

**North Ayrshire Adult Protection Committee
Thursday 24 August 2017 at 10:00am
Garnock Room, Ground Floor, Cunninghame House, Irvine**

Present

John Paterson, Independent Convenor (Chair)
Mary Francey, Senior Manager Locality Services, NAHSCP
Pete Gilfedder, Senior Nurse (AMH Inpatient & Forensic Services and ANP Service), NAHSCP
Dr Paul Kerr, Clinical Director, NAH&SCP
David MacRitchie, Chief Social Work Officer, NAHSCP
Colin Martin, Superintendent, Police Scotland
Ann McArthur, ASP Link Officer Acute Services, NHS Ayrshire & Arran
Alistair Reid, Senior Manager AHPs, NAHSCP
Ann Reid, Senior Nurse (Health & Community Care), NAHSCP
David Rowland, Head of Service Health & Community Care, NAH&SCP
Brian Skimming, Community Inspector, Police Scotland
Fiona Thomson, Mental Health Services Public Reference Group
David Thomson, Associate Nurse Director / IJB Lead Nurse, NAHSCP
Brenda Walker, Senior Officer Adult Support & Protection, NAH&SCP
Nigel Wanless, Scottish Care

In Attendance

Margaret Burns, ASP Co-ordinator, Inverclyde HSCP
Caroline Conway, Senior Clerical Assistant, NAHSCP (Minutes)
Dale Meller, Senior Manager Community Mental Health, NAHSCP
Sarah Watts, Choose Life Manager, NAHSCP
Pamela Wheeler, Clinical Nurse Manager, NHS Ayrshire & Arran

Apologies

Jillian Ingram, Child Protection Lead Officer, North Ayrshire Child Protection Committee
Angela O'Neill, Associate Nurse Director (Acute), NHS Ayrshire & Arran
Aileen Craig, Team Manager Litigation, NAC Legal Services

Invited but Did Not Attend

Jim Anderson, Group Manager, Scottish Fire & Rescue Service
Philip Gosnay, Senior Manager, Education & Youth Employment, NAC
Maureen Johnston, Inspector, Care Inspectorate

| Item | | Action |
|------|--|--------|
| 1 | <u>Welcome & Apologies</u> | |
| 1.1 | J Paterson opened the meeting by welcoming the Committee and invited introductions | |
| 1.2 | Apologies are as noted above. | |
| 2 | <u>Previous Minutes (Paper 1)</u> | |
| | The minutes of the previous meeting were agreed as accurate. | |

| | | |
|---|---|----|
| 3 | <u>Matters Arising (Paper 1)</u> | |
| | <ul style="list-style-type: none"> • Item 4.5 Key Information Leaflet The leaflet containing key information for year 2016-2017 has been compiled and circulated. • Item 5 ASP Stakeholder Evaluation The results from the Stakeholder Evaluation have been circulated to the Committee. J Paterson, M Francey and B Walker will be meeting on 3 October to discuss the results. Invitations to ASP Case Conferences are at present sent by email to professionals but by post to service users, family members, carers etc. B Walker discussed the possibility of sending invitations to service user, family etc. by email with Sandra Delaney (Business Support Officer). Sandra Delaney clarified that invitations to Child Protection Case Conferences are not sent by email. It was agreed that the Child Protection and ASP processes should be as aligned as possible. It was suggested that the allocated Worker could call service users, family etc. to advise them of the Conference. F Thomson expressed concern about this being the only method of communication; she was concerned that the call would not be made, messages left on answering machines could be deleted, and the call may not be answered if the number displays as Withheld (often this is the case when calling from Council or NHS switchboards). It was suggested that the individuals involved could be asked their preferred method of contact, and if they choose to be contacted by telephone advise them that the number could display as Withheld. In terms of Advocacy, although this must be considered as part of the ASP process the recording of the answer is not a mandatory question on the CareFirst AP1 form (the form can be completed without the answer being recorded). The Committee agreed that it would be worth considering making this a mandatory question; it was agreed to remit this to the ASP Improvement Subgroup. • Item 9 Partner Updates (Committee Minutes & Reports) B Walker updated that arrangements have been made to upload Committee minutes and reports to the NAC public website. | BW |
| 4 | <u>ASP Practice in Inverclyde</u> | |
| | <p>Margaret Burns (ASP Co-ordinator, Inverclyde Health & Social Care Partnership) delivered a presentation to the Committee regarding ASP practice in Inverclyde in terms of Health staff acting in the role of Second Person in ASP investigations, and moving from Inquiry to Investigation phase in the ASP process.</p> <p>Key points: -</p> | |

- All staff, regardless if they are acting as a Council Officer or Second Person, are trained to the same standard. This helps staff have a shared understanding of ASP and are more likely to submit a referral.
- There is no dedicated refresher training; all staff undertake the full training to refresh / update knowledge and skills.
- If the adult has an established relationship with a Health member of staff, having them involved in the Investigation means the adult is more likely to disclose. There have been occasions when the Health member of staff has not undertaken the relevant training; in these cases they still undertake the Second Person role and work closely with the Council Officer.
- Health staff have valuable skills to contribute to the process e.g. communication.
- Courses are continually evolving to keep them fresh.
- Future aim is to involve Health staff in developing and delivering courses to make them even more relevant.
- Inquiry is information gathering stage. Investigation process is followed when there is a need to meet the adult and / or their supporter. There was a situation when a visit was made during the Inquiry stage but the adult / supporter was not made aware they were being visited under the ASP process and were not advised they did not have to answer any questions. The adult / supporter raised a complaint which was upheld and as a result Inverclyde took the decision that Investigation process will commence when there is a need to meet the adult / supporter.

The Committee discussed if North Ayrshire should broaden out their Second Person options to include Health staff and if so, should they undertake the full Council Officer training, Role of the Second Person training, or no specific training but be supported by the Council Officer. D Rowland commented that it would be an advantage to involve Health staff and that they should undertake the full Council Officer training to provide shared understanding. D Thomson added that workload capacity and ability to release staff would need to be considered, and also suggested raising for discussion at the Senior Nurse Group. M Francey advised that District Nurses have received ASP training but that a refresher is required and should be mandatory. B Walker will raise with Johannah Lamont (Learning & Development Adviser) re scoping the various issues.

In terms of moving from Inquiry to Investigation stage, B Walker commented that some practitioners feel they need to see the adult in order to determine if they are at risk and meet the three point test which is part of the Inquiry process. Practitioners have been advised that when visiting an adult / supporter as part of an ASP Inquiry, they must clearly introduce themselves, explain the reason for their visit and clearly advise that the adult / supporter does not have to answer any question if they do not wish to do so.

BW

| | | |
|-----|---|----|
| | <p>B Walker also commented that she feels a lot of investigatory work is being recorded under Inquiry, so practitioners are not being appropriately credited for work they have done.</p> <p>M Francey suggested raising this at the various practitioner Forums to establish a consistent approach. The Committee agreed to remit this to the ASP Improvement Subgroup.</p> | BW |
| 5 | <u>Convenor's Report</u> | |
| 5.1 | <p>The National Convenors' Group met on 9 August 2017.</p> <ul style="list-style-type: none"> • Guidance for GPs has been revised and is now out for final comments. • Concerns have been raised regarding the Scottish Government's engagement in ASP. Some Convenors have requested to meet with the Minister in this regard. | |
| 5.2 | <p>Update from Chief Officers' Group.</p> <p>The meeting focussed on Child Protection matters due to a recent Significant Case Review.</p> | |
| 5.3 | <p>Update from Pan Ayrshire APC Convenors & Lead Officers' Group</p> <p>There were no significant matters for update from the Pan Ayrshire APC Convenors & ASP Lead Officers' Group.</p> | |
| 6 | <u>Case Learning Review Report (Paper 2)</u> | |
| | <p>The Committee noted Paper 2.</p> <p>The Case Learning Review concluded that it was difficult to identify what could have been done differently to prevent the Adult's death. The Review highlighted several areas of good practice and partnership working.</p> <p>The following key learning points were highlighted: -</p> <ul style="list-style-type: none"> • Recognising that having consistent workers is important to some individuals. • Gaps in information sharing between NHS and NAC functions in terms of the North Ayrshire Drug & Alcohol Recovery Service are being addressed. • The Review raised concerns regarding the Housing Association's policy of issuing warnings to victims of domestic violence in terms of resulting noise / neighbour complaints. J Paterson has requested to meet with the Housing Association's manager to discuss this further. | |
| 7 | <u>Senior Officer Adult Support & Protection Report (Paper 3)</u> | |
| | The Committee noted the Senior Officer's Report (Paper 3). | |

| | | |
|------|--|------------|
| | <p>It was highlighted that Adult at Risk referrals from Care Homes are reducing; it is likely this is as a result of the introduction of the two-tier referral process so Care Homes can now submit Adult Concern reports. There have been some issues regarding inappropriate referrals e.g. for deceased persons; this has been raised with the Care Inspectorate.</p> | |
| 8 | <u>ASP Work Plan & KPI Report (Papers 4a & 4b)</u> | |
| 8.1 | <p>The Committee noted the ASP Work Plan (Paper 4a).</p> <p>All items are on target.</p> | |
| 8.2 | <p>The Committee noted the KPI Report (Paper 4b).</p> <p>It was highlighted that the target for GP referrals has not been achieved. B Walker advised that three GP Practices have identified a Single Point of Contact for ASP, and it would be helpful to extend this to other Practices. P Kerr commented that there is a general lack of awareness about ASP amongst GPs. Also due to GP recruitment issues there is increased demand on GPs' time.</p> | |
| 9 | <u>ASP Administrative Issues Improvements (Paper 5)</u> | |
| | The Committee noted the ASP Administrative Issues Improvements report (Paper 5). | |
| 10 | <u>Staff and Adult Protection Committee Evaluation Reports (Paper 6a & 6b)</u> | |
| 10.1 | <p>The Committee noted ASP Staff Evaluation (Paper 6a).</p> <p>The following key points were highlighted: -</p> <ul style="list-style-type: none"> • There has been an increase in responses from Health staff in comparison to the 2016 Survey. • Overall, staff feel more confident in making ASP referrals. <p>D Rowland suggested that there may be value in taking the next Staff Survey to the GP Locality Forums and using PPVote; this may be a better method to gather GPs views rather than sending to generic Practice email addresses.</p> | |
| 10.2 | <p>The Committee noted Paper North Ayrshire APC Self-Evaluation (Paper 6b).</p> <p>It was highlighted that there was a fewer number of targeted respondents but the smaller number would have a greater impact.</p> <p>J Paterson stated that Committee attendance over the past two years should be looked into, and write to Members with low attendance.</p> | BW / CC |
| 11 | <u>ASP Improvement Subgroup Update (Paper 7)</u> | |
| | The Committee noted the ASP Improvement Subgroup Update (Paper 7). | |

| | | |
|----|--|----|
| 12 | <u>Pan Ayrshire ASP Learning & Development Subgroup Update (Paper 8)</u> | |
| | <p>The Committee noted the Pan Ayrshire ASP Learning & Development Subgroup Update (Paper 8).</p> <p>It was agreed that for future Committee meetings, the minutes of the Pan Ayrshire APC Convenors & ASP Lead Officers meetings would be tabled, thus covering updates from all Pan Ayrshire Subgroups.</p> | |
| 13 | <u>Harm Escalation Process (Paper 9)</u> | |
| | <p>The Committee noted the Harm Escalation Process Paper (Paper 9).</p> <p>The Paper was put together by Rochdale Borough Safeguarding Adults Board and consists of a checklist of things to take into account when considering harm escalation.</p> <p>The Committee agreed that this would be a valuable tool and remitted to the ASP Improvement Subgroup to take forward.</p> | BW |
| 14 | <u>Thematic Inspection – Care Inspectorate (Papers 10a & 10b)</u> | |
| | <p>The Committee noted Care Inspectorate letter (Paper 10a) and presentation (Paper 10b).</p> <p>B Walker informed that this is the first Inspection of ASP in its own right. North Ayrshire volunteered to take part and was selected. There will be a further five Partnerships inspected on this occasion. The Inspection will look at case files from Social Services and Police Scotland; NHS records will not be included on this occasion. The reason given for NHS files not being included is that NHS records contain little information regarding ASP.</p> <p>North Ayrshire's Inspection will take place week commencing 30 October 2017. This will comprise three file reading days and two scrutiny session days.</p> <p>A meeting took place with Ian Kerr from the Care Inspectorate on 23 August 2017. Mr Kerr advised that it is envisaged that future Inspections will take the form of supported self-evaluation, and this Inspection is to help establish a baseline.</p> | |
| 15 | <u>SOLACE Scotland (Paper 11)</u> | |
| | The Committee noted email from Fiona Lees (Chief Executive, East Ayrshire Council) to SOLACE Scotland (Paper 11). | |
| 16 | <u>Ayrshire People in Distress Pilot</u> | |
| | Dale Meller (Senior Manager Community Mental Health) and Sarah Watts (Choose Life Manager) delivered a presentation on the Ayrshire People in Distress Pilot. | |

| | | |
|----|--|---------|
| | <ul style="list-style-type: none"> • Ayrshire has been allocated £100,000 over three years from the Mental Health Innovation Fund. • Referrals can now be made directly to Mental Health Services. • Currently the system is only available outwith normal office hours; a business case is being put forward to offer the service twenty-four hours a day. • Action plan is being explored for those who are not suitable for referral to Mental Health Services. • Options are being explored to mirror the Red Cross model for older people; whereby a volunteer will accompany an individual home from hospital and ensure they are settled at home. • It is acknowledged that carers also require support. • Links are required to services of support e.g. for bereavement. • Mental Health & Wellbeing worker is in post at Ayrshire College. | |
| 17 | <u>Partner Updates (Papers 12a & 12b)</u> | |
| | The Committee noted update from A McArthur / Pamela Wheeler (Paper 12a) and update from M Francey / Ann Reid (Paper 12b). | |
| 18 | <u>Any Other Competent Business</u> | |
| | None. | |
| 19 | <u>2018 Meeting Dates</u> | |
| | Meeting dates for 2018 will be identified and circulated to the Committee. | JP / CC |
| 20 | <u>2017 Meeting Date</u> | |
| | Thursday 9 November 2017 at 10:00am within Cunninghame House, Irvine. | |

JP/CC
29 September 2017