

EAST AYRSHIRE COUNCIL
CABINET 1 JUNE 2011
ADULT SUPPORT AND PROTECTION

Report by Executive Director of Educational and Social Services

1. PURPOSE OF REPORT

1.1 The purpose of this report is to:

- (i) advise members of progress in the development of the Adult Protection Committee
- (ii) to provide information in respect of the Biennial Report by the Chair of the Adult Protection Committee for 2008-10 and Business Plan 2010-11.
- (iii) to seek endorsement to develop a prevention strategy that sets out the vision for East Ayrshire Community Planning Partnership to utilise the resources allocated through Scottish Government in support of implementing Part 1 of the Adult Support and Protection (Scotland) Act 2007 in terms of a future direction of travel that promotes safeguarding.
- (iv) to seek agreement to alterations to the establishment within the Adult Protection Unit

2. BACKGROUND

2.1 The Adult Support and Protection (Scotland) Act 2007 came into force on 29th October 2008 with the aim of identifying and providing safeguards for adults who may be at risk of harm. There is a statutory requirement of Local Authorities to establish Adult Protection Committees. The East Ayrshire Adult protection Committee was established in November 2008.

2.2 The Act requires that "The Convener of the Adult Protection Committee must prepare a general report" which is expected to be submitted to Scottish Ministers on a biennial basis to demonstrate progress made. This report provides a summary of this biennial report and also the response from Scottish Government. The full report is available on the Members portal.

2.3 The legislative goal for Adult Support and Protection as described in the Code of Practice from Scottish Government (October 2008) was to;

"Make new provisions intended to protect those adults who are unable to safeguard their own interests, such as those affected by disability, mental disorder, illness or physical or mental infirmity, and who are at risk of harm or self harm including neglect."

2.4 It also ensures this is carried out within a range of principles that acknowledge the legal rights of adults who may be at risk of harm to live free from any preventable harm and fully participate in any decisions by public bodies to

intervene in their lives. The Adult Protection Committee has been based on the shared value base that we all have a right to live our lives free from harm and neglect.

- 2.5 The Act however does not sit in isolation from other interventions available in social work practice. Including the aforementioned Act there are currently three pieces of legislation available which can be considered with respect to the protection of adults who may be vulnerable to harm:
 - (i) The Adults with Incapacity (Scotland) Act 2000
 - (ii) The Mental Health Care & Treatment (Scotland) Act 2003
 - (iii) The Adults Support & Protection (Scotland) Act 2007
- 2.6 The Adults with Incapacity (Scotland) Act 2000 can be utilised where adults have been assessed as lacking capacity with respect to all or elements of their lives. Interventions can be granted to intervene in order to manage either welfare and/or financial matters of the person lacking capacity by social work services or privately by friends of families.
- 2.7 The Mental Health Care & Treatment (Scotland) Act 2003 requires the person to have a diagnosis of mental disorder which includes mental illness, learning disability and personality disorder in order to secure the authority to intervene in terms of treatment, location and support provision.
- 2.8 All three Acts can be utilised in order to protect vulnerable adults, however due consideration is required as to which may be most appropriate with respect to meeting the needs of the situation.
- 2.9 As case law develops through the establishment of practice of these three pieces of legislation this becomes increasingly complex, requiring all staff involved to maintain and update their knowledge base.
- 2.10 There is a clear emphasis on the role of the registered social worker retaining accountability for the care and protection of adults as part of the 21st Century Review of Social Work. It is also anticipated that there will be resulting increases in resource demands and challenges for community social care and health services. Extensive work continues to progress in terms of the social work sustainability programme to address the significant pressures on modernising working practices and service models and further consideration will require to be given to strengthen front line services to meet the increasing demand of adult protection activity.
- 2.11 The existing performance reporting arrangements within the context of Adult Support and Protection legislation do not record alternative legislative solutions which have been applied in order to protect and which therefore would not be reflected in statistics that evidence growing activity in this area of work. As an example, there are currently 111 people subject to Guardianship in East Ayrshire. In order to provide protection for them these 111 all require their Guardianship Orders to be supervised by a Social Work officer.

- 2.12 We will require to consider further developing reporting processes that will enable an overview of the practice, resource commitments and range of interventions utilised to protect beyond the confines of the ASP. It will also enable informed consideration with respect to resource and training requirements across agencies involved in protection activity.

3 PROGRESS OF ADULT SUPPORT AND PROTECTION IN EAST AYRSHIRE

- 3.1 The Biennial report by the APC Independent Chair is the first of its kind and provides the full detail of the progress made by the APC in the two years since the act came into force. It is endorsed and supported by the APC and Multi Agency Chief officers Group for Child, Adult and Public protection within East Ayrshire.
- 3.2 The report has provided an opportunity for the APC to demonstrate to what extent it has been able to implement the act and the development of adult support and protection policy and procedures.

3.3 Overview of the Biennial Report

The report provides information on a number of areas which include;

- The impact of local demography
- A perspective and experience from Service users and Carers
- Management information including analysis of adult protection activity and local procedures
- The impact of national critical case reviews and the local response
- Public information and awareness raising activity
- How well agencies are working together to protect people
- Local training developed and workforce issues
- A business plan for the APIC and partners to focus on and to achieve to build on current successes.

3.4 Summary of Key Findings

- 3.4.1 The East Ayrshire demographic profile identified a declining adult population where there is a projected increased aging population. There are challenges faced by the adverse impact of alcohol, tobacco, obesity, disability and poverty on the population however it is acknowledged that there is a robust structure for Community Planning Partners to address these. The APC has developed an Adult Protection Unit who through a number of sub groups have identified the key priorities of the business plan that demonstrate and contribute to national and community planning priorities and local outcomes.
- 3.4.2 The report recognised that the APC has established a multi agency partnership through its membership and governance arrangements which demonstrate clear lines of authority and accountability to partner agencies through the Chief Officers Group.

3.4.3 In terms of activity around prevention, recognising harm and the support of adults at risk the adult protection unit and partners have established effective interagency procedures. Management information identified that;

- There have been a total of 312 reports of adult at risk which is a 93% increase since the implementation of the act with an average 20% increase projected per annum.
- In terms of formal investigation leading to case Conferences and protection planning activity this has risen from 6.3% to 12.6% which suggests an increased success in identifying situations where adults were at significant risk and required intervention.
- The highest categories of referrals are associated with adults with learning disability, mental health issues and dementia including the impact of alcohol related brain damage.
- Reports associated with self harm have had the highest increase and incidents of financial and physical harm are consistently higher.
- Alcohol misuse has been a significant factor in contributing to harm and in particular women with disabilities are affected by harm from another who is affected by alcohol misuse.
- Evaluation of activity suggest key priorities for further work will be to monitor trends in relation to older people and financial exploitation as well as monitoring the implementation of the dementia strategy
- Intervention using statutory Protection Orders designed to intervene when serious harm has occurred remains relatively low (5 banning orders) which was anticipated .
- The main activity is around the local authority responding to inquiries and investigations with the majority of referrals requiring no further action under adult protection procedures but mainly support from social work or other agencies.

3.5 Key Achievements

3.5.1 There have been many areas of joint working with partners across the three Ayrshire APC's, the Child Protection Committee and agencies of the Council, NHS and Police. A few of these successes noted have been:

- The clear leadership and direction for adult support and protection through the establishment of the APC, Adult Protection Unit and sub groups which were further enhanced by the appointment of an Independent Chair in December 2010.
- Established multi agency West of Scottish Guidance across Ayrshire and improved the local East Ayrshire's interagency operational policy and practice for support of adults at risk of harm.
- A local Act against harm media campaign continues to increase local awareness that harm happens and the Adult Protection Unit has developed its own website and multi agency public information materials.

- A rolling calendar of training has been established which includes training for registered establishments and independent providers and a total of 1,938 places have been provided as well as attending a number of local community partnership events for older people, those with a learning disability and homeless services.
- Established a weekly legal solutions forum for social services and other parties to provide support and advice on best practice when considering if legal intervention is appropriate and necessary. This is a response to many national enquiries and serious case reviews where agencies have been criticised for not exploring legal options at crucial times where there are potential issues.

3.6 Future Priorities

3.6.1 The APC Business Plan 2010-11 details the priorities and has clear links to the Community Plan in terms of National priorities of the Single Outcome Agreement and the main community planning partners strategic priorities of;

- improving community safety in neighbourhoods and homes, and protecting our most vulnerable individuals and families
- protection of children and the safety of vulnerable adults, individuals and families promoted and;
- Improving physical and mental health, wellbeing and care, and reducing health inequalities.

3.6.2 A summary of some of the key actions from the business plan will be:

- Strengthening partnership arrangements by establishing a model of involving the independent sector and service users and carers in the APC.
- Improve partnership information sharing by reviewing the current multi agency information sharing protocol.
- Continue to engage and improve knowledge and cooperation of general practitioners of NHS staff in relation to their role and responsibilities relating to Adult Support and Protection.
- Improve arrangements for sharing information regarding work of the APC by developing a communication strategy.
- Priority groups identified within the Biennial Report to have increased awareness of adult support and protection issues and local practice to identify future needs.
- Ensure process for systematic evaluation of Adult Protection practice is in place through development of a performance framework tool.

3.6.3 In conclusion the Biennial Report acknowledged the steady progress made in East Ayrshire in terms of delivery on all aspects relating to the committee functions. Strong and effective partnerships are being forged within Scottish Government, between and within planning parties and are positive in terms of building on achievements and successes within the adult support and protection agenda.

4. SCOTTISH GOVERNMENT RESPONSE TO EAST AYRSHIRE PROGRESS

- 4.1 The East Ayrshire Adult Protection Committee Biennial Report Feedback from Shona Robison MSP, Minister for Public Health and Sport substantiated the success of progress made in East Ayrshire.
- 4.2 The minister acknowledged the key role that Adult Protection Committee's play to ensure the new law is implemented nationally and noted the national difficulty experienced in accessing medical examinations. The Scottish Government is currently working closely with the British Medical Association to address this through issuing guidelines.
- 4.3 It was noted that in East Ayrshire reports of harm have not been restricted to any specific group the Minister felt this highlighted the importance of ensuring Adult Protection remains a priority for everyone.
- 4.4 A summary of other key points made by the Minister included that our Biennial Report demonstrated that East Ayrshire;
- Have very strong links and joint working has been created with different partners all across the Council.
 - Clearly demonstrate a commitment to adult protection by all agencies.
 - Reflect an impressive vision of adult protection as a joined up approach to public protection.
 - Have an innovative approach to prevention of harm which has the potential to lead to better outcomes for adults at risk of harm
 - Has an increased level of awareness of the act amongst staff across agencies due to the provision of training.
- 4.5 The Minister recommended the Committee continues its current approach and in the next two years would like us to;
- Continue to promote increased awareness across communities which is already started to happen through visits to local community groups.
 - Provide more information about the outcomes for adults who have experienced adult protection procedures. The Committee is considering a self evaluation this year which will tell us more about this.

5. MOVING FROM PROTECTION TO PREVENTION

- 5.1 It is recognised that we have a wide range of legislation that is designed to support and protect the most vulnerable in our communities. The real challenge for all partners is to ensure we work in ways that ensures best practice when applying the law however it is evidenced that the law alone does not always support and protect people or prevent them from harm.

5.2 Safeguarding networks recognize that the experience of harm and neglect is likely to have a significant impact on a person's health and wellbeing. "The very nature of abuse is the misuse of power by one person over another has an impact on their independence. Neglect can prevent a person who is dependent on others for their basic needs exercising control over the fundamental aspects of their life and cause humiliation and loss of dignity." Leadership in Social Care (2005)

5.3 In East Ayrshire we recognize our success in developing our APC partnership and within that development of policies and procedures that strengthen the capacity of our workforce and partners to support and protect individuals, families and our community. However given the complexity of the factors that contribute to harm we can't do this in isolation. We will also need to move towards a strategic direction that balances an approach that places equal importance on ensuring the causes of harm and its effects on people and communities is prevented, removed or reduced.

5.4 The aforementioned elements can be defined as a Safeguarding approach which is defined as;

"a range of activity aimed at upholding an adult's fundamental right to be safe at the same time as respecting people's right to make choices. It involves empowerment, protection and justice." (Improvement and Development Agency and centre for Public Scrutiny; 2010 p4)

5.5 The 5 key elements of a prevention strategy recognized by the Improvement and Development agency are;

- **Reducing the likelihood of repeat episodes of harm**

Improving policy and practice across agencies. These include how services whether paid or voluntary safely recruit their staff. How we learn from good practice but also that we learn when things go wrong for example national local enquiries and enquiries of serious case reviews.

We know that services that have good recruitment and disciplinary procedures and prevent the likelihood of people who harm being hired of have record that can prevent the likelihood of these persons causing harm doing it again.

Making sure that when we collect information about what happens locally (data) we analyse the trends and made sure the evidence is shared with partners so we can work on ways that lead to reduction in harm.

- **Empowering people to safeguard themselves**

By making sure information about harm is available to that people know how to recognise this and know who to report this to; we will increase people's confidence and ability to keep themselves safe.

People will be more likely to report harm if we have clear information in different ways that people can understand the public will be more likely to report harm or concerns.

This also includes building the capacity of our community to become key partners in all aspects of what we do. This includes building service user participation into our membership; monitoring, development and implementation of our work and training strategy. Proactively promoting the participation of those affected by harm at the earliest stage in particular in planning and implementation of peoples safeguarding assessment and plans will be crucial.

- **Improving services and systems quality**

Make sure that people who provide support for others are better trained in recognising harm, understanding its effects on people and how best to support people to prevent themselves and promote good practice in positive risk taking.

- **Earlier detection of harm**

Making sure that partners have practice that identifies clear outcomes with and for people will help establish better relationships and increase the likelihood of someone discussing harm. Open discussions naturally increase the likelihood that taboo issues can be raised and therefore dealt with. Person Centred Practice and personalised services can encourage confidence; promote independence therefore help safeguard people.

- **Analysis of safeguarding information to understand and mitigate risk factors**

Information that is collected that is analysed to show a pattern or trends can be used to take action that either makes certain groups a priority for action or where practice can be changed to prevent harm in the future. It may identify areas that make the risk of harm more likely and these can be acted on. This local research can be used to look at other models of practice used that may prevent harm.

5.6 The key to ensure we are able to deliver on the strategy will be to strengthen our vision and as we move into Year 3 of the implementation of the Adult Support and Protection (Scotland) Act 2007 we have an ideal opportunity to consult with our current and future planning partners in developing the strategy that takes us from 2011-2015 when Community Plans will be reviewed.

6. FINANCIAL IMPLICATIONS

6.1 The Scottish Government has made available a national resource of £15.6M through Local Authorities, to support the ongoing implementation of the Adult Support and Protection (Scotland) Act 2007. Until 2011/12 this has been paid to Council's on behalf of the partnership as a redetermination of the general

revenue grant. An additional £0.4million is paid to the Police as a separate grant through Central Government for their specific functions in respect of the Act.

- 6.2 Following the Scottish Government study to review the costs of implementing the legislation the funding for 2011-12 remains at the same level as 2010-11, but has now been included in the annual review funding.
- 6.3 In terms of East Ayrshire the allocation which was originally agreed with COSLA was £367K and was based on the authority population as a proportion of the Scottish population over 16 years of age. This consists of:
- an allocation to cover costs associated with Adult Protection Committee independent convener costs;
 - An allocation for additional frontline staffing costs;
 - An allocation for developing Adult Protection Units.

7. HUMAN RESOURCES IMPLICATIONS

- 7.1 The current performance management statistics have identified implications for East Ayrshire Social Services in terms of the capacity of front line services to sustain the current level of inquiry activity that is being generated by the significant increase in reporting of adults at risk of harm.
- 7.2 The APC as part of their preparation for completing the Scottish Government Adult Support and Protection Survey 2010/11 returns completed an analysis of the additional hours that social workers and care managers have spent on work activity responding and enquiring into Adults at Risk Referrals since the implementation of the Act.
- 7.3 A template was designed to capture work activity involved in Adult at risk referrals and 3 Categories of referral were identified and analysed to give the average time spent on each referral of this nature;
- Category 1-Referrals that resulted in No further action (NFA) – 8.75 hrs
 - Category 2 - Referrals that resulted in additional supports being provided to manage risk (no further action under formal procedures i.e case conference) -10.4 hrs
 - Category 3 - Referrals that required multi agency formal adult protection procedures e.g Case Conference – 33 hours.

In terms of the categories the total number of hours spent over the year was;

- Category 1 - $43 \times 8.75 = 376.25$ Hrs per annum
 - Category 2- $88 \times 10.4 = 915.2$ Hrs per annum
 - Category 3 – $24 \times 33 = 792$ Hrs per annum
- 7.4 In relation to responding to this additional work it is equivalent to one full time social worker working full time for 59.45 weeks exclusive of any days off for

training or leave. It should be noted that the activity has continued to grow by 20% therefore it is highly likely that this figure underestimates current resource demands.

- 7.5 The statutory activity referred to above highlights the need to review the current budgetary allocations and ensure sufficient resources to meet the demands placed on both the adult protection unit team and the front line services.
- 7.6 Due to the original model of funding from Government the posts within the Adult Protection Unit were established as temporary, but are staffed by permanent employees. With the funding model now established it is proposed to add the posts detailed below to the permanent establishment.

Posts		Salary Costs (including on-costs)
Adult Protection Coordinator	Grade 12	49,400
Learning and Development Practitioner	Grade 11	43,230
Resource Assistant	Grade 7	28,140
Legislative Reporting Assistant	Grade 6	25,481
Administrative Support (P/T)	Grade 3	9,740
		155,991

- 7.7 It is also proposed to establish 2 posts for registered Social Workers to increase capacity in frontline services to meet the emerging pressure of the Act.

Post	Salary Costs (including on-costs)
Social Worker X2	84,966
	84,966

- 7.8 The resources for the above posts is available from the dedicated funding provided by Scottish Government.

8 POLICY AND LEGAL IMPLICATIONS

- 8.1 The delivery of the support and protection of adults at risk of harm is a statutory duty of all public bodies of the Adult Protection Committee (APC), Child Protection Committee (CPC) and Multi Agency Public Protection Arrangements (MAPPA) and a key priority for all Community Planning Partners.

- 8.2 The proposals within this report support the Council meet the duties of the legislation.

9 COMMUNITY PLANNING IMPLICATIONS

- 9.1. The safeguarding of adults children and families is an integral part of the Community Planning Partners strategic priorities for the protection of children

and vulnerable adults, individuals and their families and is a positive example of Community Planning partners working together.

10. RISK IMPLICATIONS

- 10.1 Delivery of effective social care, housing, health improvement and health services mitigates against risks to individuals against the impact of harm abuse and neglect.
- 10.2 Development of sustainable models of care mitigates against financial risk to the public sector.

11. EQUALITIES IMPLICATIONS

- 11.1 The delivery of the East Ayrshire Adult Protection Committee business plan is a positive contribution of inclusion of adults who may be at risk of harm.

12. RECOMMENDATIONS

It is recommended Cabinet:

- (i) Note the positive progress achieved in the initial 2 years of implementing the Adult Support and Protection (Scotland) Act 2007
- (ii) Agree the Human Resource Implications at section 7 of this report
- (iii) Endorse the general principles and approach for an East Ayrshire Safeguarding Strategy as outlined in section 5 of this report.
- (iv) Agree to receive further reports from the Executive Director of Educational and Social Services in respect of the development of an East Ayrshire Safeguarding Strategy as details of the plan are developed.
- (v) Otherwise note the content of this report.

Graham Short
Executive Director of Educational and Social Services
19 MAY 2011

LIST OF BACKGROUND PAPERS

- 1. East Ayrshire Chair of the Adult Protection Committee Biennial Report 2008- 10 and Business Plan October 2010-October 2011

**IMPLEMENTATION OFFICER: EDDIE FRASER, HEAD OF SERVICE:
COMMUNITY CARE**