



## Perth & Kinross Adult Protection Committee Minute

Friday 27<sup>th</sup> September 2024 10:00 am held via Microsoft Teams

### ATTENDEES

Bill Atkinson (BA)	Independent Convener
Dave Henderson (DH)	Scottish Care, Independent Sector Lead, Perth & Kinross
Grace Gilling (GG)	Associate Nurse Director (Public Protection), NHS Tayside
Iain Wilkie (IW)	Adult Protection Coordinator, Perth & Kinross HSCP
Julie Hutton (JH)	CEO, Independent Advocacy (AP in attendance)
Lee Stewart (LS)	DI, Risk and Concern hub, Police Scotland
Karyn Sharp	Service Manager, Social Work, Perth & Kinross HSCP
Sheila McCole (SM)	Councillor, Perth City South
Susan Netherington	ASP Admin
Susan Hunter (SH)	Independent Vice-Convener
William Young	Scottish Ambulance Service

### APOLOGIES

Angie McManus (retiring)	AHP Lead Perth & Kinross HSCP
Alison Fairlie (AF)	Service Manager, Social Work, Perth & Kinross HSCP
Julie Wyllie (JW)	Manager, Robert Douglas Memorial Care Home
Kenny Ogilvie (KO)	Interim Head of Service, Adult Social Work, Social Care Operations for HSCP
Michelle Dow (MD)	Service Manager, Housing, Perth & Kinross Council
Sarah Peterson	GP Clinical Lead in Perth and Kinross, NHS
Christopher Lamont (CL)	Strategic Lead for Mental Health, NHS
Winnie Burke	Care Inspectorate
Jennifer Reid	Police Scotland
Erin Wilson	Capability Scotland

### Correspondence Members

Arun Singh (AS)	Chief Social Work Officer
Amanda Welch	Care Inspectorate
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
Louis Ford	Team leader, SAS
Paul Boath	DCI, Public Protection, Police Scotland
Raymond Birnie	Police Scotland
Sarah Rodger	Legal Manager, Legal & Governance Services, PKC
Susan Torrance (ST)	ASP Adviser, NHS
Valerie Davis	Led Nurse

1	<p><b>Welcome and Apologies</b></p> <p>BA welcomed all and apologies were also noted as above.</p> <p>AM has been a long-standing member of the APC, but she is due to retire. BA took the opportunity to acknowledge the work AM has provided to the committee and to the work she has carried out for Perth and Kinross. On behalf of the APC, he wished her a happy retirement. She will be replaced by James Fulton, AHM Clinical Educator with HSCP</p>	
2	<p><b>Minute of Adult Protection Committee (18.07.2024)</b></p> <p>The minute from the last ASP Committee was shared on the screen and attendees were invited to make comment.</p> <p><u>Decision-making framework in ASP (Dr Melanie Durowse)</u> IW advised that there was an interest in multi-agencies being upskilled in Dr Melanie Durowse’s decision making framework. Further dates will be shared with the APC as soon as IW has them, for Police Health and other professionals to attend. IW said that Council Officers have fed back that they are using this to support their ASP work with those who may be at risk for financial harm as well as other categories of harm.</p> <p><u>P&amp;K response to the Maragret Fleming learning review</u> GG advised that she hopes to bring an updated Tayside position at the next Tayside Leads meeting regarding next steps. GG is aware that Angus are keen to progress.</p> <p>Minutes were accepted and approved by the Committee.</p>	
3	<p><b>Adult Protection Sub-Committee – (05.09.2024)</b></p> <p>The minute for the Sub-Committee was shared with those attending.</p> <p>IW provided an overview of the minute and the discussions.</p> <p><u>Hoarding</u> GG has been asked to join a hoarding task force set up by the Scottish Government and IRISS. GG suggested that with all the work that has been carried out in Perth and Kinross if IW would want to be involved. IW confirmed that IRISS has reached out to Jodie Gordon and IW, and both will be part of that. LS asked if information could be shared with him so that he can understand if there is a place for police to attend.</p>	

## APC Biennial Report

IW shared a presentation on the screen regarding the APC Biennial report. Key points are below:

- Council Officer numbers have increased due to several reasons highlighted in the report.
- 98% of all AP concerns are screened by a Team Leader within 24 hours.
- There has been a slowing of Police Concerns throughout 2023/24 and again in the 6-months from April 2024. IW and LS will continue to monitor this. LS stated that this is a similar trend to Dundee and Angus.
- Health AP concerns continue to increase which can be attributed to the NHS ASP Teams providing awareness and supporting them to submit concerns where concerns exist.
- IRDs are increasing in value and continuing to be audited by Health, Social Work and Police to highlight areas of strength and areas look for improvements.
- ASP Inquires are used less which seems to be due to the growth of IRD's, information being shared and having that coordinated approach.
- Physical harm and Neglect dominate the categories of harm seen in Perth and Kinross, and audit work showing that those are areas at which we are good.
- Significant increase in Adult Protection review case conferences.
- Over the last 2 years LSI's have significantly moved away from being predominately a social work function to one that's multi-agency particularly around decision making and the support that is provided.
- LSI feedback reports has led to how we improve how we deliver LSIs.
- Our use of Independent Advocacy has improved.
- The joint inspection found missed opportunities to use a medical examination in our ASP work. Since then, the ASP coordinator has drafted guidance and delivered training around this. Feedback is that although it is in draft form it is working well and Council Officers who as asking for a medical examination are getting one.
- Our audit in 2023/24 has led to our ASP work being much more multi-agency and coordinated and we see a significant increase in our ASP investigations using health as the second worker.
- The new ASP MOSAIC assessment and protection plan also gives more focus to the need to consider medical examinations, it gives a greater emphasis on multi-agency chronologies and to the importance in the role of advocacy for the adult and his/her unpaid carer.
- Within the inspection defendable and defensible recording was seen as a need for improvement. Specific training is being delivered twice a year.
- Financial Harm and SCAMs Prevention Subgroup re-established.

SM highlighted the six categories under those who receives ASP support and asked if those categories are what we need to report on or if it is something we have chosen. IW explained that this is a data set that he has inherited and a data set that is used when reporting from AIS. MOSAIC will be able to report on the entirety of the new national data set which gives a much wider data set.

	<p>LS notes that the substance use category is quite low. LS feels a lot of people with substance misuse go down the ADP pathway when ASP would be better suited as there are tools with ASP that could be better utilised. BA suggested that a narrative could be added to the report explaining that the low numbers does not necessarily mean that there is a low level of substance abuse in Perth and Kinross. IW highlighted that Susan Torrance and IW met with the Drugs and Alcohol team (IDART) yesterday and have an ASP development session planned for October regarding how the use of ASP can be strengthened when seeking to support someone who experiences addiction. JH asked for Independent Advocacy to be involved as they also receive low referrals from drugs and alcohol misuse.</p> <p>The standardisation of IRD's across Scotland was discussed. IW noted that not all APC areas use IRDs in adult protection work. Currently within Tayside there is not a consistent approach to IRD's therefore it is hard to compare and contrast. GG advised that Tayside approach to IRDs was another agenda item for Tayside Leads meeting to be held soon where this will be discussed further.</p> <p>Key areas for improvement:</p> <ul style="list-style-type: none"> <li>• Strengthening a public partnership approach to safeguarding including violence against women, financial harm, those who experience addiction, mental ill-health, and suicide prevention.</li> <li>• Collaborate with partners to ensure that our approach to safeguarding the older adult is coordinated.</li> <li>• We will continue to give priority focus on young people and adults in transition between services and securing improvements in the multi-agency, coordinated response.</li> <li>• We look to build on our multi-agency approach to delivering ASP in Perth &amp; Kinross.</li> <li>• We look to improve how we encourage and support adults and their unpaid carers to remain fully engaged in the ASP episode.</li> <li>• We will develop a robust multi-agency data set to inform planning, manage workload efficiently, target resources on key issues, to inform improvements to practice, and to demonstrate outcomes.</li> <li>• Improve our use of chronologies to identify patterns of behaviour and escalating risks.</li> </ul> <p>IW feels really assured that we can demonstrate improvements have made since the inspection. BA asked that members of the ASP Committee review the document and provide feedback to IW on any changes or additional information they feel is necessary.</p>	
<p>5</p>	<p><b>Good Practice for Effective Participation by the Adult in Adult Support and Protection Case Conferences</b></p> <p>IW advised that this is a key improvement area as defined in the ACP improvement plan. The document has recently been published. IW is to consider the findings in the guidance and how these can be used to better engage adults and their unpaid carers in all aspects of ASP practice.</p>	

**NHS Update**

The NHS ASP team issued a Vital Signs Tayside-wide NHS communications route in July 2024, reminding all NHS staff of their duty to cooperate responsibilities, particularly around attendance at case conferences. GG is aware that there is a reliance on the NHS ASP team to attend to represent NHS rather than when that person is open to a team that they should be attending not only as part of the duty to cooperate, but they know that person best, they can address recommendations, actions, etc. The ASP NHS team is still happy to act as point of contact to identify who would be the appropriate health representation should be and follow that up.

Steps have also been taken to draft an Adults with Incapacity Act audit tools particularly for Health. This is a recurring theme not only in their own single agency audits, but in some of the case reviews around our staff's knowledge, understanding and practise around certain aspects of Adults with Incapacity. A draft tool has been created which GG will issue to IW for his thoughts. The tool is to be evaluated in a few areas before it is finalised.

Adult Protection champions within our LD inpatient services is being tested initially, with a view to rolling that out.

NHS AP team hope to look at organisational harm due to a number of recent cases and concerns had across the organisation, in all three localities. This is to highlight that organisational harm exists and broader such as restrictive practise, delayed discharge etc and where that that may come under that.

GG hopes to also link in with IW regarding older adults as they do not see as many health referrals from the older adult population in both community services and inpatient services. GG feels there is a mismatch therefore will discuss this further with IW.

Susan Torrence, the teams Senior Nurse is part of the Adult Support and Protection Learning and Development Framework writing group, therefore not only do we have health input but someone from Tayside feeding into that.

Healthcare Improvement Scotland are leading some work to look at the link between our adverse events within health and how that may link into learning reviews and the broader reviews which GG will be attending. We often see where someone could be subject to a number of reviews, therefore we will look at how to streamline that and how our internal processes link into that.

A public protection learning review community of Practise Group has been established that looks to bring together learning on themes from both child protection and adult protection learning reviews and how we might start to have a look at that nationally in terms of recommendations, approaches, etcetera. There has only been one meeting of that which was the terms of reference and the focus. Again, it is good that someone from heath and Tayside will be involved in that.

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7	<p><b>Police Scotland Update</b></p> <p>VPD referrals has reduced on the last 3 years due to several factors which has been discussed earlier today. The VPD backlog has been cleared for a number of months.</p> <p>Change to the concern hub structure has now been authorised through our senior leadership team and through the unit Staff Union as well. Those changes are due to go live on 21<sup>st</sup> October 2024.</p> <p>Kevin Mollison – Vulnerable Persons Database  Lee Stewart – Adult Support Protection (IRDs, Case Conferences etc)  Kerry Reid and Michael Wilson-Wynne will report to Lee Stewart.  Domestic Abuse Liaison Officers will also come under the Safeguarding unit.</p> <p>SM asked if Police Officers aware of how to recognise an adult at risk of harm and do they know where to go or what to do with that.</p> <p>LS confirmed that guidance was provided along with training in relation to ASP and spotting those that are vulnerable. Officers also know that there are dedicated Adult Support and Protection advisors that can provided advice and assistance, and people regularly come to the team. However, if an Officer is dealing with someone that they have any doubts in, they will raise a VPD. That information is then assessed by the call handlers and police officers in the control room also. Therefore, there are a number of layers to capture that.</p> <p>LS highlighted Operation Reform, work being carried that his Chief Constable spoke about earlier this week. It is focusing on officers dealing with crime rather than vulnerabilities and for partners to improve their processes as a lot of the time Police are dealing with vulnerabilities when they are not trained medical professionals, they are officers. Officers will understand when something is not right and highlight it, once that is done the right partner should bridge that gap and provide the wrap around care for them.</p>	
FYI	<p>Documents for information:</p> <ul style="list-style-type: none"> <li>• Proposal to amend section 5 of the ASP Act</li> <li>• NASPC quarter one progress report - L&amp;D Network Meeting 17.09.24</li> </ul>	
AOB	<p><u>Transitions</u></p> <p>SM mentioned that she had a session with the NHS Tayside Board and <i>the promise</i> was discussed and the fact that the promise extends to young people up to the age of twenty-six of their care experience. SM suggested this could be a discussion for a future AP Committee meeting. BA acknowledged that whilst transitions has been a priority for the APC, however, takes on board regarding the promise and will discuss this with IW regarding arranging a discussion at some point in the future.</p>	

IW advised that he and Ross Drummond developed guiding principles around what transitions need to look like. Periodically IW also meets with AS, the Chief Social Work Officer and IW raised some concern the last time he met him, about how we begin to operationalise the screening on any information relating to the 16-18 group, particularly following the revision of the Children (Scot) Act. AS has asked Julie Baker and IW to establish a short life working group together between colleagues in Child and Adult services. A session has been arranged for November to determine the delineation between what might be considered child protection and what is considered adult protection.

BA notes there has been a long standing discussion regarding transitions and how to get it right so that it meets the needs of the young people rather than meeting the legislative requirement, which is where the difficulties come into this and is the reason we have been looking at the current arrangements.

LS said that often Police are in the middle when it comes to how young people are treated, and quite often it is young vulnerable people being treated as an adult due to their age and not being in education. LS is aware from learning reviews completed that there has been young people housed with adults in homeless shelters which in his opinion will not result in a positive outcome. LS would like to be sure that police have a place within the discussions regarding transitions and asks IW to be involved in any meetings going forward regarding this. BA notes that transitions is a much wider issue than social work, it is a multiagency issue and complex.

JH said that within children's hearings there is a variance on the continuing care legislation and how and when that is used. JH said that she feels it is sometimes hard to understand the reasons for those decisions and the rights for the young person change quite significantly based on this decision.

Future discussion regarding transitions will be arranged.

#### Independent Advocacy

JH highlighted that there is a new service within Independent Advocacy working with new Scots in Perth and Kinross. Yesterday was the first open session where people could come along and there was fourteen people that attended. Translation is an issue which they are peer supporting and finding a human way around that.

JH advised they had a full day training from Dev links in Dundee regarding vulnerabilities that we should all be aware of which are endless. Vulnerabilities that stopped the advocates in their tracks was deafness and blindness. Younger people are becoming deaf quicker, and it is something that will be a growing issue. There are two advocates that are in training for trainers, for reducing and identifying stigma, which is a public health initiative. As an organisation Independent Advocacy also attended a Scottish Human Rights conference recently in Glasgow and the Scottish Independent Advocacy Alliance Conference. The focus of both of those conference was the LDAN (Learning Disabilities, Autism and Neurodivergence) bill, which is not going through, and

the human rights bill, which has also been delayed.

#### Carers Rights Day

KS highlighted that Carers Rights day is on 21<sup>st</sup> November 2024. There was a successful carers week. There are currently six infomercials that will be shown regarding:

- looking after someone
- emergency planning,
- financial support for Carers,
- Hospital to home,
- carers rights
- adult carers support plan.

KS asked if GG or IW wanted an infomercial launched into community groups and team on 21<sup>st</sup> November to let her know.

#### AP Committee meeting in November 2024

At the next AP Committee meeting we hope that an adult may join who was subject to an ASP episode may speak to the APC about his experiences of that process. IW is to meet him. If he feels able to do this, it will be him that might determine whether he feels he is able to do this in person or on MS teams.