The learning points from the various SCR reports are incorporated into partnership learning and development sessions and disseminated via multi agency training and locality forums.

5.10.2 There were 4 notifications of case reviews or significant incidents made to the APC, for the year 2017/18 in comparison to none the previous year. Due to the issues presented within each, and after careful consideration, the APC decided that it would be appropriate for each agency to conduct internal learning reviews and implement action plans as required.

## **6. Skills and Knowledge**

### **6.1 Supporting and Protecting Adults at Risk of Harm Training**

- 6.1.1 The APC has statutory duties to promote communication and co-operation within and between the public bodies, but also, to be involved in the adult protection learning and development on a multi-agency basis. To gauge the level of awareness in relation to adult protection across multiple agencies, the APC conducted a survey which was circulated in May 2017. This is discussed further in P 29.
- 6.1.2 The Training Subcommittee continue to meet quarterly to monitor current training programmes, identify gaps and promote future training programmes. The APC has noted a decrease in the number of staff requiring ASP training and has therefore amended the Training Strategy to reflect this. Training programmes for 2018-19 will be reduced from 24 sessions a year to 12 and will remain under regular review.
- 6.1.3 The multi-agency one day training developed and co-ordinated by the Committee is open to attendance by staff from both the public agencies and the voluntary/independent sector. The content of the training materials have been frequently revised and provide a more interactive, skill based training session. As the workforce who attend the training sessions all have active contact with service users and a growing awareness of adult protection, the training programme is reviewed regularly.

### **6.2 Awareness of Risk and Responsibility - Training Programme**

- 6.2.1 This is a half day awareness course for all staff that may have direct or indirect contact with the public. This training is also very well attended and offers awareness of how to recognise or report adult protection concerns. The training programme was suspended for three months as the health representative and the Adult Protection Co-ordinator both retired at the same time. A new Adult Protection Co-ordinator is in post and NHS Lanarkshire have identified a representative to deliver the training.

### **6.3 ASP Council Officer Training**

- 6.3.1 Social workers who are required to act as Council Officers undertake the one day multi-agency training course as part of the council officer two day course. Social work staff are also required to undertake the "Investigative Interviewing" course and this is also available for staff who may act as second worker.
- 6.3.2 Refresher training is the responsibility of each agency to deliver in house. Support to help facilitate the training is available from the Adult Protection Co-ordinator and partner agencies as required and regular updated reports will be submitted to the APC for information.

### **6.4 ASP Single Agency Training**

- 6.4.1 North Lanarkshire Learning and Organisational Development Section deliver ASP training as part of their staff induction programme. This staff group includes home support staff, housing contractors and youth investment induction programmes.
- 6.4.2 The Training Sub-committee have reviewed their work plan and the priority areas for the coming year is raising awareness of financial harm amongst staff, public agencies and the local community.

6.4.3 There is often a misconception that young people are able to keep themselves safe and are not seen as meeting the criteria for adult protection due to their age or perceived capabilities, however we have a growing population of young people who are very vulnerable due to their transient lifestyles, poor educational abilities and mental health issues. We have a plan in place to work with both our statutory and third sector partners to develop information and raise awareness of ASP.

6.4.4 GP's are also a group of key personnel who we plan to engage and deliver ASP training to raise their awareness particularly in light of the findings from the recent GP Consultation carried out by the Scottish Government.

## **6.5 Effective Risk Management Training**

6.5.1 The Effective Risk Management Assessment Tool, which was jointly developed by health and social work, is regularly used when there are adult protection concerns. The tool offers a multi-agency approach to risk assessment / management across care groups and is often implemented alongside adult protection support plans where there are complex issues identified.

## **6.6 Multi Agency Adult Protection Practitioner Fora**

6.6.1 In November 2009 the Committee arranged the first series of multi-agency adult protection practitioner fora's. This followed discussions with front line practitioners on what would best support multi-agency working. It was emphasised that holding events at a local level would better support networking. The aims and purpose of the fora's were established, and included:

- Bringing together operational staff with responsibility for adult protection across North Lanarkshire, locality by locality.
- Sharing relevant information and practice developments.
- Providing opportunities for best practice to be disseminated across all of the six localities in North Lanarkshire.
- Providing opportunities for communication both within and across agencies.
- Creating links with operational staff and the Adult Protection Committee.

6.6.2 The two hour fora takes place in each of the six localities within North Lanarkshire. Front line practitioners from North Lanarkshire Council Services, NHS Lanarkshire Services and Police Scotland are invited to attend. A theme will be introduced, usually based around a local practice example, and within multi-agency groups there will be discussion which is then fed back to the full group. The aims and purpose of the fora is to share information and practice developments, bring together operational staff with a responsibility for adult protection across North Lanarkshire, locality by locality and provide opportunities for communication both within and across agencies.

6.6.3 During this reporting period there has only been one fora due to the volume of training and work undertaken following NLC Significant Case Review. Now that the action plan, review of training materials and changes to local policy and procedures are complete, we propose to increase the fora to twice a year due to their popularity.

#### 6.6.4 June 2017 – Miss A (SCR)

- 6.6.5 The eleventh series of the multi-agency fora took place in June 2017. This series focused specifically on adult protection and the significant case review (SCR) involving Miss A, who was resident within North Lanarkshire. The fora also took into consideration recent advice notes issued by the Mental Welfare Commission (MWC) on Adults with Incapacity – Sexual Relationships and the Criminal Law.
- 6.6.6 The event built on the lessons learned from the SCR and in particular areas around risk assessment and risk management, capacity to make informed decisions and defensible decision making. The recent MWC advice notes also links closely with issues that arose within the Miss A report and some of the challenges staff face when supporting adults who place themselves in high risk situations and may lack capacity.
- 6.6.7 Each fora was were very well attended and received positive feedback from participants. The opportunity to review a local SCR was well received as the learning related to a North Lanarkshire resident. This offered an opportunity for each of the public bodies to reflect on areas of good practice and how agencies can improve. Response from across the agencies continually highlighted the importance of good communication and recording information.
- 6.6.8 The next series of fora 2018/19 will again focus on local learning and links to national policy and guidance.

## **7. Mental Health Services**

7.1 Often the more complex adult support and protection interventions have required consideration and use of the Mental Health (Care & Treatment) (Scotland) Act 2003 and /or the Adults with Incapacity (Scotland) Act 2000.

7.1.1 While a very high proportion of our referrals are for psychological harm on further interrogation many also include areas of self harm. This is often during a period of crisis or distress and can have a significant effect on the person and resources.

7.1.2 In 2017/18, adults with mental health issues were represented in 37% of total ASP referrals received and were as such the main primary user group referred. These statistics are consistent with 2016/17. This only reinforces the importance of key service developments such as Distress Brief Intervention and social work investment in delivering ASP training for those organisations who deliver services at home to our most vulnerable service users.

### **7.2 Distress Brief Intervention (DBI)**

7.2.1 The Scottish Government announced that North Lanarkshire Health and Social Care Partnership were successful in their bid to host the Central Team for the Distress Brief Intervention (DBI) test programme as well as run one of the pilot sites. The test sites became live in the spring of 2017 and a great deal of local work has continued to build on current resources to create a sustainable DBI initial response and follow up service as well as to look at the infrastructure across North Lanarkshire to support the development of the DBI processes across all public services.

7.2.2 The overarching aim of the DBI Programme is to provide a framework for improved inter-agency co-ordination, collaboration and co-operation across a wide range of care settings, interventions and community supports, towards the shared goal of providing a compassionate and effective response to people in distress, making it more likely that they will engage with and stay connected to services or support that may benefit them over time.

7.2.3 A Distress Brief Intervention is a time limited and supportive problem solving contact with an individual in distress. It is a two-level approach. DBI level 1 is provided by front line staff and involves a compassionate response, signposting and offer of referral to a DBI level 2 service. DBI level 2 is provided by commissioned and trained third sector service Life Link (North Lanarkshire) who will contact the person within 24-hours of referral and provide compassionate community-based problem solving support, wellness and distress management planning, supported connections and signposting for a period of up to 14 days.

7.2.4 In preparation for the service providers becoming active in DBI interventions in North Lanarkshire, ASP training was delivered to Life Link and SAMH to raise awareness of potential and actual harm issues and reinforce roles and responsibilities in relation to the reporting of adult harm. In addition to this, DBI training to local North Lanarkshire Police Scotland personnel was delivered, again reinforcing the roles and responsibilities of the 2007 Act, but also, assisting local officers to differentiate ASP and DBI situations and consider appropriate pathways for adults experiencing distress in North Lanarkshire.

7.2.5 The DBI project is subject to scrutiny by University of Stirling and a full evaluation of the service will take place to identify good practice and the outcomes being achieved by adults who receive the service here in North Lanarkshire.

## **8. Outcomes**

### **8.1 Quality Assurance**

#### **8.1.1 North Lanarkshire Adult Support and Protection Committee Self-Evaluation Review**

8.1.2 Each year North Lanarkshire ASP Committee undertake a self-evaluation to:

- Consider the effectiveness of the partnership, and
- Review our business plan and identify key objectives for the following year

8.1.3 Our key objectives for 2018-20 and completed business plan was approved at Committee on the 7<sup>th</sup> August 2018.

8.1.4 The first part of the day focussed on effectiveness of the partnerships and identified that some of the strengths of the Committee were:

- Consistency of leadership
- Focus, clear priorities and equity across partner agencies
- Shared commitment to better outcomes for citizens
- Understanding the diversity and scale of the AP agenda
- Effective performance reporting

8.1.5 Some of the challenges were:

- Wider representation from NHSL acute services, homelessness teams and addiction services
- Maintain a clear focus on long term aims and objectives
- Greater focus on outcomes. Better understanding of the adults experience
- Build upon established practice

8.1.6 The Committee have a number of sub groups which offer the opportunity for the work highlighted within the report to be taken forward and progressed. The APC has also taken cognisance of a number of practice audits, performance information and established practice relating to adult protection and incorporated the learning into practice forums and training programmes.

### **8.2 Improvement Plan**

8.2.1 The Committee identified a number of priority areas for 2018/20:

- Care at Home – a significant investment into the ASP training for both local authority and independent Care at Home staff was undertaken and will continue into 2018-19.
- Improving awareness of adult protection in registered Care Homes – an audit on the management of resident on resident incident was completed recently across both North and South Lanarkshire. An event for all Care Home managers will take place on 6<sup>th</sup> November 2018 and will report on the findings as well as raising awareness on areas of good practice and innovative ideas.
- Financial Harm – is an area that the Committee has been heavily invested in raising awareness off, however over the past year this has been overtaken by other priorities.

We have again highlighted this as a priority area and will invest in reviewing our information leaflets and holding local events.

- Service User and Carer Engagement – North Lanarkshire have very positive relationships with our local Service User & Carer Sub Committee. Evaluating the outcome of ASP interventions on adults remains a challenge, however local advocacy services are keen to be actively involved.
- G.P. Engagement – with the introduction of new G.P leads within the Health & Social Care Partnership we hope to improve awareness raising in this area.
- For further reference see (Appendix 1).

### **8.3 Audit**

8.3.1 A variety of audits have been undertaken to examine adult protection practice and future awareness need during 2016 -18:

#### **8.3.2 Case File Audit and Inspection**

A multi-agency case file audit took place in February 2017, in preparation of the announced partnership inspection of Adult Services by the Care Inspectorate, which took place between May and August 2017. The case file audit focused on adults aged 16-65 years with a number of cases that included adults who had been subject to adult protection interventions. The outcome of the review revealed a good standard of practice and performance in adult support and protection.

8.3.3 The inspection by the Care Inspectorate and Health Improvement Scotland was the first in Scotland to focus upon the effectiveness of strategic planning and commissioning within Health and Social Care. The outcome of the inspection identified a range of areas of strengths and some areas for improvement. The full inspection report can be accessed by clicking the following link:

[Health and Social Care North Lanarkshire - Adult Services Inspection 2017](#)

### **8.4 Adult Support & Protection staff Survey**

8.4.1 The Information & Public Awareness Sub-committee has responsibility for identifying the information needs for staff, service users, carers, service providers, and the general public. Over the years we have fulfilled this role through regular adult protection training and awareness sessions for both staff and the public as well as producing a wide range of literature for dissemination through public events, social media and support of the national agenda. The staff survey offered us an opportunity to measure our progress, identify future areas of work and set a baseline to assist with future reviews.

8.4.2 The group agreed to take this work forward by developing a questionnaire that was circulated across health, social work and the local community. With integration of health and social work currently in place and very active participation from our third sector partners through the Service User & Carer Sub-committee it was agreed that this would be the initial target group to complete the survey.

#### **8.4.3 Key Finding of the Survey:**

- In total 608 people took part in the survey from across both agencies and the community.

- Result show that not all participants completed every question however most questions received a full response.
- The second survey completed by NHS staff in September showed that 73% (137) health staff worked within the HSCP, 27% (49) in Acute Care. The May survey highlighted that 67% staff work in SW and 33% worked in “other” areas (includes respondents who work in the wider Enterprise and Housing Resources service, home support, Learning and Development, community alarms, out of hours and emergency service.)
- All three groups felt their knowledge was good, with only 7 participants saying they had no knowledge of ASP.
- The majority of respondents work with service users and 75% of them reported they had a good knowledge of ASP. The remaining participants felt they were quite knowledgeable with only a small proportion with little or no knowledge. Some of this group were involved with service users but not at a grade where ASP practice was an issues (admin etc.)
- 80% (157) of NHS staff and 71% (252) of SW staff report using their learning in their practice.
- 93% of professionals know how to report their concerns; however 25% of the third sector respondents did not which is an area that needs to be progress further.
- Ongoing and refresher training, along with the practice forums were popular suggestions on how we can continue to raise awareness of ASP.
- Further detail is in attached appendices

## **8.5 Review of Referrals**

- 8.5.1 The APC has continued to raise a number of concerns at the increase of referrals for psychological harm and the possibility of this is being used as a “catch all” approach and perhaps distorting other areas of reporting.
- 8.5.2 As a result of this an internal audit was carried out which confirmed that psychological harm was often used as a ‘catch all’ term and can often hide other areas of harm. The updated SW adult protection procedures offer information as to what constitutes psychological harm type incidents, as well as responsibility for the Senior Social Worker to screen the referral to ensure the primary harm judgment is accurately reflected in the information recorded. It is hoped both measures will increase the accuracy of primary harm statistics.
- 8.5.3 Multi-agency adult protection training reinforces the importance of referrers being clear on the area of harm to enable social work staff to conduct more focussed inquiries.

## **8.6 Advocacy Services**

- 8.6.1 North Lanarkshire has a range of advocacy services who are very committed to taking forward the adult protection agenda. Similar to many other councils we have struggled to engage with service users on their experiences when subject to adult protection. On further review local advocacy services have agreed to develop an evaluation form that they will discuss with the

adult at the most appropriate time. At the end of the year they will produce a report on the effectiveness of the partners to deliver positive adult protection outcomes.

## 9. Challenges

9.1 The main challenges for the APC, in no particular order of primacy are:

- Maintaining a focus on adult protection within increased demand on services and particularly in light of increasing financial and service constraints.
- Extending public awareness and understanding of adult protection remains a significant challenge.
- Increasing adult protection awareness with acute NHS Services, Homelessness and Addiction Services.
- Risk threshold and risk enablement and practice within adult protection.



North Lanarkshire  
Adult Protection  
Committee

## North Lanarkshire Adult Protection Committee Action Plan 2018 - 2020

### SELF EVALUATION IMPROVEMENT ACTIONS

No	Action	Lead	Target completion date	Evidence Measure	Progress
SE01	Improve connection of Adult Protection Committee (APC) to public protection and partner governance structures	APC chair / APC Co-ordinator	2018/19 2019/20	<ul style="list-style-type: none"> <li>• Rab to update Support Care and Clinical Governance (IJB/NHS) twice a year</li> <li>• Annual APC Report submitted to Support Care and Clinical Governance (IJB/NHS)</li> </ul>	
SE02	Improve mechanisms of APC to support practice awareness & improvement	APC chair / APC Co-ordinator	2018/19 2019/20	<ul style="list-style-type: none"> <li>• Practitioner Forums</li> <li>• S.U &amp; C Forums</li> <li>• APC Training</li> <li>• 3<sup>rd</sup> Sector Forums</li> </ul>	
SE03	Improve sub-group relationship with APC	APC chair / APC Co-ordinator / Sub-group Chairs	2018/19 2019/20	<ul style="list-style-type: none"> <li>• Sub-group membership and leads reviewed</li> <li>• Sub-group action plans reviewed</li> </ul>	

No	Action	Lead	Target completion date	Evidence Measure	Progress
SE04	Improve sub-group action planning and reporting	APC chair / APC Co-ordinator / Sub-group Chairs	2018/19 2019/20	<ul style="list-style-type: none"> <li>• Sub-group member(s) attends APC regularly to feedback on progress and support.</li> <li>• Annual reports from sub groups</li> </ul>	
SE05	Benchmark APC across other APC's to understand and improve performance	APC Co-ordinator	2018/19 2019/20	<ul style="list-style-type: none"> <li>• National Data Set reporting</li> <li>• Links to SWS National Group and West of Scotland Group</li> </ul>	
SE06	Improve accountability of partners for APC concerns within their organisations	APC Chair / All APC members	2018/19 2019/20	<ul style="list-style-type: none"> <li>• Notification Protocol developed to share information on incidents</li> <li>• Review process in place to recognise and share learning from incidents</li> </ul>	
SE07	Ensure APC is informed of legislative and policy changes which affect it	All APC members	2018/19 2019/20	<ul style="list-style-type: none"> <li>• Members update APC on policy/legal changes which impact on their organisation and APC</li> </ul>	
SE08	Strengthen relationships between APC partners	All APC members	2018/19 2019/20	<ul style="list-style-type: none"> <li>• Strengthened APC and sub-group relationships</li> <li>• Induction programme for new APC members</li> <li>• Annual event for the APC and wider sub group membership.</li> </ul>	

No	Action	Lead	Target completion date	Evidence Measure	Progress
				<ul style="list-style-type: none"> <li>• Self-Evaluation and Annual Report on APC activity and wider links to the APC.</li> </ul>	
SE09	Ensure progress is measurable and monitored	APC chair / APC Co-ordinator / Sub-group Chairs	2018/19 2019/20	<ul style="list-style-type: none"> <li>• APC action plans are SMART and regularly reviewed</li> <li>• Annual report is in place to measure progress</li> </ul>	
SE10	Ensure risks are reduced by clear APC understanding of referral thresholds	Monitoring, Reporting & Audit sub group	2018/19 2019/20	<ul style="list-style-type: none"> <li>• Review referral thresholds with partner agencies</li> <li>• Current review of “Police Concern” reports</li> <li>• Identify associated risks and develop mitigation measures through regular audits</li> <li>• Identify and implement improvements to referral reporting processes</li> </ul>	

## PRIORITY 1 – CARE HOMES

No	Action	Lead	Target completion date	Evidence Measure	Progress
CH01	Undertake an event to improve understanding of resident on resident harm	APC Chair / APC Co-ordinator	November 2018	<ul style="list-style-type: none"> <li>• Event delivered for Care Homes staff</li> </ul>	
CH02	Improve learning on resident on resident harm and identify areas for improvement	APC Chair / APC– Co-ordinator	2018/19 2019/20	<ul style="list-style-type: none"> <li>• Undertake survey of participants</li> <li>• Assess outcomes and identify improvement actions</li> </ul>	
CH03	Support the improvement of risk management within care homes	Monitoring, Reporting & Audit sub group	2018/19 2019/20	<ul style="list-style-type: none"> <li>• Review risk management processes in place</li> <li>• Identify and action improvements through Social Work Commissioning processes</li> </ul>	
CH04	Establish processes to ensure that APC have clear understanding of Resident on Resident assault prevalence and patterns	Monitoring, Reporting & Audit sub group	2018/19 2019/20	<ul style="list-style-type: none"> <li>• Review statistics to identify quantity, patterns and areas of good practice.</li> <li>• Undertake research to improve understanding of Dementia management.</li> <li>• Undertake training for APC and staff as required</li> </ul>	

## PRIORITY 2 – GP ENGAGEMENT

No	Action	Lead	Target completion date	Evidence Measure	Progress
GP01	Support a clear understanding AP responsibilities within the locality setting	All APC members	2018/19 2019/20	<ul style="list-style-type: none"> <li>• Locality link leads connect with clinical fora or clusters</li> </ul>	
GP02	Improve knowledge and understanding of AP and the wider public protection agenda with GPs	All APC members	2018/19 2019/20	<ul style="list-style-type: none"> <li>• Develop and deliver educational events on Public Protection/MAPPA for GPs</li> </ul>	
GP03	Continually develop and improve GP AP learning	Training sub-group	2018/19 2019/20	<ul style="list-style-type: none"> <li>• Obtain feedback on learning event(s)</li> <li>• Identify improvements and implement</li> </ul>	

## PRIORITY 3 – FINANCIAL HARM

No	Action	Lead	Target completion date	Evidence Measure	Progress
FH01	Increase awareness raising on Financial Harm to include wider staff group, carers and public	Training sub-group	2018/19 2019/20	<ul style="list-style-type: none"> <li>• Deliver training through APC on financial harm</li> <li>• Evaluate training course</li> <li>• Identify learning and implement improvements</li> </ul>	
FH02	Widen reach of Financial Harm training by incorporating into current APC training programmes	Training sub-group	2018/19 2019/20	<ul style="list-style-type: none"> <li>• Review training and incorporate financial harm</li> <li>• Deliver, evaluate and identify improvements</li> </ul>	
FH03	Include training on financial harm within partner training programmes	Training sub-group	2018/19 2019/20	<ul style="list-style-type: none"> <li>• Partners on APC to identify training links within their organisations</li> <li>• Courses adapted to include Financial Harm</li> <li>• Impact assessed</li> </ul>	
FH04	Ensure an awareness of Financial Harm is included in partner financial assessment processes and public information.	All APC members / Information Sub Group	2018/19 2019/20	<ul style="list-style-type: none"> <li>• AP partners provide assurance to APC on these processes.</li> <li>• Review and reprint financial harm publicity materiel.</li> </ul>	

## PRIORITY 4 – CARE AT HOME

No	Action	Lead	Target completion date	Evidence Measure	Progress
CAT01	Ensure an understanding of Adult Protection within commissioned services	Training sub-group	March 2019	<ul style="list-style-type: none"> <li>• Deliver training sessions to commissioned service providers</li> </ul>	
CAT02	Assess impact of training through changes in referrals	Training sub-group	March 2019	<ul style="list-style-type: none"> <li>• Monitor referrals over a specified period</li> <li>• Assess changes</li> </ul>	
CAT03	Learn from actions (CAT01, CAT02) and identify groups of commissioned staff where training should be expanded	Training sub-group	March 2019	<ul style="list-style-type: none"> <li>• Review undertaken and staff groups identified</li> <li>• Training developed and timetabled</li> </ul>	
CAT04	Assess need to expand training to include frontline staff in other areas, third sector staff and supported providers.	Training sub-group	March 2019	<ul style="list-style-type: none"> <li>• S.U &amp; C Sub Group Determine resource requirements</li> <li>• APC consider next steps</li> </ul>	

## PRIORITY 5 – SERVICE USER AND CARER EVALUATION

No	Action	Lead	Target completion date	Evidence Measure	Progress
SUC01	Strengthen relationships with NLC Advocacy services to support service user involvement	S.U & C Sub Group	2018/19 2019/20	<ul style="list-style-type: none"> <li>• Evidence of engagement</li> <li>• Evidence of improved involvement</li> </ul>	
SU02	Maximise use of other involvement mechanism to strengthen service user and carer voices	S.U & C Sub Group	2018/19 2019/20	<ul style="list-style-type: none"> <li>• Develop links to wider IJB and partner involvement and engagement processes</li> <li>• Seek support for recognition of AP agenda</li> <li>• Seek views of users and carers as appropriate</li> </ul>	
SUC03	Improve linkages with People First to ensure service user voice is recognised	S.U & C Sub Group	2018/19 2019/20	<ul style="list-style-type: none"> <li>• Evidence of engagement</li> <li>• Evidence of improved involvement</li> </ul>	
\SUC04	Improve linkages and engagement with young people.	S.U & C Sub Group	2018/19 2019/20	<ul style="list-style-type: none"> <li>• Scope the needs of young people and ASP.</li> <li>• Review and print ASP age appropriate information</li> <li>• Engage young people through local events.</li> <li>• Encourage participation of young people in ASP</li> </ul>	