

**North Ayrshire Adult Protection Committee
Thursday 9 November 2017 at 10:00am
Garnock Room, Ground Floor, Cunninghame House, Irvine**

Present

John Paterson, Independent Convenor (Chair)
 Jim Anderson, Group Manager, Scottish Fire & Rescue Service
 Mary Francey, Senior Manager Locality Services, NAHSCP
 Ann McArthur, ASP Link Officer Acute Services, NHS Ayrshire & Arran
 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

Barbara Conner, The Ayrshire Community Trust (deputising for Vicki Yuill)
 Caroline Conway, Senior Clerical Assistant, NAHSCP (Minutes)
 Val Fitzpatrick, Team Manager Service Access, MADART & MAASH, NAHSCP
 Mark Inglis, Senior Manager Intervention Services, NAHSCP
 Pamela Wheeler, Clinical Nurse Manager, NHS Ayrshire & Arran (deputising for Angela O'Neill)

Apologies

Pete Gilfedder, Senior Nurse (AMH Inpatient & Forensic Services and ANP Service), NAHSCP
 Philip Gosnay, Senior Manager, Education & Youth Employment, NAC
 Maureen Johnston, Inspector, Care Inspectorate
 Dr Paul Kerr, Clinical Director, NAH&SCP
 David MacRitchie, Chief Social Work Officer, NAHSCP
 Eleanor McLaren, Team Manager Litigation, NAC Legal Services
 Colin Martin, Superintendent, Police Scotland
 Angela O'Neill, Associate Nurse Director (Acute), NHS Ayrshire & Arran
 Alistair Reid, Senior Manager AHPs, NAHSCP
 Ann Reid, Senior Nurse (Health & Community Care), NAHSCP
 Vicki Yuill, Arran CVS

Invited but Did Not Attend

David Rowland, Head of Service Health & Community Care, NAH&SCP

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 meeting held on 24 August 2017 were agreed as accurate allowing for an amendment to Item 4 ASP Practice.	CC

	B Walker highlighted that when visiting the Adult during an ASP Inquiry, as well as clearly introducing themselves and explaining the reason for the visit, practitioners must also make it clear to the Adult than they do not have to answer any questions if they do not wish to do so.	
3	<u>Matters Arising (Paper 1)</u>	
	<ul style="list-style-type: none"> • Item 3 Matters Arising (Item 5 ASP Stakeholder Evaluation) The ASP Improvement Subgroup has agreed that answering the question regarding Advocacy should be mandatory on the AP1 CareFirst form; B Walker will take this forward with the Information Systems Team. • Item 4 ASP Practice A meeting has been arranged with B Walker, A Reid, A McArthur, D Thomson and Johannah Lamont (ASP Learning & Development Adviser) for 14 November 2017. The meeting was arranged following the discussion at the August Adult Protection Committee meeting regarding the potential for training Health staff to act in the role of the 'Second Person' during ASP Investigative Interviews. An update will be provided at the next Committee. • Item 13 Harm Escalation Process (Rochdale Paper) B Walker advised that this will be taken forward by the ASP Improvement Subgroup. 	BW BW BW
4	<u>Prevent & Multi-Agency Assessment & Screening Hub (Police Hub)</u>	
	A presentation on Prevent and the Multi-Agency Assessment & Screening Hub (MAASH) was delivered by M Inglis and V Fitzpatrick.	
4.1	<p>MAASH key points: -</p> <ul style="list-style-type: none"> • The aim of the MAASH model is to improve the way agencies (currently primarily Police Scotland and Social Work) work together concerning issues relating to Public Protection raised by Police Scotland • A new Social Worker will shortly be assigned to the Hub to focus on referrals involving adults. • The Hub will filter those referrals that require a response under ASP and those that require other supportive measures or those which require no further action. It is hoped that one of the benefits of this work will be to ensure that all relevant issues are appropriately identified as ASP and this will lead to an improvement in the conversion rate from ASP Inquiry to ASP Investigation. • Informed by multi-agency information and discussion, staff based within the MAASH will undertake an initial assessment. If further input is required for adults, this will be taken forward by the appropriate Social Worker (Council Officer) or allocated to the relevant Social Work Team if the person is currently involved with Social Work. This will provide a prompt response and consistent approach. 	

	<ul style="list-style-type: none"> • There will be additional supports identified via MAASH processes for families affected by suicide. • The North Ayrshire MAASH follows a similar framework (although the models are currently not identical) to the way East and South Ayrshire Councils are working within the MAASH. • The objectives of MAASH appear to be a good fit with the Adult Protection Committee Work Plan, for example, ensuring reduced duplication of effort and strengthening thresholds. 	
4.2	<p>Prevent key points: -</p> <ul style="list-style-type: none"> • The aim of the strategy is to prevent the radicalisation of people who may be more susceptible to extreme views and provide a proportionate response. • Decisions can be taken on how to proceed when a possible Prevent case is identified, via a Professionals' Prevent Meeting, escalating to a Prevent Case Conference if required. • The strategy links to existing protective measures. • It is recognised that not everyone identified via the Prevent strategy would meet the three point test for ASP, although some cases may. • Andrew Fraser is the Prevent Link Officer for North Ayrshire Council and M Inglis is the main Prevent Contact for the North Ayrshire Health & Social Care Partnership. • Training workshops and e-learning modules for raising awareness of Prevent are available. 	
5	<u>Convenor's Report</u>	
5.1	<p>National Convenors' Group update: -</p> <ul style="list-style-type: none"> • The Convenors have agreed to reconvene the Adult Protection Forum. A NHS representative is required although there was some discussion about how this could be achieved so that all Health Boards and the many facets of NHS are represented effectively. D Thomson suggested contacting the Chief Nursing Officer; he also offered to raise this at the Mental Health National Leads Group. The Convenors felt that a broader representation may be required e.g. AHPs, Medical, Nurse Director etc. • A meeting was held with Maureen Watt (Minister for Mental Health) and Jean Harper (Adult Protection Policy Lead, Scottish Government). The question was posed at the meeting, as to whether the Financial Harm pledge could be invigorated and the suggestion made that there should be a launch event based on the outcomes of the first Joint Thematic Inspection of ASP. 	DT

	<p>The Convenors were advised that the Scottish Government would be unable to offer ongoing commitment in relation to these requests.</p> <ul style="list-style-type: none"> An email was received from the Scottish Government advising they are keen to raise awareness of ASP throughout their other departments to ensure that appropriate links are made with other relevant legislation etc. 	
5.2	<p>Update from Chief Officers' Group: -</p> <p>The main issues for ASP tabled at the most recent Chief Officers' Group meeting related to the ASP Case Learning Review which took place earlier this year, and an update concerning the Joint Thematic Inspection of ASP by the Care Inspectorate, in which North Ayrshire had recently been involved.</p>	
5.3	<p>The main points raised at the Pan Ayrshire APC Convenors & ASP Lead Officers' Group: -</p> <ul style="list-style-type: none"> It is recognised that there is no consistent approach or guidance in terms of GP payments either locally or nationally. There has been some work done by Paul Comley (National ASP Co-ordinator) on this, which B Walker was involved with, and the results of this work to scope the issues and make recommendations are now with the Scottish Government. The issue of streamlining the ASP Significant Case Review process and the NHS Adverse Events Review process remains unresolved. Processes are currently under discussion which may simplify the methods by which NHS staff submit ASP referrals. 	
6	<p><u>Senior Officer's Report (Paper 2)</u></p>	
	<p>The Committee noted the Senior Officer's Report (Paper 2).</p> <p>The following were highlighted: -</p> <ul style="list-style-type: none"> The number of ASP referrals submitted by care homes in North Ayrshire has significantly decreased; this is thought to be as a joint result of the ASP event held for care homes early in 2017 and making it possible for agencies to use the AP1 form to make either 'full blown' ASP referrals under the ASP Act or 'lower level' Adult Concern reports. B Walker advised that she meets with individual care home managers should a specific issue be identified or at their request. The Committee commented that it would be beneficial to see the Adult Concern report figures for previous quarters in graph form (as well as the ASP referral figures), this will be included in future Senior Officer reports. The Pan Ayrshire Annual Conference is arranged for 23 November 2017. There was a change in one of the main Speakers due to the retirement of the speaker that had been originally arranged. The morning session will be led by Sue Hampson of 'Safe to Say' and will include workshops and a short film. 	BW/CC

	<p>Local organisation 'Break the Silence' will also deliver a presentation and short film. There will be three local cases studies, including one from South Ayrshire, who has arranged for a carer to speak about their experience of ASP in relation to their son who was the adult at risk of harm.</p> <ul style="list-style-type: none"> • The newly devised pan Ayrshire Council Officer training will commence Monday 27 November 2017 for four consecutive days. An update on how this was received will be provided at the next meeting as part of a presentation to be provided by Johannah Lamont (ASP Learning & Development Adviser) on training developments over 2017 and plans for 2018 and beyond. • A bespoke ASP training session was recently delivered to subcontractors (taxi drivers etc) who operate in conjunction with the NAC Transport Hub. • Bespoke ASP training was also delivered to national representatives of the British Transport Police. Local contacts were provided for ASP Teams around the country via the 'Act Against Harm' website contacts section. 	JL
7	<u>Adult Protection Committee Work Plan Update (Paper 3)</u>	
	<p>The Committee noted the Adult Protection Committee Work Plan (Paper 3).</p> <p>All items are on target. It is noted that the current West of Scotland ASP Practice Guidance is being reviewed, which may impact on future ASP process completion deadline timescales.</p>	
8	<u>Key Performance Indicators Report (Paper 4)</u>	
8	<p>The Committee noted the Key Performance Indicators Report (Paper 4).</p> <ul style="list-style-type: none"> • The number of referrals from GPs has increased over the biennial period; although the increase is small, the target for GP referrals was modest and therefore the agreed target has been met. The Committee acknowledged that it will take time to continue to increase the number of ASP referrals from GPs, and that Practice staff also have a role in ensuring they meet their responsibilities under the legislation. It was suggested that links could be strengthened via the Community Link Workers who have a base within GP Practices; B Walker will liaise with Lorna McGoran who manages the Community Link Workers. D Thomson suggested linking with the GP Locality Group and agreed he will speak with P Kerr regarding this. • The People's Panel survey has not yet been sent out (it may be delayed this year); however respondents have been sent an ASP information leaflet ahead of the survey. 	<p>BW</p> <p>DT</p>

	<ul style="list-style-type: none"> The targets for the number of adults represented at Case Conferences and the number of staff attending Case Conferences has not currently been met in this quarter. 	
9	<u>Pan Ayrshire ASP Learning & Development Framework (Paper 5)</u>	
	The Committee ratified the Pan Ayrshire ASP Learning & Development Framework (Paper 5). The Committee was requested to disseminate and promote the Framework throughout their networks and staff groups.	All
10	<u>Duty of Candour and Wilful Neglect (Paper 6)</u>	
	<p>The Committee noted the Health Improvement Scotland and Care Inspectorate document on Duty of Candour and Wilful Neglect (Paper 6).</p> <ul style="list-style-type: none"> It is noted that the new Act includes a duty to report. N Wanless noted that Scottish Care has already arranged related workshops for care staff. All providers of care must have a visible complaints procedure. At the last Social Work Scotland meeting, there was a discussion about whether APCs should be sense checking to ensure that recently introduced and forthcoming legislation is appropriately linked within relevant ASP policies and procedures etc. The Committee agreed this could be a helpful piece of work and requested that this be taken forward by the ASP Improvement Subgroup. 	BW
11	<u>Local Case Study</u>	
	<p>M Francey presented a case study relating to Financial Harm.</p> <p>Discussion: -</p> <ul style="list-style-type: none"> What options are available to the Office of the Public Guardian (OPG) when a concern is raised relating to a Power of Attorney misusing their powers, and are these options being taken forward by the OPG? Banks are limited in relation to what action they can take when a Power of Attorney is acting on an individual's behalf; unless otherwise known, it is 'assumed' a Power of Attorney is carrying out the wishes of the individual. There is a general unhelpful lack of formalised financial arrangements i.e. joint accounts are set up rather than Power of Attorney or Financial Guardianship arrangements. 	
12	<u>Joint Thematic Inspection Update</u>	
	B Walker informed that the Inspection went smoothly in terms of arrangements made to facilitate the process of the Inspection, including IT, room bookings and	

	<p>groups arranged to meet with the Inspectors and other administrative type arrangements. The required advance information was submitted to deadline. File readers were generally able to find the information required to complete the Inspection template fairly easily. There were good discussions generated in the Multi-Agency ‘Scrutiny Sessions’.</p> <p>B Walker felt the exercise overall was positive; D Thomson added that there was a positive approach by the Inspectors, which was helpful.</p> <p>The initial report on the redacted cases (selected cases that did not progress beyond ASP Inquiry, submitted as part of the advance information) is expected any time. The report from the on-site file reading is expected in December 2017. The North Ayrshire Overview Report is expected in January 2018, with the Thematic Benchmarking Report giving an overview of all six areas which took part in the Inspection thereafter.</p> <p>The Care Inspectorate has also stated that they intend to hold a session for all six areas following publication of the Thematic Benchmarking to discuss the process and lessons learned.</p>	
13	<p><u>Large Scale Investigations</u></p>	
	<p>B Walker had previously raised Large Scale Investigations (LSI) as an area which required some improvement; however as there were links to other processes this improvement work had been held off until key staff and processes were in place. The issue of improvement in relation to LSI was again identified as part of the self-evaluation element of the ASP Inspection. There is evidence of good practice in relation to the operational work with regard to LSI; however it is felt that Social Work practitioners and managers are not recognising potential LSI situations and are not aware of the requirement for escalation and reporting. B Walker noted that she felt there is sometimes confusion over what constitutes a Large Scale Investigation and that LSI should be considered as the approach for any case where there is a report of ASP relating to more than one adult within the same care setting and a co-ordinated response would be helpful. Whilst it will not always be agreed to proceed in these circumstances under a formal LSI process, it should be considered and a decision making process followed. Work is required on refining decision making and reporting processes (informed by the Pan Ayrshire LSI Guidance) and ensuring Social Work staff are familiar with these. B Walker requires to be notified about any LSIs as it constitutes part of the data return on ASP to the Scottish Government.</p> <p>B Walker advised the Committee that she intends to update staff via several routes. These will include ASP Forums, Senior Management meetings, and a staff briefing note. D Thomson suggested tabling this at the Governance meeting, and further suggested that there may be value in tabling the minutes of this Committee as a standing item; B Walker will take this forward.</p> <p>It was suggested that potential Large Scale Investigation triggers could be missed if there are Social Workers from different teams dealing with individual referrals. B Walker acknowledged this could potentially occur and would have to be considered when establishing processes.</p>	BW

	<p>In relation to care homes (usually the biggest source of LSIs) however, the likelihood of a trigger being missed will be reduced with the establishment of the Review Team, whereby Social Workers from the same team will be dealing with all North Ayrshire care homes and will usually have responsibility for identified care homes.</p> <p>The Committee discussed potential perpetrators of harm, and acknowledged that ASP legislation does not require a response in relation to supporting perpetrators unless they themselves are at risk of harm or are carers with support needs. However, there may be scope for looking at how we could link perpetrators into existing supports where this is appropriate.</p>	
14	<u>Care Inspectorate Link Arrangements (Paper 7)</u>	
	<p>The Committee noted the letter from the Care Inspectorate regarding Care Inspectorate link arrangements with Local Authorities and Integrated Authorities (Paper 7).</p> <p>The Committee agreed that B Walker will contact M Johnston to discuss whether a meeting or other communication is required with Helen Murphy, North Ayrshire's identified Relationship Manager for adult services.</p>	BW
15	<u>Partner Updates</u>	
15.1	<p>A McArthur updated: -</p> <ul style="list-style-type: none"> • Proposal for mandatory eighteen month ASP refresher training was declined by senior management in NHS. • An ASP Advanced LearnPro electronic learning session will be launched in 2018. • Work is ongoing regarding the potential for a direct referral process from NHS systems. 	
15.2	<p>B Skimming announced that he will shortly be retiring from Police Scotland after thirty years of service, and that Colin Convery has been identified as his replacement. The Committee thanked B Skimming for his contributions to the ASP agenda and wished him well for the future.</p>	
16	<u>Any Other Competent Business</u>	
	None.	
17	<u>2018 Meeting Dates</u>	
	<ul style="list-style-type: none"> • 8 February 2018 • 3 May 2018 • 23 August 2018 • 15 November 2018 <p>All Thursdays at 10:00am within Cunninghame House, Irvine</p>	

JP/CC
8 December 2017