

**REPORT TO: HEALTH AND SOCIAL CARE SERVICES COMMITTEE ON  
3 FEBRUARY 2010**

**SUBJECT: ADULT SUPPORT AND PROTECTION**

**BY: DIRECTOR OF COMMUNITY SERVICES**

**1. REASON FOR REPORT**

- 1.1 To update The Moray Council on the progress being made in Moray to implement the Adult Support and Protection (Scotland) Act 2007.
- 1.2 This report is submitted to Committee in terms of the Council's Administrative Scheme in relation to the function of the Council as Social Work Authority under the Social Work (Scotland) Act 1968.

**2. RECOMMENDATION**

- 2.1 **It is recommended that Committee considers the progress made to date and the future planned developments.**

**3. BACKGROUND**

- 3.1 The Adult Support and Protection (Scotland) Act 2007 was implemented on 28 October 2008, as agreed at Policy & Resources Committee on 11 November 2008 (para 5 of the minute refers).
- 3.2 The main focus of the Act is to provide support and protection to adults within our communities who are believed to be at risk of harm.
- 3.3 The Act defines an 'adult at risk' as a person aged 16 years or over who:
  - is unable to safeguard her/his own well-being, property, rights or other interests;
  - is 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.

- 3.4 Section 53 of the Act states harm includes all harmful conduct and, in particular includes:
- conduct which causes physical harm;
  - conduct which causes psychological harm (for example by causing fear, alarm or distress);
  - unlawful conduct which appropriates or adversely affects property, rights or interests (for example theft, fraud, embezzlement or extortion);
  - conduct which causes self-harm.
- 3.5 The implementation of the Act has been taken forward by the Grampian Adult Support and Protection Group, a multi agency group formed by members of the three Local Authorities (Moray, Aberdeen City and Aberdeenshire), NHS Grampian, Grampian Police, the Care Commission and the voluntary sector.
- 3.6 The Group have developed and led in the implementation of the Grampian Interagency Policy and Procedures and Joint Training Plan.
- 3.7 In Moray, an Adult Protection Committee has been formed, whose focus is:
- to take a strategic overview on managing adult protection policies, systems and procedures of relevant public bodies at a local level, including any such policies, systems or procedures which involve co-operation between the Council and other public bodies or office holders. This includes the NHS, the Care Commission and the Police Force in the Council area;
  - to give relevant public bodies information or advice, or make proposals on the exercise of functions which relate to the safe guarding of adults at risk in the Council's area;
  - to make or be involved in making arrangements for improving the skills and knowledge of relevant officers or employees; and
  - improve the co-operation between each of the relevant public bodies and office holders, that is:  
  
The Moray Council;  
The Care Commission;  
NHS Grampian;  
Grampian Police;  
Any other public body or office holder as the Scottish Ministers may by order specify; and  
Any other related functions specified by Ministers.
- 3.8 The Adult Protection Committee and the implementation of the Act in Moray are supported by the Adult Protection Unit which consists of the Adult Protection Coordinator and Secretary. In addition, 44 council officers have been appointed to carry out inquiries and investigations under the Act. (NB: A council officer is a member of staff already employed by the Council with identified professional qualifications, training and registration, who undertakes specific duties under the Adult Support & Protection (Scotland) Act 2007).

- 3.9 Training has commenced and to date 1,489 training course places taken. Details of the Training Plan is attached at Appendix 1.
- 3.10 Over 1,000 NHS staff in Moray and 5,000<sup>1</sup> Moray Council staff, as well as voluntary and private sector staff require to be trained<sup>2</sup>. It should be noted that training is provided at a level appropriate to the staff concerned e.g. ranging from awareness raising to advanced). To date 149 (14%) of NHS staff and 1,087 (21%) of all Moray Council staff have received training on the support and protection of adults at risk of harm. Voluntary and private sector staff also require to be trained<sup>3</sup>. The NHS in particular are finding it difficult to release staff for training. The training is in the process of being made mandatory for all NHS staff and alternative forms of training are being sought to enable staff to access the appropriate level of training.
- 3.11 Adult Protection referrals are steadily increasing, as detailed in Appendix 2. However, the particular issues are noted below:
- Many referrals relate to people who are at risk due to drugs, alcohol, low level mental health issues or borderline learning disability who are choosing to make what might be considered 'bad' life choices but who are not covered by the Act, as defined by 3.3 above. Alternative ways of managing these referrals are being considered.
  - Referrals relate to all age ranges and care groups across the adult community care spectrum.
  - The significant rise in referrals does not necessarily imply an increase in the occurrence of abuse but rather increased awareness of the issue (through training and publicity) and a readiness to refer.
- 3.12 A recent SWIA inspection has highlighted the need to ensure all Adult Support and Protection processes are audited. This is to be done from a statistical point of view and a qualitative perspective.
- 3.13 The gathering of statistical information has begun and is detailed in the attached Appendices, but will be further enhanced with the introduction of Care First 6 in 2010, which will improve our ability to record client specific information electronically.
- 3.14 In addition, the Grampian Adult Support and Protection Group have established an Audit Sub Group to develop cross Grampian qualitative measures. The group has already met and agreed the priorities areas. This will be further developed over the next few months.

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<sup>1</sup> Source: Quarterly Joint Staff Watch Survey, September 2009 (5,192 staff)

<sup>2</sup> Training statistics are currently gathered and calculated manually.

<sup>3</sup> Training presently available on-line.

The main areas to be developed are:

- Case Conferences and Adult Protection Meetings – attendance, decision making, outcomes, risk assessments and protection plans.
- Training – effectiveness, quality and quantity.
- Awareness – source of referrals, questionnaire of community groups etc
- Service User involvement – numbers who attend case conferences, 6 month post conference follow up to review opinion of interventions.
- Partnership Working and Information Sharing.

#### **4. SUMMARY OF IMPLICATIONS**

##### **(a) Single Outcome Agreement /Service Improvement Plan**

- (i) The implementation of the Adult Support and Protection Act as detailed in this report complies with the Single Outcome Agreement priority 3 and National outcome 6.
- (ii) The implementation of the Adult Support and Protection Act as detailed in this report complies with Service Priority 1.1 of Community Services' Service Development and Improvement Plan.

##### **(b) Policy and Legal**

The implementation of the Adult Support and Protection Act is a statutory requirement.

##### **(c) Resources (Financial, Risks, Staffing and Property)**

- (i) There are no direct financial implications arising from this report.
- (ii) The Government has provided additional funding to enable Local Authorities to implement the Act. A statistical audit was recently completed on behalf of the Government by COSLA. The outcome is likely to determine future Government funding.
- (iii) To date, the funding provided to the Local Authority has covered the cost of implementation but it is unclear what the future costs are likely to be given the rising referrals.
- (iv) Funding to the NHS has been very limited and has not covered the cost of implementation within the NHS. This has been highlighted within the audit.

**(d) Consultations**

This report has been prepared in consultation with the the following:

Director of Community Services;

Acting Head of Community Care;

Deborah Bosworth, Principal Accountant;

Adult Protection Co-ordinator;

General Manager, Moray Community Health & Social Care Partnership.

**5. CONCLUSION**

- 5.1 The implementation of the Act, to date, in Moray has been successful but the continued support of all senior managers and Committee will be required to ensure the levels of awareness and training are sufficient to ensure those most at risk of harm can be safeguarded.

Author of Report: Anne Slee, Integrated Learning Disability Service Manger/Lead Officer for Adult Protection

Background Papers:

Ref: