



Perth & Kinross Adult Protection Committee Minute

Friday 9th February 2024 10 am at 2 High Street Perth

ATTENDEES

Andy Park (AP)	Operations Manager, Independent Advocacy
Bill Atkinson (BA)	Independent Convener
Dave Henderson (DH)	Scottish Care, Independent Sector Lead, P&K
Grace Gilling (GG)	Associate Nurse Director (Public Protection), NHS Tayside
Kenny Ogilvie (KO)	Interim Head of Service, Adult Social Work, Social Care Operations for HSCP
Lee Stewart (LS)	DI, Risk and Concern hub, Police Scotland
Paul Boath (PB)	DCI, Public Protection, Police Scotland
Michelle Dow (MD)	Service Manager, Housing, PKC
Iain Wilkie (IW)	Adult Protection Coordinator, P&K HSCP
Julie Wyllie (JW)	Manager, Robert Douglas Memorial Care Home
Susan Netherington	ASP Admin, PKC

APOLOGIES

Alison Fairlie (AF)	Service Manager, Social Work, PKC
Christopher Lamont (CL)	Strategic Lead for Mental Health, NHS
Erin Wilson	Capability Scotland
Amanda Welch	Care Inspectorate
Julie Hutton (JH)	CEO, Independent Advocacy (AP in attendance)
Karyn Sharp	Service Manager, Social Work, PKC
Christopher Jolly (CJ)	Service Manager, Business Planning and Performance
Susan Torrance (ST)	ASP Adviser, NHS
Sheila McCole (SM)	Councillor, Perth City South
Susan Hunter (SH)	Independent Vice-Convener

Correspondence Members

Arun Singh	Chief Social Work Officer
Angie McManus	AHP Lead P&K HSCP
Alyson Paterson	Mental Welfare Commission
Brian Hutton	Improvement Officer, ECS
Deborah Lally	Perth College
Daniel Smith	GP, NHS
Ewan Baird	Scottish Fire & Rescue Service
Gordon McNelis	Mental Welfare Commission
Jennifer McOmish	VAW Coordinator, PKC
Louis Ford	Team leader, SAS
Raymond Birnie	Police Scotland
Sarah Rodger	Legal Manager, Legal & Governance Services, PKC
William Young	Scottish Ambulance Service
Winnie Burke (WB)	Care Inspectorate
Valerie Davis	Lead Nurse

1	<p>Welcome and Apologies</p> <p>BA welcomed all to the meeting and apologies were noted as above.</p>	
2	<p>Minute of Adult Protection Committee (17.11.23)</p> <p>The presentation on the challenges faced by Council Officers in safeguarding where financial harm exits was well received by the APC. IW highlighted that Dr Durowse from Dundee University is conducting research into how decision making in relation to financial harm is constructed and P&K is supporting her with this. She has established a short life working group in P&K to progress her work.</p> <p>BA confirmed that the APC Annual Report 2022/23 will be shared with the Integrated Joint Board (IJB) on Wednesday 14th February 2024.</p> <p>The draft IRISS LSI framework was discussed. DH and IW have been working on how to implement this within P&K and are part of the national working group to finalise the guidance.</p> <p>DH has visited all 4 homes that had an Large Scale Investigation (LSI) last year and completed a summary report of how the care home found the LSI using 7 key principles as proposed in the draft IRISS LSI guidance. DH noted that in doing this, he has found rich learning that needs to be shared to inform how we carry out LSIs in the future. DH has suggested an LSI section on the PKC website so that anyone that is going through an LSI can go onto it to understand what it is, along with documentation such as letter templates advising of the LSI to send to relatives etc. IW and DH to set up a SLWG to take this work forward.</p> <p>GG notes that LSI guidance for NHS Tayside staff has been drafted using the national framework in order to highlight that an LSI can be conducted within a hospital setting. This guidance also provides some focus on the role of 2nd worker in an LSI. GG will share the guidance to DH and IW to review. IW advised that ST contacted him yesterday and will be involved in the working group to look at training for the care home sector going forward.</p> <p>JW said that there is a lot of support being put into some care homes however she feels could be more targeted as currently it feels that the support provided within LSIs is quite repetitive. JW also notes that if you are a new Care Home Manager, and the home is not performing, she thinks that last thing any new manager wants is people coming into the home. Therefore there is a balance needed.</p> <p>DH advised that a group will also be set up to look at the last 6 months of incidents reported from care homes and identify any recurring themes that emerge. This will allow an opportunity to identify what preventative measures can be put in place that may obviate the need for an LSI. .</p> <p>LS asked if social work are notified of deaths when people are receiving care. It was clarified that they do. When concerns due to the standard of care relate to that death, health would inform social work. GG also confirmed that Health have</p>	IW/DH

	<p>strengthened their understanding of who to notify following a death. This was one of the missed opportunities that was found in the P19 learning review.</p> <p>GG is aware of reports raised over the last week where a patient made allegations against their carer. GG will raise these as an adult concern. However feedback is not always received therefore they are unaware of how it is progressed. IW understands that feeding back the outcome of any adult protection concern is a longstanding issue. IW suggested that with the new Mosaic system coming to social work, that they could look at adding an automatic box to remind the person completing the referral to update the referrer. IW confirmed this would not be for VPDs. KO confirmed decision making is recorded within AIS. AIS is the current recording system that social work and social care use.</p>	
3	<p>Minute of the Adult Protection Sub-Committee meeting (30.11.2023)</p> <p>IW provided an overview of the Sub-Committee meeting.</p>	
4	<p>Multi-Agency Case File Audit 2023</p> <p>The report for this audit was shared with the group prior to the meeting. IW confirmed GG, GT and himself reviewed and amended some of the questions that underpinned this audit to make the audit more multi-agency and to give it more focus on the outcomes and impact of ASP work.</p> <p>The audit found numerous examples of good, multi-agency, person centred, outcome focussed practice in relation to keeping adults at risk of harm safe, even when circumstances were complex. The improvement areas identified were discussed. Many of these related to consistency rather than missed opportunities.</p> <ul style="list-style-type: none"> i) The need for consistently well-articulated, defensible and defensible decision making. ii) Improve our multi-agency approach to safeguarding iii) Greater emphasis of the importance of chronologies in ASP protection planning iv) Improve how we consistently engage adults and their unpaid carers in the ASP episode. v) More coordinated approach to supporting those where domestic abuse may exist. <p>BA asked if there is a need to strengthen the links between Housing and Adult Protection. IW and MD to meet following today to discuss this further. IW noted that housing colleagues have been fully engaged with the recent hoarding webinars.</p>	

	<p>IW spoke about the ASP/VAW development day on 11/3/24 which follows on from the initial session in 2022. Some improvements have been made in this work since 2022. The development day on 11 March looks to build on this and review where we are and highlight areas for further improvement. IW noted that in the recent ASP audit, there was some disconnect between MARAC (Multi-Agency Risk Assessment Conference) and ASP. As a consequence, IW advised that if there are any ASP cases with someone relating to domestic violence that it should now be taken to IRD (inter-agency referral discussion). This would make that connection with MARAC a better coordinated response and consider the response to the alleged perpetrator.</p> <p>GG is MARAC Chairperson in Perth and has seen an improvement especially since there has been a dedicated question added to the MARAC form “Are there any adult concerns you want to raise and progress.” That way, we can evidence that ASP has been considered for each and every adult who has been referred to MARAC. GG is keen for this question to be in the other 2 areas within Tayside. IW advised that the introduction of that question came from a suggestion from one of the participants in the initial development session in 2022.</p> <p>PB asked if we are happy with the pathway prior to a case reaching IRD. IW samples VPRs and the decision making that stem from them. IW reviewed all the VPRs received for one week in November 2023 and is in the process of collating an audit report from that work. IW said the main theme emerging from this is about consistently well defensible, articulate recording and making sure that the reader is absolutely clear on why those screening the VPR has reached that decision.</p> <p>LS wanted to highlight that another area within Tayside has had issues with recording at screening due to Mosaic. IW is confident in the PKC ASP Mosaic module. He has worked with the Mosaic team to change the way that strategic discussions are recorded so that they are not only consistent but require better defensible decision making.</p>	
<p>5</p>	<p>Annual report on significant case reviews and learning reviews for adults (2022-2023)</p> <p>IW provided an overview of the Care Inspectorate Annual report 2023 on significant case reviews and learning reviews for adults. The learning noted was similar to those found in internal audits, such as communication, collaboration and professional curiosity. The report advises that the recommendations in the learning reviews examined as part of this audit were not SMART enough, timescales were unrealistic and there was a lack of accredited reviewers which was seen as a challenge.</p> <p>BA notes that there have been informal reviews completed within P&K that has</p>	

	<p>not met the formal criteria for a learning review which the Care Inspectorate are currently not getting sight of. This would explain why the numbers of reviews contained with this audit is so low.</p> <p>GG is aware that health also complete health led reviews (LAER and SAER's) which can feature elements of adult protection. Therefore, because these are not formal learning reviews as defined by the Care Inspectorate, the Care Inspectorate do not have sight of these. GG is surprised to note that there are partnerships within Scotland that have never completed a formal Learning Review.</p> <p>KO said that many different learning reviews exist. It is therefore crucial that it is multi-agency and learning is shared. KO agrees that the learning should be escalated through the care governance arrangements that are multidisciplinary and broad enough to ensure learning identified is shared across the partnership and organisations in the area.</p>	
<p>6</p>	<p>NHS update</p> <p><u>NHS Tayside Public Protection Annual Report 2022-23</u> GG advised that they had their Public Protection Executive Group (PPEG) in December 2023, where the Tayside Public Protection Annual Report was approved.</p> <p>The first NHS Tayside Public Protection Learning and Development Framework and the Operational Governance were also approved which GG can share with the Committee.</p> <p><u>National Adult Protection Day – 20th February</u> There are a range of learning events and webinars being held by several partners within P&K. Health are holding an event on Sextortion along with our Police Colleagues.</p> <p>The team will have presence everyday in one of their main hospital sites, advertising Adult Protection, the team etc. Health will be joined by a number of partners on those days also.</p> <p><u>Changes to committees within Tayside</u> GG advised that Angus have combined the Committee's for Adult Protection, Child Protection and Violence Against Women to form a Public Protection Committee which will take place from April 2024.</p> <p>Dundee will have an Adult Protection Committee and a Child Protection Committee. The Adult Protection Committee will include Violence Against Women and Suicide Prevention in adults. The Child Protection Committee will include Suicide in children and young people and violence against girls.</p> <p>BA said that they will continue to monitor the public protection arrangements in other areas with interest. BA understands the combination of Child Protection,</p>	

Adult Protection and Violence Against Women could be beneficial for smaller authorities. However, he is aware that some Child Protection committees have lasted 3+ hours and to add Adult Protection and Violence Against Women to that discussion could be challenging.

GG agrees, combining the 3 is not allowing for same amount of time to be spent on each area therefore it has to be a strategic group with a very strong sub group.

P19 Review

There are 2 recommendations outstanding from the P19 Learning Review. One recommendation was guidance for health staff around individuals who are unable to engage, which GG is hoping to have complete in the next few weeks.

The last remaining recommendation was regarding consideration of developing a standard for adults subject to Adult Protection that have had a two week or more admission into hospital. The consideration was for a formal multiagency discharge planning meeting that could align with an Adult Protection case conference. Colleagues within the discharge hub are going to take that forward. P&K are included within that working group.

DH is on the NHS Care Home Collaborative Group. DH said that if there is an issue with discharge from a hospital setting within P&K it would be escalated to the Enhanced Care Home Team who will complete a DATIX if there is any concerns. DH asked about discharge from hospital when a taxi arrives with medication, paperwork or equipment, 5 hours after discharge and if this was under the remit of GG's team. GG confirmed it is not within her remit however she often sees the DATIXs as health staff will tick this as an Adult Protection concern. When a number of issues are coming from the same ward etc, and there is that accumulative impact, her team can step in and speak with their health colleagues.

DH noted there is Care Home Collaborative Group sub group discussion starting and asked if someone in GG's team would like to be involved. GG provided assurance that she has spoken with Susie Flowers about where her team would be involved therefore it is in hand.

AWI Audit Tool

From internal audits it has been identified the need for an AWI audit tool for Health. Previous audit tools have focused on Section 47 but recognised that this needs to be broadened. Partners from within Tayside will be convening in two weeks' time to progress this forward. There is no other health board that has produced an AWI tool. Therefore once produced, this can be shared nationally.

Health Boards and Chief Executives are to provide assurance around their responsibilities across some of the Public Protection agendas including MAPPA, Adult Protection and Child Protection. At the moment it doesn't include Violence against women but hopes that it will be included in the future.

Margaret Fleming Learning Review

GG advised that a Tayside Learning Review group has been established to look at the findings and the recommendation from that report. IW is leading a P&K

	<p>group, and the finding from this will be shared with the tayside group to look at shared themes.</p>	
<p>7</p>	<p>Police Scotland update</p> <p>LS advised of the recent changes with the Risk and Concern Hub. Michael Wilson-Wynne has the ASP portfolio and Kerry Reid (KR) will continue on a DC level. KR attends most of the case conferences and IRDs that take place within P&K.</p> <p><u>VPD Backlog</u> LS confirmed that the VPD backlog continues to be an issue. LS has spoken with other divisions and is aware that the backlog is a problem across Scotland. PB provided reassurance that each VPD is triaged and VPDs that identify those at high risk are shared as a matter of urgency. LS explained that some of the VPDs have also already been shared through IRDs or MARAC etc.</p> <p>LS and PB have created an action plan looking at a number of areas within the Risk and Concern Hub, one of which is the VPD to ensure we get it right first time.</p> <p><u>ASP IRD Review Group</u> The IRD review group continues to meet in P&K every 2 weeks. The most recent review highlighted a disparity in quality of IRD minutes. One locality was using a different minute template and had an extensive amount of information within it.</p> <p>LS advised that sometimes the discussion around the client meeting the 3 point test is not being recorded. Some meetings are lasting 2 hours so the risk is that it will be discussed but it is lost in the recording. Therefore amendments to the IRD assessment template is being considered so that it includes a box solely for consideration of the 3 point test, detailing if it is met and how that decision was reached.</p> <p>LS would like to see a terms of reference for what an IRD is, a template that is fit for purpose and ideally that process being pan-tayside. LS confirmed that P&K has a good team of chairs holding IRDs and they are discussing all of the right things and in great detail. However the recording of that needs to be improved on so that someone not involved in the meeting can understand exactly what has been discussed.</p> <p>LS said it is great to see that multiagency approach and real time learning. The issue raised to IW from the last meeting will potentially be fixed for the next review.</p> <p><u>Training/shadowing</u> LS is keen for staff at all levels to have an appreciation and understanding of the operations within each partner agency. This includes recognising how our daily practices influence our partners in their assessment and processing of information and referrals.</p>	

	<p>An offer has been made for shadowing opportunities for partners within the Police Risk and Concern Hub and it is hoped that this will be reciprocated to allow for a better understanding and help remove any potential barriers between teams.</p>	
FYI	<ul style="list-style-type: none"> I. Mental Welfare Commission Investigation “They didn’t ask me”: Investigation into the care and treatment of Mr E (2024) II. National Data Set III. P&K Trauma informed learning e-module <ul style="list-style-type: none"> ○ Trauma Informed Approaches to Adult Support and Protection: P&K APC Briefing e-module 	
AOB		