



**REPORT TO:** HEALTH AND SOCIAL CARE INTEGRATION JOINT BOARD –  
23 FEBRUARY 2022

**REPORT ON:** ADULT SUPPORT AND PROTECTION COMMITTEE – MID-TERM REPORT  
2020/21

**REPORT BY:** INDEPENDENT CONVENOR, DUNDEE ADULT SUPPORT AND  
PROTECTION COMMITTEE

**REPORT NO:** DIJB2-2022

**1.0 PURPOSE OF REPORT**

1.1 The purpose of this report is to inform the Integration Joint Board that the Independent Convenor of the Dundee Adult Support and Protection Committee (ASPC) has produced their mid-term report for the period April 2020 to March 2021.

**2.0 RECOMMENDATIONS**

It is recommended that the Integration Joint Board (IJB):

- 2.1 Note the content of this report and of the Independent Convenor's Mid-term Report (attached as Appendix 1).
- 2.2 Note the progress achieved in response to the recommendations made by the Independent Convenor in the Biennial Report 2018-20 (section 4.4).
- 2.3 Note the areas for improvement identified within the annual report which are to be incorporated into the Adult Support and Protection Committee's delivery plan (section 4.5).

**3.0 FINANCIAL IMPLICATIONS**

3.1 None.

**4.0 MAIN TEXT**

4.1 In response to serious shortcomings in the protection and safeguarding of adults at risk of harm in Scotland, the Scottish Government introduced the Adult Support and Protection (Scotland) Act 2007. The main aim of the Adult Support and Protection (Scotland) Act 2007 is to keep adults safe and protect them from harm. The Act defines an adult at risk as people aged 16 years or over who are unable to safeguard their own well-being, property, rights or other interests;

- are at risk of harm; and
- because they are affected by disability, mental disorder, illness or physical or mental infirmity, are more vulnerable to being harmed than adults who are not so affected.

This is commonly known as the 3-point test. For an adult to be at risk in terms of the Adult Support and Protection (Scotland) Act 2007 (the Act), the adult must meet all three points above.

In line with the requirements of the Act, the Dundee Adult Support and Protection Committee was established in July 2008.

- 4.2 Section 46 of the Act requires the Independent Convenor to prepare a Biennial Report outlining the activities of the Adult Support and Protection Committee and more widely the progress made in Dundee in protecting adults at-risk of harm. The report is organised around a number of themes agreed by the Adult Support and Protection (Scotland) Act 2007 Code of Practice (Revised April 2014). The last Biennial Report was published in 2020, however the Independent Convenor also produces a mid-term report in years in which there is no biennial report required.
- 4.3 The mid-term report contains updates on the commitment to ensure that the protection of people of all ages is a key strategic priority, as well as wider developments to strengthen multi-agency responses to protecting people concerns. It outlines how the Adult Support and Protection Committee has continued to work closely with all relevant partners, including the Integration Joint Board, the Community Safety Partnership and other relevant strategic planning groups, to ensure strategies and priorities are aligned and co-ordinated. The Independent Convenor's Mid-term Report April 2020 to March 2021, is attached at Appendix 1.

#### **4.4 Progress on Previous Recommendations in Biennial Report 2018-2020**

- 4.4.1 During the last twelve months the Dundee Adult Support and Protection Committee has focused on two specific areas of work; the statutory duties for the local authority contained within the Adult Support and Protection (Scotland) Act 2007 and development of partnership working. Key areas of progress include:

- **Statutory duties within the Adult Support and Protection (Scotland) Act 2007**
  - A learning and development programme for Council Officers has been developed and delivered through a blended-learning approach. A Council Officer forum and adult support and protection operational managers forum has also been developed.
  - Utilising learning for the Child Protection Committee the Adult Support and Protection Committee has improved the collation, reporting and scrutiny of key performance data relating to statutory duties.
  - A test of change has been progressed in relation to screening of adult concern reports. Planning for this test took place during the reporting year with implementation from March 2021 onwards. This has led to a reduction in the number of adult concern reports, bringing Dundee into line with other local authority areas across Scotland, by ensuring access to proportionate and timely supports through alternative routes.
  - Work has been undertaken in partnership across Tayside to review operational protocols that support key adult support and protection processes, such as inter-agency referral discussions.
- **Partnership working**
  - A thematic review of fire deaths across the city was completed and has identified areas of strength as well as areas for improvement. The thematic review process has been reported to relevant local, regional and national groups to ensure that learning is effectively disseminated.
  - Focused work has been undertaken to improve the integration of adult support and protection duties and practice into hospital discharge pathways. Work has also been undertaken to review and strengthen pathways that support assessment on capacity.
  - The development of a common model for risk assessment has been progressed and alongside this there has also been activity to enhance arrangements for response to people who do not meet the three-point test for adult support and protection intervention, including the test of change referred to above.
  - Partners have continued to work together to raise awareness of financial harm and scam activity.

- During the year NHS Tayside has continued to develop its infrastructure and capacity for implementing adult support and protection duties, including enhancing staffing levels within their corporate protecting people strategic support team. The enhanced capacity within the team will help NHS Tayside to meet increased demands as well as to comply with local and national guidance and participate fully in partnership working.
- 4.4.2 In addition to the areas of work outlined in 4.4.1, the Adult Support and Protection Committee has continued to maintain an overview and support the workforce and services in their response to the pandemic. This has included continued use of a strategic risk register to identify and mitigate risks to continuity and quality of service delivery. A range of services have utilised digital technology as part of blended approaches to service delivery, including the use of virtual inter-agency referral discussions and case conferences. There has also been an enhanced focus on public awareness raising. This has included providing information to the public on the increased use of scams within communities and identifying and responding to risks associated with hidden harm. Enhanced supports for third and independent sector providers and unpaid carers have also been developed. A key risk area monitored by the Adult Support and Protection Committee during the pandemic has been reporting on the impact on people living in care home settings and ensuring that appropriate protective measures are in place.
- 4.4.3 The Mid-Term Report also provides detailed performance information regarding adult support and protection processes, including trend over time where this is available. Over the last year numbers of adult concern reports have continued to rise; this has directly informed the test of change in relation to screening processes described at section 4.4.1. Increased concern reports include a significant rise in the number of concerns raised by the NHS Tayside workforce, reflecting focused awareness raising and staff development activity delivered over the last two years. It remains the case that a very low proportion of adult concerns are assessed as meeting the three-point test and go on to receive a formal adult support and protection response. However, all reported concerns are followed-up and appropriate support offered when needed. Consistent use of investigations, inter-agency referral discussions and case conferences and recording of decision making is recognised as a continued area for improvement.

#### **4.5 Conclusions, Recommendations and Future Plans.**

- 4.5.1 All Adult Support and Protection activity needs to be considered in the context of the strengths and areas for improvement identified by external scrutiny reports, the Transforming Public Protection Programme and the content of the Convenor's Biennial Report.
- 4.5.2 The Independent Convenor will lead a development session for the Adult Support and Protection Committee before the end of the current financial year to agree revisions to the committee's current delivery plan. Priority areas for further improvement work that will be considered include:
  - Workforce development activity targeted at improving early identification of risks associated with self-neglect, hoarding, domestic abuse, hate crime and internet safety.
  - Strengthening arrangements for engagement with adults at risk of harm, unpaid carers and wider communities.
  - Strengthening arrangements for consideration of findings from learning reviews, including dissemination of learning, action planning and evaluation of impact. This will take into account learning already gained by the Child Protection Committee.
  - Further improvements in operational practice, specifically the use of single and multi-agency chronologies, implementation of recently revised inter-agency referral discussions process and recording of decision making.
  - Developing a multi-agency adult support and protection quality assurance and self-evaluation framework, including developing increased opportunities for workforce involvement in these activities.

## 5.0 POLICY IMPLICATIONS

5.1 This report has been screened for any policy implications in respect of Integrated Impact Assessment. An Integrated Impact Assessment is attached.

## 6.0 RISK ASSESSMENT

6.1 This report has not been subject to a risk assessment as it does not require any policy or financial decisions at this time.

## 7.0 CONSULTATIONS

7.1 The Chief Officer, Chief Finance Officer, Heads of Service – Health and Community Care, Chief Social Work Officer, members of the Dundee Adult Support and Protection Committee, members of the Chief Officers Group and the Clerk were consulted in the preparation of this report.

## 8.0 DIRECTIONS

8.1 The Integration Joint Board requires a mechanism to action its strategic commissioning plans and this is provided for in sections 26 to 28 of the Public Bodies (Joint Working)(Scotland) Act 2014. This mechanism takes the form of binding directions from the Integration Joint Board to one or both of Dundee City Council and NHS Tayside.

Direction Required to Dundee City Council, NHS Tayside or Both	Direction to:	
	1. No Direction Required	<b>x</b>
	2. Dundee City Council	
	3. NHS Tayside	
	4. Dundee City Council and NHS Tayside	

## 9.0 BACKGROUND PAPERS

9.1 None.

Elaine Torrance  
Independent Convenor, Dundee Adult Support and Protection Committee

DATE: 25 January 2022

Andrew Beckett  
Lead Officer, Protecting People

Kathryn Sharp  
Service Manager, Strategy and Performance



# Adult Support & Protection Committee Dundee



## Mid Term Summary Report

April 2020 - March 2021

[www.dundeeprotects.co.uk](http://www.dundeeprotects.co.uk)



Adult Support  
& Protection  
Committee Dundee

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# Independent Convener of Dundee Adult Support and Protection Committee 1

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Welcome to Dundee Adult Support and Protection Committee's Annual mid-term report for 20/21 which is a snapshot of our partnership's approach to provide adult support and protection leadership and effective operational processes across the city.

The report covers the period from April 2020 to March 2021 and, as can be seen by the information in the report this has been a busy, challenging and productive period for the Adult Support and Protection Committee recognising that the period covered in this document was made more challenging by the impact of the COVID19 pandemic. This has been reflected in the types of harm and risks that we have seen and in our mobilisation of services and the strategic leadership required to meet the challenges associated with this.

Whilst all agencies individually responded with their own operational plans the Adult Support and Protection Committee met more regularly to ensure there was an effective multi -agency response to strategic and key identified risks.

In my role as Independent Convenor I was really impressed by the way all key partners responded quickly and flexibly, shared information effectively and kept an ongoing focus on recognising and responding to adults at risk of harm. This close partnership working continues to respond to the ongoing challenges of the pandemic which impact on staff, communities, families and individuals. As we move forward there remains more to be done and our priorities for the coming year are detailed towards the end of this report.

I would like to thank all the members of the Committee for their ongoing support and dedication and I also recognise the tremendous effort made by all staff in all of our partner agencies during the pandemic and thank them for their ongoing commitment to provide support during this difficult time. Finally, my thanks also to the ongoing support provided by all communities and everyone in Dundee who play a key role in keeping the people of Dundee safe.

With thanks.



**Elaine Torrance**  
Independent Convenor  
Dundee Adult Support and Protection Committee



# Adult Support and Protection in Context

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Adult Support and Protection is the only area of Public Protection governed by specific legislation in so far as it places a legal duty on local authorities to inquire and investigate cases where harm is known or suspected.

The act defines adults at risk as those aged 16 years and over who:

- are unable to safeguard their own wellbeing, property, rights or other interests
- and are at risk of harm
- and because they are affected by disability, mental disorder, illness or physical or mental infirmity, are more vulnerable to being harmed than adults who are not so affected

This is commonly referred to as the '3-point test' and is the benchmark by which any legislative intervention is determined.

This presents challenges as it sets the bar for legislative intervention very high and means that vulnerable people effected by substance use, domestic violence and the majority of mental health conditions are generally not covered.

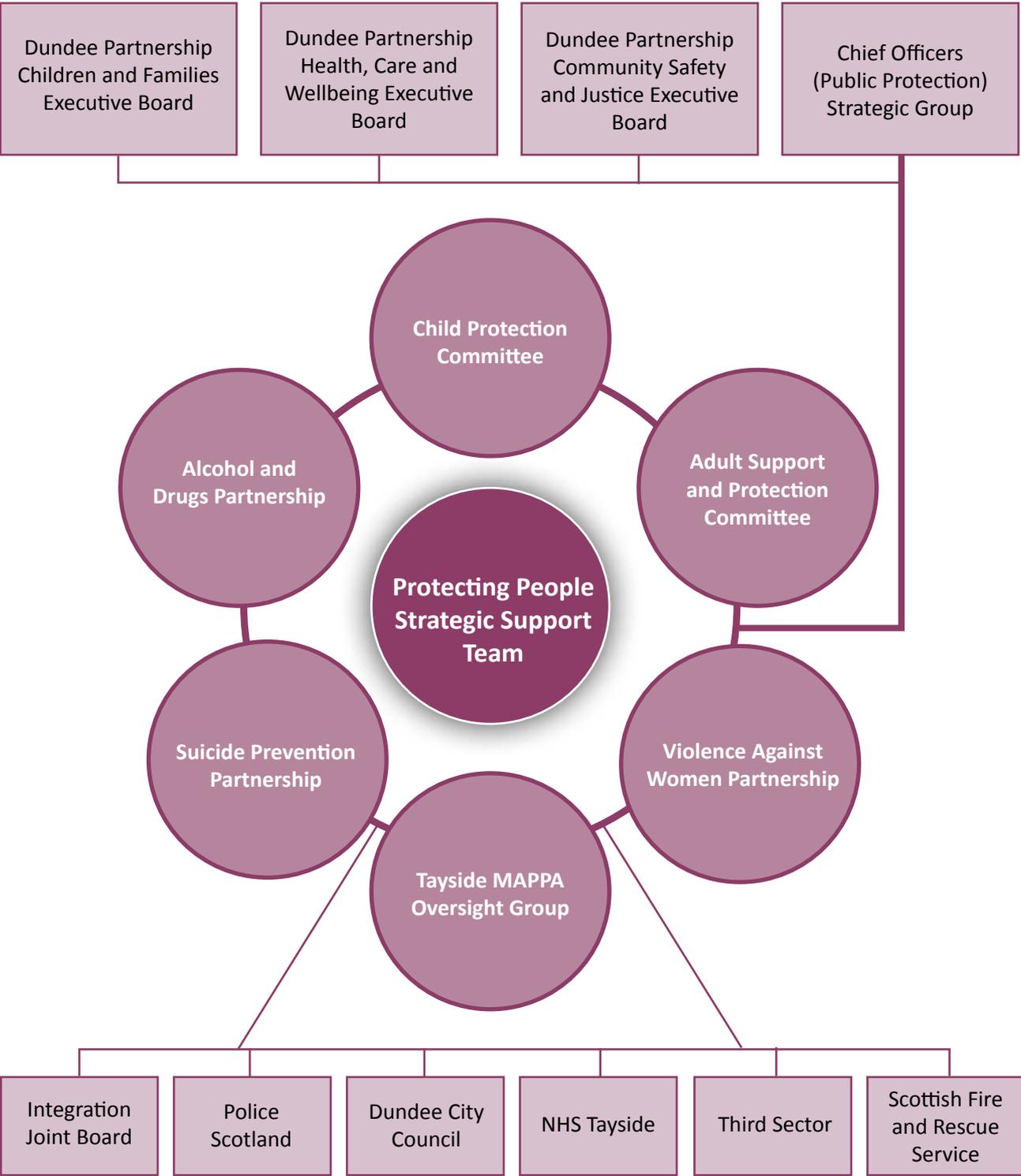
## Governance and Oversight in Dundee

The Adult Support and Protection Committee sits within the work of Protecting People which covers Adult Protection, Child Protection, Violence Against Women, Alcohol and Drugs and Multi Agency Public Protection Arrangements (MAPPA). There are three Protecting People groups which consider Self Evaluation, Communication and Learning and Workforce Development.

Individually and collectively, the Chief Officers of Dundee City Council, NHS Tayside and Police Scotland Tayside Division, lead and are accountable for the development of work in the area in relation to Protecting People Services. This includes ensuring the effectiveness of each of the component committees/partnerships. This places the work in a more holistic framework in which protection is undertaken in an integrated fashion.



The Chief Officer Group (COG) is the strategic forum for public protection in Dundee with responsibility for shaping the operational development of the public protection arrangement. As such it will work through public safety and partnership committees statutory and otherwise to assess risk and to work to reduce it. The image below illustrates the relationship between the various bodies and groups to protect the people of Dundee.



The delivery of Adult Support and Protection processes in Dundee is administered by a team who arrange Adult Support and Protection meetings, manage referrals, minute meetings and collate performance data. This team continues to work efficiently, flexibly and effectively in delivering these key supporting tasks.

The role of Lead Officer to the Adult Support and Protection Committee was set up in July 2013 and focuses on progressing the work of the Committee through its subgroups and the Protecting People meetings. Now entitled “Lead Officer Protecting People” this officer provides an effective link between relevant agencies as well as co-ordinating within these agencies and with the Independent Convenor.

The structure of the Partnership, the role of the Integrated Joint Board and the role of staff within the joint services has been the focus of much work in respect of Adult Support and Protection. The Chief Officers Group is committed to ensuring that the protection of people of all ages continues to be a key Strategic Priority. Further key priorities are: Strategic Priorities of Early Intervention/Prevention, Person Centred Care and Support, Models of Support, Pathways of Care, Health Inequalities and Managing our Resources Effectively. By focussing on these the multi-agency responses to Protecting People concerns is strengthened.

The Adult Support and Protection Committee continues to work closely with all relevant partners to ensure our strategies and priorities are aligned and coordinated.

# Our Response to COVID-19 3

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The initial phase of the pandemic (March - July 2020) involved building on strong relationships between partners to ensure a sustained focus on service continuity for priority groups.

A strategic risk register was established informed by multi-agency operational challenges. The introduction of Chief Officer Group and ASPC Executive Groups initially monitored and coordinated mitigating activity and latterly maintained the risk register as a current, relevant means of strategic overview.

To encourage early identification of concerns and promote timeous support, targeted public and workforce communication made use of a variety of media with extensive use of social media, video and radio campaigns and physical bag drops at community support centres.

To mitigate risk of 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 CPC <https://www.youtube.com/watch?v=4DxrLPlmFBY>.

Although the use of technology contributed greatly to the development and continuity of services this has 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 have significantly increased the speed and impact of responses across the partnership to vulnerable groups. Subject to further evaluation and informed by reflective sessions and planned workforce and community consultation, this will be built upon and strengthened in next iteration of the ASPC business Plan.

The following examples detail some of the progress made by partners towards addressing some of the challenges presented by COVID-19

- Core processes including Initial referral Discussions and Case Conferences used technology to convene virtually. Where possible, vulnerable people and their carers were supported to access and use this equipment to aid their full participation.
- Additional monitoring and oversight on a multi-agency basis was introduced with weekly meetings and data collection and analysis.
- Executive Groups/Chief Officer Groups for Public Protection increased the frequency of meetings to support their responsibility as guardians of collective public protection governance, assurance and culture to proactively provide additional support.
- Information shared via HSCP and NHS Tayside COVID-19 newsletters to raise awareness and ensure staff remain vigilant
- Scottish Government supplementary Adult Protection Guidelines shared. Local and Tayside guidance updated.
- The Mental Welfare Commission guidance in response to COVID-19 to support practitioners was shared across the partnership.
- There has been a focus on recognising and responding to financial harm during the pandemic with regular information and updates being provided via <https://onedundee.dundeeecity.gov.uk/news/covid-19-fraud-scams>
- Partners continued to develop and redesign services to support safe discharge from hospital, including the successful 'Discharge to Assess' model which promotes discharge prior to major assessment decisions being made. The aim of this is to improve experiences of discharge for both patients and carers and to reduce the numbers of patients moving directly to a care home from hospital. This in turn reduces the demand for guardianship applications under the Adults with Incapacity legislation.
- Developed and strengthened our support to third and independent sector providers to assist them to continue to operate safely throughout the pandemic and to support ongoing sustainability through national financial support arrangements.
- Developed a Partnership staff wellbeing framework and worked with partners in Dundee City Council and NHS Tayside to develop a range of supports and responses to respond to workforce health and wellbeing needs arising from the experience of working through the pandemic.
- In order to ensure key messages reached the community during the pandemic; leaflets with key protection messages for women who are involved in commercial sexual exploitation were developed and an accessible, symbolised version of public communication around domestic abuse was produced.
- Continued to support unpaid carers via the virtual hub, launch of the e-learning portal Carers of Dundee, the introduction of shopping cards and the provision of safe and innovative forms of respite. How we support carers continues to be informed by the Engagement Surveys and Focus Groups which carers were invited to contribute to.

- Ensured that people in vulnerable care groups are supported when they attend their appointment for a COVID-19 vaccination by aiding the organisation and development of the local vaccination centres and community testing facilities. For example, the Community Learning Disability Nurse organised a secluded area to support the needs of some people with a learning disability.
- Continued to support victims of domestic abuse and understand the effects lockdown and the pandemic has had on families. This includes a range of activities in partnership with Neighbourhood and Children and Families Services to enhance mainstream services responses to women, children and young people.
- The community learning disability nurses also adapted their service during the pandemic by providing nursing cover on public holidays and offering garden visits and 1:1 sessions instead of group work, where people did not wish to communicate using Near Me.
- The CARES service (COVID-Related Advice on Rehabilitation, Enablement and Support) has been a rapid development in direct response to emerging need. This remote access service offers direct access for anyone experiencing symptoms which are common after COVID-19.
- The Mental Health and Learning Disability Allied Health Professionals used MS Teams to communicate with individuals in lieu of 'face to face' appointments. For example Speech and Language Therapy utilised MS Teams to provide an Augmentative & Alternative Communication (AAC) therapy group for people with a range of learning disabilities and associated physical issues which would otherwise not have been able to meet due to COVID-19 related restrictions. This method of communication has also provided peer support for both service users and carers which might normally have been hard to achieve.
- Community Care and Treatment Service adapted their clinic based services to visit shielding patients at home to deliver wound care and phlebotomy services.
- Through the Gendered Services project, members of the lived experience group have discussed the barriers they have experienced when trying to engage with services and what instead would make a service more accessible. The input from this lived experience group has been incorporated into a self-assessment tool which will be used with services to identify gaps in service delivery and any gaps in knowledge for staff. The Gendered Services group also developed a directory of services for women in Dundee and this includes specialist services such as Women's Aid but also other services which have women-only elements <https://www.dvawp.co.uk/adult-experiencing-VAW/Specialist-Support>
- Positive Steps Assertive Outreach service has been especially successful in targeting overdose prevention interventions towards a "hidden" population of individuals at significant risk of drug related death. The service proactively identifies high risk individuals by conducting visits to street begging sites and homeless accommodation, as well as working with Dundee Drug and Alcohol Recovery Service to re-engage individuals who have recently stopped attending their service.



# What Our Data is Telling Us 4

## 1<sup>st</sup> April 2020 - 31<sup>st</sup> March 2021



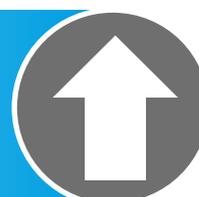
Improving the use of qualitative and quantitative multi-agency data to inform strategic decision making and the development and delivery of person centred approaches to improving safety and well-being was identified as a priority for the partnership in 2018.

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.

**What follows is a brief summary of key ASP data from 1st April 2020 - 31st March 2021.**

**2373** Concerns received

Increase of 10%  
on previous year



The number of adult concerns increased by 10% during the period covered by this report.

Dundee is a national outlier in terms of the levels of adult concern reports that are received by the HSCP from other partner agencies. In 2019 – 20 some 35,407 adult concerns were recorded nationally with Dundee accounting for 2147 (6%) of these. Last year Dundee was more than double the national average for Adult Concerns but was significantly below average for those proceeding to investigation.

There is no evidence to suggest that adults in Dundee are at any greater risk than they would be anywhere else but rather this has more to do with how agencies in Dundee carry out and record their statutory duties.

The vast majority of these adult concerns originated from Police Scotland VPD reports and do not meet the three point test under ASP legislation. Therefore, they cannot progress through legislative processes in respect of ASP processes. They do however, relate to adults who have a wider variety of needs and vulnerabilities. This means that response to the identified risks is required out with the legislative framework

Detailed multi-agency analysis was undertaken into how concerns were reported, screened, assessed and progressed. Analysis was also completed into what happens to individuals who present concern but do not progress in respect of statutory intervention.

A pilot screening of Adult Concerns commenced in March resulting in a 61% reduction in recorded ACR's. Bringing Dundee in line with other areas.

**180** ASP concerns raised by NHS Tayside

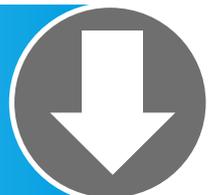
Increase of 78% on previous year



Although Police Scotland persist in being the major source of adult concern referrals, the past year has seen a significant rise in concerns raised by NHS Tayside. This is attributed largely to the work of our colleagues in the NHS Tayside Adult Protection Team in raising awareness and identifying areas for development across the NHS.

**14** Interagency referral discussions

Decrease of 40% on previous year



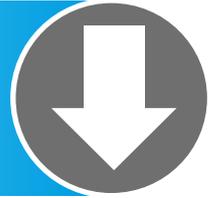
The number of Interagency referral discussions has decreased by 40%. Although numbers are small it is recognised the consistent application and recording of IRD processes is an area for development. Standardisation of IRD processes on a Tayside basis features in the current ASP business plan.

**47** Concerns that had a case reference

Increase of 18% on previous year



Again, although the numbers are small it is significant to note that many conferences were convened without an IRD taking place.

**55****Investigations  
undertaken****Decrease of 33%  
on previous year**

Of the investigations undertaken, 22 (40%) related to males and 33 (60%) concerned females. We have seen a significant decrease in the number of younger females being investigated. This was an area of concern during the previous reporting period.

Mental Health and Substance use feature as the primary areas of concern with most incidents of harm occurring in the individual's home or a public place.



# Key Achievements

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## Progress during the past 12 months

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Dundee Adult Support and Protection Committee has focused on two specific areas during the period covered by this report.

### The statutory duties for the local authority as defined in the legislation.

#### Examples of progress made in these areas include:

- Council Officer Programme (Blended Learning)
- Much improved use and interpretation of data.
- Pilot screening of Adult Concerns (Since commencing in March there has been a 61% reduction in recorded ACR's. Bringing Dundee in line with other areas)
- Council Officer and Manager Fora
- Development of Tayside Protocol (Eg Interagency referral discussion))

### Partnership

#### Examples of progress made in these areas include:

- Learning reviews: The Dundee partnership undertook a thematic review of fire deaths across the city which has identified areas of strength and development for the coming year.
- Focus on hospital discharge
- Capacity Pathway development
- Development of common risk assessment model
- Appropriate response to those not meeting 3-point test
- Financial harm and scam activity.

## NHS Developments

NHS Tayside has continued to develop the infrastructure of the Adult Protection Team, broadening the agenda and recruiting additional members of the team covering generic and specialist posts.

Tayside NHS Board holds a range of responsibilities under a broad suite of protective legislation (Adult Support and Protection/Mental Health Act/Adults with Incapacity Act/Wilful Neglect and Ill Treatment). To progress the development of a sustainable infrastructure for Adult Protection.

The development of this new service is well placed to meet the increasing demands as well as comply with all local and national arrangements and partnership working. The development of this team will ensure that NHS Tayside is able to support the most vulnerable and at risk adults within our communities and meet the growing demands on the NHS Tayside AP team.

# Workforce Learning & Development (2020/21)

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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 Adult Support and Protection (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

**“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)

**“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)

**“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

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 (MS Teams from August 2020) and continues to be a forum for practitioners and managers. This now also includes newly appointed NHS Tayside ASP Advisors for shared learning and development opportunities.

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. Utilising the positive learning from this pilot, programme 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

- The development of an ASP learning tool, enabling practitioners to evaluate and track their knowledge, skills and competence against key adult support protection quality indicators
- Individual learning plans and supervision tool, line manager input and feedback
- Accessible learning resource which follows the programme
- Self-directed learning tasks
- 8 Practice workshops, running over a 6–8-month period

The ASP learning tool competencies were designed by Dundee and Angus and critically appraised by colleagues in Perth and Kinross who at the time, were out with the programme pilot. The tool has also been shared nationally for feedback and reviewed by the National Adult Protection Coordinator, Paul Comley.

## 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.

The Tayside portal enables partners from a range of services across the city, 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 Health and Social Care Partnership. 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 throughout the ongoing COVID-19 pandemic.



# Priorities for the Next 12 Months

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## National Adult Protection Priorities

Inspection Partners are undertaking a phased restart to the Inspection Programme that was postponed due to COVID-19 in 2020. Dundee ASPC will consider the recommendations of any partner authority inspections and consider in respect of our business plan and risk register.

Institute for Research and Innovation in Social Services are working with the ASP Data Advisory Group to develop and test a new ASP Minimum Dataset in partnership with 3 test authorities. Dundee hopes to benefit from this area of development.

The ASP Code of Practice and the Guidance for Adult Protection Committees are being refreshed with a view to strengthening service user and carer involvement.

A Large Scale Investigation training resource is being developed nationally which will inform practice within Dundee.

## Local Adult Protection Priorities

- **Improve the multi-agency workforce awareness** of and their response to identified and emerging themes including Self-Neglect, Hoarding, Domestic Violence, Hate Crime and Internet Safety
- **Work with partners to plan and deliver mitigating actions** in response to risks identified through the strategic Risk register.
- **Improve and strengthen collaborative working** with our partner agencies
- **Strengthen arrangements for engagement** with the community, adult's at risk of harm, unpaid carers and the multi-agency workforce in respect of Adult Support and Protection
- **Strengthen learning** from Initial and Significant Case Reviews
- **The use of single agency and multi-agency chronologies.**
- **Implementation of the IRD process**
- **Recording of Decision making**
- **Application of 3 point test and the role** of the council officer.
- **Consider how frontline staff are directly involved** in self-evaluation and improvement activity
- **Development of a multi-agency ASP self-evaluation and improvement framework.**



What I  
**need!**  
from you!

Adult Support and Protection Committee Dundee

c/o Andrew Beckett, Lead Officer  
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**Adult Support  
& Protection**  
Committee Dundee

**Committee Report No:**

**Document Title:** Adult Support and Protection Committee Independent Convenor's Mid-Term Report 2020-2021

**Document Type:** Other

**New/Existing:** New

**Period Covered:** 01/04/2020 - 31/03/2021

**Document Description:**

Mid-term report of the Independent Convenor of the Adult Support and Protection Committee.

**Intended Outcome:**

To report progress against the recommendations from the Biennial Report 2018-2020 and summarise the work of the Adult Support and Protection Committee over the reporting period.

**How will the proposal be monitored?:**

The Independent Convenor monitors and reports progress through mid-term and biennial reports.

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## **A. Equality and Diversity Impacts:**

**Age:** Positive

**Disability:** Positive

<b>Gender Reassignment:</b>	No Impact
<b>Marriage and Civil Partnership:</b>	No Impact
<b>Pregnancy and Maternity:</b>	No Impact
<b>Race/Ethnicity:</b>	No Impact
<b>Religion or Belief:</b>	No Impact
<b>Sex:</b>	Positive
<b>Sexual Orientation:</b>	No Impact

**Equality and diversity Implications:**

The report details a range of activities that will have specific positive impacts on older people and people with a disability.

**Proposed Mitigating Actions:**

None required

**Is the proposal subject to a full EQIA? : No**

The report details a range of activities that will have specific positive impacts on older people and people with a disability.

**B. Fairness and Poverty Impacts:**

**Geography**

<b>Strathmartine (Ardler, St Mary's and Kirkton):</b>	Positive
<b>Lochee(Lochee/Beechwood, Charleston and Menzieshill):</b>	Positive
<b>Coldside(Hilltown, Fairmuir and Coldside):</b>	Positive
<b>Maryfield(Stobswell and City Centre):</b>	Positive
<b>North East(Whitfield, Fintry and Mill O' Mains):</b>	Positive
<b>East End(Mid Craigie, Linlathen and Douglas):</b>	Positive
<b>The Ferry:</b>	Positive
<b>West End:</b>	Positive

**Household Group**

<b>Lone Parent Families:</b>	No Impact
<b>Greater Number of children and/or Young Children:</b>	No Impact
<b>Pensioners - Single/Couple:</b>	Positive
<b>Single female households with children:</b>	No Impact
<b>Unskilled workers or unemployed:</b>	No Impact
<b>Serious and enduring mental health problems:</b>	Positive
<b>Homeless:</b>	Positive
<b>Drug and/or alcohol problems:</b>	Positive
<b>Offenders and Ex-offenders:</b>	No Impact
<b>Looked after children and care leavers:</b>	No Impact
<b>Carers:</b>	Positive

**Significant Impact**

<b>Employment:</b>	No Impact
<b>Education and Skills:</b>	No Impact

**Benefit Advice/Income Maximisation:**

No Impact

**Childcare:**

No Impact

**Affordability and Accessibility of services:**

Positive

**Fairness and Poverty Implications:**

The activities of the Adult Support and Protection Committee have a positive impact across all localities and on a range of vulnerable groups across the city. The report details activities with specific focus on older people, homelessness, mental health and other vulnerable groups.

**Proposed Mitigating Actions:**

None required

## **C. Environmental Impacts**

### **Climate Change**

**Mitigating greenhouse gases:**

Not Known

**Adapting to the effects of climate change:**

Not Known

### **Resource Use**

**Energy efficiency and consumption:**

Not Known

**Prevention, reduction, re-use, recovery or recycling waste:**

Not Known

**Sustainable Procurement:**

Not Known

### **Transport**

**Accessible transport provision:**

Not Known

**Sustainable modes of transport:**

Not Known

### **Natural Environment**

**Air, land and water quality:**

Not Known

**Biodiversity:**

Not Known

**Open and green spaces:**

Not Known

### **Built Environment**

**Built Heritage:**

Not Known

**Housing:**

Not Known

### **Is the proposal subject to Strategic Environmental Assessment**

No further action is required as it does not qualify as a Plan, Programme or Strategy as defined by the Environment Assessment (Scotland) Act 2005.

### **Proposed Mitigating Actions:**

None

### **Environmental Implications:**

Not known

## **D. Corporate Risk Impacts**

### **Corporate Risk Implications:**

The risk implications associated with the subject matter of this report are 'business as normal' risks. The subject matter is routine and has happened many times before without significant loss. There is comfort that the risks inherent within the activity are either transferred to another party, shared equally and fairly between the Council and another party or are negligible.

### **Corporate Risk Mitigating Actions:**