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# Introduction

The Adult Support and Protection (ASP) (Scotland) Act 2007 was introduced to protect adults at risk of harm. All Health & Social Care Partnerships are required to have procedures in place which ensure the safety and wellbeing of any adult deemed to be at risk of harm. The Glasgow City Adult Protection Committee (APC) has implemented procedures which promote health and well-being with the aim of strengthening, safeguarding and protecting vulnerable people.

The ASP Service User Sub Committee is a sub group of the APC and has representatives mainly from North East Locality Engagement Forum, People First and the Glasgow Disability Alliance. The representatives are meaningfully involved in supporting and contributing to the work of the APC.

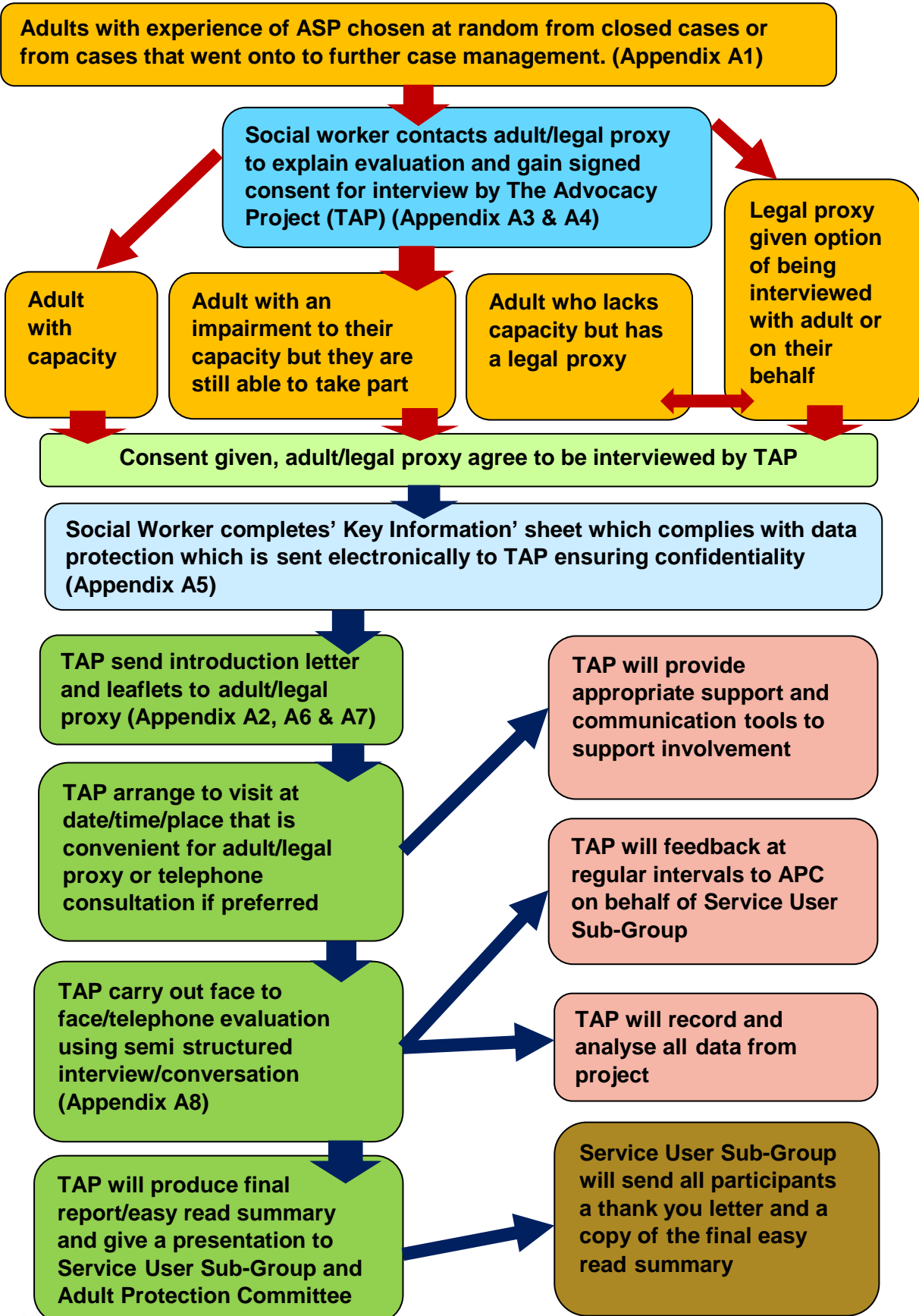
The ASP Sub Committee commissioned The Advocacy Project (TAP) to consult with a number of individuals who had recently been subject to ASP legislation. TAP is an independent, rights based advocacy provider in Glasgow and this consultation was facilitated by their Engagement & Involvement team.

The intention of the project was to allow participants to reflect on their experience and in doing so help to shape future strategy and inform practice. Participants were selected at random from recently closed cases which included a mix of client groups and issues. All the participants' cases had progressed to the protection planning stage.

This report contains a selection of the participant's views and perceptions based on their own personal experience. There are also some stories of change which highlight participant's views on how ASP legislation was used in their cases.

The lay out of the report is structured around questions which the participants were encouraged to discuss in a relaxed and informal setting, using an informal, semi structured, conversational approach. The focus is not in the statistical information gathered but in the collation of the perceptions that participants had about how they were treated and their personal outcomes.

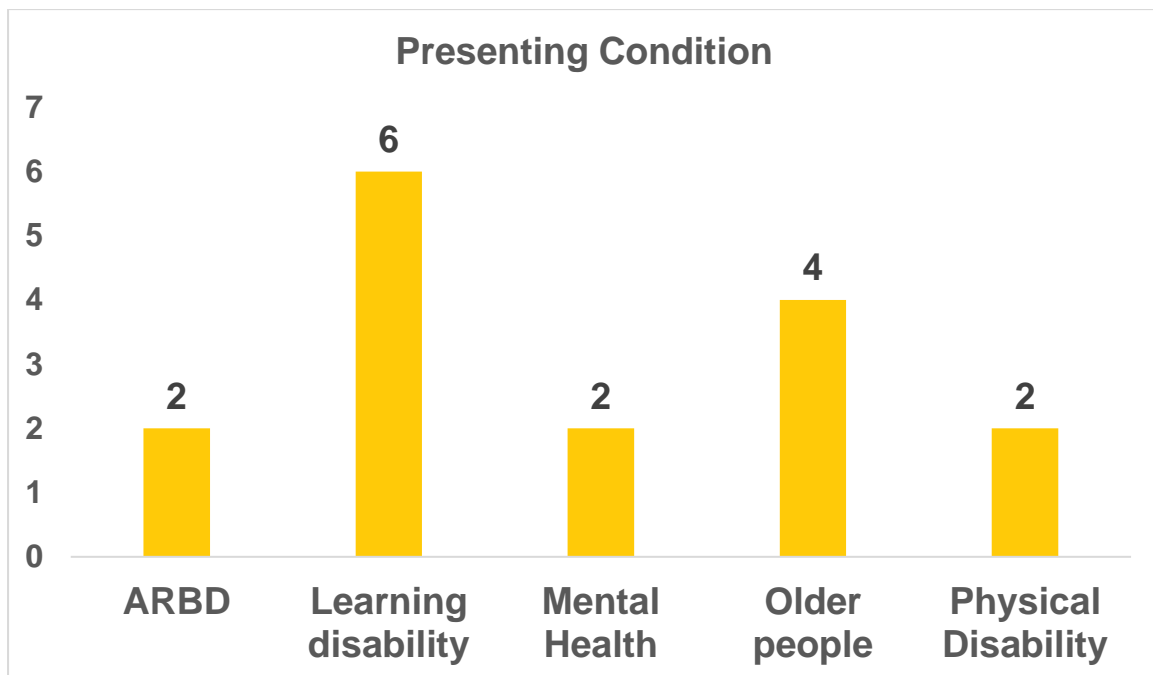
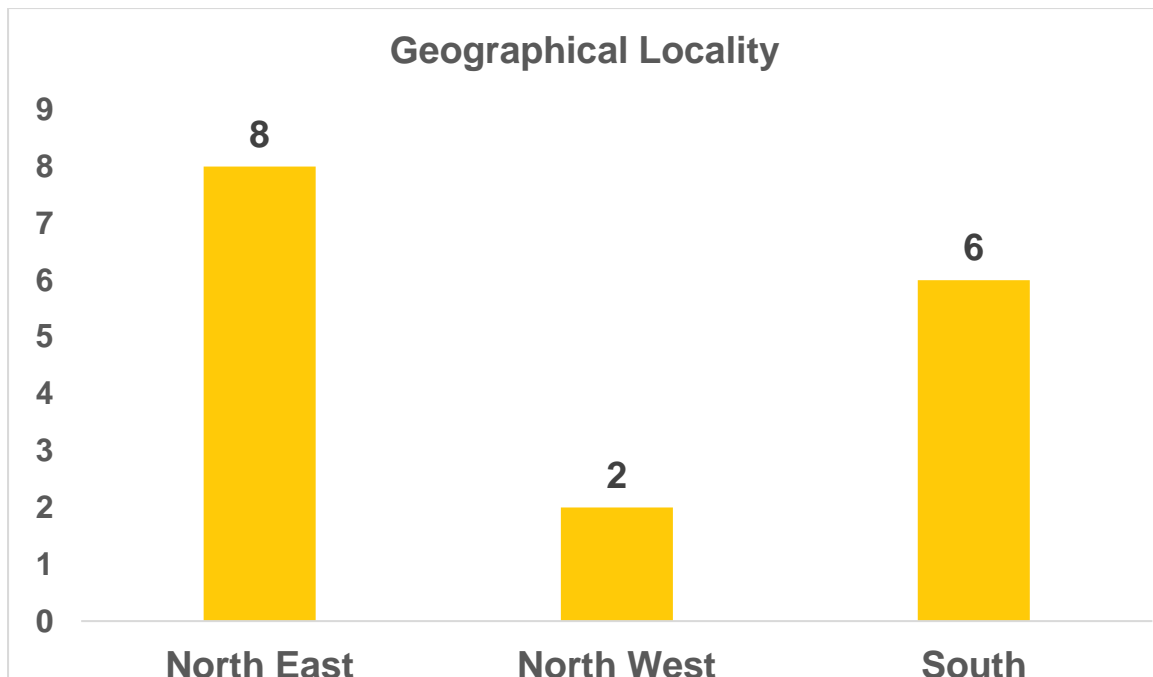
# Method

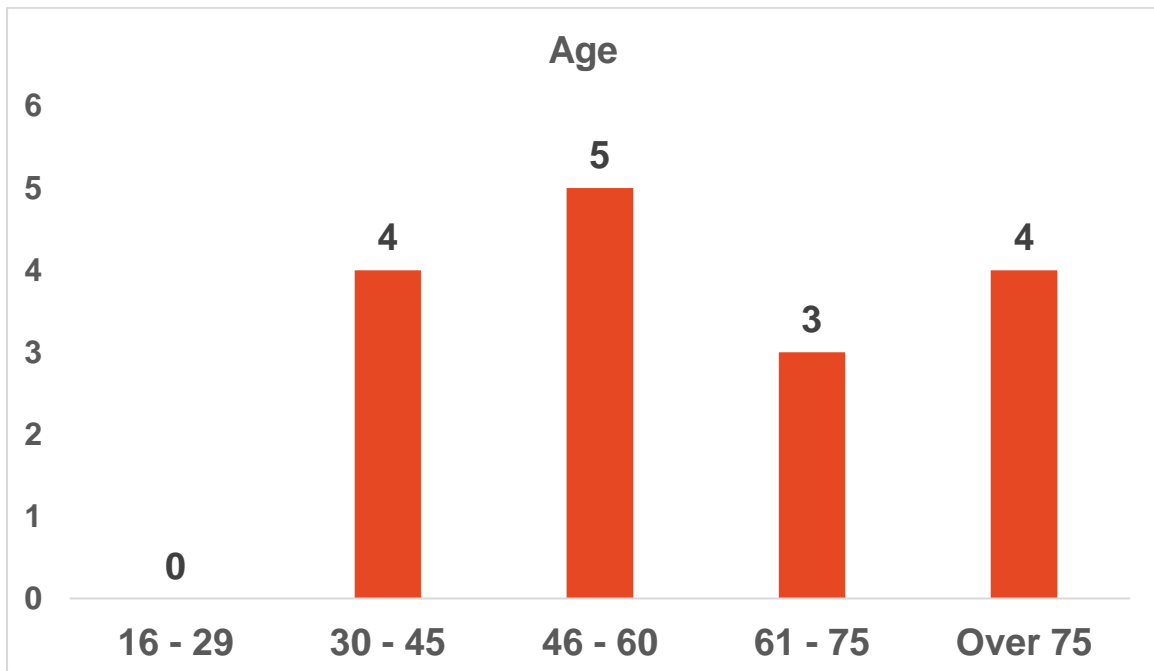
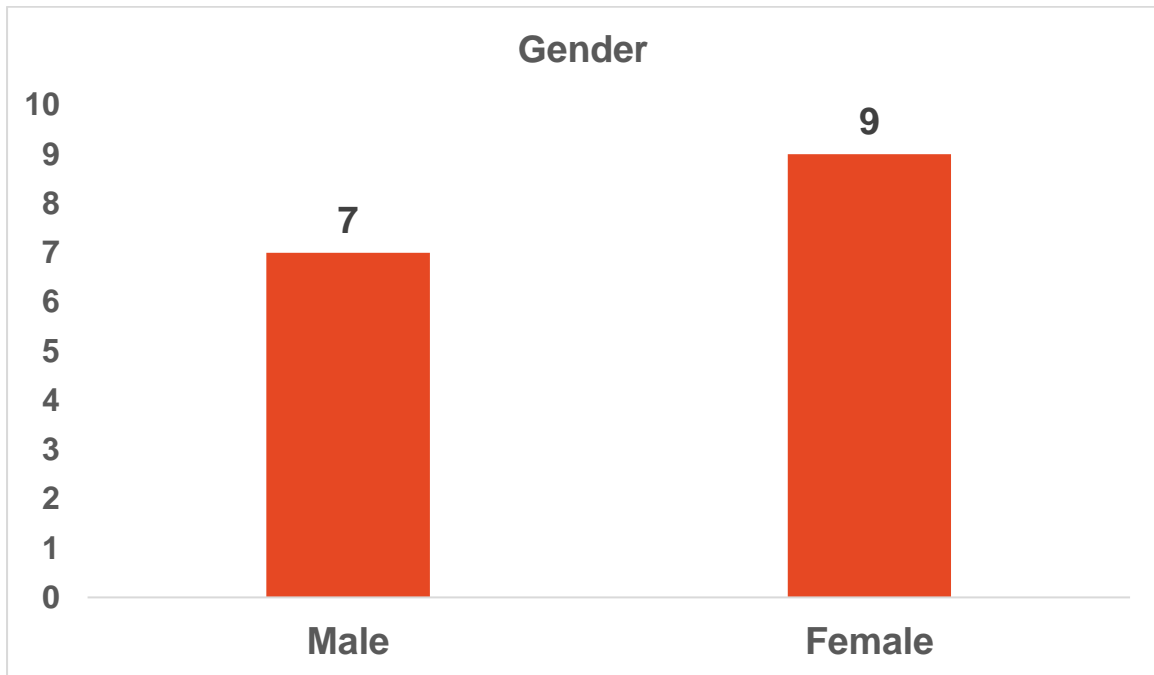


The consultation period ran for a period of 4 months. The first interview took place in late April 2017 and they were completed by late Aug 2017. This gave as many individuals as possible the opportunity to take part. Although 26 individuals initially gave consent to take part during the consultation period, 10 individuals were unable to take part due to various reasons i.e. bereavement, admission to hospital or deterioration in mental health.

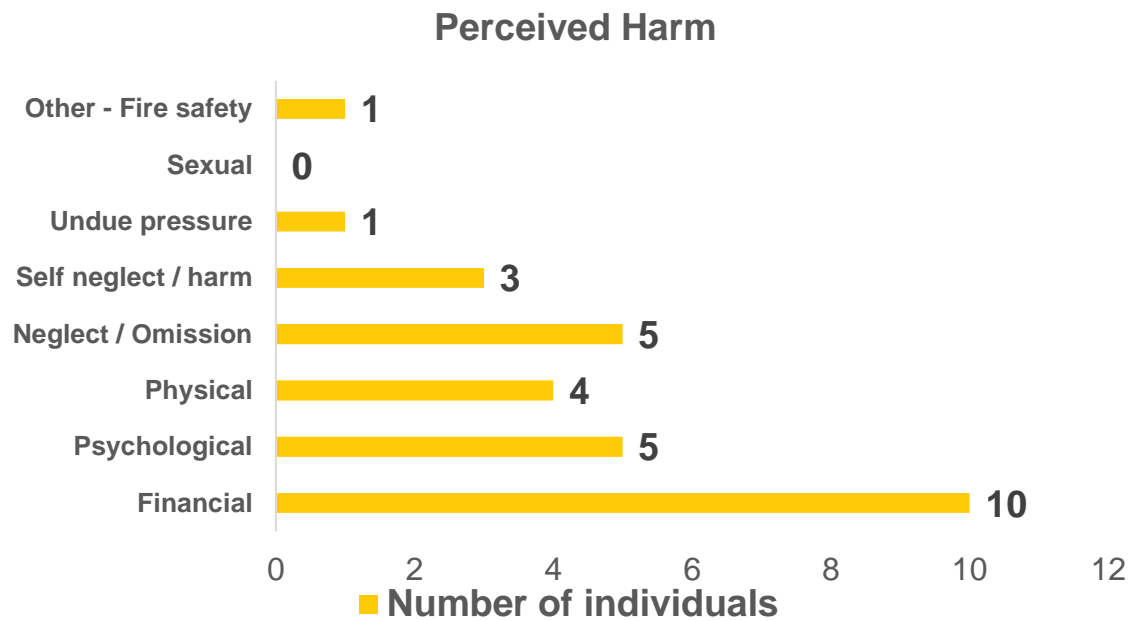
All of the following results are collated from the individuals who completed the consultation.

# Breakdown of Participant's details





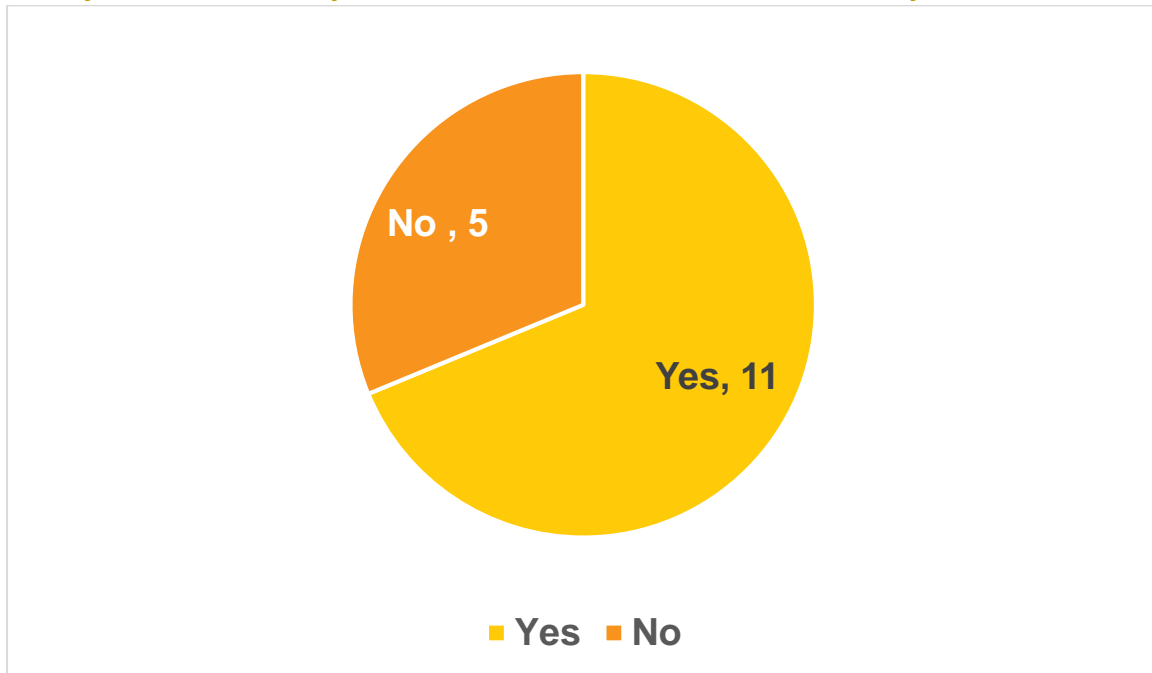
The following chart records the type of perceived harm recorded by social work at the investigation stage. Some individuals were considered to be at risk of more than one type of harm.





# Initial Involvement

Did you know why someone was worried about you?



All of the participants had prior involvement with social work. Just over two thirds of participants understood why someone might be worried about them and agreed with this.

“I agreed with them that something bad could happen.”

“They were worried about me hurting myself and my medical condition.”

10 participants were perceived to be at risk of financial harm. In many of these cases there was also thought to be psychological harm or undue pressure. In all of these instances of financial abuse the alleged perpetrator was also someone the person trusted. This contributed to many of the individuals feeling helpless and unable to disclose to anyone what was happening.

“It was about my money”

“I was getting taken advantage of and couldn't get out.”

“They were taking advantage of me, my house and my money.”

Around one fifth of the participants did not agree that they had been at risk of any type of harm.

“No, I didn’t understand the worry or see any risks.”

“I understood why they were worried but I wasn’t unsafe”

“I felt I was being hounded and my mum had just died.”

Two participants had felt they were at serious risk of harm but that it had been difficult to get services to recognize this until crisis point.

“Social work knew what was going on but nothing happened until I called the police, then suddenly everyone was involved.”

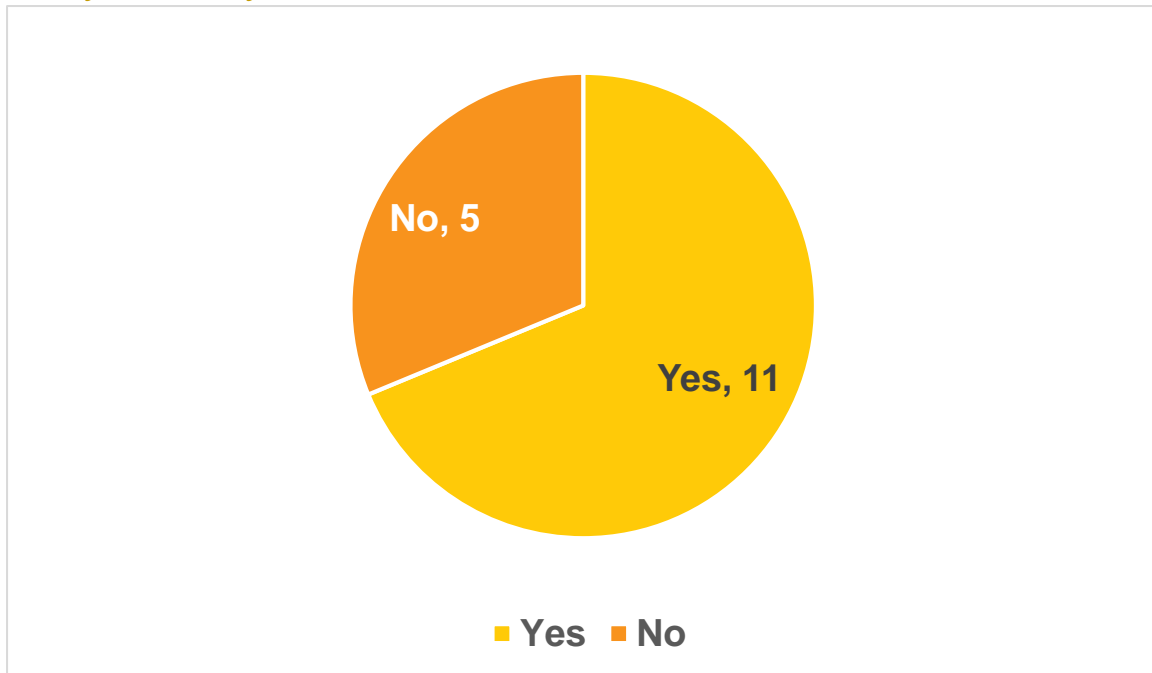
“If it hadn’t been for the workers in the night shelter, I wouldn’t be here now, I would be dead.”

In one case a legal proxy had notified support services of mismanagement of medication which posed a serious risk to the person they were responsible for safeguarding. They also notified social work and the Care Inspectorate but it was only investigated as ASP after the person was admitted to hospital after medical overdose.

“I felt my mother was at serious risk of harm. No one listened until it happened.”

The legal proxy felt that the authorities had not acted quickly enough to ensure this persons safety.

## Did you feel you were at risk of harm?



The participants who understood why someone may be worried about them also agreed that they were at risk of harm. Many of the participants were vulnerable and had emotional involvement with the alleged perpetrators. Seven participants had an impairment to their capacity and were not aware of some of the risks they were exposed to.



“No, I didn’t know anything about it until I was accused of mismanaging their money at a case conference.”

“No one said anything before the ASP began although I had managed for years without support, now suddenly I was at risk.”

Five participants and their legal proxies didn’t know anything about the perceived risk and felt that their cases could have been dealt with without going to ASP. They felt that better communication and discussions with them at the investigation stage would have solved their particular issues.

During this consultation period there was a large scale ASP investigation carried out on a care provider. Two legal guardians for individuals agreed to take part in the consultation to represent the views of the individuals who were perceived to be at risk.

In both cases the legal guardians felt the communication was very poor from both social work and the care provider. They are both very involved in their family member’s lives. They were not given any indication about concerns about their family member’s care, nor about ASP proceedings in the early stages. One proxy only found out about the ASP when they visited their family member only to find social workers in the family member’s home. They were told ASP concerns had been raised and asked questions about any concerns they may have about the care provided.

The only reason they were given about the investigation taking place was that “Everyone’s support was being reviewed because of concerns raised at another property.”

“If we had any concerns we would have raised them ourselves”

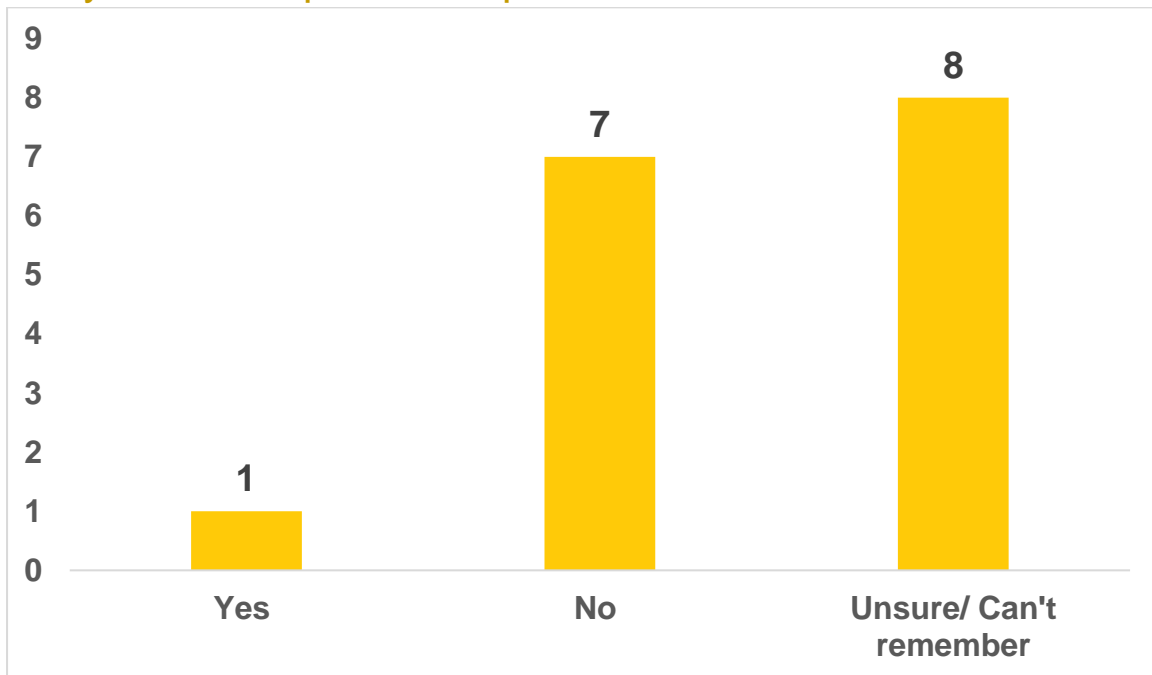
“I did not agree that X was at any risk”

In both cases the guardians stated that the “ASP process has had a negative effect on this persons health & wellbeing and their quality of life had deteriorated as a result.”

They both felt the process was unnecessary and concerns could have been dealt with in a different way.

# The Process

## Did you have a protection plan?



Only one participant said they had a protection plan and they found this to be a useful document.

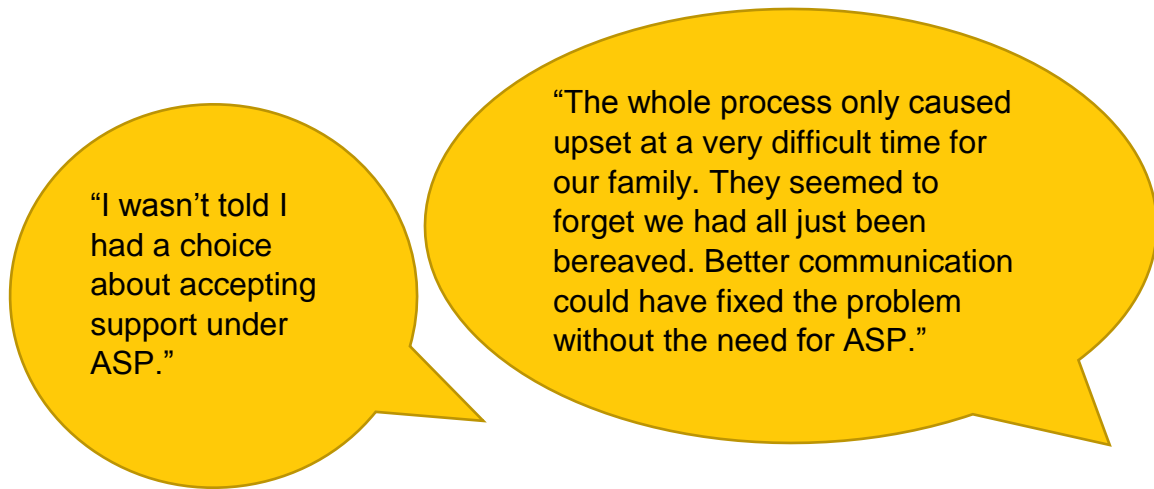
“My protection plan has details about how I can keep myself safe.”

The other participants did not identify with having a protection plan. Some said it may have been mentioned but didn't recall an actual plan being drawn up. Others said they definitely didn't know anything about a protection plan

“A protection plan? That doesn't mean anything to me.”

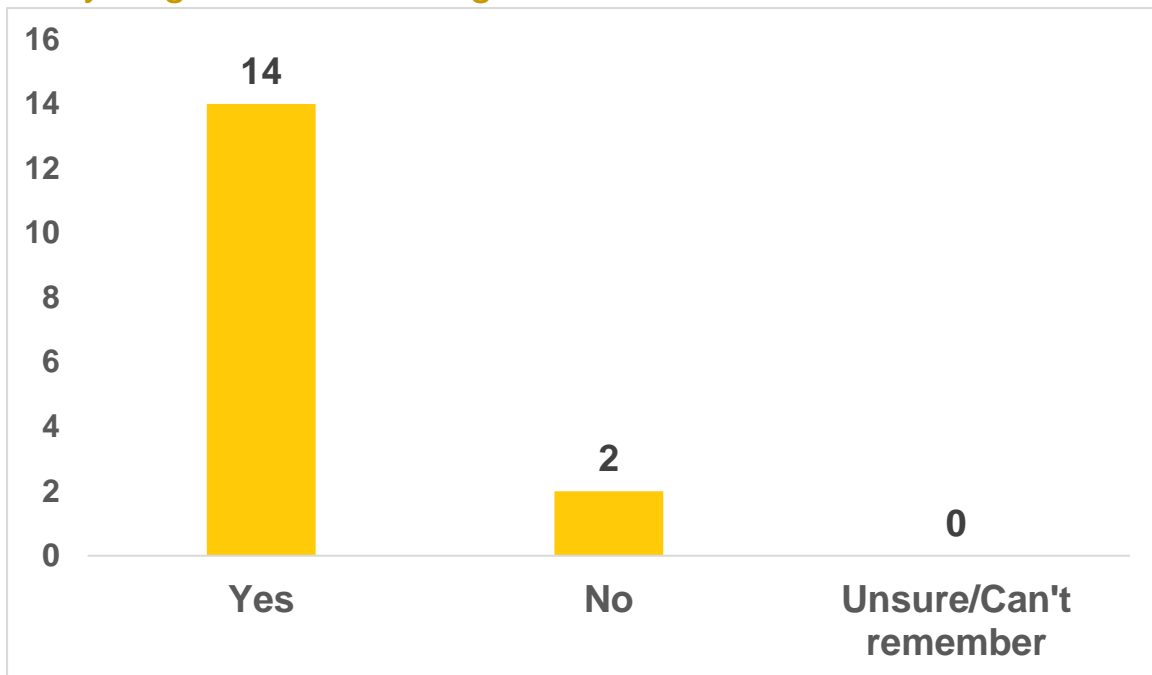
“I don't know what a protection plan is.”

Ten individuals also said that they did not know or had not been advised that they could choose whether to accept the support on offer from ASP. If they had known this they would not have allowed it to progress.



Eleven individuals said they were not given any information or leaflets on ASP or any written information about their own case. The other five participants couldn't recall being given any written information or leaflets about ASP. All of the participants felt that having easy to understand information, explaining the process and the details of the act would have made them feel more informed and in control during the process and help them to understand the various stages of the process.

## Did you go to the meetings?



Fourteen of the participants attended the ASP case conferences and related meetings. Only two participants did not attend and this was mainly due to physical barriers and illness.

“The biggest problem was that I didn’t go to the meetings, I can’t leave my house”

Although nine of the participants felt they were given appropriate care and support as a result of the discussion at meetings, the others felt that their views were an afterthought. Only four participants felt listened to during the meetings. Comments about the experience at meetings varied but many reported feeling intimidated, nervous, anxious, and overwhelmed.

“I did go to the meetings but they were scary and made me nervous.”

“I don’t feel they listened to my views.”

“I agreed with the decisions made but I didn’t feel listened to.”

Ten participants also reflected that they didn't feel very included or meaningfully involved.

"At the meeting, I didn't know the people that were there."

"I didn't feel respected during the process, I was made to feel like a pest."

"I didn't say anything for the first couple of meetings"

"There were 10 people around the table (2 in uniform) – I didn't really know any of them and I felt my life was laid bare across the table."

"They kept calling me the carer, this was about my mum. (They didn't even ask me what we would like 'her' to be referred to during the proceedings). They kept talking about care and carers but none of them really care. It's so impersonal."

Fourteen participants said they felt the structure of the meeting was wrong. Nearly everyone felt that they should be asked if they wanted to speak before hearing everyone else's opinion on what is happening in their lives.

"I went to the meetings but they all spoke first and I wasn't able to answer them all back."

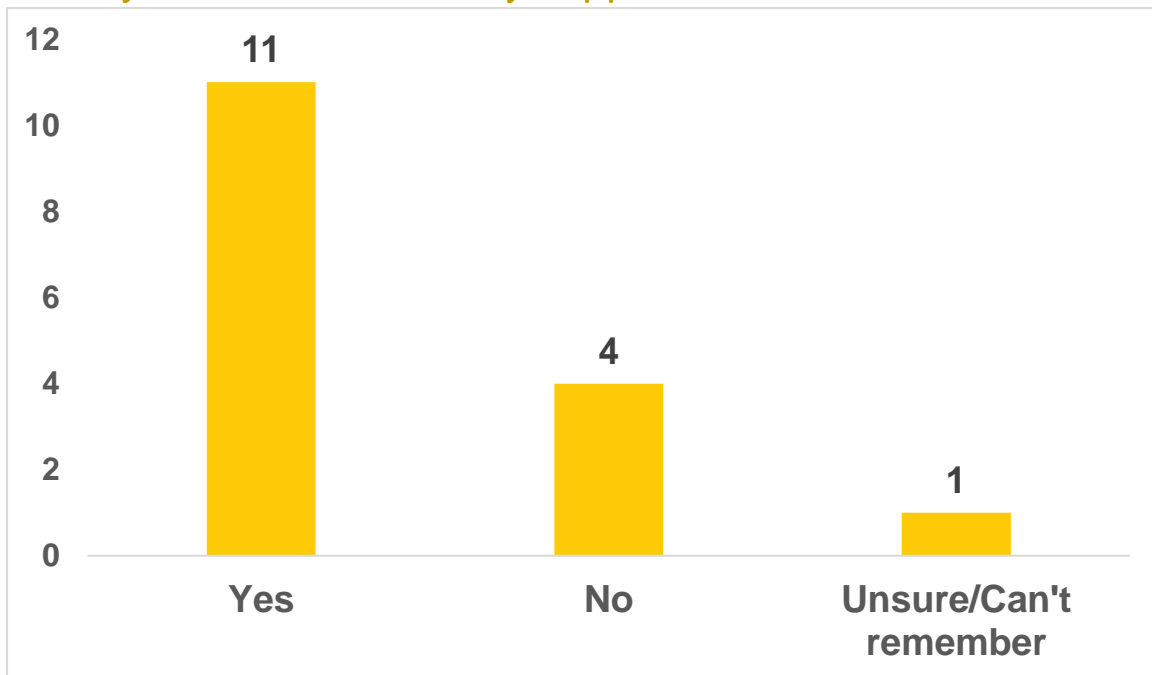
"You are sat there with all of these people talking about YOUR LIFE."

"They sit there and talk about you as if you aren't there"

"They all spoke first and then it was me but surely it should have been me first, it was all about me."



## Were you offered advocacy support?



Just under one third of the participants did not have any advocacy support throughout the process. This was either because they were not told about this additional support, couldn't remember being offered it or felt it wasn't explained very well.

"I don't think that social work explained advocacy very well. I think it would have been good to have someone there to talk to about it all after coming out of meetings, go over my options."

When the role of advocacy worker was explained, most of these individuals said they would have taken the support if they had understood what the advocacy role would have been and had known about the type of support an advocacy worker could offer them.

"The only thing missing was having someone there to speak to after the meetings when my emotions were all over the place and then trying to remember everything."

All of the participants who had advocacy support reflected that they felt more informed throughout the process and that it was very valuable helping them feel more in control. Those who had an advocacy worker reported feeling better prepared for the meetings and more meaningfully involved during the meetings. Many also said they had a better understanding of their rights which helped them in their decision making.

“I had advocacy and they helped”

“The advocacy was brilliant.”

“Advocacy helped me think about what I wanted to say at my meetings.”

“Things got explained more by advocacy than at the meetings or by my mum or dad.”

“Having advocacy was very helpful, it helped me put across what I wanted to say and helped me understand what was happening.”

Participants valued the time that their advocacy worker could spend with them before and after meetings, explaining anything that was unclear. Three participants said their advocacy workers used communication tools to help their understanding of the proceedings.

“My advocate explained thing in a way I could understand.”

“My advocacy worker used pictures to help me understand what was happening.”

## Taking account of the adults perceptions

Some participants reflected that although they understood various services, organisations and individuals have to give a view on their cases the meetings are so impersonal, "it makes you feel as though you don't exist". They reflected that sometimes social work etc. fail to take into account how you are feeling emotionally or understand how the situations may impact on you as a person. Many of the cases are very complex and people may have never had this level of involvement in their lives before.

"I drove into the car park and saw the police car and knew they were there for my meeting."

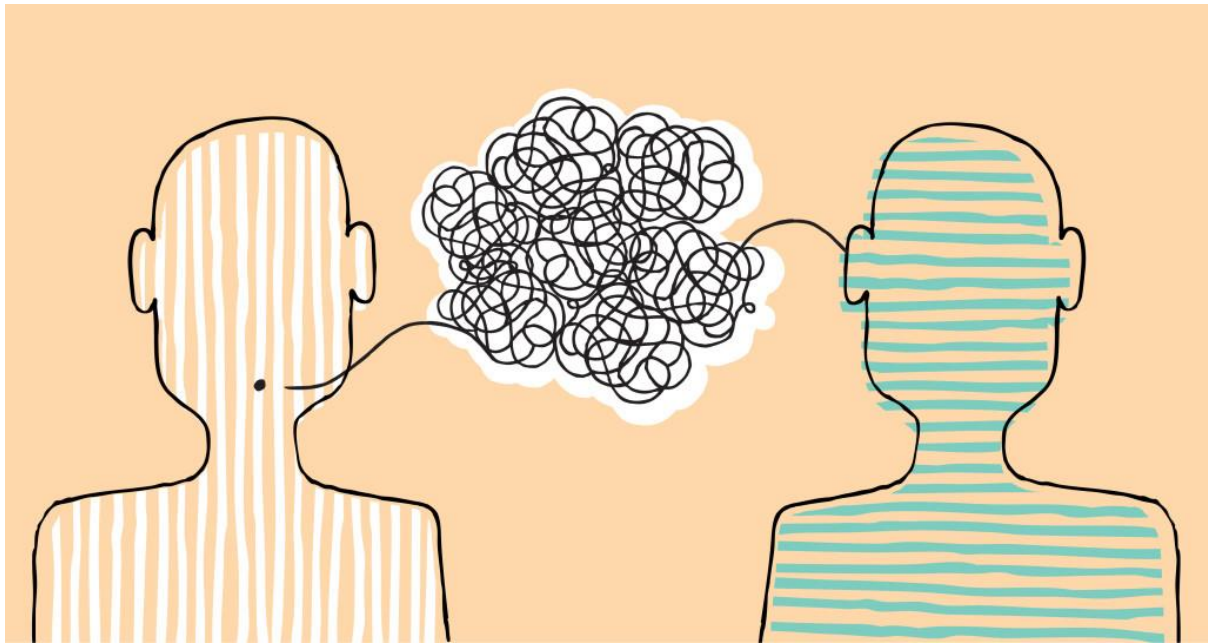
"I understood they were all there to help me but still I felt I was being judged."

"I had never shared what was happening – not even with my family."

"At the end of the meeting they all rushed off to get on with their busy day and I was left sitting in my car thinking "What just happened"."

Participants did understand that social work, police and other services have a duty to make you safe and be professional but a little more compassion and showing a more human side would help to make people feel more at ease.

## Communication, was it sufficient?



A common theme in all of the participants comments about the ASP process are about lack of knowledge and understanding of the process. No one could recall being given leaflets, written information or information in alternative formats. Access to information, knowledge and understanding is empowering and helps people feel more engaged in the process and involved in the decision making process. Some participants felt this information would have helped them understand their rights especially the principles of it being of benefit to the adult and being the least restrictive option. A number of participants suggested an information pack for any person going through this would be really useful. Other participants felt they might need some additional support to understand it as well as leaflets etc. Other suggestions were made about the language used at meetings perhaps being changes or simplified to aid understanding.

“We didn’t receive any leaflets or information.”

“I would have liked easy read information”

“They used jargon the whole time”

“Some of it went way above my head. They could have explained what was going to happen in a better way.”

“I can’t remember being given information about ASP.”

# The Outcomes

Has this process...?



Nine participants felt safer as a result of ASP proceedings. This was for a variety of reasons; new support packages, changes to support staff, moving to a different care home, assistive technology and different safety features fitted in individual's homes. This resulted in people feeling more content and happier. For five of these individuals, it has also resulted in them having more money.



One participant is the main carer for their son who has autism and OCD, they have a very close relationship. The son accesses a service which supports him in the community but he became the victim of harm and was subject to ASP proceedings. These events were very stressful for the family and impacted on his behaviour which changed towards his mother, putting her at physical and emotional risk. The participant was reluctant to share this with anyone as they felt they were letting their son down if they contacted the police. "I felt I had failed my son. I was admitting I couldn't cope or keep myself safe." The participant was subject to ASP proceedings which they credit with possibly saving their life.

Three participants felt that the process had a negative effect on their lives and did not feel safer as a result of proceedings. These individuals felt the process had impacted on their mental health and general wellbeing and all for no benefit.

"They have made changes for no reason that have made X's life worse"

"This has made no difference in my life, in fact it has just been upsetting."

"One comment that sticks in my head from all this is that after the issue had been raised about a support provider, their manager said that "they were her best workers". If so, I dread to think what could have happened had they not been the "best workers"."

Four participants felt the process had made no difference at all to their circumstances. All of their cases were very complex with no easy solutions.

"This process hasn't really made any difference, not really."

"No difference for me. I am stuck here in this care home and I hate it"

"It's all still the same."

Two of these cases involved financial abuse and the adults' money could not be retrieved. These individuals did not feel there had been any beneficial outcomes for them personally and had impacted on their quality of life.

"The ASP has been closed but I still want to know what happens to the person who took my money, did they go to jail?"

"No one will be able to get my money back, will they?"

The views on quality of life improving after the proceedings were split almost 50/50. This was because although individuals felt they were safer they had perhaps had to move to a different area or were still waiting on a new home or they had less money.

"I felt quite isolated, I didn't want to burden my family."

"We could still have more support."

Four participant felt that someone should have acted quicker to make them safe. These participants were all already known to various services

"They could have helped me quicker."

"Getting everyone round the table enabled them to see how serious the situation was and it made them sit up and take notice."

"It hasn't been a smooth ride but we got here"

The other participants felt that they were made safe as soon as the risks were identified. They were also happy that they were given enough support although for some individuals it took a little time to get the type of support they required or the right quality of support put in place.

“The ASP happened quite quickly after I reported how unhappy I was.”

“I’m an independent person but social work did help me.”

“I don’t think there is anything that could have been done better”

Five individuals they felt that the ASP process had intervened in their lives at a point where they were at very serious risk of harm and feel it has made all the difference, making them safer.

“Difference – I wouldn’t be sitting here now.”

“Things are better. I’m in control now.”

Three other individuals who took part in the consultation they felt that they process did not take into consideration their views or wishes. It can cause tension between family members and friends and cause upset and upheaval where it has not been necessary.

“It’s my choice if I want to give my grandchildren money or give my family my bank card and pin number. I didn’t need any help with my money. My bills are paid, I have money and they get my shopping for me.”



A participant who is a carer and legal guardian for their mother and father was alleged to be a perpetrator of financial harm. They had cared for their mother and father at home when the mother had a stroke and cancer diagnosis and the father had been diagnosed with dementia. Their mothers condition became terminal and so the father went into a care home for respite. They made monthly payments for the cost of care and were given some forms to complete. However as they were focusing on the mothers care, they never got around to sending the forms. A few weeks later the mother died and this is when the concern was raised about how they were managing the father's finances. "The finance issue with my dad all kicked off when my mother was dying – it was horrible. It's made me feel wary of things for the future."

# Conclusion

Everyone has a different perception as to what constitutes harm. It is difficult sometimes for someone else to understand the complexity of an individual's ASP case. When a disclosure is made that someone may be at risk of harm it is often not the adult themselves who has reported it. Many individuals are too afraid or ashamed to disclose risks as often the perpetrator is someone related to them or involved in their care. Sometimes in cases of financial harm the adult is unaware that they are at risk.

## What is working well?

When an ASP concern is raised people feel that things happen quickly to make them feel safe. Often, in cases of psychological harm, the adult had felt relieved that they were now being supported and the issues could hopefully be resolved.

Individuals reported having enough support put in place as a result of ASP from many different agencies, social work, health, support providers, housing associations etc. Those who had advocacy support throughout the process found this very helpful. Many people feel safer and can attribute changes in their lives to ASP that were beneficial. All of the participants said they would tell someone in future if they had any concerns and had someone they would disclose to. This may be a family member, friend, care provider or social worker.

## What could be improved?

Some of the cases took a little time to be raised as ASP concerns and the adults involved felt somewhere along the chain someone should have disclosed concerns sooner.

## Communication

Many of the suggested improvements are related to communication. This is from the beginning of the process through to its conclusion. Participants would like more easy to understand information which explains their rights under the legislation, what to expect during the process, the different support that is available to them including advocacy, what happens at meetings and what say they have in the decisions that are made.



This could be in the form of leaflets, handouts, accessible information or having someone explain this to them.

Much better explanations are needed about protection plans as very few people understood what they were or had a copy of their protection plan.

### Meeting Etiquette

Although most of the participants attended meetings, they felt they were not very welcoming or inclusive. Suggestions range from looking at where the meetings take place, how meetings are conducted, the order of proceedings and taking a more human approach to make people feel less anxious, nervous and judged. Issues for many people are the numbers of people in attendance at their meetings who are often people they don't really know. Nearly everyone said they were the last person asked to speak at meetings. Most feel they should speak first at meetings. It would make people feel more listened to and more meaningfully involved if some of these issues were tackled. Most want to be involved in the decision making process so they feel a sense of being 'part of the problem solving process' rather than it being 'done to you'.

### Perceptions

In cases where people do not agree with the risk of harm, ensuring that they understand as much as possible the reasons behind the action taken would help. Explaining why their wishes seem to be disregarded and exploring the least restrictive option would maintain engagement, particularly in cases where there is undue pressure or the person does not have capacity to understand why they are at risk.

Participants have given many suggestions for small changes to the ASP process which they feel could improve the experience for them and for others in the future.

## ACKNOWLEDGEMENTS

The Advocacy Project would like to thank all those who took part and chose to share their experiences with us and all practitioners who contributed to the facilitation of the process.



## Appendix 1

# Information for Social Work Teams

### **Adult Protection Service User Evaluation**

The focus of the evaluation will be on the experience of adults who have been the subject of adult protection procedures, and also the outcome as experienced by the adult of the intervention.

Advocacy workers from The Advocacy Project (TAP) will conduct face to face interviews with adults who have consented to participating in the evaluation. The interviews will be semi structured, the advocates using a previously agreed structured questionnaire.

### **Time scales:**

TAP will carry out interviews over a three/four month period and provide a report of the findings shortly after completing the interviews – the findings will be anonymised.

### **Criteria for choosing adults to be approached and asked if they would participate in the evaluation:**

People will be randomly identified and then approached with a request that they participate in the evaluation by their social worker.

The adult protection process could have entailed either progress to investigation, or progress to case conference, or progress to protection planning (which may have included seeking Protection Orders, or use of other legislative orders). If the adult protection intervention was in relation to an adult who was deemed to lack capacity, a person holding welfare attorney or guardianship powers could be asked to respond on their behalf.

Adults with impaired capacity, who have an ability to respond to the interview, should be included



The interview will involve one worker from TAP meeting with the adult – any concerns about risk for the advocacy worker should be highlighted

### **Seeking the consent of the adult to participate in the evaluation:**

Adults chosen would be approached by the relevant social worker/social work assistant, to ask if they would consent to participating in the evaluation by meeting with an advocacy worker.

The adult may no longer have an allocated worker within the social work teams (they may either have ongoing contact with another service, or no further involvement with public bodies). If there is no allocated worker, where possible the social worker who had responded as Council Officer could be asked to approach the adult to request their involvement.

The worker would explain about the evaluation process and emphasise that the adult was free to agree or refuse to participate in the evaluation

If the adult agreed to participate, the worker would ask them to sign the consent form.

### **The consent form states that the adults is consenting to:**

- Meeting with an advocacy worker from The Advocacy Project, and
- Talking about their recent involvement with public services when thought to be at risk of harm, and
- The Advocacy Project being provided with some basic information about their recent involvement with services

The worker would confirm that the adult would be contacted by TAP, who will make arrangements regarding the date of the interview, and also where this should take place (if the adult does not wish the interview to take place at their home, they can identify where they would prefer)

TAP will in the first instance contact the adult by phone, and if appropriate a letter confirming arrangements that have been made for the interview will be sent. The adult should be advised they would be free to have someone with them during the interview.



## Appendix 2

# Information for Adult & Legal Proxy

## Adult Support & Protection (ASP) service user evaluation

### Who we are?

The Adult Support and Protection Act became law in 2007.

Since then all local authorities have implemented procedures aimed at ensuring the safety and well-being of any adult deemed to be at risk of harm.

The Glasgow Service User – Sub Group have commissioned The Advocacy Project to speak to a number of individuals who have recently been subject to ASP procedures in relation to the legislation. The Advocacy Project is an independent rights based advocacy organisation that believes everyone should be involved in shaping the services that they receive. The intention of this piece of work is to ensure that service users have an opportunity to reflect on their experience and in doing so help to shape strategy for the future and enhance staff practice. A fully rounded evaluation of service delivery would not be complete without reflections from those who went through the experience. The best way for us to find out what worked best for people is to ask them.

### How will we do that?

#### We would like to hear directly from you:

- Your views of the support and services you received
- If you felt safer following the involvement of services

The Advocacy Project have been asked to speak to people who may have been harmed by others, or may have harmed themselves.

We would need your **permission** before we could arrange for an advocacy worker to meet with you. It is up to you to decide – and we will take no action without your permission.

If you agree to meet with an advocacy worker, we will ask you to sign a **consent form**.

We will only ask you do this after we have explained more about what we will do. **You should sign the form only if you agree that you are willing to speak to an advocacy worker.**



## **What if I don't want to speak with an advocacy worker?**

If you do not want to speak with an advocacy worker, you will **not** be asked to sign the consent form and we will **not** arrange for an advocacy worker to meet with you.

## **What happens if I agree to speak with an advocacy worker?**

Your name and contact details will be passed to The Advocacy Project. An advocacy worker will get in touch with you to arrange to meet with you, and send you a letter to confirm the arrangement. You can decide where you want to meet. You can decide if you want to have someone with you when you meet with the advocacy worker. The advocacy worker will ask you about the situation when you were at risk of being harmed. They will want to hear how you felt about the situation and how you were supported. They will write down the information you give them.

You only need to give the information that you want to – you do not need to give any information that you wish to keep private. The advocacy worker will have received some basic information about your situation. We need your permission to pass that information to the advocacy worker.

## **What happens next?**

The information you give will be included in a report that The Advocacy Project will write up for the Glasgow Service User – Sub Group. Your name will not be used in the report. You are free to give your views as you wish. The Glasgow Service User – Sub Group and the Adult Protection Committee will receive the report – and from that we will learn how support and services can be changed or improved. You will also receive a copy of the report if you have taken part in the evaluation process

## **Why are we doing this?**

By speaking to you, we can find out what made a difference to you – and this will help us to make sure other people get the same help. If you did not get the help you needed, we will find out why. This will help us improve the help we give in future.



Appendix 3

# Consent form for adult

**Name of person:**

.....

**Name of person's principal representative (if appropriate):**

.....

**Name of worker explaining the request:**

.....

**I agree / do not agree (delete as appropriate) to:**

- Meeting with an advocacy worker from The Advocacy Project, and talking about my recent involvement with public services when I was thought to be at risk of harm
- The Advocacy Project being provided with some basic information about my recent involvement with service

All information will be dealt with in the strictest confidence and with sensitivity.

Neither you, or your family or friends will be identified at any stage. I have received the information leaflet explaining this and understand what is going to happen.

**Signed:** .....

**Printed name:** .....

**Date:** .....

**Worker:** .....

**Date:** .....





Appendix 4

# Consent form for Representative

**Name of person's principal representative:**

.....

**Name of person subjected to ASP proceedings:**

.....

**Name of worker explaining the request:**

.....

**I agree / do not agree (delete as appropriate) to:**

- Meeting with an advocacy worker from The Advocacy Project, and talking about my recent involvement with public services when I was a representative of someone thought to be at risk of harm
- All information will be dealt with in the strictest confidence and with sensitivity.
- Neither you, or your family or friends will be identified at any stage.
- I have received the information leaflet explaining this and understand what is going to happen.

**Signed:** .....

**Printed name:** .....

**Date:** .....

**Worker:** .....

**Date:** .....



## Appendix 5

# Adult Protection Service User Evaluation Key Information

- 1. Name, Address, contact telephone number(s)**
  
- 2. Age and gender**
  
- 3. Care Group**
  
- 4. Best time to contact or visit**
  
- 5. Communication & Support needs**
  
- 6. If not the adult to be interviewed, but someone on their behalf – Their name, address, contact number(s) and relationship to the adult**
  
- 7. Indicate if the adult has an impairment of their capacity**
  
- 8. Dates when recorded as ‘adult protection’ and extent of adult protection process (enquiry/investigation/case conference/protection planning)**
  
- 9. All types of harm identified and person causing harm (not their name, but relationship e.g. family member, unpaid or paid carer etc.)**

**10. Names of key people involved in the adult protection process (including if advocacy was involved)**

**11. Date and place of key meetings**

**12. Adult protection decisions taken (and at which stage)**

**13. Outcomes since ASP legislation**

**14. Are there any risks that may be confronted by the advocacy worker when meeting with the adult?**

**15. Any other relevant information**

## Appendix 6

# Introduction letter for Adult

Dear

The Advocacy Project is an independent rights based advocacy organisation that believes everyone should be involved in shaping the services that they receive.

Independent advocacy aims to support people to express their views and opinions on issues that are important to them.

You recently agreed with your social worker to speak to someone from The Advocacy Project regarding your experience of the Adult Support & Protection process. Your views will form part of a final report and will remain anonymous.

Ann Lafferty from The Advocacy Project will call you to arrange a visit at a time that suits you. If you have any questions please call **0141 420 0961** and ask to speak to Ann.

Kind regards



Ann Lafferty



## Appendix 7

# Introduction letter for Legal Proxy

Dear

The Advocacy Project is an independent rights based organisation that believes everyone should be involved in shaping the services that they receive.

Independent advocacy aims to support people to express their views and opinions on issues that are important to them.

We are currently carrying out an independent evaluation, speaking to individuals who have had experience of the Adult Support and Protection process. Their views will form part of an anonymised report which will help inform current practice with Glasgow HSCP.

Under the Adults with Incapacity Act (Scotland) Act 2000, one of the general principles for an adult with impaired capacity is to take into account their views and the views of relevant others. As legal proxy for, we would like to ensure you have the opportunity to comment on the process. We can arrange a visit at a place, time and date that suits you or a telephone consultation at a pre-arranged time.

Please call Ann Lafferty on **0141 420 0961** if you would like to arrange an appointment or if you have any further queries.

Yours sincerely



Ann Lafferty



## Appendix 8

# Semi Structured Interview pro-forma

## Adult Protection Service User Evaluation 2017

### Structured Questionnaire

**This document is designed to record the impact that Glasgow City HSCP Adult Support and Protection services have had on the people who have used this service.**

**This document is not intended as a tick box questionnaire to be used with the adult. Conversation should be structured around the discussion points to ascertain the adult's views on the outcomes in a manner that is meaningful to them. These points may overlap or repeat during the discussion. This conversation would happen with the adult after their agreement to be involved in the evaluation has been obtained. Information will be made anonymous in the record of the discussion. Boxes can be used for notes, but a record should be written up afterwards to avoid a sense of 'being interviewed'.**

**Facilitated by The Advocacy Project**



**Date:**

**Reference No:**

**Section 1 – Initial Involvement**

**Prompts / Questions:**

- Do you know who was worried about you and why they were worried?
- Did you feel you were at risk of harm or unsafe?
- Did you agree with them?
- Did you feel you needed support?
  - If yes, what did you think you needed support with? Did you get the support you felt you needed/ What helped you the most?
  - If not, were you not offered support?
- Was the support offered not what you wanted? Did you not want help?

**Section1:**

**Outcome table:**

OUTCOME	Yes	No	Unsure/ Don't know
I understood why someone was worried about me			
I felt at risk of harm			
I needed support			
The support given was what I needed			
I wasn't given the support I needed			



## Section 2 – The Process

### Prompts / Questions:

- What did you expect to happen when the social worker first came to see you?
- Did the social worker show you their identity card?
- Was it made clear that you had a choice about whether to accept the support of ASP?
- Did the social worker give you any written information? Information in another format e.g. easy read? Did they explain it?
- Did you have a 'Protection Plan'?
  - If yes, what does this term mean to you?
- Did you receive an ASP factsheet/leaflet?
- Were you asked if you would like an advocacy worker to support you?
  - If yes, was it helpful having an advocacy worker?
  - If no, was advocacy explained? Would you have liked an advocacy worker to support you?
- Did you feel your rights were up-held?
- Did anyone explain what was going to happen and answer your questions?
- Did you feel you were kept informed about what was happening during the process?
- Did you feel listened to? Were you asked what you wanted to happen? Did you feel you could say what you wanted? Did you feel they respected your



decisions? Were you given time to think about your options?

- Were you told about meetings that were happening? Did you get anything in writing beforehand to explain the reason for the meetings? Was the information easy to understand?
- Did you go to these meetings?
  - If yes, were they helpful? Were you told beforehand who was going to be there? Did you have support at these meetings? Did you feel involved?
  - If no, why did you not go? Would you liked to have gone to the meetings? What were the barriers? Were you offered support or transportation to get to meetings? Were you told afterwards what had happened? Was there anything else that would have helped you go to meetings?
- Was what happens next explained clearly to you? Did you get anything in writing about this?

## **Section 2:**

**Outcome table:**

<b>OUTCOME</b>	<b>Yes</b>	<b>No</b>	<b>Unsure/ Don't know</b>
I was given written information			
I have a protection plan			
I was given an ASP factsheet/leaflet			
Were you offered advocacy support			
The advocacy was useful			
I felt the process was fully explained			
I felt informed during the process			
I felt my views were listened to during the process			
I attended meetings			
I felt meaningfully involved in the meetings			
What was going to happen next was clearly explained			



### **Section 3 – Outcome of the process**

#### **Prompts / Questions:**

- Have the decisions made by the adult protection process made a difference to your life?
  - If yes, what is better now? What changed to make it better? Do you feel safer now?
  - If not, do you feel things are still the same? Do you feel you are not safe?
  - Did you get the support you needed? What support was offered? Was this what you needed?
  - Has your life changed? In what way, better/ same or worse
  
- Did you agree with the decisions that were made? Did you feel your views were listened to?
  
- Did you feel you had enough support to help you through the process? Who helped you the most?
  
- Did you feel people acted quickly enough to make sure you were safe?
  - If not, how could the process have acted quicker for you?
  
- Is there anything else that could have been done better?
  
- If you needed support again in future, would you know who to ask? Explore?
  
- Is there anything else you would like to say about the process?
  
- Is this the best way to ask people what they thought of the process?

**Section 3:  
Outcome Table:**

<b>OUTCOME</b>	<b>Yes</b>	<b>No</b>	<b>Unsure/ Don't know</b>
I feel safer after the process			
The process has made a difference in my life			
The process has improved my quality of life			
I agreed with the decisions made			
I feel I had enough support through the process			
I felt respected during the process			
I felt included & involved			
I was given support e.g. home care etc.			
I felt the organisations involved acted quickly enough			
I would know who to ask for help in the future?			
I think this is the best way to ask about this process			