



Dundee
Adult Support &
Protection Committee



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...**who?**

**BIENNIAL
REPORT
2022**



Adult Support
& Protection
Committee Dundee

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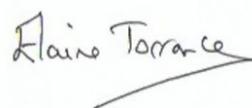
Introduction

Welcome to the Dundee Adult Support and Protection Committee Bi-annual report which covers the period April 2020 to April 2022. I hope you find the information in the report interesting and helpful. The report covers a range of areas including local data and trends relating to Adult Support and Protection, learning and development opportunities for staff, outcomes and improvements made during this period and future plans.

The report covers the period when all agencies were having to adapt their responses to deal with the COVID-19 pandemic. This was a particular concern to ensure support was provided to vulnerable people and their families when traditional support services such as local community lunch clubs or day centres were closed and social distancing was required. The Committee met more frequently during this time to share information and provide a joined up, partnership response. In my role as Independent Convenor I was impressed by the adaptability of all the agencies and the flexibility and commitment of all staff who worked together to offer ongoing support and keep people safe during the pandemic.

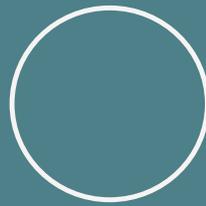
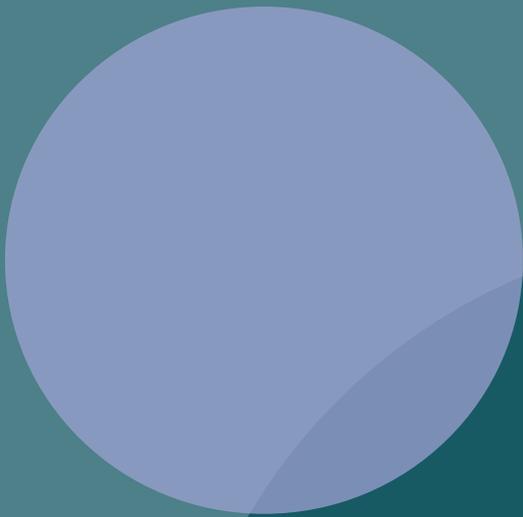
This work continues and the report sets out the achievements over the last 2 years as well as some areas identified where we are able to improve processes and practice, including learning from case reviews and implementation of new national guidance which has recently been published.

I would like to take this opportunity to thank all members of the Committee for their ongoing support and dedication and recognise the ongoing work and commitment of all staff across all the agencies – health, social care, police and the voluntary sector. Finally, thanks go to the people and communities of Dundee who look out for their families and neighbours and continue to provide support to keep adults safe and supported in the City.



Elaine Torrance
Independent Chair

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1. Protecting People



“Dundee’s future lies with its people. They deserve the best this city can give them. We will provide the protection they need, when they need it, to keep them safe from harm.”

Key Principles of Protecting People

- The protection of people in Dundee is part of the overall provision of services that will deliver positive outcomes for people in Dundee.
- The people delivering those services will have the knowledge, skills and experience to deliver quality services.
- We will deliver our vision by working in partnership across the statutory (Dundee City Council, NHS Tayside, Police Scotland and Scottish Fire and Rescue Service) and voluntary sector.
- We will work with our partners in other local authority areas, both in Tayside and throughout Scotland, to improve services to protect people and work towards a consistent approach.

Governance Arrangements

The wider Protecting People strategic agenda in Dundee City is led by a number of key public protection partnerships. These include the Alcohol and Drug Partnership (ADP), the Adult Support and Protection Committee (ASP), the Child Protection Committee (CPC), the Violence Against Women Partnership (VAWP) and the Multi Agency Public Protection (MAPPA) Strategic Oversight Group. All report to the Chief Officers Group (COG).

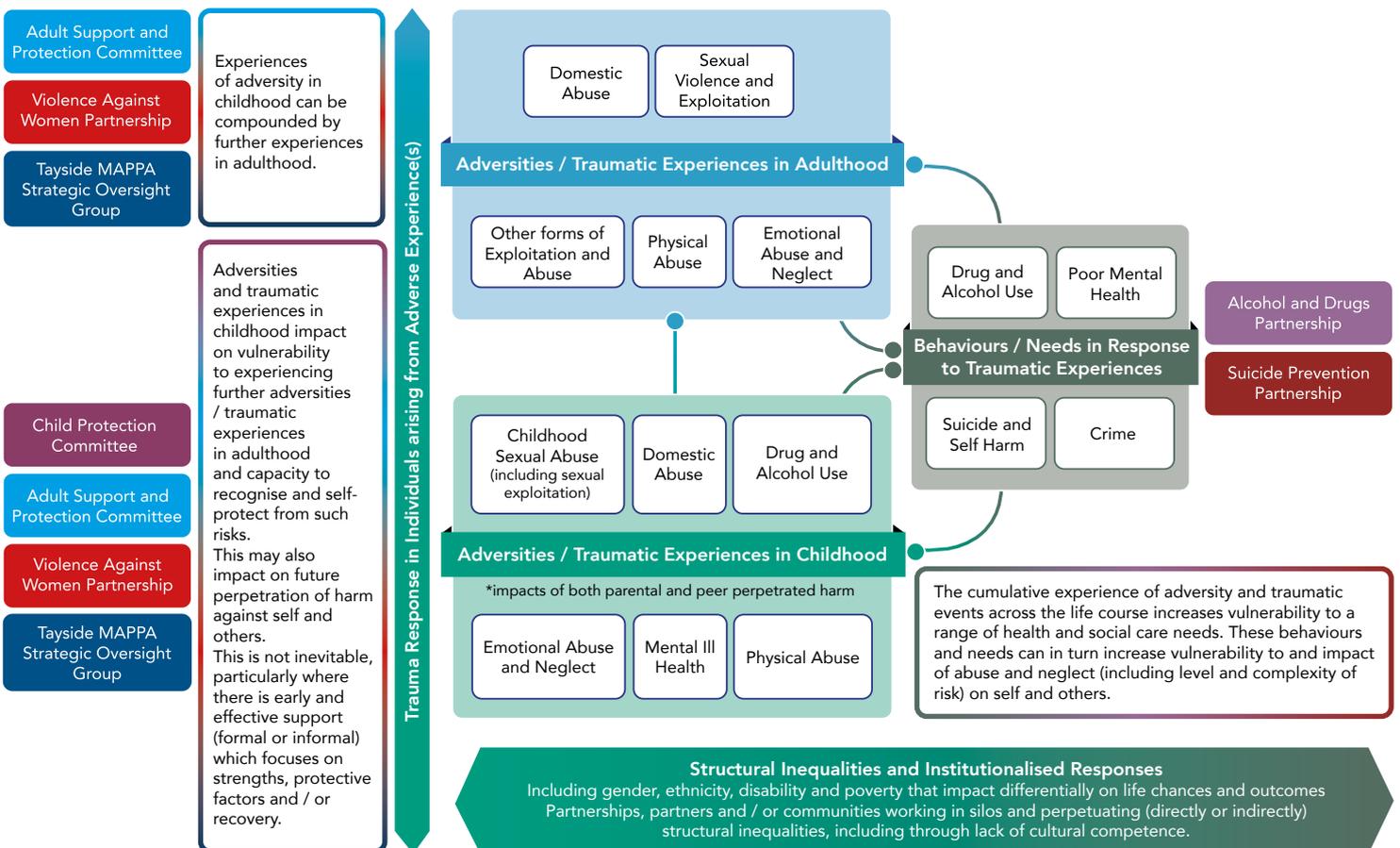
The COG oversees the strategic direction for overall public protection and seeks assurance from the ASP Committee. The COG is also helpful in providing solutions and resources if needed to improve local arrangements.



Integrated Public Protection Approach

In Dundee an integrated protecting people approach has been adopted and informs all of our work to protect people at risk of harm. Across all of the protecting people committees / partnerships we are committed to developing approaches that improve support to people with often multiple, complex and changing needs which typically arise from experiences of trauma, instead of individually and separately addressing specific themes.

To highlight the interconnected nature of Protecting People work and how experiences of trauma can impact life experiences and outcomes, the following diagram was produced to provide a visual rationale for our integrated protecting people approach.





Dundee Adult Support & Protection Committee

Dundee Adult Support and Protection Committee (ASPC) is responsible for monitoring and advising on adult protection procedures and practice, for ensuring appropriate cooperation between agencies and for improving the skills and knowledge of those with a responsibility for the protection of adults at risk.

In the light of the Adult Support and Protection (Scotland) Act 2007 (Section 44), the 2008 Scottish Government Guidance for Adult Protection Committees, and the revised Code of Practice, 2014, the Committee will establish and regulate its own procedures.

The ASPC is a body required by statute, locally, this reports to the COG which promotes clear lines of accountability between the Committee and local council, health board and police.

The functions of the Dundee Adult Support & Protection Committee as specified under the Adult Support & Protection (Scotland) Act 2007 (Section 42) are:

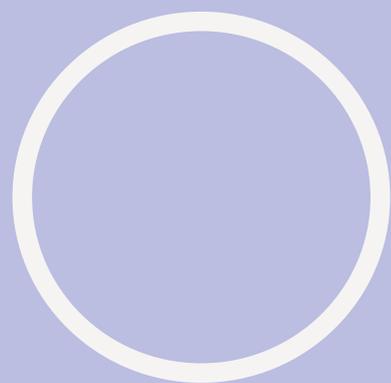
- To keep under review the procedures and practices of the Council, the Care Commission, NHS Tayside, Police Scotland which relate to the safeguarding of adults at-risk present in the Council's area (including, in particular, any such procedures and practices which involve co-operation between them);
- To give information or advice, or make proposals, to the Council, the Care Commission, NHS Tayside, Police Scotland on the exercise of functions which relate to the safeguarding of adults at-risk present in the Council's area;
- To make, or assist in or encourage the making of, arrangements for improving the skills and knowledge of officers or employees of the Council, the Care Commission, NHS Tayside, and Police Scotland who have responsibilities relating to the safeguarding of adults at-risk present in the Council's area;

This includes:

- Developing and introducing arrangements and protocols for interagency working, and auditing and evaluating the effectiveness of these arrangements;
 - Developing procedures, policies and strategies for protecting adults at risk and reviewing these;
 - Developing and introducing arrangements to monitor, review, disseminate and report activity data in relation to the protection of adults at risk;
 - Raising awareness and providing information and advice to the wider community and to professionals;
 - Training and development activities;
 - Improving local ways of working in light of knowledge gained through local and national experience, case review and research;
 - Publication of a strategic and business plan and the monitoring of its implementation;
 - Improving co-operation between each of the relevant public bodies and office holders, and
 - Undertaking any other functions relating to the safeguarding of individuals as the Scottish Ministers may specify by order.
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2. Dundee at a Glance

Snapshot of Dundee

4th

highest prevalence of drug use in Scotland; with an estimated 2,300 problem drug users in Dundee². Alcohol related harm is also high both in terms of hospital attendances and alcohol-related deaths.

23,958

children and young people aged 0-15 years living in Dundee City (and a further 20,568 aged 16-24 years)¹.

HIGHEST

of the Dundee population live in the 20% most deprived SIMD data zones; including 10,506 children aged 0-15 years (43.8% of all children in that age group)⁴.

5th

highest rate in Scotland of adults (aged 16-64) who reported in the 2011 Census that they are living with a mental health condition.

36.6%

prevalence (per 100,000 population) of incidents of domestic abuse recorded by the police in Scotland³.

¹ National Records of Scotland, Mid-year Population Estimates 2020

² Public Health Scotland. Estimating the Prevalence of Problem Drug Use in Scotland 2015/16, published 2019.

³ Domestic abuse: statistics recorded by the police in Scotland 2019/20

⁴ Scottish Index of Multiple Deprivation, 2020

DUNDEE

1/4
in
POVERTY
2nd highest in Scotland

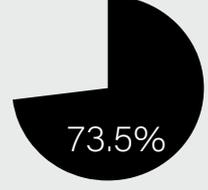


is **Scotland's**
fourth largest city

Dun dee

Employment rate

January - December 2020
ONSS ANNUAL POPULATION SURVEY



Dundee

Scotland

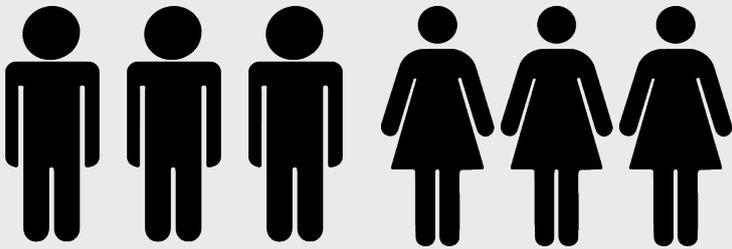
147,720

people as of June 2021*. Down from 148,820 in 2020
*NRS 2021 Mid-Year Population Estimate

ALCOHOL DEATHS

27.04 per **100,000**

5th highest in Scotland



71,220

76,500

73.8

 Male life expectancy

79.4

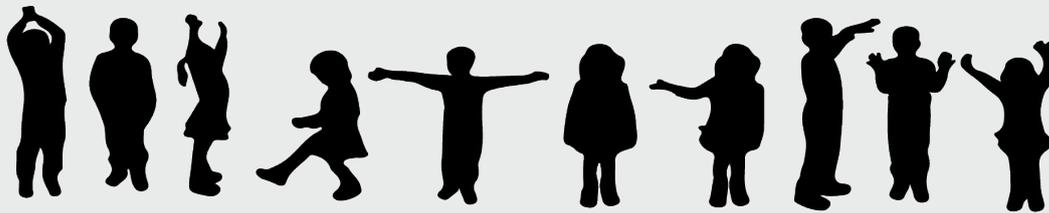
 Female life expectancy

0.23%

Imprisonment rate
1st highest in Scotland

DRUG USE Est **2,300** DEATHS **45.2/100,000**

(5 year average) 1st Highest in Scotland
Drug use: 4th highest in Scotland



CHILD PROTECTION

ORDERS **2.2** per **1000**
1st highest in Scotland

64 / 10000

16-64
living with mental health conditions
5th highest in Scotland

177 / 100000

DOMESTIC ABUSE

(5year average) 1st highest in Scotland



SUICIDE **22 PER 100,000**

1st highest in Scotland

Trauma Informed Implementation

The Dundee Trauma Steering Group have recently launched a local implementation plan for trauma informed practice across the workforce in Dundee.

Research tells us that while anyone is at risk of experiencing trauma, women are significantly more likely than men to experience trauma as a result of being a victim/ survivor of domestic abuse, rape and sexual assault, stalking and harassment, commercial sexual exploitation and other forms of gender-based violence. Women are also likely to face significant barriers to accessing support for violence and abuse as a result of experiencing feelings of stigma, blame and judgement around their traumatic experiences, not feeling believed by professionals if they disclose what has happened to them, and facing complex referral pathways to support, which can be re-traumatising. Without adequate support, women and children who have experienced Violence Against Women are at increased risk of experiencing other negative outcomes. It is therefore vital that trauma-informed systems and services are in place locally that take account of previous, current or ongoing experiences of violence, abuse and trauma, and ensure that women and children's voices are heard and their rights are respected.

Our commitment to tackling the challenges that people and families face is reflected in the activity undertaken by multi-agency partners across the city to tackle issues such as drug and alcohol use, mental health, domestic abuse and neglect at the earliest possible stage.



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3. Response to COVID-19 Pandemic



The following summarises the impact of and response to COVID-19 on Adult Support and Protection Activity in Dundee during the period covered by this report. These have been broken down into strategic and governance functions, core statutory functions, prevention and communication and remobilisation. Much of this information has previously been provided to both the Scottish Government and Care Inspectorate in greater detail, at various times throughout the pandemic.

Strategic and Governance Functions

The frequency, duration and content of both the ASPC and COG (Protecting People) was adapted to better address both the strategic and operational risks identified. These took the form of fortnightly on line Conference Calls with the primary focus being a focus on hidden harm whilst support services such as day services were closed. The Committee focused on multi-agency partnership working and the Protecting People Risk Register was helpful in identifying risks but also mitigating actions that were being taken by partners. In addition, operational data was been made available relating to key processes on a weekly basis. Queries and good practice examples from both the national group and other local authority areas were considered and applied in a Dundee context.

A strategic risk register was already being developed prior to the pandemic, informed by multi-agency operational challenges. The introduction of COG and ASPC Executive Groups initially monitored and coordinated mitigating activity and latterly maintained the risk register as a current, relevant means of strategic overview.

Regular reporting was made to the Dundee COG enabling scrutiny of the risk register and mitigating actions. In addition, regular updates were provided to the Operational Leadership Team within NHS Tayside.

Whilst the frequency and duration of core strategic forums have returned to pre-COVID patterns, the content and supporting infrastructure has been informed by learning and improvement activity identified during the pandemic. Specifically, the ASPC Executive Group continues to meet to scrutinise risk and prioritise the committee agenda complimented by the Self Evaluation and Continuous Improvement subgroup which oversees many of the actions arising from the ASP business plan.

An example of this included oversight of the developing situation in Care Homes, the provision and use of Personal Protection Equipment and communication across this sector.

Core Statutory Functions

To mitigate risk of cross infection working environments and arrangements changed considerably in line with public health guidance, including testing and vaccination programmes. The multi-agency workforce demonstrated high levels of resilience, flexibility and commitment over this period; this has been acknowledged by the COG and ASPC.

Although the use of technology contributed greatly to the development and continuity of services this also presented challenges of access for the workforce. In addition, the pace of change and increase in evaluation activity, albeit understandable in response to pandemic risks, was identified as an issue for many staff.

The leadership and workforce responses to COVID-19 significantly increased the flexibility, speed, and impact of responses across the partnership to vulnerable groups. Informed by reflective sessions and workforce and community consultations. This approach was built upon and strengthened the ASPC Delivery Plan.

The ASPC was assured that actions around adults known to services and known to be vulnerable to harm were robust and defensible. Data was used extensively to benchmark against practice pre-pandemic. Some examples of this are explored in the next section of this report.

All adults identified as most vulnerable were Red, Amber, Green (RAG) rated, triaged / prioritised and their support packages reviewed.

Additional staff were re-deployed to support the First Contact Team at the commencement of the COVID response in anticipation of an increase in the reporting of risk. Initially concern reports decreased but subsequently rose to levels higher than that for the same period in previous years. This was mitigated somewhat by dedicated COVID services provided elsewhere across the partnership.

Personnel shortages across key partners due to sickness, self-isolation or the need to provide childcare / carer provision did not manifest as initially anticipated. However, post pandemic these have had an impact on staffing levels with additional support being offered to our First Contact service from elsewhere in the partnership.

Initially, The Early Screening Group, met virtually. This was latterly replaced by a new screening protocol, piloted in March 2021 and adopted more widely by October the same year.

Greater emphasis was placed upon reflective learning and scrutiny, evidenced by the increase in case reviews during this period.

Prevention and Communication

In addition to the platforms used by Police Scotland, Scottish Fire & Rescue, NHS Tayside, Dundee City Council and the Health and Social Care Partnership, the Protecting People Team developed and delivered a public awareness raising strategy targeting the recognition and reporting of people at risk in the wider community.

Each single agency utilised its own resources and networks to communicate operational and strategic messages to its workforce.

Where appropriate, single agency updates were shared both publicly and across the partnership by way of the ASP committee. Key national messages, questions, and best practice examples were also shared in this manner. Similarly, the Tayside ASP Lead Officers group have shared resources and expertise.

Local complimentary procedures based on updated national guidance for Adult Protection during the pandemic published by the Scottish Government were developed for staff in Dundee and distributed in the form of revised ASP protocols. This is explored in greater detail in subsequent sections of this report.

Remobilisation

Moving forward from the pandemic, the partnership has continued to build upon strategic and practice improvements developed as part of the COVID response. An example of this being, much of the infrastructure developed to deliver on the challenges of COVID have remained, strategic sub groups and interim meetings of the ASPC executive have continued as well as increasing use of the corporate risk register.

Many changes were accelerated and prioritised as a result of COVID and these have laid the foundation for the Dundee ASP delivery plan as well as single agency remobilisation activity. However, we also recognise the challenges facing the multi-agency workforce. Dundee HSCP is part way through a restructuring process and NHS Tayside continue to enhance and further develop their Protecting People provision to better address the challenges identified in the final sections of this report.

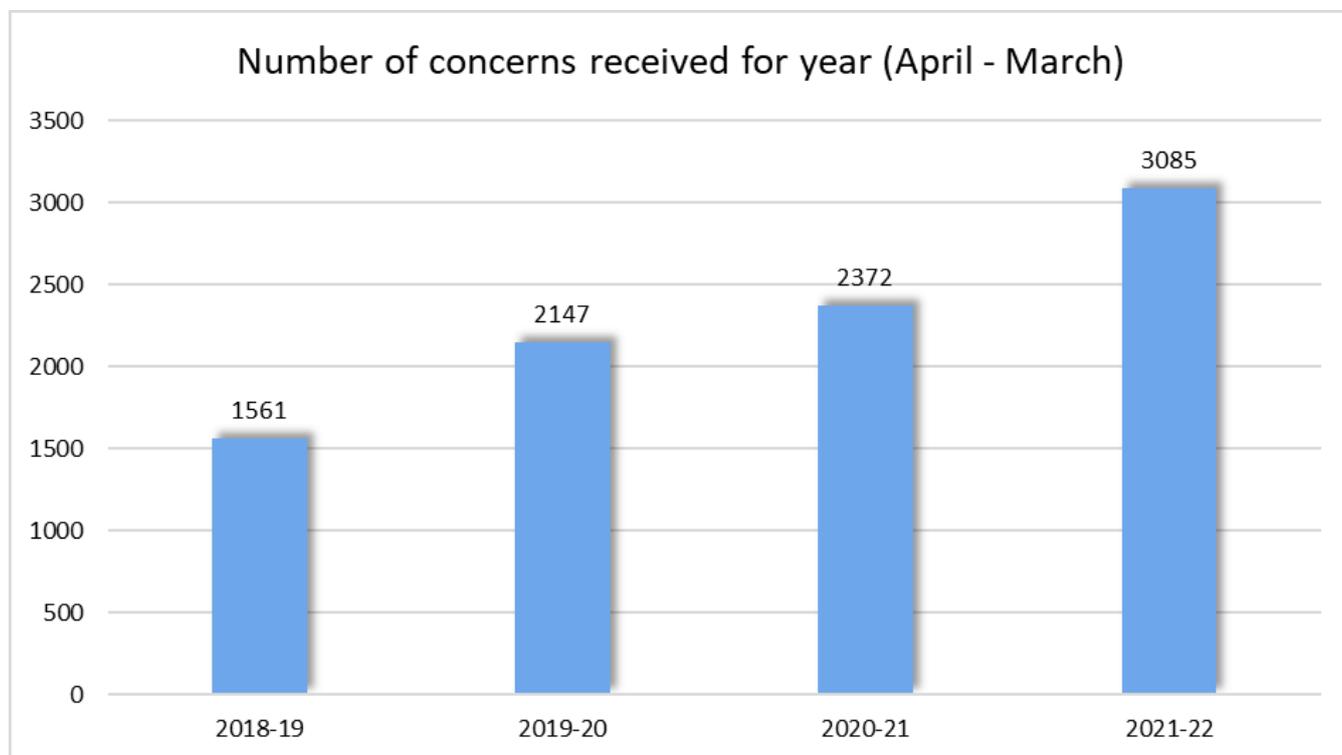
4. What Our Data is Telling Us



Improving the use of qualitative and quantitative multi-agency data to inform strategic decision making and the development and delivery of person-centred approaches to improving safety and well-being was identified as a priority for the partnership in the previous ASP delivery plan. Since then, the focus has shifted from the collation of single agency indicators to the synthesis of a wide variety of data inputs to better understand collective impact on outcomes for individuals and communities at risk.

Core data is shared across the partnership on a weekly basis. This is analysed in terms of operational practice and reporting exceptions escalated for further scrutiny. Data reports are presented quarterly to the committee with accompanying analysis, interpretation and recommendations. Most recently the Self Evaluation and Continuous Improvement sub group has offered wider interpretation of this data, generating further study, explanation and identifying both further areas for development, scrutiny and assurance.

What follows is a brief summary of key ASP data as well as examples of where this has been applied to multi-agency practice.



The number of adult concerns received have continued the recent year on year rise increasing by 47% during the period covered by this report. Dundee continues to be a national outlier in terms of the levels of adult concern reports that are recorded as being received by the HSCP from other partner agencies largely as a result of the current data recording processes.

Dundee has consistently been more than double the national average for Adult Concerns received but is significantly below average for those proceeding to investigation.

Whilst there is no evidence to suggest that adults in Dundee are at any greater risk than they would be across Scotland it has to be recognised that there are some key challenges including higher rates of drug deaths, mental health concerns and completed suicides. The high number of Adult Concerns recorded are reflective of how agencies in Dundee carries out and record their statutory duties and this is under review to try to bring this in line with other areas.

The vast majority of these adult concerns originate from Police Scotland Vulnerable Person Database reports and do not appear to meet the threshold (three-point test) to warrant a statutory response in respect of ASP processes. However, they do relate to adults who have a wider variety of needs and vulnerabilities. How we are improving our screening processes and how the Adult Support and Protection Committee is assured of the quality of screening activity is explored later in this report.

Detailed multi-agency analysis is regularly undertaken into how concerns are reported, screened, assessed and progressed. This is benchmarked against the other Tayside authority areas. Analysis was also completed into what happens to individuals who present concern but do not progress in respect of statutory intervention. The Committee were reassured that the majority of people referred were offered support in other ways than through the adult protection process.

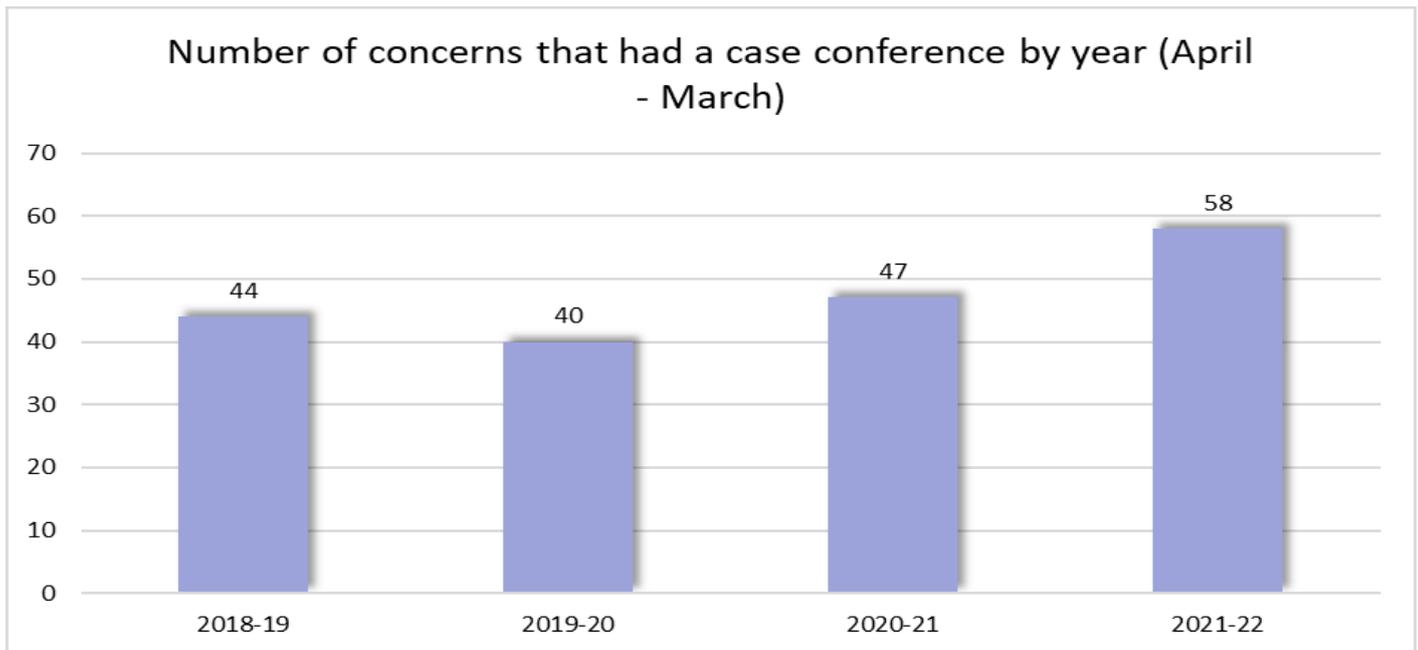
A pilot screening of Adult Concerns commenced in March 2021 resulting in a 61% reduction in recorded adult concern reports. which brings Dundee more in line with other areas. This was subsequently adopted across the partnership six months later. The primary reason given for not progressing with a statutory response is” Existing support services have been informed of the concern and will manage appropriately (least restrictive approach.)”

Although Police Scotland continue to be the major source of adult concern referrals, the past two years has seen a significant rise in concerns raised by staff in NHS Tayside. This is attributed largely to the effective work of our colleagues in the NHS Tayside Adult Protection Team in raising awareness and identifying areas for development across the NHS. Awareness raising and training has been a key factor in this increase.

Following the completion of a thematic review into fire deaths, concerns raised by Scottish Fire and Rescue Service doubled during the period covered by this report. This is reflective of focused work undertaken in respect of this particular risk factor as a result of the review and improvements made in communication and referral pathways.

Similarly, an Initial Case Review undertaken in 2021 raised issues relating to the Scottish Ambulance Service (SAS.) Assurances were received from the service that developments would continue in this area and subsequently, there was a tenfold increase in concerns raised by SAS from one during the previous year to ten in the next.

The number of Interagency referral discussions has increased by 26% over the past two years. In the year 2020/21 numbers actually decreased but it was recognised the consistent application and recording of IRD processes was an area for development and numbers have increased over the past year. Standardisation of IRD processes on a Tayside basis features in the current ASP delivery plan as a further area for development.



The number of concerns resulting in a Case Conference also increased by 22% during this period from 47 to 58 (See Table Two). Again, although the numbers are small it is significant to note that many conferences were convened without an IRD taking place. This is keeping with local guidance in so far as, in cases where initial information raises significant protection concerns, –“The IRD stage is escalated to conference where the nature and level of risk considers this to be necessary. During the pandemic period, both IRD’s and Case Conferences shifted to a virtual setting rather than face to face, which may have contributed to this increase.

Of the investigations undertaken 51 (44%) related to males and 65 (56%) concerned females. We have seen a significant decrease in the number of younger females being investigated. This had previously been an area of concern scrutinized by the committee which had sought assurance in relation to assessment of risk and provision for vulnerable young women. This has contributed to developments progressed by the Dundee VAWP relating to multi-agency trauma informed approaches to women and risk of harm.

Mental Health and Substance use feature as the primary causes of concern with most incidents of harm occurring in the individual’s home or a public place. Again, most of these referrals originate from police officers attending incidents in the community. The vast majority of these do not proceed beyond initial screening and are often referred to a service or team with whom there is an existing relationship.

The ASP committee sought assurances that these individuals were being protected from further incidents of abuse, harm and neglect and this has resulted in a number of practice improvements, for example the development of the non-fatal overdose pathway and the development of NHS Tayside Capacity Assessment pathway, both of which are explored in greater detail in the next section of this report.

Data was used extensively to help inform responses to risks identified by both the ASPC Executive Group and, latterly, the Self Evaluation and Continuous Improvement Group. Examples of these are provided as follows;

Care Homes

When benchmarking against national ASP data, Dundee City has been an outlier when it comes to “locations of harm” in so far as care homes and supported accommodation are significantly underrepresented in respect of progressing Adult Support and Protection Investigations. See Appendix One Chart 10.

This had been accounted for by the HSCP adopting a preventative rather than reactive approach to risk in a group care setting. Dundee maintains an early indicator of concern database (see next section), a care home team with dedicated key practitioners overseeing public protection responsibilities as well as robust contract monitoring and a providers' forum.

However, during the first lockdown periods, many of these preventative factors were unable to operate effectively due to the restrictions on visiting group care settings.

During the period March 2020 to April 2021 although 51 duty to enquires were undertaken in a care home setting only one progressed to an IRD and none to Case Conference. Whilst some of these concerns were subject to a Large-Scale Investigation the ASP executive group sought assurances from partners that such risks were being effectively recognised and responded to and individuals kept safe from abuse and harm. Multi-agency partners including NHS Tayside, Police Scotland Division D and Dundee Health and Social care Partnership were able to evidence that, in addition to risks arising from COVID issues, there were robust multi-agency risk management plans in place for risks identified of which the Care Inspectorate were aware of and contributed to response.

During the next period (March 2021 to April 2022) there were 66 reported Adult Concerns raised in a Care Home setting resulting in 63 Duty to Inquires, seven Investigations and four Case Conferences.

As a result of learning identified from case reviews, engagement with care homes and both residential and homecare providers is an identified area for development in the ASP delivery plan.

Financial Harm

The ASP committee sought assurances following Police and Trading standards colleagues raising concerns about an increase in targeted scam and financial harm activity during the pandemic. This was also being reported nationally. Consequently, current and historical data was scrutinised. In 2020/21 financial harm was the 6th most common principal type of harm record for all referrals. In 2021/22 it was the 7th most common. The percentage of referrals due to financial harm have remained stable during the majority of the period covered by this report. In terms of ASP statutory activity, Dundee was not experiencing such a significant increase in numbers of referrals compared to those reported by Trading Standards and Police Scotland. However, the two most recent quarters have shown an increase which will continue to be monitored to determine the significance of this.

As a result the Dundee partnership is developing a multi-agency financial abuse response to better recognise and respond to individuals at risk of financial harm who may not progress down a statutory ASP route.



5. Outcomes, Achievements and Service Improvements



Although the past two years have been challenging for all partners concerned with public protection it has also been an opportunity for innovation and improvement.

This section summarises some of the key achievements developed and delivered during the period covered by this report.

“Hidden Harm” during pandemic

During the Coronavirus pandemic, there was a recognition across all partners of the importance to help keep adults at risk safe from harm and neglect by sharing up to date information with the public and across the multiagency partnership. Throughout this time, there was an emerging picture from elsewhere of a number of potential safeguarding issues and areas of exploitation directly related to the pandemic.

A significant concern within the Dundee ASPC was that much of this harm may be hidden, particularly with people living in isolation, perhaps with perpetrators of abuse, those identified as 'shielding' and with the additional issue that professionals were not able to visit clients or patients as frequently or face to face. There was also recognition that individuals may be vulnerable to harm as others may seek to exploit disadvantages due to age, disability, mental or physical impairment or illness.

Such concerns and risks were identified as high in the Protecting People Risk Register across all areas regarding hidden harm for a number of reasons. These include the reduced ability across all agencies to carry out face to face contact with individuals and families due to staff absence and social distancing requirements, the impact of the closure of some support and care services, reduced operations of some community and third sector provisions and the potential for particular forms of harm to escalate during the current crisis e.g. domestic abuse and substance use. Early monitoring showed a drop in the number of referrals to First Contact Team, similar trends were reported by Police and third sector agencies across protecting people areas.

Between April and June 2020, Dundee ASPC completed a comprehensive "hidden harm" review which would go on to form the basis of much of it's work during the first full year of the pandemic and replacing the previous ASP development plan. Broadly, this covered;

- Governance and strategic planning
- Public communication
- Communication across the partnership
- Approach taken towards adults currently supported by Dundee health & social care partnership
- Approach taken towards new risks reported Dundee HSCP
- Response to COVID in care homes
- Approach taken to people affected by substance misuse
- Approach taken to refine work including provision & interrogation of data
- Approach taken towards the wider population not already supported or known
- Approach taken to hidden harm relating to violence against women issues

Subsequently, these areas were integrated into the ASP delivery plan which currently informs the work of the committee and broader partnership underpinned by closer working with other committees.

Committee processes and membership

The committee has taken the opportunity to develop new terms of reference and an induction pack for new members. Following a number of committee development events, membership has also been expanded in an effort to broaden the knowledge, skills and experience available across the partnership. In addition, the role, responsibilities and expectations of members is also clearly outlined.

Audit Activity

Dundee ASP committee completed a multi-agency case file audit in February 2020 and the learning from this informed our (then) ASP improvement plan. The onset of COVID impacted on the scope and pace of some of these changes as we adjusted to a COVID footing, specifically relating to the development of chronologies and risk assessment which were revisited as part of our post pandemic mobilisation. This is expanded on later in this section.

In addition, the Dundee HSCP were recently subject to an internal audit of progress of actions arising from the joint inspection undertaken in 2017. A separate single agency plan has been developed in response to this with regular updates provided to the committee alongside the Asp delivery plan

NHS Tayside Adult Protection Team

The Dundee partnership is fortunate to benefit from a dedicated Adult Protection Team within NHS Tayside. In addition to improving practice across the NHS, the team also contributes to core statutory ASP duties with the nurse advisors providing an invaluable service across a wide variety of protecting people fora. Key achievements delivered by the team have included.

- Developing NHS Chronology framework for use in adult services
- Focused work around Safeguarding with the NHS Tayside Forensic Service
- Developing guidance to support clinical teams around patients who have difficulty engaging with services and who may be vulnerable/at risk.
- Drafted NHS Tayside VAW/GBV Workplan for 2022 and presented this at NHS Tayside Public Protection Executive Group
- Progressing Values Based Reflective Practice within team to provide additional supervision support to staff who may be involved in adult protection work with a patient/family.
- Self-Evaluation and Continuous Improvement (SECI)

As part of activity designed to improve committee governance and oversight the Dundee partnership has developed a Self-Evaluation and Continuous Improvement sub group.

The purpose and priorities of the group are;

- Inspection preparation and follow up
- Performance data
- Improvement Plan monitoring and progress following ICRs/SCRs
- Self-Evaluation Activity

The SECI is the primary means by which the committee monitors progress of activities arising from the delivery plan and is proving to be effective with engagement and support from all key partners.

Case Review Activity

Dundee was already operating a Protecting People Case review protocol prior to the publication of the national interim framework for conducting Significant Case Reviews in November 2019. During the period covered by this report seven Initial Case Reviews were undertaken in relation to adults at risk of abuse and harm. One of these has progressed to a Significant Case Review which is due to report in early 2023.

In addition, one Significant Case Review was published in respect of the death of a care experienced young adult and two further Initial Case Reviews were undertaken in partnership with Dundee Child Protection Committee concerning the deaths of two further young adults.

The multi-agency learning identified from this activity has informed single and multi-agency improvement plans broadly themed under the following areas.

**Information
Sharing**

**Professional
Curiosity**

Escalation

**Risk
Assessment
and Risk
Management**

**Transitions
from
Childhood to
Adulthood**

Capacity

Screening of initial concerns and responses to individuals potentially at risk who do not meet the three-point test were also identified as areas for development together with responses to mental health and substance use.

These themes run throughout our planned improvement activity and progress is monitored by way of the SECI sub group reporting to the ASP committee and COG respectively.

To help support staff with the increase in Case Review Activity, communities of practice and development sessions were delivered to a number of multi-agency practitioners and first line managers to raise awareness of the review process.

In addition, during the Autumn of 2021, four development sessions were delivered to groups of multi-agency managers entitled, "Embedding and Sharing Learning from Case Reviews in Dundee."

These specifically addressed:

- Introduction of a tool to help managers share and embed learning from case reviews within their teams and service
- Exploring existing learning identified from case reviews
- Find out how you can influence change and contribute to service improvement and development
- Further learning opportunities and engagement work with your workforce

Although well attended it became apparent that the capacity to implement some of the changes identified required significant investment in and development of redesigned workflows in order to embed and evaluate the impact of the learning identified. This, in turn, has informed various actions detailed in the ASP delivery plan, SECI, Transforming Public Protection (TPP) and HSCP Protecting People Oversight Group.

Thematic Fire Death Review

Following discussion with Chief Officers and as a result of three Initial Case Reviews undertaken in early 2021, the ASPC agreed that as an extension to the Learning Review process, a Thematic Case Review should be undertaken with a clear and focussed remit to consider the three cases simultaneously.

Andrew Beckett (ASP Lead Officer), Grace Gilling (NHS Tayside) and Graham Smart (Scottish Fire and Rescue Service) along with Paul Comely, National Adult Protection Co-Ordinator acting as a critical friend, were identified as the Lead Reviewers and were tasked with delivering a report in respect of the following themes as part of the remit;

1. Multiagency Risk Assessment and management of risk
2. Adult Support and Protection- processes and procedures
3. Co-operation, Co-ordination and Leadership
4. Professional involvement and relationships
5. Accommodation/ Housing issues
6. Hospital Discharge processes
7. Impact of COVID-19
8. Home Care Services

The thematic review was completed in early Summer 2021 and concluded with thirteen key recommendations. Partner agencies were requested to consider the final report and identify opportunities for learning within single agencies/services as well as undertake improvement actions in respect of these recommendations, with the ASP Self Evaluation and Continuous Improvement sub group seeking reassurance from partner agencies in relation to actions progressed. A briefing was provided for COG members on 28 October 2021 outlining elements of good practice identified within the review as well as opportunities for further learning. Improvement activity has continued in respect of the recommendations identified. A review of progress is scheduled for the Summer of 2022.

Early indicators of Concern in a residential setting

Part of the response to protecting people in Care Homes relied upon the consistent application of operational guidance relating to early indicators of concern. Although these have been in operation across Dundee for a number of years, the onset of COVID restrictions placed greater emphasis on their importance in safeguarding vulnerable adults.

There are six early indicators of concern which all staff members visiting/attending/working in care homes were required to consider:

1. Concerns about management, leadership and organisation
2. Concerns about staff skills, knowledge and practice
3. Behaviours, Interactions and Wellbeing of Residents
4. Concerns about the service resisting the involvement of external people, isolating individuals and lack of openness.
5. Concerns about the way services are planned and the delivery of commissioned support
6. Concerns about the quality of basic care and the environment.

The guidance and tool are designed to support, and not replace, professional judgement. Its use is expected to assist staff members to organise their thoughts so that they can act more confidently, consistently and effectively within the wider care context. This proved invaluable during the periods of limited access in assuring vulnerable adults in a residential setting were safeguarded from abuse and neglect.

Cumulative concerns recorded in the Early Indicator database contributed to preventative early intervention and identified both individuals for further investigation which in turn led to Large Scale Investigations involving multiple individuals in a group care setting in keeping with local protocols and procedures.

Hospital Discharge Management

Case Review Activity Identified Hospital Discharge as an area for particular development in terms of ASP. There was some evidence to suggest that protection from harm was not consistently applied as part of discharge planning and that multi-agency staff would benefit from specific training and development opportunities. This was delivered and subsequently evaluated and evidence identified which indicates improvement in the recognition of and response to risk.

Under the banner of “Home First”, the Partnership has developed a single point of referral for Enhanced Community Support and Dundee Enhanced Community Support Acute and are working to develop an Urgent Care Triage tool and common assessment documentation with Scottish Ambulance Service and advanced paramedics to contribute to avoidable admissions.

The redesign of urgent care and the implementation of the Flow and Navigation Centre (FNC) Model has improved decision making support from the Scottish Ambulance Service, Primary Care, Out-Of-Hours, NHS24 and other partners including ASP activity. This is increasingly ensuring that the most appropriate source of care, in the most appropriate place is used to respond to people's needs or that an appropriate digital solution, such as NearMe, is provided.

During 2021/22 all social care packages that were adjusted due to the COVID-19 response were re-started or adjusted back to normal arrangements. Work has progressed to remobilise both day support and respite services and a variety of short-break arrangements have been used in Community Mental Health and Learning Disability Services.

Supporting drug and alcohol recovery

Drug and alcohol issues continue to feature prominently as a risk factor in Adult Concern Reports but are also one of the client groups most likely to be “screened out” of statutory procedures. Consequently, harm reduction and recovery has been a focus of improvement activity.

During 2021/22 the HSCP Clinical, Care and Professional Governance Group has continued to maintain oversight of a range of risks associated with the Dundee Drug and Alcohol Recovery Service. Whilst some of these risks relate to clinical functions within the service others include demand in excess of resource and insufficient funding to undertake the redesign of Dundee Drug and Alcohol Recovery Service (DDARS) services. Staff recruitment and retention challenges have also had a significant impact on the service throughout the year.

Over the last two years considerable progress that has been made in key areas to reduce harm associated with drug use, including drug deaths. This has included:

- Development and evaluation of a multi-agency, rapid response to non-fatal overdose (recently recognised as a sector leading approach in the COSAL Excellence Awards 2022);
- Enhanced capacity to delivery assertive outreach services through collaboration with third sector services, DDARS and the SafeZone Bus;
- Establishing the Navigator Programme based in Ninewells Accident and Emergency to work alongside medical and nursing teams to offer support to people who have multiple and complex needs, including drug and alcohol use;

Community mental health services and supports

Mental health concerns and suicide ideation also feature highly in Adult Concern Reports received and investigations undertaken. Although more of these risks are managed by a statutory response there remains a significant number of adults at risk with mental health and wellbeing challenges supported in the community.

Partners have continued to work together to improve the range of services and supports for people with mental health and wellbeing challenges. During 2021/22 work began with stakeholders, including people with lived experience on mental health challenges, to develop the city centre Community Wellbeing Centre that is planned to open in Autumn 2022. This has included workstreams focused on developing pathways and connections, the building facilities and aesthetics and communications and engagement. Since November 2021 a Stakeholder Group has been in operation and has been fully involved in co-producing the service specification

for the Centre; with tendering activity to secure a suitable service provider commencing in 2022/23. Alongside the development of the Centre progress has been made in other areas to enhance supports that will ultimately be linked to the Centre once it is operational. This includes developments with the Scottish Ambulance Centre and the appointment of a manager within Penumbra for the distress brief intervention service.

A successful pilot has been undertaken with Scottish Ambulance Service (SAS) and Dundee HSCP to establish a Paramedic Mental Health Response Vehicle (PMHRV). The PMHRV is jointly staffed by a paramedic and an experienced mental health nurse meaning that they can attend to aspects of physical healthcare as well as conducting a specialist mental health assessment. Following the pilot period, the service is now operating seven nights a week and during weekend days. Early outcomes indicate that most people have been successfully helped in their own home environment without the need for more intensive mental health assistance. Data from the first few months shows that the number of mental health emergency admissions fell by 51%.

Advanced Nurse Prescribers and Specialist Mental Health Pharmacists have been a positive addition to Community Mental Health Teams, increasing the capacity to prescribe medication and attend to physical aspects of mental healthcare, which supports resources within General Practice. Mental Health and Learning Disability Teams have also benefitted from increased numbers of Social Workers and Support Workers. There are now also General Practitioner Leads for Mental Health in place for each of the three Tayside Partnerships with a role in ensuring that all mental health developments are 'whole system' and cognisant of the specific needs of, and contributions that can be made from, primary care and to contribute to primary care development work and more specialist mental health redesign work. A plan has been submitted to the Scottish Government describing how a share of the national pandemic recovery funding totalling £120m will be used to strengthen mental health and wellbeing responses across primary care.

Mental Health Act work has continued to be a priority for the Mental Health Officer (MHO) Service during the pandemic. The service has continued to undertake all assessments and provide applications in line with legislative requirements. There has been the occasional assessment that has been provided without direct contact with the person concerned. On these occasions, this has been determined by COVID-positive situations and governed by safe practice. The situations have been clarified from other professionals directly involved in the person's care and we have also sought advice and liaised with the Mental Welfare Commission. The service has coped well with the demands generally during the pandemic, however capacity was an issue during the Festive Period 20/21 and a sessional worker was employed by the service. Although the service has coped with the Mental Health Act demands, there is an overall reduction in the numbers of MHO's undertaking the role within Dundee. This has been for a number of reasons and is under review to consider the options we have for addressing this and ensuring the MHO service is sustainable.

Trauma informed practice

A significant amount of work has been undertaken around 'trauma informed practice' including a test of change in care homes, a test of change focused on embedding trauma informed principles, tools and models to existing learning and development activity across the city and a test of change focused on enhancing responses to domestic abuse. The Care Home Team test of change had a focus on trauma principles and aimed to collate stories on the impact of COVID for care homes, residents, next of kin and staff across the city. This work was underpinned by a request from the Care Home Safety Huddle and findings from a National Trauma Deep Dive event for Health and Social Care. A stakeholder engagement and feedback session took place in October 2021 with care homes across the city, followed by an accessible trauma informed survey. Survey data, stories and experiences were then analysed and findings shared with HSCP and the Care Home Safety Huddle. A Care Home Trauma Deep Dive learning exchange event was used to share local findings, stories, next steps, national and local trauma developments, improvements and resources as well as available supports and offers to the workforce.

Carers

Direct work has been undertaken with carers to raise awareness of Public protection in general and Adult Support and Protection specifically. Throughout 2021/22 the HSCP, working alongside Dundee Carers Partnership, has continued to prioritise services and supports to meet the needs of unpaid carers. Carers engagement activities have reinforced the significant impact the pandemic has had on the health and wellbeing of many unpaid carers, who have also been further affected by the cost of living crisis. Multi-agency work to understand these needs and reflect these in an updated Carers Strategy is described earlier in this report. The HSCP has continued to focus on enhance capacity to fully implement the duties contained within the Carers (Scotland) Act, including a focus on identification and assessment of unpaid carers and the use of Adult Carers Support Plans across Partnership services. The recently agreed Carers Investment Plan includes significant additional resource to support enhanced capacity across Care Management Teams to implement carers assessment and support planning duties. It is anticipated that this additional capacity will be recruited during 2022/23.

Chronologies

In response to learning identified through the case review process and earlier actions from the Care Inspection process in 2018, Dundee ASPC "Practitioner's Guidance: Chronologies" was developed to provide Health and Social Care practitioners involved with vulnerable adults, their families and carers across Dundee, with clear practice guidance on the effective use of Chronologies. It is complimented by a revised workflow on the MOSAIC computer system. The guidance provides minimum standards aimed at ensuring a consistent practice approach to Chronologies and is compatible with the Tayside Multi-Agency Adult Support and Protection Protocols.

Risk Assessment

In response to learning identified through the case review process, Dundee ASPC developed a safeguarding risk assessment tool and threshold matrix. This was designed to ensure that across the partnership a consistent and proportionate response is delivered, that safeguarding from risk of harm responses are proportionate to the abuse/neglect, and that formal ASP procedures are not the only way of addressing issues that arise. Actions taken must be proportionate to the level of presenting risk or harm and be driven by the desired outcomes of the adult or their representative. Partners and professional need to use their professional judgement, consider the views of the adult at risk and where appropriate, seek consent for sharing information on a multi-agency basis. The document consists of two parts;

Part one: Offers a risk assessment tool and threshold matrix to support anyone working with adults across Dundee to identify the level of risk and proportionality of response in respect of potential harm, abuse or neglect.

Part two: Introduces a risk assessment workflow to MOSAIC to support managers and council officers in evidencing defensible decision making and the consistent application of Adult Support & Protection processes.

The chronology and risk assessment guidance were developed in Dundee as part of the Transforming Public Protection Programme in Dundee and informed by improvement methodology and guidance from the Care Inspectorate. An evaluation of the uptake and impact of this will be completed towards the end of 2022.

6. Training and Workforce Development



Dundee's social work and social care workforce, alongside other public, third and private sector services have continued to respond to the unprecedented impact of the COVID-19 pandemic. Social work and social care employees have undertaken an invaluable role to deliver critical services to individuals, families, and communities across the city.

While responding to the COVID-19 pandemic, we have continued our commitment to ensure social work values and standards are promoted while maintaining safe practice within a challenging and changing context.

Protection

Delivering on programmes relating to the protection of children and adults has remained a priority as in previous years. The delivery of learning and training opportunities was significantly impacted by the COVID-19 pandemic. We have adapted, innovated and where appropriate developed interim digital resources to mitigate workforce risks, upskill and enhance protection learning and development activity throughout cross cutting protection themes.

Our enhanced and intensive multi-agency programme in ASP (Defensible Decision-making) was adapted to meet the complex challenges of remote delivery within the context of the COVID-19 Pandemic.

This programme was tested, thoroughly evaluated, and improved over three programme cohorts throughout 2020/21. This programme is now delivered on a Tayside wide multi-agency basis. Delivering the programme and best use of technology, has enabled us to increase capacity and accessibility of the programme to a much wider audience. The 2020/21 cohorts included social work and social care practitioners and managers from Perth and Kinross, Dundee and Angus as well as NHS Tayside employees. Participants have ranged from GP, nurses in various community and clinical settings, OT, Clinical Psychiatrist. Our enhanced multi-agency programme is innovative, engaging, interactive and underpinned by:

- A reflective and practical phased programme approach to embed and enhance learning
- Using best evidence and research, underpinned by learning from national and local case reviews
- Promoting ethically literate, critical practice in multi-agency adult support and protection while working with adults and young people
- Risk assessment and management (including chronologies) – challenging assumptions, thresholds, and best evidence
- A space to explore and share existing practice dilemmas and group case discussion
- Self-directed learning

“My practice has been enlightened! I have shared the learning in my team and commit to using the 6 hat approach for complex case discussions and supervision”

(Senior Manager, ASP DD,
16 March 2021)

“This programme raised essential considerations for my practice, I liked and got of learning participants. It has helped to improve my confidence in SW role”

(Care Manager, ASP DD Cohort,
16 March 2021)

“The training was valuable in giving me an opportunity to refocus on issues/challenges inherent in ASP work. Brilliant course, I would like to explore things further”

March 2021 ASP DD

Council Officer Programme and Forum

Development work has continued with practitioners who have specific Council Officer functions under the Adult Support and Protection (S) Act 2007. The ASP forum was relaunched using digital tools and access via MS Teams August 2020 and continues to be a forum for practitioners and managers.

The Adult Support and Protection Council Officer training programme was redesigned and adapted. This statutory programme was co-created and tested with 16 practitioners from Dundee and Angus. Learning from this programme pilot, tools and resources were shared Nationally, with a dedicated development session delivered by Dundee to the ASP National Leads Meeting, L&D Network and ASP convenors. Our model to ASP Council Officer Training has been commended nationally as a best practice approach. Our programme has been endorsed and agreed delivery for a shared Tayside approach. Key elements of the programme include:

What difference has this made to your practice so far?

Thinking differently about risk and risk assessment

Knowledge and confidence boost

They will understand the pathway

Can offer a more person-centered and rights based response to concerns

Increased confidence and understanding of the role and responsibilities

More knowledge about the legislation

Enabled greater reflection on the term capacity when thinking about what skills means and opportunity

More knowledge built on skills

Giving background and knowledge to process

Increased confidence

It has made me feel more self assured and that everyone works to their own styles

Increasing confidence in recognising and responding to ASP concerns

What difference has this made to your practice so far?

More confident in undertaking my role and where it sits in wider processes

Things are clearer

How to ask the right questions

Enhanced knowledge and confidence

Adult Protection Awareness Day, 20 February 2022

Dundee ASPC hosted a series of workshops and events running across two weeks to raise awareness of National Adult Support and Protection Day. A range of opportunities were available for the multi-agency and Tayside workforce with all workshops well attended. Workshops and training included topics such as self-neglect and hoarding, manager briefings hosted by Mental Health Officers around safeguarding, Adults with Incapacity and Mental Health Care and Treatment legislation, workshop on financial harm and scams, learning from case reviews and a workshop on trauma informed practice and adult protection. A full list of calendar events is available on the following link [HERE](#).

TURASLearn

TURASLearn is NHS Education for Scotland's (NES) learning platform. It provides a wide range of educational resources for the health and social care workforce. Dundee City Council, in partnership with Angus and Perth and Kinross Council's, have worked with NES to develop a Tayside learning platform hosted on TURAS which focuses on protection resources.

The Tayside portal enables partners from a range of services across the city from including NHS Tayside employees, third and independent sector employees and volunteers’ access to a range of protection learning resources previously unavailable to them.

TURASLearn has also been heavily promoted across all social work and social care services, both with the organisation and with those who deliver services on behalf of or as part of Dundee HSCP. It has proved to be an invaluable resource to allow the social care workforce to access additional learning and other resources designed to support their own and others health, psychological wellbeing and safety.

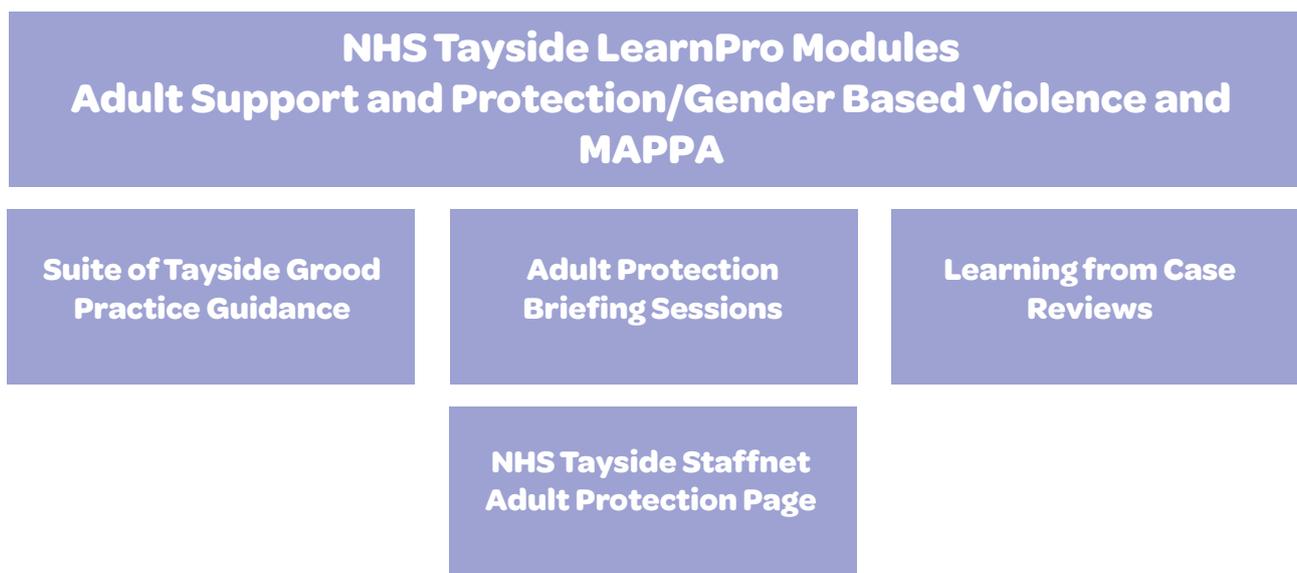
NHS Tayside Training

NHS Tayside requires its workforce to be competent, knowledgeable and have the required skills to actively recognise and respond to protect vulnerable adults at risk of harm.

In order to develop a competent and confident workforce, all NHS Tayside staff must have access to appropriate training, learning opportunities and support, to enable staff can execute their roles and responsibilities.

Online training is available for staff via Learn-Pro, however this should be supplemented by face to face training particularly for staff with specific roles such as those staff working in Acute and Mental Health services who require increased knowledge and competence in Adult/Public Protection issues.

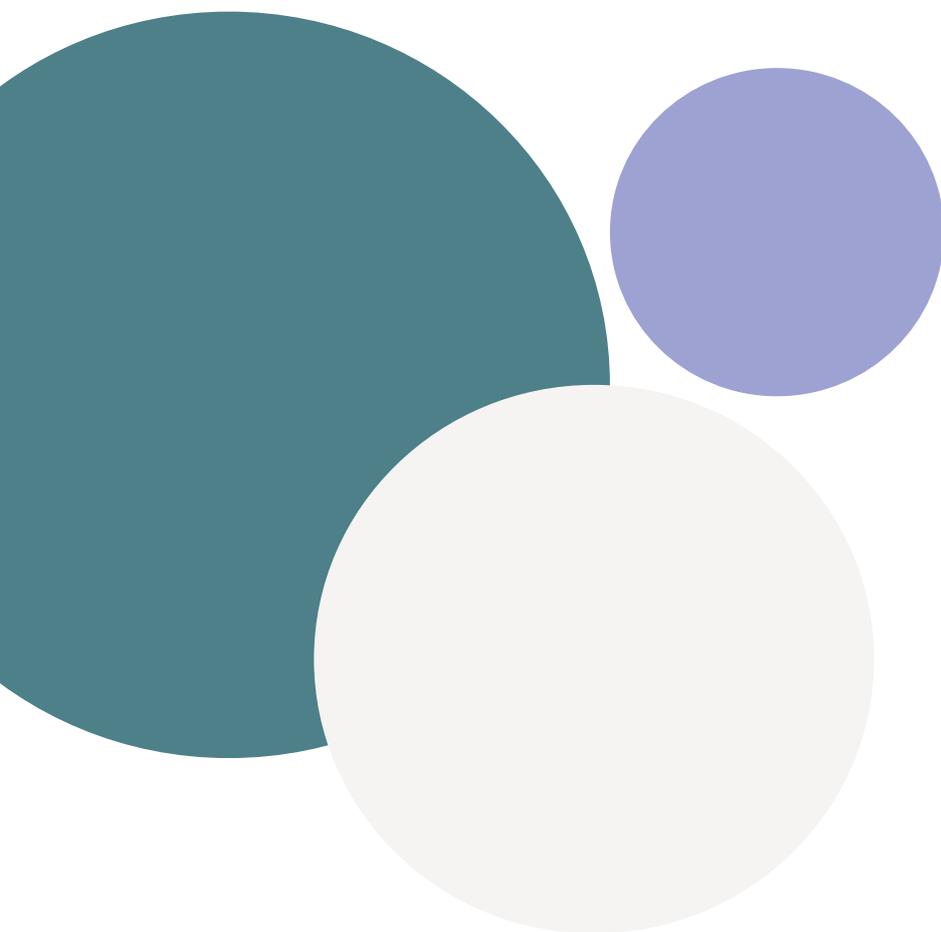
A range of learning opportunities are available and include:



Key deliverables achieved during the period covered by this report include;

- NHS Staff Attending sessions on: Defensible Decision Making, Power of Attorney & Learning from case reviews.
- 16 Face to face ASP Briefing Sessions delivered between Aug-Dec 2021
- 11852 NHS Staff have completed Adult Support & Protection eLearning

As we move forward from the pandemic, Face to Face Briefing sessions are increasing. Training requests are tailored to the individual services where possible, though a core message runs throughout in terms of the legislation and responsibilities within health.



7. Engagement, Involvement & Communication



Engagement, involvement and communication has evolved throughout the period covered in this report moving from an initial COVID response focus to wider lived experience engagement.

Public communication activity arising from hidden harm report

During the first year of the pandemic and in addition to the platforms used by Police Scotland, Scottish Fire & Rescue, NHS Tayside, Dundee City Council and the HSCP, the Protecting People Team developed and delivered a public awareness raising strategy targeting the recognition and reporting of people at risk in the wider community.

- Key information providing details of how to raise concerns was widely distributed across social media by all partners as well as a focus on specific campaigns such as potential scams and fraud.
- 10,000 hard copy leaflets were distributed to households across Dundee to highlight how to report concerns about vulnerable adults.
- Local press have ran a number of articles raising public awareness.
- Information was also made available in BSL, easy read and video formats to ensure accessibility.
- A radio campaign ran throughout May 2020 on Wave 102 specifically focused on mental wellbeing.
- A public facing bulletin focussing specifically on Protecting People issues was regularly published throughout the period of COVID response.
- Specific support was provided for carers with a newsletter developed and distributed in association with Dundee Carers Centre.

Raising public awareness of how to recognize and respond to adults at risk was considered to mitigate somewhat against the risks posed by the potential gaps in the usual network of support and communication as a result of the COVID situation. The initial drop in adult protection referrals quickly increased back to the usual rates reassuring the Committee that concerns were being identified and reported. Additional support was provided where carer stress was identified. The take up of advocacy increased ensuring that people who need support and protection are able to access independent support.

As circumstances changed it became necessary to target specific groups and convey particular pieces of information. The ASP committee and Protecting People Team continued to develop and deliver this as well as monitoring the impact by way of performance data and regular updates from partners.

Partnership Communication arising from hidden harm report

Guidance and training for staff within Dundee Council, Dundee HSCP and NHS Tayside who were redeployed and volunteers was produced regarding Adult Support and Protection. This conveyed the message that staff require to remain vigilant in recognising and responding to potential additional safeguarding concerns and in particular, those arising as a result of the COVID-19 situation.

Guidance was also provided to the Community Support Centres and wider partnership outlining how to recognise and respond to people at risk.

An online module “COVID-19: Information to Support Those Temporarily Working in Health & Social Care Settings” was developed and delivered by Dundee City Learning and Workforce Development.

A dedicated email address was set up for HSCP providers with a regular bulletin distributed. This contained subjects such as national information sources, key messages, and actions for providers to consider, emerging risks and issues and key public health issues. Whilst this did not remove or replace the responsibility of individual providers to pro-actively seek out relevant information about the developing situation and to take action in response to this; it provided regular communication that summarised and signposted to official information and guidance that supported providers to undertake these responsibilities.

Ensuring that all partners were kept up to date with the development and delivery of services helped to ensure the recognition of and proportionate response to risk of harm. Clear, concise lines of communication contributed to informed and timeous assessment, best value and delivery of support and services.

There were early examples of conflicting information being provided from both the Scottish and UK governments and this together with the pace of change led to challenges in developing a local response which was mitigated somewhat by joint ventures such as the Tayside Oversight Group.

Engagement with People with Lived Experience

In Dundee we have been fortunate enough to have had lived experience representation on the committee for a number of years. Pre-COVID there were three lived experience committee members representing different groups, specifically older people, mental health and learning disabilities. Where required, these members were supported to actively participate in committee business in a variety of ways including;

- Direct input from advocacy services
- Provision of “easy read” executive summaries
- Pre-meetings with lead officer and independent convenor

Lived experience committee members have contributed to agenda setting, the development of public facing materials and the recruitment and selection of the independent convenor.

Unfortunately, following the pandemic, lived experience representation has reduced with one current member on the committee. This individual has been supported directly by Advocating Together to attend meetings virtually by way of MS Teams. More recently, this member has met with the Lead Officer, Protecting People, in person and been supported to participate in committee procedures in a hybrid manner.

Dundee ASP Citizen Engagement & Involvement Group

In late 2021 Dundee ASP convened a Citizen Engagement & Involvement sub Group. Fundamentally the purpose of the group was to support Dundee Public Protection partners to work towards the engagement of people with experience, and their inclusion in the strategic decision-making processes and linked strategic planning, improvement and development programmes and activities.

- Developing Citizen Led Approaches
- Creation of Citizen Led Practice Guidance
- Support for Citizen Led Ambassadors

An engagement and involvement plan was initially drafted based on 5 principles:

- Safety
- Trust
- Collaboration
- Empowerment
- Choice

Mapping activity commenced in March 2022, however, more recently Protecting People Dundee have partnered with the Authentic Voice Project and the work of the sub group is now linked to deliver on the following outcomes.

- **Professionals working across a wide range of policy areas are supported to embed survivor voice and lived experience into system and service design processes in a high quality, sustainable and trauma-informed way.**
- **Decision-makers are supported to see how meaningful change can be achieved, and compelled to act, through seeing living examples, having access to evidence & hearing diverse voices of people with lived experience.**

Project Background

In Dundee, we recognise we need to develop a robust approach to ensure lived experience has a meaningful contribution and influence within local multi-agency governance and strategic planning arrangements across our Public Protection Partnerships. We sought to review our inclusion of people with lived experience in strategic forums that led to the opportunity to work with the Authentic Voice Project. We have taken this opportunity to partner with Authentic Voice as the pilot area for their leadership workstream focused on embedding lived experience into strategic forums across Scotland. Authentic Voice is a national project aiming to support local authorities and other community planning organisations to develop the knowledge, confidence, and tools they need to embed survivor voices and lived experience into local systems and service design processes. They do this in a robust, trauma-informed and meaningful way. This project is in partnership with SafeLives UK, Improvement Service, Resilience Learning Partnership, and locally the Protecting People Strategic Support Team. Dundee Chief Officers Group (COG) have endorsed this with senior leadership and is committed to engaging in key activities with the Authentic Voice Project in Dundee as a priority to ensure locally we embed lived experience in our public protection strategic forums. While this review process is carried out in partnership with the Authentic Voice Project (which includes the Resilience Learning Partnership and the Authentic Voice Panel), it is led in collaboration with people who have lived experience and will very much be at the heart of the project.

Project Aims and Outcomes

Develop a better understanding of the lived experience strand of work across the public protection partners.

Gather and analyse current practices across the public protection partnerships regarding engagement with people with lived experience. Identify areas of good practice around co-production and engagement and areas for improvement to generate reflective leadership discussions on co-production, decision making and planning culture to develop a shared understanding of meaningful engagement and create positive change.

Professionals working across a wide range of policy areas are supported to embed survivors' voices and lived experiences into system and service design processes in a high-quality, sustainable and trauma-informed way.

Decision-makers are supported to see how meaningful change is achievable and compelled to act; through discussions, seeing living examples, having access to evidence & hearing diverse voices of people with lived experience.

This project will progress over the next twelve months.

8 Challenges & Areas for Improvement



Dundee ASPC has developed a three year delivery plan informed by self-evaluation and quality assurance activity, audits, learning identified from case reviews and national changes in guidance and protocols. It details our identified challenges and areas for improvement and is explored in greater detail in the last section of this report.

Our overarching challenges are detailed as part of the Protecting People Strategic Risk Register. This changes over time in response to the efforts of the ASPC and wider partnership. Recommendations are made to the COG in respect of Risk, Mitigating Controls, Planned Actions and the probability and impact of the identified risk.

At present, there are three identified risks associated with Adult Support and Protection.

Risk: Management & Leadership: Current infrastructure insufficient to lead, support, develop and implement practice consistently.

Risk: Workforce and core processes: Limited partnership ability to respond to changes of need post COVID / remobilization as services restart due to workforce capacity issues.

Risk: Current Recognition of and Response to individuals identified as vulnerable but who do not meet threshold for statutory intervention (3-point test) is not consistent enough to effectively respond to current individual and community needs.

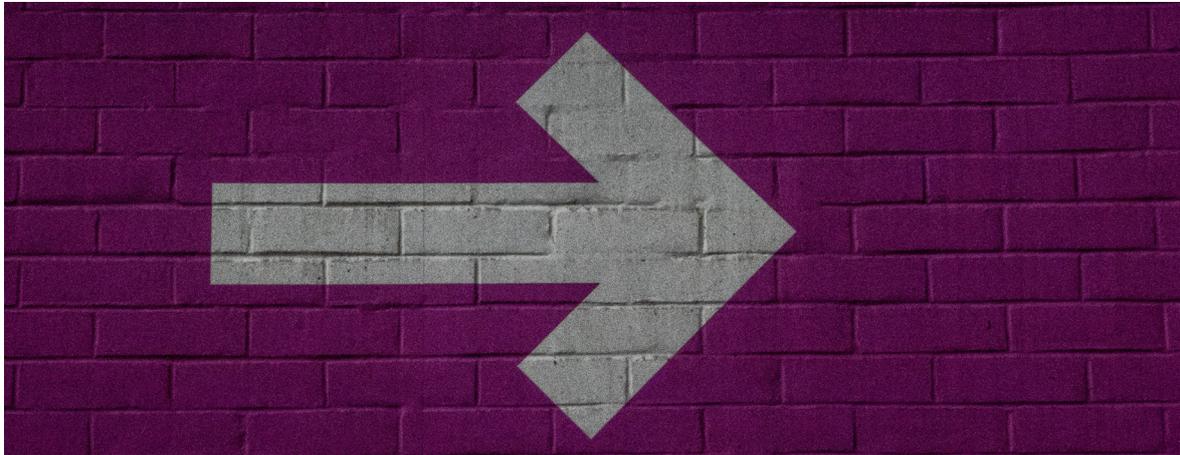
Adults with Incapacity and Welfare Guardianship

The requests for assessment of guardianship applications has not diminished due to the pandemic. The mental health officer (MHO) service has continued to allocate Court reports into MHO workloads, however the demand was restricted until the Courts re-opened following the first lockdown. Unfortunately, it is in this area that demand is not able to be met by the current capacity. Following the initial lockdown and the increase in the waiting list for Court reports, we provided the opportunity for MHO colleagues to undertake this work out with their contracted hours for additional payment to increase the number of reports being completed, however there was only a limited uptake of this. The waiting list continues to be high and we are actively seeking an increase in MHO capacity, both temporarily and permanently in order to address this statutory requirement.

Impact of National Care Service

At present, there are a significant number of unknown factors associated with the National Care Service proposals. It is unclear the extent to which this will impact upon Public Protection activity in general and ASP activity specifically.

9. The Way Forward



As mentioned throughout this document, Dundee ASPC has developed a three-year delivery plan (concluding March 2024.) The plan sets out a range of specific actions including reviewing the membership of the committee, developing an induction pack for new members, cross cutting work with the CP committee working with young people at risk of harm and developing the use of chronologies and risk assessments . A copy of this is available on request, however, it is summarised as follows with actions identified in each area.

Key Outcomes

- All adults are kept safe from harm and have improved wellbeing across a range of indicators
- Dundee has a confident and supported workforce delivering best practice to all adults in need of support and protection.
- The Dundee ASPC is assured and can provide assurance that key processes are delivered effectively and services are operating in line with up to date policies, procedures and guidance.

Key Actions

- Maintain focus on local, regional and national interfaces and how these inform all areas of our work
- Ensure provision of clear and up to date guidance, policies, procedures and learning opportunities
- Increase public awareness and stakeholder engagement through clear communication and participation processes
- Develop and improve scrutiny and assurance processes
- Develop and improve the use of the protecting people corporate risk register

Strategic Leadership

- There is a clear vision, commitment and direction provided by leaders which is communicated regularly and effectively to a range of stakeholders
- Increase Public Awareness of ASP and Community Engagement
- Maintain robust business processes to support the committee in scrutiny of key processes (both multi and single agency operations) and provide oversight of strategic risk for adult protection
- Ensure a consistent understanding and approach to the use of improvement methodology and develop committee capacity to support the use of this approach
- Participate in the transformative re-design of protection processes

Strategic Planning and Improvement

Drive Continuous Improvement of key processes and practice through:

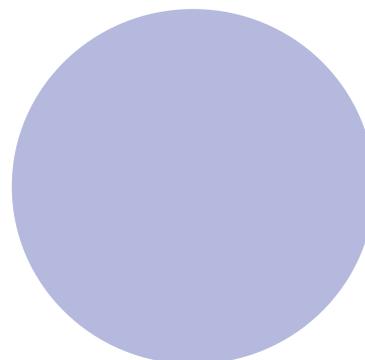
- Scrutiny of dataset
- Quality assurance processes
- Audit cycle and case review (both local and national)
- Increase the involvement of citizens in work of ASPC
- Delivery of Key Processes



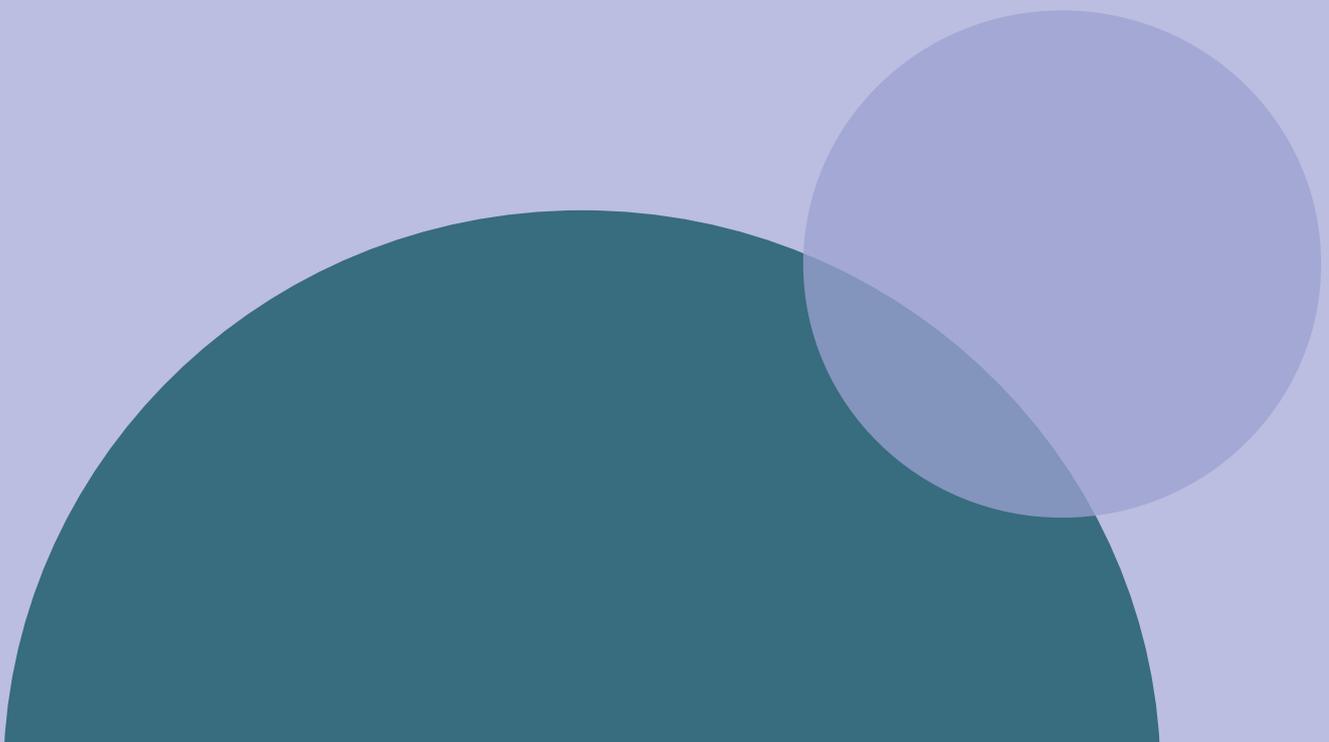
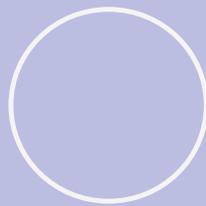
Development of guidance, policies, tools, resources and learning and development opportunities is focused on:

Delivery and improvement of key processes are focused on:

- Identified key risks in the risk register
- Learning from scrutiny/review activity
- Identified priorities at national and regional level.
- New national guidance for ASP
- Horizon scanning for new national care service.



If not
you?
...who!



What I
need!
from you!

Dundee Support and Protection Committee
c/o Andrew Beckett, Lead Officer
Protecting People Team
Floor 2
5 City Square
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**Adult Support
& Protection**
Committee Dundee