



Item No. 11

Meeting Date Wednesday 15th June 2022

**Glasgow City
Integration Joint Board
Finance, Audit and Scrutiny Committee**

Report By: Pat Togher, Assistant Chief Officer, Public Protection and Complex Needs

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**Adult Support and Protection
2021 Annual Self-evaluation Update**

Purpose of Report:	To advise the IJB Finance, Audit and Scrutiny Committee on the Adult Support and Protection (ASP) Self-Evaluation for 2021 and work ongoing to support the delivery of key ASP processes.
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Background/Engagement:	This report reflects the commitment to Adult Support and Protection Joint Self Evaluation to the IJB FASC and crucial role of audit in relation to this area of work and demonstrating continuous improvement.
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Governance Route:	The matters contained within this paper have been previously considered by the following group(s) as part of its development. HSCP Senior Management Team ☐ Council Corporate Management Team ☐ Health Board Corporate Management Team ☐ Council Committee ☐ Update requested by IJB ☐ Other ☐ Not Applicable ☐
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Recommendations:	The IJB Finance, Audit and Scrutiny Committee is asked to: a) Note the impact of Covid-19 and actions taken to mitigate risks during the pandemic and strengthen practice; b) Consider the collaborative work being undertaken by key partner agencies to prepare for external ASP inspection of Police, SWS and Health and related emphasis on improving how we support and protect adults at risk of harm; c) Note the method and model used to undertake a single agency audit of SWS ASP Hubs (duty arrangements) and the intention to use the findings and recommendations to drive improvements and inform service re-design; and d) Request that the outcomes and findings of the next joint self-evaluation is considered by the IJB Finance, Audit and Scrutiny Committee and brought back as and when appropriate following the scheduled 2022 evaluation.
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Relevance to Integration Joint Board Strategic Plan:

Workforce planning, monitoring and review of the delivery of statutory duties directly noted in the Adult Support and Protection Act 2007 and any other relevant legislative duties

Implications for Health and Social Care Partnership:

Reference to National Health & Wellbeing Outcome:	Workforce planning, monitoring and review of the delivery of statutory duties contained within the Adult Support and Protection Act 2007 and any other relevant legislative duties. National health and wellbeing outcomes acknowledged and referenced throughout the joint self-evaluation. Strategic priorities are based on the diverse needs of adults at risk in the city, and are underpinned by the National Health and Wellbeing Outcomes with an emphasis on outcome 7:- People using health and social care services are free from harm
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Personnel:	None
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Carers:	Consideration to the Carer's Act as fundamentally linked to supporting and protecting vulnerable adults at risk of harm and their families and unpaid carers. The role of unpaid carers acknowledged and considered throughout the ASP processes and related audit activity.
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Provider Organisations:	HSCP in partnership with other statutory agencies, third sector and voluntary organisations.
Equalities:	No implications
Fairer Scotland Compliance:	No implications
Financial:	No implications
Legal:	ASP (S) Act 2007 places a number of statutory duties on the Local Authority and public bodies
Economic Impact:	No implications
Sustainability:	No implications
Sustainable Procurement and Article 19:	No implications
Risk Implications:	Regular self-evaluation activity is a vital part of ensuring robust Adult Support and Protection processes. The impact of Covid-19 and related national lockdown which started in March 2020, and continued throughout most of 2020, has delayed the Joint Self Evaluation until 2021. However, risks were mitigated by giving priority to ASP related work and working collaboratively to ensure services remained resilient and adapted to unheralded challenges during a world-wide pandemic
Implications for Glasgow City Council:	Local Authorities have the lead role under the Adult Support and Protection Act 2007.
Implications for NHS Greater Glasgow & Clyde:	Legal duties on Public bodies under the act, including duty to cooperate and notify, and work collaboratively to support and protect adults at risk of harm. Commitment from the statutory partners to be involved in the regular (generally annual) tripartite joint self- evaluation and currently working together to prepare for external ASP inspection

1. Purpose

- 1.1. To advise the IJB Finance, Audit and Scrutiny Committee on the Adult Support and Protection (ASP) Self-Evaluation for 2021 and work ongoing to support the delivery of key ASP processes.

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2. Background

- 2.1. The Adult Support and Protection (S) Act 2007 was passed by the Scottish Parliament in February 2007 and deals with the protection of adults at risk of harm. The Act defines adults at risk as individuals aged 16 years or over who:
- are unable to safeguard themselves or their property, rights or other interests
 - are at risk of harm; and
 - because they are affected by disability, mental disorder, illness or physical or mental infirmity, are more vulnerable to being harmed than others who are not so affected. This is commonly referred to by practitioners as the three point test.
- 2.2. The Act placed a duty on councils to make the necessary inquiries and investigations to establish whether or not further action is required to stop or prevent harm occurring. It made it a requirement for specified public bodies to cooperate with local councils and each other about adult protection investigations. It introduced a range of protection orders including assessment orders, removal orders and banning orders, and it established the requirement for multi-disciplinary Adult Support and Protection Committees.
- 2.3 Glasgow Adult Support and Protection Committee, in agreement with the Partnership, is required to undertake the necessary monitoring of our Adult Support and Protection processes, interventions, policies and procedures. We made a commitment to evaluate and respond to the duties under the Adult Support and Protection Act to support adults who are at risk of harm. We have undertaken joint self-evaluation annually since 2015, with the exception of 2020 (due to the impact of Covid-19).
- 2.4 The findings from previous evaluations have been actioned to ensure that any learning and development is taken forward. This applies to incorporating any learning into both our single agency and multi-agency training and developments. It has also resulted in updated eforms (launched April 2022) to facilitate improved recording, particularly in relation to chronologies. We have also considered national developments and have considered the interim findings from the National Inspection programme – this has identified a key finding in relation that asp care management and protection planning processes needs to improve. We have used that finding to help focus some of our improvement planning with a Good Practice Guide developed for practitioners to support this part of the ASP process, additional training for Chairs, quality assuring open Protection Plans and adopting the theme of “Promoting Effective Joint Working in ASP Processes” for Local Management Reviews scheduled for June 2022.

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- 2.5 As was previously raised to the Finance, Audit and Scrutiny Committee, there was a change of approach from 2018 onwards, whereby we adopted the Care Inspectorate model of reviewing Adult Support and Protection. We have continued to use an agreed formula based on the Care Inspectorate template, and this should also help us prepare for the forthcoming external inspection due to be undertaken by the Care Inspectorate by 2023
- 2.6 The Care Inspectorate initially inspected 6 Local Authorities in 2018 (external inspection programme now being rolled out to the remaining Local Authorities and has progressed to half of all Local Authorities having been inspected). The findings from the thematic inspection have highlighted the key quality indicators and allowed us to benchmark and drive practice improvement. Inspection Reports to date, have also identified some challenges and potential areas to be strengthened, which have helped us to consider such learning in a Glasgow context and seek to strengthen such processes.

3. **Actions Taken to Mitigate Risks During the Pandemic and Strengthen Practice:**

- **ASP Committee** – has been very responsive and helped to ensure that a key priority has been placed on Public Protection during the pandemic, such as moving to 4 weekly (rather than 8 weekly) multi-agency meetings at the height of the pandemic and disseminating key information via the Public Protection newsletter. The ASP Committee has also switched to monitoring more “real time data” and commissioned thematic reviews in response to any patterns of concern, to help mitigate risks. This has been supported by the work of its sub-committees, namely the Learning Review Panel (formerly the Significant Case Review Panel), Service User Sub-Group, Learning and Development Sub-Group, and the Quality Assurance Sub-Group. The work of the Committee and Sub-Groups reflects a robust multiagency approach to governance and leadership arrangements with significant developments over the last year including the launch of a Learning Review Protocol (to reflect updated national guidance) and related briefings for staff to help promote a Learning Review culture that involves a whole system approach to disseminating learning and ensuring that recommendations are measurable and impact monitored.
- **Completion of two Significant Case Reviews** – Adult B has been published, multi-agency Action Plan developed, learning pack devised and a series of events held on a multi agency and single agency basis, to disseminate the learning. The Adult A SCR is due to be published shortly and a similar approach will be undertaken to help promote a learning culture which seeks to drive practice improvements. This approach is also reflected in plans to hold an ASP Conference (November 2022) which will also incorporate learning themes from the Significant Case Reviews and seek to ensure that a major focus is placed on implementing the multiagency action plans and making a positive difference to how we support and protect adults at risk of harm

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- **Issuing of Guidance** – this involved dissemination of National Guidance on ASP during the Covid Pandemic alongside HSCP operational ASP guidance being issued to front line staff. Mental Health Officer staff were similarly issued with guidance to assist in their statutory role and manage related risks. The consistent themes helped to highlight the need to prioritise the statutory role and maintain face to face contact where appropriate and reasonable to do so – alongside highlighting risk management information such as the use of PPE
- **Service delivery has been prioritised**, with ASP duty systems obviously viewed as a priority area of service. A collaborative approach has been taken between Health, SWS and the third sector to help ensure that the most vulnerable individuals have been monitored in the context of Covid, generally involving the application of a risk rating system, to help ensure that adults continue to be appropriately supported and protected.
- **Additional governance arrangements/ developments in Service Delivery** – such as the introduction of Public Protection Contingency Meetings and Care Home Huddle arrangements - have been introduced and now play a key role in the HSCP approach to monitoring risk. The HSCP has also made a further commitment to the ASP agenda by creating an ASP Team that is Centre based and consists of a Service Manager and two Senior Officers. This will allow further governance and monitoring of ASP processes and provide a link to operational staff to help monitor and develop practice. Covid/lockdown arrangements have also influenced the introduction of new services such as the Complex Needs Service and use of Microsoft Teams has allowed Case Conferences to more accessible to some (with work ongoing to promote an approach that offers a range of options for Case conference activity to support greater choice and participation)
- **Training** has adapted to ongoing restrictions linked to the pandemic, with a more blended approach now embedded which involves a mix of online and face to face training (where safe to do so). Key “statutory” training regarding such as Council Officer training, Second Worker Training and Team Leader training, has been prioritised for face to face delivery. Work is also ongoing to review content in light of the revised Code of Practice and to reflect findings from local and national audit activity, in terms of areas of practice that need strengthened (such as highlighting the need for a trauma informed approach). A range of e-learning training courses have also been introduced. A further example of collaborative working has been the design and launch of an e-learning module on Chronologies that is now available on both Health and SWS intranet systems.
- **Communication and engagement with staff** – major emphasis placed on effective communication during the height of the pandemic, with regular updates provided via email, issuing of guidance and newsletters (including Public Protection newsletter) to help them to deliver a service despite obvious challenges. As the recovery planning continues, a range of staff engagement methods have been used to help inform workforce

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planning around hybrid ways of working. Similarly, online options have facilitated the running of local ASP Steering groups and Practitioner Forums/ Briefing sessions to help promote that wider ASP agenda, despite limitations on face to face meetings. Regular communication has helped to ensure staff are kept informed and supported

- **Multi agency Practice Development Forums (previously Local Management Reviews)** – recommenced in 2021, with two held in each area, based on consistent themes to help strengthen a collaborative approach to protection planning. Further dates scheduled for 2022 are now in place with findings from SCR/LR holding a central focus.
- **Covid Recovery Planning/ Development Work**- greater emphasis is now being placed on recovery planning and crucial improvement planning that was slowed during the height of the pandemic. This includes updating key strategies and processes, with work currently ongoing to update the HSCP's Domestic Abuse Strategy, Prevent Strategy, Large Scale Investigation Procedures and planning of Development Sessions.

3.1 Collaborative Work Being Undertaken to Prepare for External Inspection:

- The national inspection programme has now recommenced and is now past the half way point in terms of completed inspections. The exact start date for the City of Glasgow HSCP (involving an inspection of the key partner agencies namely SWS/Health and Police) is still to be confirmed. The process of inspection has been adapted due to Covid concerns, and will rely on virtual platforms to assist their scrutiny activity. Similarly, focus groups will run via online arrangements and will look to question staff on the impact of Covid concerns on their practice. More generally, the inspection will scrutinise delivery of key ASP processes and leadership and governance arrangements. The process will involve an analysis of advanced partnership data and file reading regarding Social Work, Health and Police records regarding adults at risk of harm (drawn from the previous two years). This will a detailed inspection of our ASP process and will help to inform future practice. Work is currently ongoing, as reflected in this Report, to help prepare for Inspection and develop any areas of practice that require to be strengthened (such as implementing learning from previous internal audit activity etc).
- A multi-agency ASP Inspection Operational Oversight Group has been established and meetings are held on a monthly basis to help prepare for inspection. This has helped develop a shared Work-Plan to help focus the preparatory work and support improvement planning. The Oversight Group have worked together to pull together preliminary ASP data, identify key documentation to evidence ASP processes and conducted trial exercises to help inform the approach that will be required when formal notification is given (at which stage we will need to submit a volume of data within a four week period). Feedback from partner agencies is that this approach has been beneficial and provides a clear example of partnership working to support the ASP agenda.

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4. Audit of ASP Hubs (Duty Systems):

Business Development's Support and intelligence Team, carried out a single agency ASP Duty System Audit in September 2021, to help quality assure our key Adult Support and Protection processes. There was a particular focus on the duty to inquire stage given that the majority of safeguarding interventions are undertaken at this stage in the process. The additional aim was to highlight any variance in practice across the three HSCP localities in the delivery of ASP duty arrangements (entitled the "ASP Duty Hubs"). The audit tool was compiled in corroboration with members of the ASP Duty Working Group (set up to review existing Generic and ASP duty systems). The audit tool contained questions drawn from the previous Tripartite Audit Tool (which is based on the National Thematic Inspection approach) and some additional questions to help analyse particular practice linked to duty interventions. The sample involved 60 Duty cases from the 'ASP Duty to Inquire' (DTI) report from CareFirst between **1st March and 31st May 2021** – proportionately drawn from the three areas. Between this period **1628** DTIs had commenced but for the purpose of this duty system audit, **1152** unique duty cases were used (linked to cases that were progressed by the ASP Hubs)

4.1 Quality Indicators: Drawn from the Care Inspectorate thematic inspection programme;

- Are Adults at risk safe, protected and supported?
- Key processes – with a particular focus on the effectiveness of the duty to inquire stage

4.2 **Findings:** The audit outcome reflected a number of key findings that highlighted strengths in terms of good practice and outcomes for adults at risk of harm, and areas for further development to help improve practice delivery. The main points are detailed below at 4.3 and 4.4:

4.3 Strengths:

- **Close to Two thirds (58%)** of ASP referrals audited were 'very clear' in terms of information found on them. Referrals were predominantly received from either care homes **13 (22%)**, the police **20 (20%)**, or nurse/health clinician **5 (15%)**
- 3-point test was correctly applied by workers in a large **(73%)** proportion of cases
- Evidence of discussions with partner agencies in **88%** of cases reflecting a strong collaborative approach
- **90%** of Souths DTIs were completed within the expected timescales of 5 working days
- Actions were taken to help the adult be **safe from harm in 82% of cases**. Where action was not taken, there was evidence that this was linked to safeguarding actions by other agencies (Fire Service/Police/Health) or input was declined by the adult.

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- **100%** TL countersignatures were found across all 3 localities to help evidence decision making
- The overall rating of the Duty to Inquire ranged from excellent to adequate in **87%** of cases

4.4 Development Areas:

- Variable practice across the three areas with tendency in North East to complete the Duty to inquire out-with their duty systems if inquiries were ongoing (happened in **75%** of cases) compared to NW (**26%**) and South (**29%**)
- Variable practice across the three areas regarding completion of Duty to Inquires within the 5 day timescale – South completed **90%** within timescales but NE (**50%**) and NW (**58%**)
- **18 (30%)** cases noted that advocacy was '**not offered**' and this was often linked to particular reasons such as a relative having proxy powers (5 cases) or already having an advocate (2)
- Misapplication of the three point test in **12 cases** – often linked to difficulty distinguishing between individuals who are unable to safeguard and those who are able to safeguard and choose not to (revised Code of Practice notes that this can be a complex area of practice)
- Overall rating of the DTI – **7 cases** were rated as weak linked to factors such as the mis-application of the three point test and/or failure to apply the escalation protocol (in terms of progressing to investigation stage where there have been repeated referrals)

4.5 Improvement Plan:

- **Audit tool / learning from audit** to be shared with front line staff and promote use of audit tool to underpin more regular case sampling and support improved governance arrangements. New ASP Senior Officers to support this task
- **Recording of the three point test** – case recording requires to be strengthened around the application of the 3-point test and advocacy. ASP eforms updated to help promote improved recording and such sections will become mandatory / stronger hints to staff to aid completion. Briefing sessions have been held to support roll out of revised eforms and the new eforms launched (April 22)
- **Application of the 3 point test** – disseminate the learning from this audit within asp practitioner forums to help improve practice in this area. Highlight identified issues regarding the misapplication of the three point test and use audit findings/training and the revised Codes of Practice, to help support a wider understanding, based on trauma informed practice. Encourage staff to undertake the new GOLD training modules on ASP awareness and chronologies. Review content of HSCP training linked to Council Officer training and Second Worker training – again seeking to incorporate learning from this audit around the application of the 3-point test and need for staff to apply the criteria from a trauma informed perspective. This will also be addressed in learning events linked to the

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Adult B SCR and themes around professional curiosity and dealing with non-engagement or disguised/non-compliance.

- **Adherence to ASP Timescales** – this also links to improved recording, with staff briefing sessions being held to highlight importance of good recording, including explicitly detailing any reason for delays in completion – and updated of recording systems. ASP Team to meet with Senior Managers from each ASP Hub area to look at local actions required to support practice improvements
- **Service Re-Design** - planning for the Single Point of Access and Eclipse recording systems will also trigger a re-design of ASP processes and related duty arrangements, informed by audit activity, performance management reports and planning linked to service re-design. This will help to identify ASP practice that needs strengthened and will include a different approach to triaging and screening asp referrals and chronology recording. It is anticipated that this will be a major shift in the delivery of key ASP processes and will include a significant investment in a new streamlined approach that promotes a more efficient way of accessing services and support.
- **Application of the escalation protocol** – ASP operating procedures highlight an expectation that patterns of repeated asp referrals will trigger an investigation or explicit recording by the Team Leader to justify a decision not to progress to investigation stage. This is inconsistently applied as per audit findings, and practice will be strengthened by the updating of eforms (to explicitly highlight the protocol) and related staff briefings. This will also be monitored going forward by more regular case sampling and annual audit
- **Audit findings will help to drive improvement planning**, inform multi-agency preparations for external ASP Inspection, and will be incorporated into the related multi-agency ASP Work-Plan

5. Future Tripartite Audit:

- 5.1 Discussions have commenced between SWs, Health and Police to re-commence our Tripartite audit programme in September/October 2022. This programme had been paused, primarily due to the impact of Covid-19. The Care Inspectorate audit tool, used during their Thematic inspection programme (and our last Tripartite audit in 2019) will again provide the basis for this audit. This will also help to monitor the impact of factors such as Covid and improvement actions that have been implemented following the last Tripartite audit in 2019 (such as strengthening recording systems). It will also help take account of significant service re-design, such as the introduction of a Single Point of Access and Eclipse recording systems (SWS), development of the Public Protection Team within Health, and creation of a specific ASP Team within Police Scotland (G Division).
- 5.2 This will provide us with a further opportunity to measure the Quality Indicators (highlighted at 4.1 above) and to employ a wider focus across ASP processes (as the recent ASP Duty Audit focused primarily on the Duty to Inquire stage). It will also benefit from a multi-agency approach and will help to support the preparations for external inspection and related improvement

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planning. A particular focus will also be placed on Life Event recording (chronology recording) in light of previous internal audit (2019) which highlighted a need to strengthen practice regarding chronology recording – this has also been identified as a key area for improvement in the National Thematic Inspection Programme to date, led by the Care Inspectorate (roughly at the halfway stage and has drawn interim conclusions).

- 5.3 The findings from the forthcoming Tripartite Audit will be shared with the Adult Protection Committee, integrated clinical and care governance structures within the HSCP and partner agencies. It will also help inform the multiagency ASP Operational Group, set up by key partner agencies to help prepare for external inspection – and again seek to assist improvement planning.
- 5.4 The ASP Inspection Operational Oversight Group is aware that notification could be received at any stage for the external ASP inspection to commence. This partly influenced the decision to continue to pause the Tripartite Audit programme in 2021 (alongside the impact of Covid-19). However, the view of partner agencies is that the overall benefit of self evaluation far outweighs the challenge of having to prepare for a tripartite audit alongside preparing for external inspection, and potential for both audits to happen in 2022. On that basis, a clear decision has been taken to re-commence the Tripartite audit programme.

6. Recommendations

- 6.1 The IJB Finance, Audit and Scrutiny is asked to:
- a) Note the impact of Covid-19 and actions taken to mitigate risks during the pandemic and strengthen practice;
 - b) Consider the collaborative work being undertaken by key partner agencies to prepare for external ASP inspection of Police, SWS and Health and related emphasis on improving how we support and protect adults at risk of harm;
 - c) Note the method and model used to undertake a single agency audit of SWS ASP Hubs (duty arrangements) and the intention to use the findings and recommendations to drive improvements and inform service re-design; and
 - d) Request that the outcomes and findings of the next joint self-evaluation is considered by the IJB Finance, Audit and Scrutiny Committee and brought back as and when appropriate following the scheduled 2022 evaluation.

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