

NHS Shetland

Meeting: Shetland NHS Board

Meeting date: 19 September 2023

Title: Adult Support and Protection Inspection

Report and Improvement Plan

Agenda reference: Board Paper 2023/24/39

Responsible Executive/Non-Executive: Jo Robinson, Interim Director of

Community Health and Social Care

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Social Work

1. Purpose

This is presented to the Board/Committee for:

Awareness

This report relates to:

Legal requirement

This aligns to the following NHSScotland quality ambition(s):

- Safe
- Effective
- Person-centred

2. Report summary

2.1. Situation

The purpose of this paper is to raise awareness of the recent Adult Support and Protection Inspection Report and subsequent Improvement Plan. The board is asked to note the Inspection report and Improvement Plan for awareness particularly the key strengths and recommendations highlighted within the report. The Inspection found that;

 the partnership's KEY PROCESSES for adult support and protection were effective with areas for improvement. There were clear strengths supporting positive experiences and outcomes for adults at risk of harm which collectively outweighed the areas for improvement. the partnership's STRATEGIC LEADERSHIP for adult support and protection was
effective with areas for improvement. There were clear strengths supporting positive
experiences and outcomes for adults at risk of harm, which collectively outweighed the
areas for improvement.

2.2. Background

A joint inspection of the Shetland partnership was undertaken by the Care Inspectorate, Health Improvement Scotland and His Majesty's Inspectorate of Constabulary in Scotland at the request of Scottish Ministers between October 2022 and March 2023 with a key focus on the following areas;

- How good were the partnership's key processes for adult support and protection?
- How good was the partnership's strategic leadership for adult support and protection?

This was part of an inspection programme which looked at all partnerships across Scotland.

2.3. Assessment

The Inspection report was largely positive with some key areas of strength and some areas for improvement. An Improvement Plan (attached) is now in place and work has commenced in this regard.

2.3.1. Quality / patient care

The Inspection report found that there were clear strengths supporting positive experiences and outcomes for adults at risk of harm which collectively outweighed the areas for improvement

2.3.2. Workforce

There is a recommendation within the report regarding Health professionals acting as second person during Adult Support and Protection investigations where appropriate (where there are key concerns relating to an individuals health) which may create workforce pressure. Training is being arranged to support the workforce in this regard.

2.3.3. Financial

The key financial impact is in relation to sourcing training from out with Shetland for staff across Health and Shetland Islands Council.

2.3.4. Risk assessment/management

Not relevant.

2.3.5. Equality and Diversity, including health inequalities

Not relevant.

2.3.6. Other impacts

Not relevant.

2.3.7. Communication, involvement, engagement and consultation

Not relevant.

2.3.8. Route to the meeting

The Inspection Report and Improvement Plan has been presented to the Shetland Public Protection Committee and the Joint Governance Group to date and is due to be presenting to the Integrated Joint Board on 5th October 2023.

2.4. Recommendation

• **Awareness** – For Members' information only.

3. List of appendices

The following appendices are included with this report:

Joint inspection of adult support and protection, Shetland partnership March 2023

<u>Joint inspection of adult support protection in the Shetland partnership</u> (careinspectorate.com)

Shetland Partnership Improvement Plan ASP 2023

INSPECTION OF ADULT SUPPORT AND PROTECTION IN THE SHETLAND PARTNERSHIP AREA

Improvement Plan- March 2023

Improvement Goal	Actions	Overall Responsibility	Monitoring Arrangements	Timescale	Success Measures	Progress Statement
1. Screening and Triaging	g of Adult Protection c	oncerns				
Ensure robust decision making at fortnightly multi-agency meeting, especially when concerns do not meet the threshold for adult support and protection.	A1.1 – Weekly meeting held with hub A1.2 – Triage Adult Concern Forms and plan to be put in place for Other Concern Forms A1.3 – Update ASP Procedures after trial period	Executive Manager, Adult Social Work	Weekly meeting held with hub 2 month review by Executive Manager and Duty Social Work Seniors	31 August 2023	A valid and well- understood system for prompt, accurate screening of all adult protection concerns is in place and is intimated to our partnership. The three-point criteria is correctly and consistently applied.	A1.1 - Weekly meetings being held A1.2 - Triaging of ACF commenced
2. Recording of Duty to	<i>Enquire</i>					
Ensure application of three-point criteria processes are clearly recorded when referrals are made, including reasons for No Further Action, where applicable.	A2.1 - Review new form to ensure fit for purpose. (Template from Clackmannanshire / Argyle and Bute) A2.2 - Implement.	Executive Manager, Adult Social Work	Roll out form and monitor it with Executive Manager and Duty Senior Team	31 August 2023	Specifically record the application of the three-point criteria consistently, including recording the rationale for why the three point criteria is met or is not met.	

3. Shetland Public Protection Committee Vision								
Develop, and share a vision for adult support and protection in the Shetland Partnership Area. Ensure adults at risk of harm and unpaid carers are represented on Shetland Public Protection Committee and its-subcommittees. Implement a new public communication strategy for Shetland Public Protection Committee.	A3.1 – Development Day – focus on Vision of SPPC A3.2 – Lead Officer, SPPC, arrange to meet with SPPC Members A3.3 – Participation and Lived Experience – discussion with Third Sector on ways to take forward A3.4 – Publicity Plan	Chair, SPPC Lead Officer, SPPC	Development day is planned around vision for SPPC	31 December 2023	Leaders ensure there are a clearly articulated vision and an integrated, cohesive strategy for adult support and protection within our partnership and that they are confident of staff understanding of this. Our staff are clear that the vision and strategy informs their work. Our leaders make sure that the views of adults at risk of harm and their unpaid carers are integral to adult protection policy formulation and planning.	A3.1 - Development Day being held 30 August 2023 A3.2 - Meetings arranged with some SPPC members A3.3 - Meeting arranged with Chief Executive of VAS re Participation		
4. Shetland Public Prot	ection Committee B	usiness Planning	7					
Improve the Shetland Public Protection Committee Business Plan, to ensure it is clearly focussed on Adult Support and Protection work, and evidences its work in quality assurance.	A4.1 - Business Plan to be formed from discussion at Development Day August 2023	Lead Officer, SPPC		30 September 2023	Leaders ensure sound quality assurance and audit processes are extant within the partnership. They carry out periodical self-evaluations of adult support and protection, and deliver improvements identified.			

5. NHS Second Worker for Full Investigations								
Use of a second worker from NHS, with Council Officer in investigations involving CPN, dementia care, palliative care, health worker	A5.1 – Arrange Council Officer Training for Social Workers and relevant NHS staff A5.2 – Protection Nurse to discuss a plan with Protection Group at NHS	Protection Nurse, NHS Lead Officer, SPPC		28 February 2024	We carry out competent, prompt, multi-agency, in-depth full investigations into adult protection concerns that correctly identify the way forward. These are timeously and fully recorded. And the rationale for key decisions is recorded. Clear arrangements – which are widely understood by staff – are in place for multi-agency consideration of the findings from our adult protection investigations. Information sharing about adults at risk of harm is underpinned by clear protocols and arrangements in place for the sharing of information between all key agencies in respect of adult risks of harm. Prompt action is taken in response to referrals received.	A5.1 - LO has contact with "name" to deliver Council Officer Training A5.2 - Protection Group Meeting held on 20 April.		

Inspection of Adult Support and Protection - Shetland Partnership Area Improvement Plan – March 2023

6. Shetland Public Protection Training Strategy								
Review the Shetland Public Protection Strategy to: • ensure it provides direction on specific training offered and delivery methods; • record uptake of specific training by staff groups; • ensure it supports early interventions such as trauma informed practice; • ensure there is a process in place for regular needs analysis.	Lead Officer, SPPC	Monitor through SPPC. Training Strategy and Improvement Plan as standing SPPC Agenda Items	31 August 2024	Leaders ensure the delivery of robust, competent, effective, and integrated adult protection practices by all staff. Leaders exercise effective governance over all aspects of adult support and protection.				

7. Feedback Following	7. Feedback Following Referrals							
Ensure timely and appropriate feedback from Social Work to referring agencies.	A7.1 – Guidance / reminder added to Duty Assistant Manual A7.2 - Social Workers to be clear about what feedback can be provided.	Executive Manager, Adult Social Work	Agenda Item at regular Team Meeting	31 August 2023	Agreed protocols and arrangements include clarity as to how feedback is provided to referring agencies.			
8. Chronologies								
Continue to develop guidance and staff training to improve the quality and effectiveness of chronologies for adults at risk of harm.	A8.1 – Finalise drafted new guidance and framework for chronologies and roll out	Executive Manager, Adult Social Work	Supervision to monitor and file management	31 October 2023	Chronologies are up to date, focus on key life events and the implications of these on risk. Risk assessments, risk management plans, and chronologies are consistently shared among all our adult protection partners.			
9. Risk Assessments a	nd Protection Plans							
Ensure agreed revised risk assessment template is implemented. Create clear and smart records Ensure all identified risks are reflected in Protection Plans.	A9.1 - Draft revised risk assessment template needs further consideration following inspection feedback.	Executive Manager, Adult Social Work	Supervision to monitor and file management	31 October 2023	Detailed risk assessments and risk management plans - including chronologies are in place - for adults at risk of harm, who require them.			

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10. Case Conferences						
Ensure the reasons for not inviting the adult at risk to their case conference are clearly recorded, or the reason why they did not attend when invited. Ensure timescales for holding review case conferences are met.	A10.1 – Ensure reason is recorded in minute by including a check box	Executive Manager, Adult Social Work	File Audit Quality Assurance work in AS&P at end of each year (September 2023)	31 October 2023	Correctly convene multiagency case conferences for adults at risk of harm, which are well attended by partner organisations. These effectively determine what needs to be done to secure the individuals' ongoing safety and other positive personal outcomes. Adults at risk of harm and their unpaid carers (if appropriate) are timeously invited and supported to attend and fully participate in the deliberations of the case conference.	

11. Health Involvement in Adult Support and Protection								
Ensure there is appropriate supervision in place for NHS staff involved in adult support and protection	A11.1 - There is an NHS Shetland CP supervision protocol in place for NHS staff so this could be adapted for AP. A11.2 – look for other examples from other authority areas	Protection Nurse, NHS	Survey / Evaluation after two cycles of supervision (after 16 weeks)	30 December 2023				
12. Quality Assurance								
Social Work managers to ensure information is consistently recorded on agreed templates.	A12.1 – Team meeting discussion A12.2 – New templates checked	Executive Manager, Adult Social Work	Regular Quality Assurance to ensure templates are being used.	31 October 2023	Leaders ensure sound quality assurance and audit processes are extant within the partnership. They carry	A12.3 - Meeting arranged with CE of VAS - Invite third sector rep to next QAAP meeting in August.		
Ensure appropriate involvement of third sector	and rolled out		Annual Quality Assurance with		out periodical self- evaluations of adult			
and partner agencies In quality assurance and reflective practice	A12.3 – Third sector representative on Quality Assurance Group	Lead Officer, SPPC	Lead Officer and Social Work (September 2023)	30 August 2023	support and protection, and deliver improvements identified.			