Public Document Pack



<u>To</u>: Councillor Radley, <u>Convener</u>; Councillor McRae, <u>Vice-Convener</u>; and Councillors Bonsell, Brooks, Copland, Delaney, Graham, Greig, MacKenzie, McLellan, Nicoll, Stewart and Thomson.

Town House, ABERDEEN 25 October 2022

COMMUNITIES, HOUSING AND PUBLIC PROTECTION COMMITTEE

The Members of the COMMUNITIES, HOUSING AND PUBLIC PROTECTION COMMITTEE are requested to meet in Council Chamber - Town House on TUESDAY, 1 NOVEMBER 2022 at 10.00 am. This is a hybrid meeting and Members may also attend remotely.

The meeting will be webcast and a live stream can be viewed on the Council's website. https://aberdeen.public-i.tv/core/portal/home

VIKKI CUTHBERT INTERIM CHIEF OFFICER - GOVERNANCE

BUSINESS

DETERMINATION OF URGENT BUSINESS

1. There are no items of urgent business at this time.

DETERMINATION OF EXEMPT BUSINESS

2. There are no exempt items of business

DECLARATIONS OF INTEREST AND CONNECTIONS

3. <u>Members are requested to intimate any declarations of interest or connections</u>

REQUESTS FOR DEPUTATION

4. There are no requests for deputation at this time

COMMITTEE PLANNER

5. <u>Committee Business Planner</u> (Pages 5 - 10)

PRESENTATION

5.1. <u>Presentation to Members from the Executive Leads</u>

NOTICES OF MOTION

6.1. Notice of Motion from Councillor Houghton - referred from Council on 13
October 2022

Councillor Houghton

- 1. Notes the decision of the Urgent Business Committee of 13th September 2022 that the Council:
 - (i) Expresses great sadness at the death of Queen Elizabeth II
 - (ii) Acknowledges the close bond that existed between Queen Elizabeth II and the North East
 - (iii) Notes the many tributes that have been paid to Queen Elizabeth II by citizens of Aberdeen, which have included recognition of her faithful commitment to duty and devotion to the country and its people.
 - (iv) Extends its condolences to His Majesty King Charles III, and to the entire Royal Family
 - (v) Instructs officers to make arrangements for people to be able to complete a physical Book of Remembrance at either Marischal College or the Central Library.
- 2. Agrees that to remember and commemorate the relationship of our late Queen with Aberdeen that 'Union Terrace Gardens' be renamed 'The Queen Elizabeth II Gardens' at its formal opening as a tribute to 70 years of unblemished service to our nation, and that any cost be met from the existing Union Terrace Gardens redevelopment budget and available existing project contingencies; and
- 3. Agrees that the Lord Provost should extend an invitation to the Palace with a view to a Royal Opening of the gardens to occur in 2023.
- 6.2. Notice of Motion from Councillor Kusznir referred from Council on 13
 October 2022

That the Council:

- (a) commends the work of Bon Accord Heritage SCIO (Charity No.: SC046052);
- (b) welcomes that politicians from all political parties in Aberdeen have expressed their support for the restoration and reopening of Bon Accord Baths:
- (c) understands that Bon Accord Heritage SCIO is working to bring Bon Accord Baths back into public use through a purchase or lease agreement with Aberdeen City Council and the financial support of other partners;
- (d) understands from Bon Accord Heritage SCIO that the in-principle official support by Aberdeen City Council to the restoration of Bon Accord Baths is a requirement for Bon Accord Heritage SCIO to access other sources of funding, including but limited to grant funding, which is essential to the ultimate restoration of the building;
- (e) instructs the Chief Executive, or other appropriate nominated officer, to formally confirm that Aberdeen City Council supports in principle the restoration of Bon Accord Baths; and
- (f) agrees to assist Bon Accord Heritage SCIO in accessing available external funding opportunities.

FINANCE, PERFORMANCE, RISK AND SERVICE WIDE ISSUES

7.1. Performance Report - CUS/22/227 (Pages 11 - 42)

GENERAL BUSINESS

- 8.1. <u>Adult Protection Committee Biennial Report 2020-22 ACHSCP/22/237</u> (Pages 43 70)
- 8.2. Tenant and Resident Engagement CUS/22/248 (Pages 71 78)
- 8.3. Warm Space CUS/22/239 (Pages 79 88)

EHRIAs related to reports on this agenda can be viewed here

To access the Service Updates for this Committee please click here

Website Address: aberdeencity.gov.uk

Should you require any further information about this agenda, please contact Lynsey McBain, lymcbain@aberdeencity.gov.uk or 01224 522123



	A	В	С	D	E	F	G	Н	I
1		COMMUNITIES The Business Planner details the reports which	CHOUSING AND PUBLIC In the have been instructed as				nitting for the cal	endar year.	
2	Report Title	Minute Reference/Committee Decision or Purpose of Report	Update	Report Author	Chief Officer	Director	Terms of Reference	Delayed or Recommende d for removal or transfer, enter either D, R, or T	Explanation if delayed, removed or transferred
3			1st N	ovember 2022					
4	Performance Report	The purpose of this report is to present Committee with the status of key performance measures relating to the Operations Directorate (non-Education).		Louise Fox	Business Intelligence and Performance Management	Customer	1.1.3	Т	Transferred from ODC planner.
5	SFRS - Verbal update	The Group Commander for SFRS to give a verbal update regarding concerns around the cost of living crisis and potential for individuals to be burning more candles etc.		Chay Ewing	Scottish Fire and Rescue Service	Scottish Fire and Rescue Service		Т	Transferred from Public Protection Committee business planner.
6	Adult Protection Committee Biennial Report 2020-22	To share the Adult Protection Committee (APC) Convener's Biennial Report for 2020-22		Val Vertigans	AHSCP	AHSCP	2.9		
7	Tenant and Resident Engagement	To advise the Committee of progress on tenant and resident engagement in the city		Derek McGowan	Early Intervention and Community	Customer	1.1.1		
8	Warm Spaces	To share the progress made on the Warm Spaces initiative by the Library and Community Learning service.		Margaret Stewart	Early Intervention and Community	Customer	1.1.1		
9			17th	January 2023					
10	Notice of Motion by Councillor Hutchison	At the Council meeting on 13 July 2022, the following Notice of Motion was referred to Operational Delivery Committee and the NOM was agreed on 31 August 2022 (a) notes the role of the council in protecting tenants in the private rented housing sector through licensing, registration and enforcement;(b) agrees that everyone living in the rented sector should be able to have an expectation of safe, secure and good-quality housing, and that this is undermined where landlords fail to meet their legal obligations; (c)instructs the Chief Officer - Early Intervention and Community Empowerment to report to a future committee on the operation of the private landlord registration and HMO licensing schemes, and short term lets legislation preparedness in Aberdeen. This should include the action taken when complaints are received about unlicensed landlords, and options to ensure that the public are aware of how to raise complaints. Report may require to be considered by Licensing Committee thereafter.		Derek McGowan	Early Intervention and Community Empowerment	Customer	1.1.1	Т	Transferred from ODC planner.

	А	В	С	D	E	F	G	Н	I
2	Report Title	Minute Reference/Committee Decision or Purpose of Report	Update	Report Author	Chief Officer	Director	Terms of Reference	Delayed or Recommende d for removal or transfer, enter either D, R, or T	Explanation if delayed, removed or transferred
11	Preventing Homelessness - Memorandum of Understanding between Aberdeen City Council and the Department of Work and Pensions	At the Council meeting on 13 July 2022, it was agreed that update reports on the Momorandum of Understanding between Aberdeen City Council and the Department of Work and Pensions be submitted to the relevant committee on a six monthly basis.		Derek McGowan	Early Intervention and Community Empowerment	Customer	1.1.1	т	Transferred from Operational Delivery Committee business planner.
12	Performance Report	The purpose of this report is to present Committee with the status of key performance measures relating to the Operations Directorate (non-Education).		Louise Fox	Business Intelligence and Performance Management	Customer	1.1.3		
13	Resilience Annual Report	To provide the annual assurance report on the Council's resilience arrangements in fulfilment of its duties as a Category 1 responder under the Civil Contingencies Act 2004		Fiona Mann/Vikki Cuthbert	Governance	Governance	2.12	Т	Transferred from Public Protection Committee business planner.
14	Building Standards Activity Report	At its meeting on 10 October 2019, the Committee agreed to six monthly assurance reporting. Last considered at PPC on 28 June 2022.		Gordon Spence	Place	Governance	2.7	Т	Transferred from Public Protection Committee business planner.
15	SFRS - Thematic Report: Tracking and Monitoring Initiatives	Members agreed at PPC on 28 June 2022 to note that the Group Commander would present a thematic report in respect of tracking and monitoring of initiatives to Committee on 12 December 2022. Following changes to the committee structure, will now be reported to CHPPC on 17 January.		Chay Ewing	Scottish Fire and Rescue Service	Scottish Fire and Rescue Service	2.20	Т	Transferred from Public Protection Committee business planner.
16	Police Scotland - Thematic Reports	Topics to be agreed with PS and Convener at meeting which is to be arranged following approval of new committee structure.		Kate Stephen	Police Scotland	Police Scotland	2.20		
17			14ti	March 2023					
18	Performance Report	The purpose of this report is to present Committee with the status of key performance measures relating to the Operations Directorate (non-Education).		Louise Fox	Business Intelligence and Performance Management	Customer	1.1.3		
19	Cluster Risk Registers and Assurance Map Reporting for Customer Experience / D&I / D&T / EI&CE and Building Services	To report on the cluster risk registers		Jacqui MacKenzie, Steve Roud, Derek McGowan, Mark Reilly, Graeme Simpson	Various	Various	1.1.4	Т	Transferred from ODC planner.

	Α	В	С	D	Е	F	G	Н	ı
2	Report Title	Minute Reference/Committee Decision or Purpose of Report	Update	Report Author	Chief Officer	Director	Terms of Reference	Delayed or Recommende d for removal or transfer, enter either D, R, or T	Explanation if delayed, removed or transferred
20	SFRS - Thematic Report:	Theme to be agreed.		Chay Ewing	Scottish Fire and Rescue Service	Scottish Fire and Rescue Service	2.20		
21	Police Scotland 6 monthly Performance Report	To present Police Scotlands 6 monthly Performance Report		Kate Stephen	Police Scotland	Police Scotland	2.20		
22			160	h May 2023					
23	Performance Report	The purpose of this report is to present Committee with the status of key performance measures relating to the Operations Directorate (non-Education).		Louise Fox	Business Intelligence and Performance Management	Customer	1.1.3		
24	SFRS: Thematic Report	Theme to be agreed.		Chay Ewing	Scottish Fire and Rescue Service	Scottish Fire and Rescue Service	2.20		
25			6t	n July 2023				l.	
26	Performance Report	The purpose of this report is to present Committee with the status of key performance measures relating to the Operations Directorate (non-Education).		Louise Fox	Business Intelligence and Performance Management	Customer	1.1.3		
27	SFRS - 2022/23 Annual Scrutiny Report	To provide details on the Scottish Fire and Rescue Scrutiny Report for 2022/23		Chay Ewing	Scottish Fire and Rescue Service	Scottish Fire and Rescue Service	2.20		
28			5th Se	eptember 2023					
29	Empty Home Policy	At the Operational Delivery Committee on 16 September 2021, it was agreed that an annual report be brought back in relation to Empty Homes.		Derek McGowan	Early Intervention and Community Empowerment	Customer	1.1.1	Т	Transferred from Operational Delivery Committee business planner.
30	Performance Report	The purpose of this report is to present Committee with the status of key performance measures relating to the Operations Directorate (non-Education).		Louise Fox	Business Intelligence and Performance Management	Customer	1.1.3		

	A	В	С	D	Е	F	G	Н	
2	Report Title	Minute Reference/Committee Decision or Purpose of Report	Update	Report Author	Chief Officer	Director	Terms of Reference	Delayed or Recommende d for removal or transfer, enter either D, R, or T	Explanation if delayed, removed or transferred
31	Annual Committee Effectiveness Report	To report on the annual effectiveness of the committee		Lynsey McBain	Governance	Commissioning	TBC		
32	Police Scotland - Performance Report	To present Police Scotland Performance Report		Kate Stephen	Police Scotland	Police Scotland	2.20		
33	SFRS: Thematic Report	Theme to be agreed.		Chay Ewing	Scottish Fire and Rescue Service	Scottish Fire and Rescue Service	2.20		
34			14th N	November 2023					
35	Annual Assurance Statement	Annual submission required to the Scottish Government. October/November 2023		Derek McGowan	Early Intervention and Community Empowerment	Customer	1.1.1	Т	Transferred from Operational Delivery Committee business planner.
36	Performance Report	The purpose of this report is to present Committee with the status of key performance measures relating to the Operations Directorate (non-Education).		Louise Fox	Business Intelligence and Performance Management	Customer	1.1.3		
37	Aberdeen City Affordable Housing Supply Programme Update report			Mel Booth	Early Intervention and Community Empowerment	Customer			
38	Strategic Housing Investment Plan			Mel Booth	Early Intervention and Community Empowerment	Customer			
39	SFRS - 6 month Performance Report	To provide details on the 6 month performance report from Scottish Fire and Rescue.		Chay Ewing	Scottish Fire and Rescue Service	Scottish Fire and Rescue Service	2.20		
40			Beyond 2023	or no date conf	irmed.				
41	Participatory Budgeting in Aberdeen	At the budget meeting on 7 March 2022, it was agreed to note the Council's approach towards meeting the target of 1% of revenue funding being available for Participatory Budgeting, paragraph 3.83 of the report, and instruct the Chief Officer - Early Intervention and Community Empowerment to report to a future meeting of the Operational Delivery Committee on the impact of Participatory Budgeting in Aberdeen;		Derek McGowan	Early Intervention and Community Empowerment	Customer	1.2	т	Transferred from Operational Delivery Committee business planner.

	A	В	С	D	E	F	G	Н	I
	Report Title	Minute Reference/Committee Decision or Purpose of Report	Update	Report Author	Chief Officer	Director	Terms of Reference	Delayed or Recommende d for removal or transfer, enter either D, R, or T	Explanation if delayed, removed or transferred
4	Piper Alpha Memorial Report	ODC 31/08/22 - to instruct the Chief Officer Operations and Protective Services to liaise with interested parties as to their preferred options for the future of the Piper Alpha Memorial and to include in those options presented to those parties, the option of the replanting of roses including any cost implications; and to instruct the Chief Officer Operations and Protective Services to report the outcome of the meeting(s) with interested parties to the next appropriate Committee meeting and seek a decision; and to instruct the Chief Officer Operations and Protective Services to provide an update to a Council meeting when appropriate.		,	Operations and Protective Services	Operations	1.1.1	Т	Transferred from ODC planner.

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COMMITTEE	Communities, Housing and Public Protection Committee					
DATE	1 November 2022					
EXEMPT	No					
CONFIDENTIAL	No					
REPORT TITLE	Communities, Housing and Public Protection Performance Report					
REPORT NUMBER	CUS/22/227					
DIRECTOR	Andy MacDonald					
CHIEF OFFICER	Martin Murchie					
REPORT AUTHOR	Louise Fox					
TERMS OF REFERENCE	1.1.3					

1. PURPOSE OF REPORT

1.1 To present Committee with the status of appropriate key performance measures relating to the Operations (non-Education) and Customer functions.

2. RECOMMENDATION(S)

2.1 That the Committee note the report and provide comments and observations on the performance information contained in the report Appendix.

3. CURRENT SITUATION

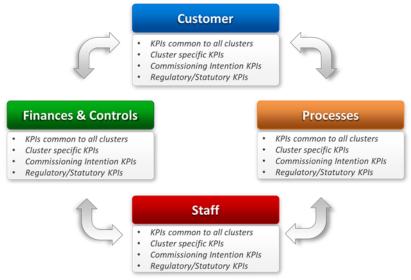
Report Purpose

3.1 This report is to provide members with appropriate key performance measures in relation to the Operations (non-Education) and Customer functions as expressed within the 2022/23 Council Delivery Plan.

Report Structure and Content

3.2 Performance Management Framework Reporting against in-house delivery directly contributing to, or enabling delivery against, the city's Local Outcome Improvement Plan, (LOIP) has informed development of successive Council Delivery Plans, including the 2022/23 Council Delivery Plan that was agreed by Council on the 7th March 2022.

- 3.3 The Council's Performance Management Framework, supporting and enabling scrutiny against progress of the Council Delivery Plan and its key measures, establishes a robust performance management and reporting system which encompasses single and multi-service inputs, outputs and outcomes.
- 3.4 Service standards against each function/cluster, associated with Council delivery planning, offer continuous insight into the effectiveness, and accessibility of core service provision to the Council's stakeholders and city communities.
- 3.5 Where appropriate, data capture against these standards is now directly incorporated within the suite of metrics contained within Appendix A and will be reported against on either a monthly, quarterly or annual basis. These will be updated for future cycles to include any new or amended standards for 2022/23.
- 3.6 The Performance Management Framework provides for a consistent approach within which performance will be reported to Committees. This presents performance data and analysis within four core perspectives, as shown below, which provides for uniformity of performance reporting across Committees.



- 3.7 This report, as far as possible, details performance up to the end of August 2022 or Quarter 1 2022/23, as appropriate.
- 3.8 Appendix A provides an overview of performance across the Operations (non-Education) and Customer functions, with reference to recent trends and performance against target. It also includes, at appropriate points in the Appendix, further analysis of several performance measures which have been identified as of potential interest in terms of either performance implications, data trends or changes in these metrics. These are listed below:
 - % Dog fouling complaints responded to within 2 days
 - % of Unintentional homeless decisions reached within 21 Days
 - YTD Average time taken to relet all properties
 - Rent loss due to voids
- 3.9 Within the summary dashboard the following symbols are also used:

Performance Measures

Traffic Light Icon

On target or within 5% of target

Within 5% and 20% of target and being monitored

Below 20% of target and being actively pursued

Data only – target not appropriate

Where narrative analysis of progress against service standards is provided and has been attributed with a RAG status by the relevant Service Manager, these are defined as follows:

RAG Status

GREEN – Actions are on track with no delays/issues emerging

 AMBER – Actions are experiencing minor delays/issues emerging and are being closely monitored

RED - Actions are experiencing significant delays/issues with improvement measures being put in place

Children's Rights

3.10 This report contains no recommendations or content that require for the direct accounting of impact on children's rights.

4. FINANCIAL IMPLICATIONS

There are no direct financial implications arising out of this report.

5. LEGAL IMPLICATIONS

There are no direct legal implications arising out of this report.

6. ENVIRONMENTAL IMPLICATIONS

There are no direct environmental implications arising out of this report

7. RISK

The assessment of risk contained within the table below is considered to be consistent with the Council's Risk Appetite Statement.

Category	Risks	Primary Controls/Control Actions to achieve Target Risk Level	*Target Risk Level (L, M or H) *taking into account controls/control actions	*Does Target Risk Level Match Appetite Set?
Strategic	None	NA	NA	NA
Compliance	Publication of service performance information in the public domain ensures that the Council is meeting its legal obligations in the context of Best value reporting.		L	Yes
Operational	No significant operational risks.	Oversight by Elected Members of core employee health and safety/attendance data supports the Council's obligations as an employer	L	Yes
Financial	No significant financial risks.	Overview data on specific limited aspects of the cluster's financial performance is provided within this report	L	Yes
Reputational	No significant reputational risks.	Reporting of service performance to Members and in the public domain serves to enhance the Council's reputation for transparency and accountability.		Yes
Environment / Climate	None	NA	NA	NA

8. OUTCOMES

CC	DUNCIL DELIVERY PLAN
	Impact of Report

Aberdeen City Council Policy Statement	None						
Aberdeen City Local Outcome Improvement Plan							
Prosperous Economy Stretch Outcomes	The Council aims to support improvement in the local economy to ensure a high quality of life for all people in Aberdeen. This report monitors indicators which reflect current economic activity within the City and actions taken by the Council to support such activity.						
Prosperous People Stretch Outcomes	The Council is committed to improving the key life outcomes of all people in Aberdeen. This report monitors key indicators impacting on the lives of all citizens of Aberdeen. Thus, Committee will be enabled to assess the effectiveness of measures already implemented, as well as allowing an evaluation of future actions which may be required to ensure an improvement in such outcomes.						
Prosperous Place Stretch Outcomes	The Council is committed to ensuring that Aberdeen is a welcoming place to invest, live and visit, operating to the highest environmental standards. This report provides essential information in relation to environmental issues allowing the Committee to measure the impact of any current action.						
Regional and City Strategies	None						

9. IMPACT ASSESSMENTS

Assessment	Outcome
Impact Assessment	The recommendations arising from this report do not require that a full Impact Assessment is completed
Data Protection Impact Assessment	Not required

10. BACKGROUND PAPERS

Council Delivery Plan 21/22 - COM/21/054 Council Delivery Plan 2022/23 - CUS/22/059

Local Outcome Improvement Plan 2016-2026 (July 2021 Refresh)

11. APPENDICES

Appendix A – Performance Summary Dashboard

12. REPORT AUTHOR CONTACT DETAILS

Louise Fox Strategic Performance and Improvement Officer Ifox@aberdeencity.gov.uk

Communities, Housing and Public Protection Committee Performance Report Appendix A

Operations and Protective Services

Building Services

1. Customer – Building Services

Performance Indicator		Jun 2022		Jul 2022		Aug 2022	
Performance indicator	Value	Status	Value	Status	Value	Status	Target
The year to date percentage of repairs appointments kept	99.18%	②	99.14%	②	99.06%	②	90%
Percentage of tenants who have had repairs or maintenance carried out in the last 12 months satisfied with the repairs and maintenance service (year to date).	91.3%	Ø	85.11%	>	83.33%	>	80%

Performance Indicator	Q3 2020/2	Q3 2020/21		Q4 2021/22		Q1 2022/22	
Performance indicator	Value	Status	Value	Status	Value	Status	Target
Total No. complaints received (stage 1 and 2) - Building Services	129		124		110		
% of complaints resolved within times cale stage 1 and 2) - Building Services	57.4%		58.1%		40.9%		75%
% of complaints with at least one point upheld (stage 1 and 2) - Building Services	26.4%		37.1%		40%	-	
*Total No. of lessons learnt identified (stage 1 and 2) - Building Services	1		2		0		

^{*}Lessons learnt referred to throughout this Appendix are lasting actions taken/changes made to resolve an issue and to prevent future re-occurrence for example amending an existing procedure or revising training processes. When a complaint has been upheld, action would be taken in the form of an apology or staff discussion/advice, but these actions are not classified as lessons learnt.

2. Processes - Building Services

Performance Indicator	Jun 2022		Jul 2022		Aug 2022		2022/23	
	Value	Status	Value	Status	Value	Status	Target	
The year to date average length of time taken to complete emergency repairs (hrs)	3.4	Ø	3.38	Ø	3.39	②	4.1	
The year to date average length of time taken to complete non-emergency repairs (days)	8.47	Ø	8.79	Δ	8.84		8.3	
The year to date percentage of reactive repairs carried out in the last year completed right first time	91.83%	Ø	91.9%	>	92.36%	Ø	90%	
The percentage of Repairs Inspections completed within 20 working day target (year to date)	97%	Ø	97.5%	②	97.5%	②	100%	

3. Staff – Building Services

Performance Indicator	Q3 2020/21		Q4 2021/22		Q1 2022/22		2022/23
	Value	Status	Value	Status	Value	Status	Target
Accidents - Reportable - Employees (No in Quarter - Building Services)	0		1		0		
Accidents - Non-Reportable - Employees (No in Quarter - Building Services)	2		4		2		

Performance Indicator	Jun 2022		Jul 2022		Aug 2022		2022/23	
	Value	Status	Value	Status	Value	Status	Target	
Sickness Absence - Average Number of Days Lost - Building Services	3.3	Ø					10	
Establishment actual FTE	410.52	46	409.83	-	414.37	4		

4. Finance & Controls – Building Services

Performance Indicator	Jun 2022		Jul 2022		Aug 2022		2022/23	
	Value	Status	Value	Status	Value	Status	Target	
Staff Costs - % Spend to Date (FYB)	24.5%	②	32.1%	Ø	40.4%	Ø	100%	

Facilities Management

1. Customer - Facilities Management

Performance Indicator	Q3 2021/22		Q4 2021/22		Q1 2022/23		2022/23
renormance indicator	Value	Status	Value	Status	Value	Status	Target
Total No. complaints received (stage 1 and 2) - Facilities	1		1		1		
% of complaints resolved within timescale (stage 1 and 2) - Facilities	100%	Ø	100%		100%	②	75%
% of complaints with at least one point upheld (stage 1 and 2) - Facilities	100%	**	0%	~	100%		
Total No. of lessons learnt identified (stage 1 and 2) - Facilities	0	-	0		0		

Performance Indicator		Q3 2021/22		Q4 2021/22		Q1 2021/22	
Performance indicator	Value	Status	Value	Status	Value	Status	Target
*Number of school lunches served in the year - Primary (YTD)	657,968	②	1,003,545	②	384,245	②	277,000

^{*}The expansion of free school meal provision and increasing pupil rolls at schools across the city have combined to see more school meals being served in our Primary schools. The service will continue to monitor pupil rolls and meal uptakes as we work through the year and will revise targets appropriately.

Appendix A

Performance Indicator	Current Status	2022/23 Target
All meals served to children and young people in our schools will meet the Nutritional requirements for Food and Drink in Schools (Scotland) Regulations	Ø	100%

The Nutritional Requirements for Food and Drink in Schools (Scotland) Regulations 2020 came into effect from April 2021. Our School Catering service aims for 100% compliance with the regulations to ensure that whilst in school, our children and young people are receiving the nutrition they require to be effective learners. We have set this as a service standard particular to Aberdeen City Council's school catering service and there is no comparative benchmarking information which we can use to compare performance with other local authorities. Performance is not reported as a metric, but the intention of the measure is to highlight to Committee any reports received on nutritional non-compliance from Education Scotland's school inspection visits.

2. Processes – Facilities Management

Performance Indicator	Jun 2022		Jul 2022		Aug 2022		2022/23
	Value	Status	Value	Status	Value	Status	Target
% Fly tipping alerts at housing multi-storey blocks responded to within 48 hours	100%	Ø	57.9%		90.2%	Ø	80%
% Response cleaning alerts responded to within priority timescales	100%	Ø	100%	Ø	100%	Ø	80%
% Void cleaning alerts responded to within priority timescales	100%	Ø	71.4%		100%	Ø	80%

Performance Indicator	Current Status	2022/23 Target
We will deliver 39 weeks contracted school cleaning		95%
Cleaning service is delivered by the in-house team at all non-3Rs schools in the city, for the 38 weeks of school term plus the five annual in-service days. We will up	sa this maa	sure to highlight

Cleaning service is delivered by the in-house team at all non-3Rs schools in the city, for the 38 weeks of school term plus the five annual in-service days. We will use this measure to highlight any instances where a school has been unable to open due to our inability to provide a satisfactory cleaning service. No issues identified.

3. Staff - Facilities Management

Performance Indicator	Q3 2021/22		Q4 2021/22		Q1 2022/23		2022/23
	Value	Status	Value	Status	Value	Status	Target
Accidents - Reportable - Employees (No in Quarter)	1		1		1		
Accidents - Non-Reportable - Employees (No Quarter)	6		6		3		

Performance Indicator	Jun 2022		Jul 2022		Aug 2022		2022/23
Performance indicator	Value	Status	Value	Status	Value	Status	Target
*Sickness Absence - Average Number of Days Lost - Facilities	11.7		11.2		12.3		10
Establishment actual FTE	500.36		504.16	46	505.46		
Establishment actual FTE (Catering)	158.11		159.03	46	161.67		
Establishment actual FTE (Cleaning)	226.15		226.49		227.04		
Establishment actual FTE (Janitorial)	63.4		64.34		63.44		
Establishment actual FTE (Office & Building Management)	15.89		16.89	46	16.89		
Establishment actual FTE (Passenger Transport Unit)	33.14		34.04		33.05		

^{*} We are aware that the above reported performance of the 12-month rolling average for working days lost due to sickness absence per FTE, is not fully accurate due to current system constraints relating to the calculation of FTE and variable working patterns for some staff. In some cases the actual absence rate is lower than the reported figure. This does not impact on attendance management for staff and their respective managers. Officers are working with the vendor to resolve this anomaly.

4. Finance & Controls - Facilities Management

Performance Indicator	Jun 2022		Jul 2022		Aug 2022		2022/23	
	Value	Status	Value	Status	Value	Status	Target	
Inspection - Number of overdue corrective actions requests as at month end	0	Ø	0	Ø	0	Ø	0	
Staff Costs - % Spend to Date (FYB)	26%	Ø	34.6%	>	43.3%	Ø	100%	

Protective Services

1. Customer - Protective Services

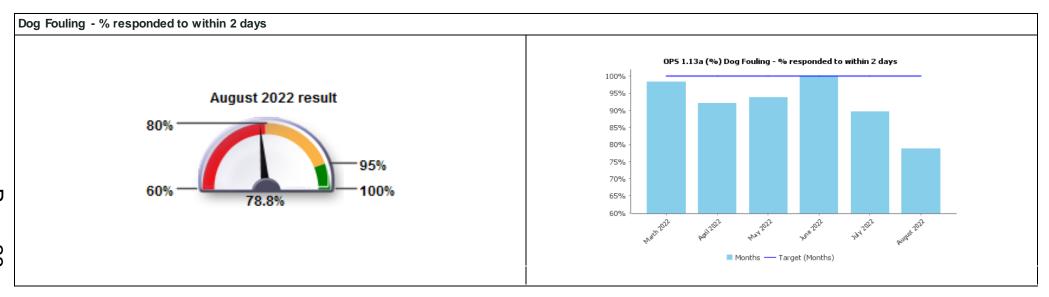
Performance Indicator	Q3 2021	Q3 2021/22		Q4 2021/22		Q1 2022/23	
Performance indicator	Value Status Value Status		Value	Status	Target		
Total No. complaints received - Protective Services	0		0		5		
% of complaints resolved within timescale - Protective Services		No Com	plaints Q3/4	100%	Ø	75%	
% of complaints with at least one point upheld (stage 1 and 2) - Protective Services							
Total No. of lessons learnt identified (stage 1 and 2) - Protective Services					0		

2. Processes - Protective Services

Performance Indicator	Jun 2022	Jun 2022			Aug 2022		2022/23	
Performance indicator	Value	Status	Value	Status	Value	Status	Target	
Non-Domestic Noise % responded to within 2 days	94.3%		100%	Ø	91.7%		100%	
High Priority Pest Control % responded to within 2 days	98.9%	②	100%	Ø	100%	Ø	100%	
High Priority Public Health % responded to within 2 days	97.3%	②	94.8%		95.6%	Ø	100%	

Appendix A

Performance Indicator	Jun 2022		Jul 2022		Aug 2022		2022/23
Performance indicator	Value	Status	Value	Status	Value	Status	Target
Dog Fouling - % responded to within 2 days	100%	Ø	89.7%		78.8%		100%



Why is this important?

Dog fouling can have a serious impact on public health. This measure takes into account complaints relating to fouling in open public spaces and communal shared areas of domestic properties.

Benchmark Information:

This measure is not currently benchmarked.

Target:

Due to the seriousness of the complaints to which this PI relates, the target is set at a 100% response within 2 working days.

This is what the data is saying:

78.8% of dog fouling service requests were responded to within 2 days, representing 26 of the 33 requests received.

This is the trend:

This is a significant fall in performance which consistently achieved 90-100% in recent years. Performance fell from 100% in June to 89.7% in July, before falling further to its August level of 78.8%.

This is the impact:

Some of the consequences of this performance are:

- An inconsistent customer experience
- Some customers are experiencing a longer wait for a response, potentially resulting in poorer customer satisfaction levels.

These are the next steps we are taking for improvement:

The fall in performance over the summer has been caused in part by staff leave which increased pressure on remaining dog ward ens. A large part of the Dog Warden resource has been taken up by enforcement action, investigations and preparation of reports for the Procurator Fiscal. This has meant the resource to respond to dog fouling complaints has been impacted. We would expect performance to return to the usual and consistent high level when the work required to carry out other enforcement duties lessens and this has indeed already been reflected in performance for September when 100% of dog fouling complaints were responded to within the required 2 days.

Responsible officer: Last Updated:

Hazel Stevenson August 2022

Appendix A

Performance Indicator	Q3 2021/22		Q4 2021/22		Q1 2022/23		2022/23	
Performance indicator	Value	Status	Value	Status	Value	Status	Target	
% of Samples reported within specified turnaround times (Aberdeen Scientific Services Laboratory)	92.1%	Ø	85.8%	Ø	72.9%	_	80%	
% of registered tobacco retailers visited to give Business Advice on compliance with tobacco legislation - Year to Date	No activity Q3		2.2%		5.1%	Ø	5%	
% of registered Nicotine Vapour Products retailers visited to give Business Advice on compliance with legislation - Year to Date			6.3%		19.6%	Ø	5%	

^{*}Since the beginning of April 2020, an exemption from the Food Law Code of Practice (Scotland) has been granted in relation to routine food inspections. Work is ongoing in relation to the restart process and how this will be achieved. As part of this work, Protective Services will aim to identify the most appropriate Pls to capture food hygiene data based on the new risk rating system which came into force on 01/07/2019. This system now rates premises across 3 types of business based on the type of operations undertaken and 5 compliance categories, giving 15 separate ratings.

3. Staff - Protective Services

Performance Indicator	Q3 2021/22		Q4 2021/22		Q1 2022/23		2022/23
renormance indicator	Value	Status	Value	Status	Value	Status	Target
Accidents - Reportable - Employees (No. In Quarter - Protective Services)	0		0		0		
Accidents - Non-Reportable - Employees (No. In Quarter - Protective Services)	0		0		0		

Performance Indicator	Jun 2022		Jul 2022		Aug 2022		2022/23
Performance indicator	Value	Status	Value	Status	Value	Status	Target
Sickness Absence - Average Number of Days Lost - Protective Services	1.2	Ø	1.1	Ø	1	Ø	10
Establishment actual FTE	62.16		61.66		61.66		

4.Finance & Controls - Protective Services

Performance Indicator	Q3 2021/22	2	Q4 2021/22		Q1 2022/23	}	2022/23
renormance indicator	Value	Status	Value	Status	Value	Status	Target
% of External Quality Assurance reported results that were satisfactory (Aberdeen Scientific Services Laboratory)	98.4%	Ø	93.3%	Ø	95.9%	Ø	95%

Performance Indicator	Jun 2022		Jul 2022		Aug 2022	2022/23	
nance indicator	Value	Status	Value	Status	Value	Status	Target
Staff Costs - % Spend to Date (FYB)	25.5%	Ø	33.6%	Ø	41.9%	Ø	100%

Customer

Customer Experience

1. Customer – Customer Experience

Performance Indicator - Service	Q3 2021/2	Q3 2021/22		Q4 2021/22		Q1 2022/23	
renormance indicator – Service	Value	Status	Value	Status	Value	Status	Target
Total No. complaints received – Customer Experience	107		48		48		
% of complaints resolved within timescale – Customer Experience	86.9%	Ø	87.5%	Ø	89.6%	Ø	75%
% of complaints with at least one point upheld (stage 1 and 2) – Customer Experience	30.2%		37.5%		39.6%		
Total No. of lessons learnt identified (stage 1 and 2) – Customer Experience	10		2		4		

2. Processes – Customer Experience

Performance Indicator	Jun 2022		Jul 2022		Aug 2022		2022/23	
Performance indicator	Value Status	Status	Value	Status	Value	Status	Target	
Average time taken in calendar days to process all new claims and change events in Housing Benefit (monthly)	11.23	Ø	11.53	Ø	12.23		12	
Correct amount of Housing Benefit paid to customer (monthly)	97.11%	②	96.5%	②	100%	②	95%	
% Customer Contact Centre calls answered within 60 seconds	76.84%	②	78.68%	Ø	76.87%	②	70%	
Percentage of invoices sampled and paid within 30 days	87.64%	②	81.21%		85.33%		90%	

Performance Indicator	Q3 2021/22		Q4 2021/22		Q1 2022/23		2022/23
renormance indicator	Value	Status	Value	Status	Value	Status	Target
*% Crisis Grant applications processed within 2 working days	92.43%	②	69.45%		53.83%		90%
*% Community Care Grant applications processed within 15 working days	50.5%	Ø	54.52%	Ø	42.68%		50%

*The Scottish Welfare Fund team seen an overall 9% increase in applications in Q1 22/23 compared with Q1 21/22. In addition, resource had to be allocated to assist with the administration of Self-Isolation Support Grants (795 claims). The team also had 2 FTE vacancies which equates to a 29% reduction in normal staffing levels during Q1. Staffing levels have returned to a full complement during September and the assistance provided with the administration of Self-Isolation Support Grants is now minimal. Therefore, it is expected that moving forward our Service Standards will be achieved.

3. Staff - Customer Experience

Performance Indicator	Q3 2021/2	Q3 2021/22		Q4 2021/22		Q1 2022/23		
	Value	Status	Value	Status	Value	Status	Target	
Accidents - Reportable - Employees (No in Quarter – Customer Experience)	0	-	0		0	26		
Accidents - Non-Reportable - Employees (No in Quarter – Customer Experience)	0		0		0			

Appendix A

Performance Indicator	Jun 2022		Jul 2022		Aug 2022		2022/23
	Value	Status	Value	Status	Value	Status	Target
Sickness Absence – Average Number of Days Lost – Customer Experience	3.8	Ø	4	Ø	4.3	Ø	5
Establishment actual FTE	335.54	*	335.42		334.34	2	

4. Finance & Controls – Customer Experience

Performance Indicator	Jun 2022		Jul 2022		Aug 2022		2022/23
	Value	Status	Value	Status	Value	Status	Target
Council Tax Cash Collected (In Year) - monthly	£43.5m	Ø	£53m	Ø	£64.9m	Ø	£62.9m
Staff Costs - % Spend to Date (FYB)	25.7%	Ø	34.1%	Ø	42.7%	Ø	100%

Data and Insights

1. Customer – Data and Insights

Performance Indicator	Q3 2021/22		Q4 2021/22		Q1 2022/23		2022/23
renormance indicator	Value	Status	Value	Status	Value	Status	Target
Total No. complaints received – Data and Insights	0		0		0		
% of complaints resolved within timescale – Data and Insights		75%					
% of complaints with at least one point upheld (stage 1 and 2) – Data and Insights							
Total No. of lessons learnt identified (stage 1 and 2) – Data and Insights							

2. Processes – Data and Insights

Performance Indicator	Q3 2021/22		Q4 2021/22		Q1 2022/23		2022/23
r en ormance mulcator	Value	Status	Value	Status	Value	Status	Target
% Reported Data Protection incidents receiving an initial response within 24 business hours	100%		100%	Ø	100%	②	95%

3. Staff – Data and Insights

Performance Indicator	Q3 2021/22		Q4 2021/22		Q1 2022/23		2022/23
	Value	Status	Value	Status	Value	Status	Target
Accidents - Reportable - Employees (No in Month Quarter – Data and Insights)	0		0		0		
Accidents - Non-Reportable - Employees (No in Quarter – Data and Insights)	0		0		0		

	Jun 2022		Jul 2022		Aug 2022	2022/23	
Performance Indicator	Value	Status	Value	Status	Value	Status	Target
Sickness Absence – Average Number of Days Lost – Data and Insights	0.2	②	0.2	Ø	0.3	②	5
Establishment actual FTE	29.89		29.89	2	32.29	**	

4. Finance & Controls – Data and Insights

Performance Indicator	Jun 2022		Jul 2022		Aug 2022		2022/23
	Value	Status	Value	Status	Value	Status	Target
Staff Costs - % Spend to Date (FYB)	25%	Ø	33.2%	>	41.5%	Ø	100%

Digital and Technology

1. Customer – Digital and Technology

Performance Indicator	Q3 2021/2	Q3 2021/22		Q4 2021/22		Q1 2022/23	
	Value	Status	Value	Status	Value	Status	Target
Total No. complaints received – Digital and Technology	2		0		3		
% of complaints resolved within timescale – Digital and Technology	100%	Ø	No complaints Q4		100%	Ø	75%
% of complaints with at least one point upheld (stage 1 and 2) – Digital and Technology	0%	4			100%		
Total No. of lessons learnt identified (stage 1 and 2) – Digital and Technology	0	4		-			

Performance Indicator	Jun 2022		Jul 2022		Aug 2022		2022/23	
	Value	Status	Value	Status	Value	Status	Target	
Average Call Wait Time (IT Helpdesk)	132 sec.	Ø	69 sec.	Ø	165 sec.		150 sec.	
Abandonment Rate % (IT Helpdesk)	19.57%	Ø	11.5%	Ø	26.36%	Ø	30%	

2. Processes – Digital and Technology

Performance Indicator	Jun 2022	Jun 2022		Jul 2022		Aug 2022	
	Value	Status	Value	Status	Value	Status	Target
Percentage of Critical system availability - average (monthly)	99.5%	Ø	99.5%	②	99.5%	②	99.5%
% Incidents logged by IT Helpdesk (including Self-Serve) resolved right first time	78.7%	Ø	90%	②	84.9%	②	65%
% Priority 1 and 2 incidents closed in timescale	82.6%		100%	②	25%		99.5%
% Priority 3 – 5 incidents closed in timescale	80.7%		84%		82.3%		95%

3. Staff – Digital and Technology

Performance Indicator	Q3 2021/22		Q4 2021/22		Q1 2022/23		2022/23
	Value	Status	Value	Status	Value	Status	Target
Accidents - Reportable - Employees (No in Quarter – Digital and Technology)	0	-	0		0		
Accidents - Non-Reportable - Employees (No in Quarter – Digital and Technology)	0		0	**	0	**	

Performance Indicator	Jun 2022		Jul 2022		Aug 2022	2022/23	
	Value	Status	Value	Status	Value	Status	Target
Sickness Absence – Average Number of Days Lost – Digital and Technology	0.4	②	0.4	Ø	0.4	Ø	5
Establishment actual FTE	91.34		91.36	***	91.12	*	

4. Finance & Controls – Digital and Technology

Performance Indicator	Jun 2022		Jul 2022		Aug 2022		2022/23	
	Value	Status	Value	Status	Value	Status	Target	
Staff Costs - % Spend to Date (FYB)	25.5%	②	34%	②	42.7%	②	100%	

Early Intervention and Community Empowerment

1. Customer – Early Intervention and Community Empowerment

Performance Indicator	Q3 2021/22		Q4 2021/22		Q1 2022/23		2022/23
	Value	Status	Value	Status	Value	Status	Target
Total No. complaints received – Early Intervention and Community Empowerment	73		47		67		
% of complaints resolved within timescale - Early Intervention and Community Empowerment	65.8%		68.1%	_	82.1%	Ø	75%
% of complaints with at least one point upheld (stage 1 and 2) - Early Intervention and Community Empowerment	38.9%		36.2%		43.3%		
Total No. of lessons learnt identified (stage 1 and 2) - Early Intervention and Community Empowerment	3		3		4	20	

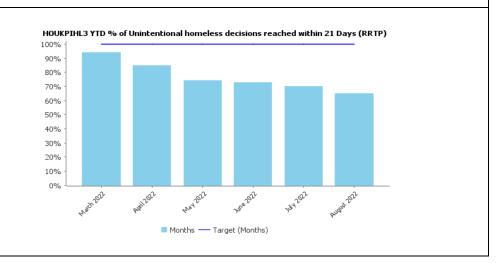
Performance Indicator	Jun 2022	Jun 2022		Jul 2022		Aug 2022	
	Value	Status	Value	Status	Value	Status	Target
Percentage of tenants satisfied with the standard of their home when moving in YTD	61.5%		66.7%		63.3%		75%
Satisfaction of new tenants with the overall service received (Year To Date)	69.2%		76.2%		73.3%		85%
Financial Inclusion - No of open cases per month	182		229		200		
Financial Inclusion - No of enquiries per month	308		218		239		
Number of visits to libraries - person	26,102		28,837		35,544		
Number of visits to libraries - virtual	102,345		115,206		122,804	-	
% Libraries open during agreed opening hours	100%		99.3%	②	100%	②	98%

2. Processes – Early Intervention and Community Empowerment

Performance Indicator	Jun 2022		Jul 2022		Aug 2022		2022/23
	Value	Status	Value	Status	Value	Status	Target
YTD % of cases reassessed as being homeless or potentially homeless within 12 months of a previous case being closed. (Data Provided by Scottish Government on a Quarterly Basis)	3.9%	②	3.9%	②	3.9%	②	4.0%
YTD % of Unintentional homeless decisions reached within 21 Days	73%		70%		65%		100%
YTD Average length of journey in days for applicants assessed as unintentionally homeless	105.1		109		107.3		100
YTD Percentage of anti-social behaviour cases reported which were resolved	82.3%		86%		87.7%		100%
YTD % of calls attended to by the ASBIT Team within 1 hour	100%	Ø	100%	②	100%	②	100%
Number of Statutory Homeless Households Residing in Temporary Accommodation at Month End	279		323		278		
The YTD number of Legal repossessions following decree (Arrears) - Citywide	6		6		8		
Applications processed 28 days YTD %	99.2%	②	100%	②	100%	②	100%
Statutory Customer Service Actions - Decisions/Outcomes within statutory times cale	94%		91.4%		90.7%		100%
New Tenants Visits YTD – Outcomes completed within locally agreed timescales (Citywide)	86%		83.4%		82.1%		93.5%
The YTD Average time taken to re-let all properties (Citywide - days)	163.3		166.1		167.9		98.8
Voids Available for Offer Month Number - Citywide	1.081		1,108		1,126		
Welfare Rights - % of Successful Appeals	40%		83.3%		88.9%		l
HMO License Applications Pending	176		177		184		
HMO Licenses in force	1,003		1,004		986		
% Library item requests satisfied within 21 days	80.4%		76.5%		80.8%		85%

YTD % of Unintentional homeless decisions reached within 21 Days





Why is this important?

The Scottish Social Housing Charter was introduced by the Housing (Scotland) Act 2010, which requires Ministers to set standards and outcomes that social landlords should be achieving for tenants and customers through their housing activities.

Charter outcome 12 – Homeless People - stipulates that Local councils perform their duties to homelessness people so that:

Homeless people get prompt and easy access to help and advice; are provided with suitable, good-quality temporary or emergency accommodation when this is needed; and are offered continuing support to help them get and keep the home they are entitled to.

This indicator, along with others, monitors whether we are achieving our desired outcomes and are committed to 'Sustain/improve performance in respect of the SSHC outcomes' and that people at risk of losing their homes get advice on preventing homelessness.

Benchmark Information:

2021-22

• The YTD % of Unintentional homeless decisions reached within 21 Days 94%. This is a local measure and no benchmarking is available.

Target:

2022-23

• The YTD % of Unintentional homeless decisions reached within 21 Days is set at 100%

This is what the data is saying:

Year to date there have been 506 homeless households assessed as unintentionally homeless. Of these 65% (329) were assessed within the 21 days local target. The average days to make a decision remains under target at 17 days. During the first 6 months of this year there has been a 21% (147) increase in homeless applications compared to the same period last year.

This is the trend:

The number of decisions made within 21 days has reduced from 97% achieved during the same period the previous year. Last financial year the average time it took to make a decision was 10 days. This is the highest number of homeless applications since the first two quarters of 2017. The increase in applications has been driven by a 40% increase in applicants becoming homeless from secure accommodation with the largest rise from private rented tenancies, where there has been a 69% increase. Despite the increase in decision times this year the average homeless journey time has not yet been affected and currently remains unchanged at 105 days. However, as more outcomes are secured, and more cases are closed there is a risk that the homeless journey will be impacted by the poorer performance over time.

This is the impact:

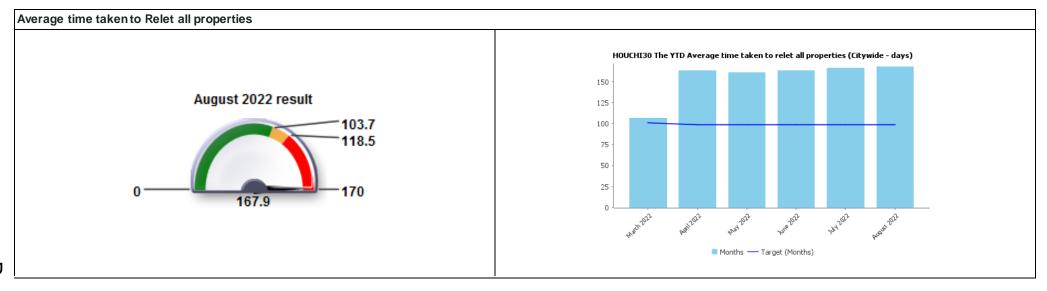
- Risk of failing to deliver on the key strategic outcomes set within the Local Outcome Improvement Plan and Rapid Rehousing Transition Plan.
- Homeless people spend longer periods in transition which prolongs the homeless journey
- Homeless people spend longer periods of time in temporary accommodation which can exacerbate existing demands and associated costs. This can also increase the risk of breaching our duties in accordance with the unsuitable accommodation order.
- Increase costs to the Council in providing temporary accommodation for more households and for longer periods of time.

These are the next steps we are taking for improvement:

Since the start of the year the Housing Options Team has completed numerous rounds of recruitment to increase the number of Housing Options Officers in line with previously agreed business cases. The Housing Options Team are now almost at full capacity although with a number of new staff members still completing their induction and training. We anticipate that as officers complete their training and begin to take on caseloads, we will see a return to previous levels. Recruitment in other key service areas to prevent homelessness, and homeless representations is also under way, and it is anticipated that this will also assist in speeding up the application process and reducing the workload of the Housing Options Team making decisions on statutory homeless cases.

Responsible officer: Last Updated:

Graeme Gardner August 2022



Why is this important?

The Scottish Social Housing Charter (SSHC) was introduced by the Housing (Scotland) Act 2010, which requires Ministers to set standards and outcomes that social landlords should be achieving for tenants and customers through their housing activities.

Charter Outcome 4 – Quality of Housing stipulates that Social Landlords ensure that:

'tenants' homes, as a minimum, meet the Scottish Housing Quality Standard (SHQS) when they are allocated; are always clean, tidy and in a good state of repair; and also meet the Energy Efficiency Standard for Social Housing (EESSH) by December 2020.

Charter Outcome 10 - Access to Housing - stipulates that Social Landlords ensure that:

People looking for housing find it easy to apply for the widest choice of social housing available and get the information they need on how the landlord allocates homes and their prospects of being housed.

Charter outcome 13 – Value for Money - stipulates that Social Landlords manager their business so that: Tenants, owners and other customers receive services that provide continually improving value for the rent and other charges they pay.

Benchmark Information:

2021-22

Average relet tims was 106.72 days, the Scottish Average for 2021/22 was 51.57 days

Target:

2022/23

Average number of days to relet all properties is set at 98.75 days.

This is what the data is saying:

For the reporting year 2022/23 the average relet time YTD is 167.9 days, an increase on the 163.4 days last reported to Committee.

This is the trend:

Average relet times for the last 3 years show 69.55 days in 2019-20, 113.9 days in 2020-21 and 106.7 days in 2021/22.

The number of properties relet as at 31st August 2022 is 792 a decrease when compared to the same period last year where 864 properties had been relet in an average of 101.23 days.

The relet times show that of the **792** properties let **287** (**36.2**%) had been void for over 200 days with the longest being void for **792** days. **135** (**17.0**%) properties were relet within the Scottish Local Authority average for 202/21 of **51.57** days.

This is the impact:

Some of the consequences of this performance are:

- Loss of rental income to the Council.
- New tenants are experiencing lengthyperiods of time to wait from when being made an offer of accommodation to the time they can move in resulting in overall poorer satisfaction levels.
- Homeless people are spending long periods of time in temporary accommodation.

These are the next steps we are taking for improvement:

Addressing voids performance continues to be a priority for services. In response to this we have developed a new corporate improvement project led at Chief Officer level with oversight being provided through a Housing Improvement Group which is chaired by the Director of Customer.

Our Improvement Plan is now led at Chief Officer level and has an extensive range of actions intended to transform performance. Actions include:

- Assigning additional resources for voids repairs. Building Services continue to prioritise deployment of its workforce to void repair work which is also contributing to the anticipated performance transformation. An additional external contractor has also been commissioned to address the backlogs incurred with carrying out full décor in certain properties.
- Use of digital technologies to support more efficient processes. Currently at the testing stage of implementing Choice Based Letting. The aim of this is to reduce unnecessary refusals and to provide an enhanced customer experience.
- Increasing inspection regimes. Additional and more robust inspections of properties to minimise properties returned in poor condition at termination. This will include meeting outgoing tenants on the final day and will coincide with the routine first inspection of the property.
- Implementing our new Housing and Support service with the emphasis on creating and delivering an enhanced approach to tenancy sustainment and letting processes.
- Reviewing temporary accommodation processes and using current availability of properties to further reduce requirements.
- Establishment of an Officer/Elected Member Working Group in August 2022. This new group has now met twice

Disaggregation of the current centralised Housing Property Officers back out to Locality Housing Offices on 31 October 2022. This will create increased capacity to accommodate more lease signing appointments.

Responsible officer: Last Updated:

Martin Smith/Graham Williamson August 2022

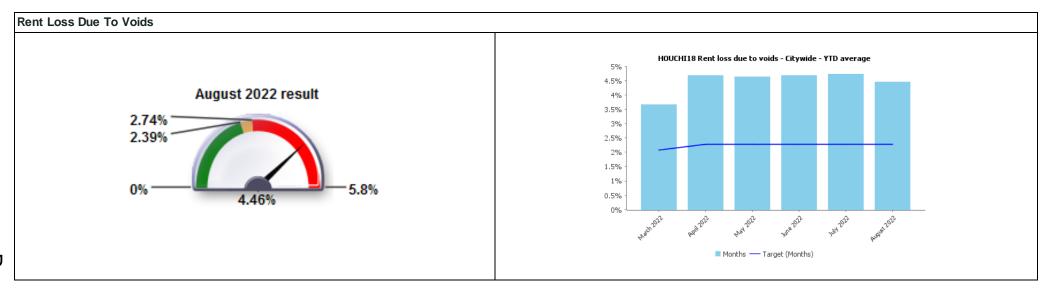
3. Staff – Early Intervention and Community Empowerment

Performance Indicator		Q3 2021/22		Q4 2021/22		Q1 2022/23	
Performance indicator	Value	Status	Value	Status	Value	Status	Target
Accidents - Reportable - Employees (No in Quarter - EICE)	0		0		0		
Accidents - Non-Reportable - Employees (No in Quarter – EICE)	4		1		2		

Performance Indicator		Jun 2022		Jul 2022		Aug 2022	
renormance mulcator	Value	Status	Value	Status	Value	Status	Target
Sickness Absence – Average Number of Days Lost - EICE	6.9	Ø	6.8	Ø	6.9	Ø	8
Establishment actual FTE	387.66	***	391.17	**	388.02	***	

4. Finance & Controls – Early Intervention and Community Empowerment

Dayfayraanaa ladiaatay		Jun 2022		Jul 2022		Aug 2022	
Performance Indicator	Value	Status	Value	Status	Value	Status	Target
Staff Costs - % Spend to Date (FYB)	22.3%	②	28.8%	②	37.3%	②	100%
Financial Inclusion - Total Financial Gains Achieved per month	£500,826		£501,318	4	£527,006		
Gross rent Arrears as a percentage of Rent due	14.65%	②	15.45%	②	16.08%	②	19.2%
Rent loss due to voids - Citywide - YTD average	4.68%		4.73%		4.46%		2.28%



Why is this important?

The Scottish Social Housing Charter (SSHC) was introduced by the Housing (Scotland) Act 2010, which requires Ministers to set standards and outcomes that social landlords should be achieving for tenants and customers through their housing activities.

Charter Outcome 4 – Quality of Housing stipulates that Social Landlords ensure that:

'tenants' homes, as a minimum, meet the Scottish Housing Quality Standard (SHQS) when they are allocated; are always clean, tidy and in a good state of repair; and also meet the Energy Efficiency Standard for Social Housing (EESSH) by December 2020.

 $Charter\,Outcome\,\textbf{10}-Access\ to\ Housing-stipulates\ that\ Social\ Landlords\ ensure\ that:$

People looking for housing find it easy to apply for the widest choice of social housing available and get the information they need on how the landlord allocates homes and their prospects of being housed.

Charter outcome 13 - Value for Money - stipulates that Social Landlords manager their business so that:

Tenants, owners and other customers receive services that provide continually improving value for the rent and other charges they pay.

Benchmark Information:

2021/22

Rent Loss due to Voids was 3.66% the Scottish Average for 2021/22 was 1.43%

Target:

2022/23

Rent Loss due to Voids is set at 2.28%

This is what the data is saying:

The YTD Void Rent Loss figure as at the 31st August 2022 for 2022/23 is £1,791,335 this equates to 4.46% of the gross debit (rent due).

This is the trend:

Void Rent Loss has steadily increased year on year from 1.86% (£1,623,519) in 2019-20, 2.53% (£2,306,569) in 2020-21 and 3.66% (£3,355,121) in 2021/22.

The number of void properties and the lengthy relet times has a direct impact on the substantial increase in the void rent loss.

The 3-year trend shows the increase year on year of the relet times from 69.5 days in 2019-20, 113.9 days in 2020-21 to 167.9 days as at 31st August 2022.

As at the 1st October 2022 the gross voids figure was sitting at **1,565** and of those **1,117** were available to relet with an average days void of **148** days. The remaining **448** properties are currently unable to be relet (UTBR) due to major works/modernisation and upgrades.

The average weekly termination of tenancies is higher (37.3) when compared with the average weekly relet figures (34.4).

The first phase of the Summerhill new builds (128 properties) are due to come into stock on the 11th November and 2nd December 22, this along with the seasonal trend in the reduction of relets over the Christmas period it is forecasted that the voids figure is set to increase further.

This is the impact:

Some of the consequences of this performance are:

- Loss of rental income to the Council
- New tenants are experiencing lengthyperiods of time to wait from when being made an offer of accommodation to the time they can move in resulting in overall poorer satisfaction levels
- Homeless people are spending long periods of time in temporary accommodation.

These are the next steps we are taking for improvement:

Addressing voids performance continues to be a priority for services. In response to this we have developed a new corporate improvement project led at Chief Officer level with oversight being provided through a Housing Improvement Group which is chaired by the Director of Customer.

Our Improvement Plan is now led at Chief Officer level and has an extensive range of actions intended to transform performance. Actions include:

• Assigning additional resources for voids repairs. Building Services continue to prioritise deployment of its workforce to void repair work which is also contributing to the anticipated performance transformation. An additional external contractor has also been commissioned to address the backlogs incurred with carrying outfull décor in certain properties.

- Use of digital technologies to support more efficient processes. Currently at the testing stage of implementing Choice Based Letting. The aim of this is to reduce unnecessary refusals and to provide an enhanced customer experience.
- Increasing inspection regimes. Additional and more robust inspections of properties to minimise properties returned in poor condition at termination. This will include meeting outgoing tenants on the final day and will coincide with the routine first inspection of the property.
- Implementing our new Housing and Support service with the emphasis on creating and delivering an enhanced approach to tenancy sustainment and letting processes.
- Reviewing temporary accommodation processes and using current availability of properties to further reduce requirements.
- Establishment of an Officer/Elected Member Working Group in August 2022. This new group has now met twice
- Disaggregation of the current centralised Housing Property Officers back out to Locality Housing Offices on 31 October 2022. This will create increased capacity to accommodate more lease signing appointments.

Responsible officer: Last Updated:

Martin Smith/Graham Williamson August 2022

Corporate

1. Customer - Corporate

Performance Indicator Cornerate	Q3 2021/2	2	Q4 2021/22		Q1 2022/23		2022/23
Performance Indicator - Corporate	Value	Status	Value	Status	Value	Status	Target
No. of Non-complex Subject Access Requests received	57		57		79		
% Non-complex Subject Access Requests responded to within 1 month	80.7%	Ø	80.7%	Ø	72.2%		80%
No. of Complex Subject Access Requests received	2		1		2		
% Complex Subject Access Requests responded to within 3 months	100%	②	100%	②	0%		70%
No. of Environmental Information Regulation requests received	80		71		47		
% of Environmental Info Requests replied to within 20 working days - Corporate	90%	②	87.3%	②	85.1%	②	85%
No. of Freedom of Information requests received	263		221		342		
% of Freedom of Information requests replied to within 20 working days - Corporate	84.8%	②	87.8%	Ø	86.3%	②	85%
No. of Access to School Records requests received	0		1		2		
% Access to School Records requests responded to within 15 school days	No req	uests Q3	100%	②	100%	Ø	100%
No. of Data Protection Right requests received	3		2		9		

Performance Indicator - Corporate		Q3 2021/22		Q4 2021/22		Q1 2022/23	
		Status	Value	Status	Value	Status	Target
% Data Protection Right requests responded to within 1 month	100%	②	100%	②	88.9%		100%

Traffic Light Icons Used

	On target or within 5% of target
	Within 5% and 20% of target and being monitored
	Below 20% of target and being actively pursued
4	Data only – target not appropriate

ABERDEEN CITY COUNCIL

COMMITTEE	Communities, Housing and Public Protection
DATE	1 November 2022
EXEMPT	No
CONFIDENTIAL	No
REPORT TITLE	Adult Protection Committee Biennial Report 2020-22
REPORT NUMBER	ACHSCP/22/237
DIRECTOR	Sandra MacLeod, UB Chief Officer
CHIEF OFFICER	Claire Wilson, ACHSCP Lead for Social Work
REPORT AUTHOR	Val Vertigans, Lead Strategic Officer Adult Public
	Protection, ACHSCP
TERMS OF REFERENCE	2.9

1. PURPOSE OF REPORT

1.1 To share the Aberdeen Adult Protection Committee (APC) Convener's Biennial Report for 2020-22.

2. RECOMMENDATION(S)

That the Committee:-

2.1 notes the Aberdeen Adult Protection Committee's Biennial Report for 2020-22 which has been prepared as required by the Adult Support and Protection (Scotland) Act 2007, and which provides assurance about progress made over the period.

3. CURRENT SITUATION

- 3.1 The Adult Support and Protection (Scotland) Act 2007 stipulates that the Independent Convener of an Adult Protection Committee must prepare a general report on the exercise of the Committee's functions during the preceding two years. A copy of the Biennial Report must be submitted to the ASP statutory partners (i.e. each of the public bodies and office-holders represented on the APC), the Care Inspectorate, Scottish Ministers, the Mental Welfare Commission for Scotland and the Public Guardian. The Biennial Report for 2020-22 as attached at Appendix 1 is the 'public-facing' version of the populated Word Template which has been submitted to Scottish Government as required.
- 3.2 The APC is committed to facilitating and overseeing an inclusive, responsive and effective approach to the support and protection of adults at risk of harm. It includes representation from a range of professional backgrounds and organisations including Aberdeen City Council, Aberdeen City Health and Social Care Partnership, NHS Grampian, Police Scotland, Scottish Ambulance

Service, Scottish Fire and Rescue Service and ACVO (Aberdeen Council of Voluntary Organisations), the local third sector interface. The Independent Convener of the APC also plays the same role for the Child Protection Committee.

- 3.3 Adult support and protection activities are, by their very nature, often complex and challenging. This Biennial Report coincides almost entirely with the period of the Covid 19 pandemic, and attempts to highlight the scale of activities and initiatives over the two-year period, the collaborations between partners, the coordination between professionals and the positive impacts on those who are or who have been at risk of harm all within the context of the additional challenges which the pandemic brought.
- 3.4 A joint inspection of adult support and protection processes and strategic leadership was undertaken from March 2022 to April 2022, with the <u>resulting report</u> published on 21st June 2022. The inspection covered the period from February 2020 to February 2022, significantly overlapping with the biennial reporting period. The report commended how the strategic leadership team had invested and progressed their vision for adult support and protection during the pandemic, through a programme of well delivered operational and structural change and improvement.
- 3.5 Some key messages from the Biennial Report include:
 - Public protection was rightly recognised by all of the statutory partners as a
 priority function at the start of the pandemic and so staff were not redeployed
 out of their ASP roles and in some cases, for example the social work duty
 team, staff numbers were increased to ensure that risk could be recognised
 and responded to appropriately
 - The APC has continued to meet on a regular basis throughout the pandemic, (moving to 'virtual' on-line meetings), to ensure a continued focus on adults at risk of harm
 - Findings from the review of case files which took place as part of the inspection indicated that:
 - 88% of adults at risk of harm had some improvement for safety and protection; and
 - 94% of adults at risk of harm who needed additional support received it.
 - Overall numbers of Adult Support & Protection (ASP) referrals were slightly higher in 2019-20 (pre-Covid) compared to the subsequent two years to end March 2022 – however, numbers increased significantly once all restrictions had been lifted, reflecting the emergence of 'hidden harms' as life returned to 'normal'.
 - The impact of the pandemic is in evidence in the majority of our datasets, in terms of the types of harms for which ASP Referrals have been made, and the parties submitting those Referrals. The number and % of ASP Referrals where the main harm type recorded was linked to 'mental health and wellbeing', eg

Self Harm, Psychological Harm, and Self Neglect, all increased in the two-year period from April 2020 compared to the previous year.

- The Biennial Report references that the inspection report findings commented favourably on Aberdeen City's engagement with adults at risk of harm, recognising a 'golden thread' that flowed from strategic decision-making to hands-on activity. Positive feedback was also received in relation to the Stakeholder Engagement Sub Committee of the APC and the APC User Forum which evidenced important steps to strengthen the voice of adults and unpaid carers.
- 3.6 In terms of moving forwards, as set out in Section 9 of the Biennial Report, the APC <u>Strategy</u> for the period January 2022 to March 2024 encompasses the below Priorities. These are being delivered by progression of a related Improvement Plan which is being progressed by the APC's Sub-Committees.

Stakeholder Engagement

We commit to continue to develop appropriate mechanisms for effective communication:

- i) recognising how diverse our communities are, to ensure the 'voice' of all those we aim to support and protect is at the centre of all we do,
- ii) to raise awareness about ASP, so that staff and public recognise the risks of harm to vulnerable adults and know how to respond, report and connect to appropriate supports, and
- iii) to ensure we understand each other's roles, responsibilities and aims (including via sharing of updates and good practice across all partners' staff groups).

Performance / Quality Assurance Framework

We will develop a robust Data Performance and Quality Assurance Framework, to enable us to:

- i) identify trends, areas for improvement and areas of good practice; and
- ii) establish a process for continuous improvement and ensure learning is embedded into practice.

This will enable us to deliver safe and effective services with improved outcomes for those at risk of harm.

Learning and Development

We will continuously improve ASP practice, learning and development by reaching all our people, ensuring effective support, preventative measures and protection of adults at risk of harm.

In addition, the monitoring and analysis of our ASP data and outcomes will be significantly enhanced in 2022 with the introduction of our new whole sector – children's and adults – database, D365 which will replace our existing CareFirst system. D365 has been designed by social work for social work in conjunction with other internal and external partners and will, amongst other things, make a significant improvement to the quality, consistency and transparency of our adult protection activities.

We will also ensure we maximise all opportunities for learning through our Learning Review Sub Committee. They continually monitor national and local

- cases from which further learning and improvements can be made and changes where appropriate implemented.
- 3.7 The Biennial Report has been submitted to Scottish Government and shared with key stakeholders as required by the Adult Support and Protection (Scotland) Act 2007. It has also been circulated widely to partners and staff, and has been published on the Aberdeen Protects website.

4. FINANCIAL IMPLICATIONS

4.1 There are no direct financial implications arising from the recommendations of this report.

5. LEGAL IMPLICATIONS

5.1 Section 46 of the Adult Support and Protection (Scotland) Act 2007 requires the convener of an Adult Protection Committee to prepare a general report on the Adult Protection Committee's work every two years. The Biennial Report as appended at Appendix 1 ensures that this statutory requirement is complied with.

6. ENVIRONMENTAL IMPLICATIONS

6.1 There are no direct environmental implications arising from the recommendations of this report.'

7. RISK

Category	Risks	Primary Controls/Control Actions to achieve Target Risk Level	*Target Risk Level (L, M or H) *taking into account controls/control actions	*Does Target Risk Level Match Appetite Set?
Strategic Risk	No significant risks identified			
Compliance	Risk of non compliance with Adult Support and Protection (Scotland) Act 2007 if no Biennial Report prepared	Biennial Report has been prepared as required by the Adult Support and Protection (Scotland) Act 2007	L	Yes
Operational	No significant risks identified			

Financial	No		
	significant		
	risks		
	identified		
Reputational	No		
	significant		
	risks		
	identified		
Environment	No		
/ Climate	significant		
	risks		
	identified		

8. OUTCOMES

Aberdeen Cit	Aberdeen City Local Outcome Improvement Plan				
Prosperous People Stretch Outcomes	The proposals within this report support the delivery of Stretch Outcome 11:				
	Healthy life expectancy (time lived in good health) is five years longer by 2026				
	Key Driver 11.1:				
	11.1 Supporting vulnerable and disadvantaged people, families and groups				
	The Biennial Report sets out how vulnerable adults at risk of harm are being supported and protected by multi agency partners.				

9. IMPACT ASSESSMENTS

Assessment	Outcome
Integrated Impact	Not required
Assessment	
Data Protection Impact	Not required
Assessment	
Other	None

10. BACKGROUND PAPERS

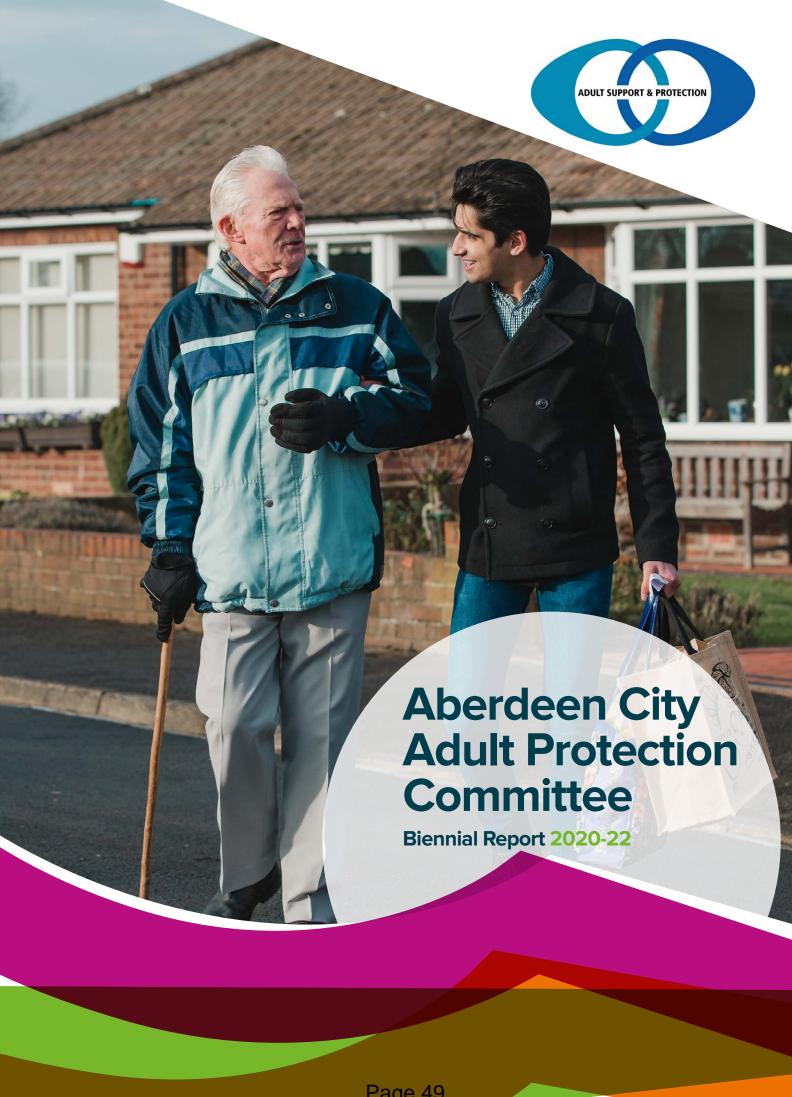
10.1 N/A

11. APPENDICES

11.1 Appendix 1 - APC Biennial Report 2020-22.

12. REPORT AUTHOR CONTACT DETAILS

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Convener's Foreword

As independent Convener of Aberdeen Adult Protection Committee (APC), I have a statutory duty to develop a Biennial Report, the last of which was for 2018-20.

I am pleased to introduce this Biennial Report on Adult Support and Protection activity undertaken in Aberdeen during the period from 1st April 2020 to 31st March 2022, which coincides significantly with the Covid-19 pandemic, recognising that this was a very different and difficult period for everyone.

There have been and continue to be wide-ranging implications of the pandemic, which impacted on every aspect of life during the reporting period. This includes the likelihood that the vulnerability of some adults will have increased because of the additional pressures placed on families and communities, potentially placing some adults at risk of harm and neglect, where that would not otherwise have been the case.

The pandemic also impacted significantly on staff, of course, and I would like to take this opportunity to sincerely thank staff across all agencies and services in Aberdeen for the essential role they have played and continue to play in identifying, reporting, supporting and protecting vulnerable adults in Aberdeen who are at risk of or who are experiencing harm.

The APC welcome the positive findings from the Care Inspectorate who endorsed our progress to-date. However, as we continue to embed our new strategy and operating model, we must also look to the future to respond effectively to emerging challenges, as we collectively seek to deliver excellent services for adults at risk of harm.

Campbell Thomson QPM

Independent Convener,
Aberdeen Adult Protection Committee

Introduction

The vision for Adult Support and Protection in Aberdeen is:

"Partners in Aberdeen are committed to an inclusive approach to preventing and responding to harm and protecting adults at risk". The Adult Protection Committee (APC) is an inter-agency forum which takes the lead to co-ordinate and develop local responses to Adult Support and Protection, including prevention of further harm. All agencies that work with vulnerable adults have a shared responsibility for providing support and safeguarding their welfare. Inter-agency working is essential to the protection of those adults and no one agency should be seen as solely responsible for the protection of adults who may be at risk of harm. Arrangements are designed to support the valuable partnership work which exists to allow continuous improvement in Adult Support and Protection services across Aberdeen City.

The APC has continued to meet on a regular basis throughout the pandemic, (moving to 'virtual' on-line meetings), to ensure a continued focus on adults at risk of harm, and offers, via this report, an overview of how this focus was maintained during this time, and the resulting outcomes.





Responding to the Covid-19 Pandemic

Public protection was rightly recognised by all of the statutory partners as a priority function at the start of the pandemic and so staff were not redeployed out of their ASP roles and in some cases, for example the social work duty team, staff numbers were increased to ensure that we could recognise and respond to risk appropriately.

A joint inspection of Adult Support and Protection processes and strategic leadership was undertaken from March to April 2022, with the <u>resulting report</u> published on 21st June. The inspection covered the period from February 2020 to February 2022, significantly overlapping with the biennial reporting period. The report commended how the strategic leadership team had invested and progressed their vision for Adult Support and Protection during the pandemic, through a programme of well delivered operational and structural change and improvement.

The frequency of our Adult Protection Committee (APC) meetings was increased to monthly at the start of the pandemic to enable more regular discussion and oversight of fast-changing lockdown circumstances, the potential impact of these on vulnerable adults, and the increasing risk of hidden harm. Meetings reverted to bi-monthly as the first lockdown eased. The frequency of Aberdeen City Executive Group for Public Protection (our Chief Officers' Group (COG)) meetings was also increased and a joint risk register covering all public protection areas was developed to support the group's scrutiny and assurance functions.

Given the heightened national Covid response that emerged in the spring of 2020, we sought to ensure that our response to individuals who were either being harmed or were at risk of harm remained timely and effective.

The Scottish Government's Covid-19 ASP Guidance which was published in April 2020 was distilled into a two-page staff update, with an appropriate focus on triage and assessment, which was shared with key agencies and organisations. The guidance was also used to review and revise the APC's local Risk Register and related Action Plan.

Although proposed prior to the pandemic, NHS Grampian increased its senior staffing allocated to support Adult Support and Protection activity during the Covid-19 response. The appointment of an Adult Public Protection Lead has helped support the driving forward of improvement activity both within NHSG and on a multi-agency basis during the busy pandemic response period.

Public protection was a protected service within NHS Grampian, and key reminders of information and messaging about ASP and hidden harm was distributed to staff over the course of the two lockdown periods. In addition, despite a significant expedited influx of new staff (vaccinators and contact tracers) – all were still prioritised and received appropriate ASP training and awareness raising. Training itself was adjusted and fully converted to virtual, yet 'live', facilitated delivery so that ASP learning remained fully accessible to NHS staff. Indeed, this mechanism of training delivery has been exceptionally successful, supporting significantly more staff to access 'live' and 'facilitated' ASP training despite their workplace and shift pattern. As a result NHS Grampian intends to use the virtual MS Teams platform for the majority of its facilitated ASP training courses going forward.

Police Scotland continued to work on a 'face to face' basis throughout the pandemic, therefore action was taken to ensure officers remained vigilant in respect of Adult Protection concerns. Sessions were held to reinforce officer awareness, given the assessment that 'community visibility' may decrease during periods of lockdown/restriction. As a consequence, a significant increase in Police referrals have been noted when compared against pre covid numbers.

Initially, scheduled Adult Support and Protection case conferences were temporarily delayed until they could be organised safely and virtually. To ensure that statutory partners and third sector organisations remained alert to the potential concerns about harm while recognising that ASP concerns may increase during the pandemic, adult protection plans were drawn up to assess any new or additional risks and measures required until relevant professionals from different agencies could attend virtual meetings.

Council Officers continued to maintain regular contact with existing ASP clients and partner agencies. Dedicated sessions were held to provide them with the support needed to ensure the implications of the pandemic were taken into account when supporting clients under ASP legislation.

The Aberdeen Care For People Plan supplements the Grampian Local Resilience Partnership Care For People Plan, and sets out local arrangements and guidance on the activation, set-up, operation, management and de-activation of Care for People teams in the event of major incidents (such as a pandemic). It provides a framework for the Care for People response within the Aberdeen City Council area ensuring that effective arrangements are in place to co-ordinate the necessary activities for a timely and joined up response to the needs of people affected by emergencies. An 'Aberdeen Together' group – this was the "brand" given to our Care for People workstream within our wider civil contingency structures – has been involved in further reform workstreams introduced as part of the local response to the Covid variant Omicron as well as other reforms in anticipation of the National Care Service.

There is a consensus that the introduction of the multi-agency Care Home Oversight Group - which is now a permanent part of our governance arrangements - and joint assurance visits has had a positive impact in respect of ASP awareness and response from health partners working with the care home sector. It is recognised that previously, there was work required regarding health professionals' recognition of 'global' ASP issues in care settings. There is now far greater assurance that healthcare staff will not only recognise concerns within the care home sector but that these will be reported, and any subsequent ASP activities supported. The Care Home Oversight Group enabled key partners along with the Care Inspectorate, to come together and have daily oversight of care homes. This allowed the triaging of information in real time and immediate action or support to be given when required. The HSCP now has an established Care Home Team and the support and assurance visits undertaken by nursing and social work colleagues enable early identification of and response to any issues. Harm is also identified and responded to early due to the more substantive relationships that the multi-disciplinary team have with providers.

The following case studies help to highlight adult support and protection in practice, during a pandemic, from the perspective of individual clients and staff:

Mr A's Story

Hello, I'm Mr A



I was referred to ASP because people were worried about my health.

The COVID-19 pandemic made it difficult for me to get out and about like before and my weight increased, causing my health to become worse. My mood was low at this point in time too. The council officer made me aware that there was going to be a meeting called a case conference because people had concerns about how I was looking after myself. I was really worried about going to this meeting. I felt angry and anxious about this. I was also worried about having to be in the same room as people because I was aware I wasn't very well physically and I did not want to catch COVID.

I knew some of the advocacy workers from my local advocacy organisation and I let them know about this meeting. They were able to let me borrow a tablet that let me attend the case conference virtually. This was really good as I wasn't able to meet face to face and I didn't have any devices that would have let me join in my meeting. My advocacy worker would meet with me to help me collect my views and wishes about things and we made a plan of how I would put my views across at the case conference. I am quite good at speaking up for myself but I like having my advocacy worker for these types of meetings because they help me explain what I am thinking if I need them to. It is also good having someone there who I know will always be putting things across from my point of view.

On the day of the meeting, I remember having to wait before getting into the case conference. I didn't like having to wait to get into my meeting. My advocacy worker was with me while I waited and this did help me feel less worried but it is difficult waiting to get in when you know there are people already there and they are speaking about you.

When it was time to go into the meeting, there were some people there who I didn't know. Everyone introduces themselves which is helpful.

I was able to tell people at the meeting what I thought was best for me going forward and my advocacy worker helped me do this too. I was able to tell the people there that I wanted more support as I thought this would help my situation. I was pleased that everyone else agreed with my view.

After the meeting I had a chance to spend some time with my advocacy worker. I think this is really important because I sometimes forget things that are said or I think of a few questions afterwards that I would like to ask. It's helpful having someone like an advocacy worker to get in touch with some of the people who were at the meeting to ask them things I want to know because when you are worrying and feeling low, it can be difficult to do these things on your own.

The meeting did help me get more support at home. I felt that this ended up working really well. After a few months of this I was asked to attend another meeting to see how I was getting on. This was done virtually like the previous one and I used one of the tablets from my local advocacy organisation again. I was pleased that everyone agreed with me that things were getting better and I didn't have any more ASP meetings after that. I understood that most of the professionals were there to make sure I was safe, but support from advocacy made sure that I was included in everything that was happening.

Mr B's Story

Hello, I'm Mr B

I have a Community
Learning Disability Nurse,
Jane, who helps me on a
regular basis.



I have a learning disability – I present as verbally very able, but I can't read or write, and I need time to process information.

Short sentences are better.

In August 2020 (during the pandemic) Mr B was in Police custody for breaching his bail conditions. The Police contacted Mr B's Community Learning Disability Nurse, Jane, for advice. Jane was concerned that Mr B didn't understand his bail conditions – he continued to breach them – and was at risk of more criminal charges.

Jane raised an Adult Support and Protection referral, and an Initial Referral Discussion meeting was held between partners to discuss the case. It was decided that no further action was needed under ASP legislation, following the principles of what was least restrictive and most beneficial for Mr B, and Jane was advised to contact the Speech and Language Therapy (SALT) Service in the Learning Disability Team to ask for support to help Mr B understand the legal matters, so that he wouldn't continue breaching his bail conditions.

The SALT team advised the use of a 'Social Story' to help communicate the necessary information, and Police and Social

Work colleagues met with Mr B over a a number of weeks to deliver the Social Story. The meetings took place at Marischal College, where essential face-to-face contact was still permitted, which seemed to work better for Mr B than meeting at his home. Jane was also able to join the meetings, via Microsoft Teams. Mr B was supported to cope with the COVID restrictions in place – having to wear a mask, using hand sanitizer, being asked questions about COVID, one-way system, etc – and also with using the technology to link in with Jane. (Jane had previously only spoken to him by telephone.)

Several weeks later, a second ASP concern report was received relating to Mr B being physically assaulted. It was decided that the best course of action was to continue with Mr B receiving support from Jane and Duty Social Work using the Social Story, meeting on a weekly basis.

Mr B will continue to receive support from the Community Learning Disability Team.

In summary, Mr B's situation was made more difficult due to the pandemic and the restrictions in place, but every effort was made to meet his wishes, and to communicate with him in the most appropriate way, resulting in a positive outcome due to effective collaborative working between Police, Health, Social Work, Speech and Language, and Nursing colleagues.

Update: Mr B is still open to Learning Disability services. He has been assessed as eligible for services and now has a support worker allocated to him. He continues to be supported in relation to the offence for which he was bailed, and there have been no subsequent criminal proceedings, which is positive. He is also getting work done to his flat, which he is very pleased with, and generally is in a more positive place.

Jackie's Story

I am a Social Worker and a Council Officer. I am trained to fulfil the Council's statutory obligations under the Adult Support & Protection (Scotland) Act 2007)



Hello, I'm Jackie

I chose Social Work because
I like working with people. A
cliché but I am continually in
awe of how resilient people are
and how we are all so unique

In early April 2020, shortly after the start of the pandemic, an ASP referral was made for Mr K to the Social Work team by Health colleagues, and the case was allocated to me.

Mr K suffers from Deep Vein Thrombosis and is at risk of having strokes – it is really important that he sees a medical practitioner regularly and takes the appropriate medication. In January 2020 he and his family moved to Aberdeen from England, and registered with a local medical practice.

The ASP referral identified a risk of harm through Neglect, as the District Nurse had not been able to access Mr K to look after his medication needs – there was a concern that Mr K's son was preventing his father's medical needs from being met. There were also concerns about the state of the property, and the amount of morphine being prescribed for this address.

Several joint visits involving Health and myself were planned, but we couldn't gain access to Mr K's address – there was no answer when the buzzer was rung. Lockdown conditions meant that there were very few people out in public, and noone was around to let us in to the property (in a shared accommodation block). A further planned visit also had to be re-arranged as Mr K was showing signs of COVID.

Given the lack of access, a meeting of professionals took place to plan the next steps if access wasn't obtained, which could potentially include use of other legislation and powers. This was the first 'virtual' Professionals Meeting, held on MS Teams, and was all very strange and unfamiliar, using this new technology and coming together in this way. It worked very well, though, and was very successful in bringing together a range of professionals at short notice (Police, Social Work, Health, Nursing and Legal staff). This paved the way for many other similar meetings held to enable the sharing of information between

partner agencies about adults at risk of harm, in order to plan the most appropriate support and protection.

Eventually, I did succeed on visiting Mr K, along with the District Nurse. This was also a new and strange experience – I'm always apprehensive about interviewing someone who is potentially an 'adult at risk' under ASP legislation, but having to do this wearing a mask, and being socially distanced, made this increasingly challenging and stressful.

The visit and interview enabled me to establish that, despite all the concerns of health colleagues about being able to access Mr K to ensure he received his medication, he was not actually an 'adult at risk'. Mr K and his family were very happy to engage with professionals and to ensure that Mr K was receiving the medication he needed.

The situation reflected the uncertainty, changes in working practice, and the way the pandemic was impacting on every aspect of life and work:

- It transpired that the Medical Practice and District Nursing Service had incorrect contact details for Mr K – which was due to communication issues arising as a result of the new and strange circumstances we were in;
- The property was not really in 'a state' the family still had packing boxes around from their recent move up from England;
- Concerns about prescriptions for morphine were allayed once it was realised that medical practitioners in England had taken a different approach to prescribing than is done locally;
- And those involved were unaware at the time that the buzzer at Mr K's home was not working

 in normal circumstances, people would likely have been going in and out of the building, and would have been able to let us in.

All was well in the end, though.

12



The development of a robust Performance and Quality Assurance Framework is one of the APC's current priorities, and in December 2021 a specific Sub Committee was established to progress this work. The Sub Committee is well on the way to developing a data dashboard, using a quality improvement (QI) approach to monitor and analyse key data. Using this approach is helping us to understand the variation in our data, highlight where special cause variation indicates that something out of the ordinary has happened / is happening, and to really tell the 'story' of the data in a wider social and environmental context. We recognise that understanding emerging or continuing trends is an integral element of providing effective interventions to those who may be at risk of harm, to inform appropriate resource allocation and where necessary, improve practice.

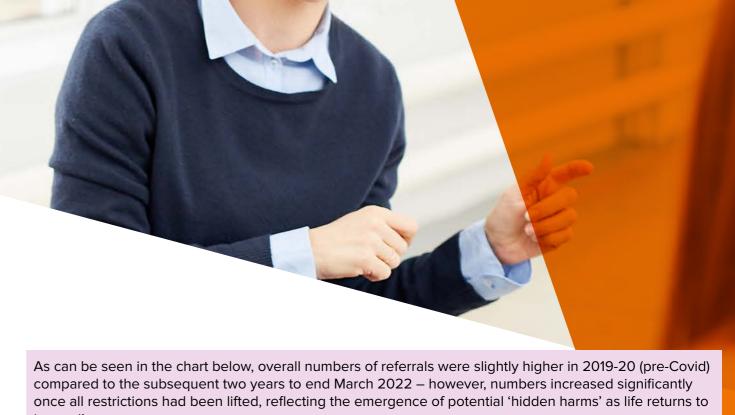
Additionally we are starting to collate and analyse data relating to 'repeat referrals' under ASP, which will help to focus on those individuals for which, for whatever reason, higher numbers of referrals are being made, to ensure their support and protection and address any related procedural or process issues.

Even prior to this development work, the APC has been receiving regular lead agency data, and key data is also reported, as part of a wider 'public protection' dataset, to the COG in order to provide both bodies with the necessary assurance about our ASP activities.

Recent meetings of the Executive Group for Public Protection (COG) have considered proposals around a more integrated Family Support Model to focus consistently on whole system early intervention and prevention, with the recognition that this will be supported by co-ordinated multiagency data and information management. The intention is to agree a multi-agency approach to commissioning of internal and external services to ensure adequate provision of family support to address current and emerging risks, with arrangements having sufficient flexibility to enable an agile response to changing and emerging needs for children, young people and families. The applicability of these proposals to other public protection areas, including Adult Support and Protection, is being actively considered.

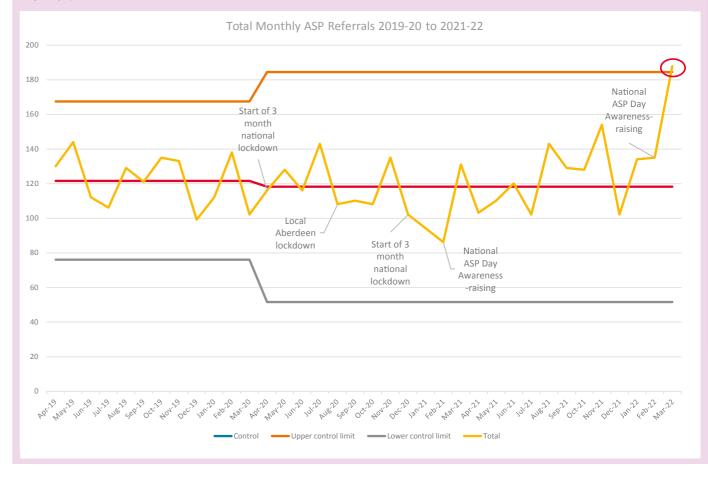
In addition, the monitoring and analysis of our ASP data and outcomes will be significantly enhanced in 2022 with the introduction of our new whole sector - children's and adults database, Microsoft Dynamics 365 (D365) which will replace our existing CareFirst system. D365 has been designed by social work for social work in conjunction with other internal and external partners and will, amongst other things, make a significant improvement to the quality, consistency and transparency of our adult protection activities.

Key data 'highlights' are set out below. These reflect three-year averages which enable us to consider trends outwith the pandemic.

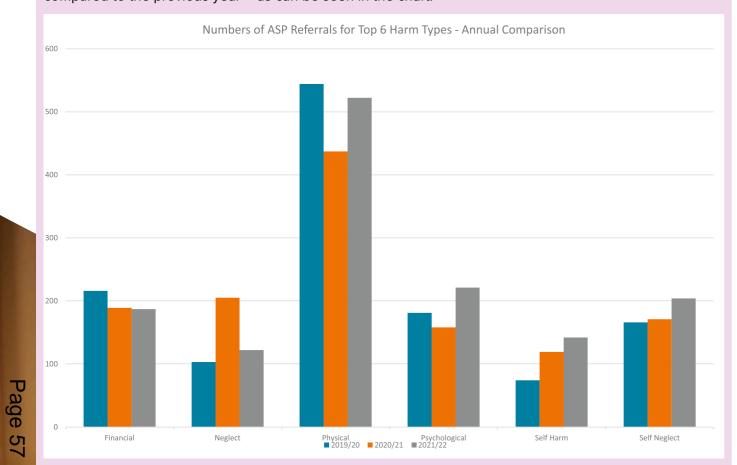


Aberdeen Protection Committee Riennial Report 2023

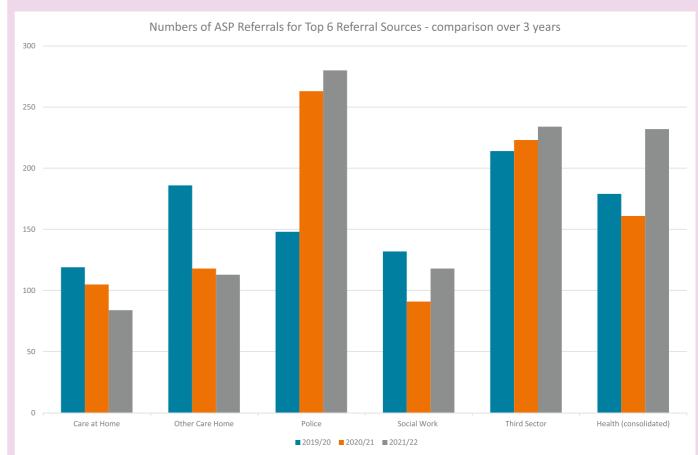
'normal'.



The impact of the pandemic is in evidence in the majority of our datasets, in terms of the types of harms for which ASP Referrals have been made, and the parties submitting those Referrals. The number and % of ASP Referrals where the main harm type recorded was linked to 'mental health and wellbeing', eg Self Harm, Psychological Harm, and Self Neglect, all increased in the two-year period from April 2020 compared to the previous year – as can be seen in the chart.

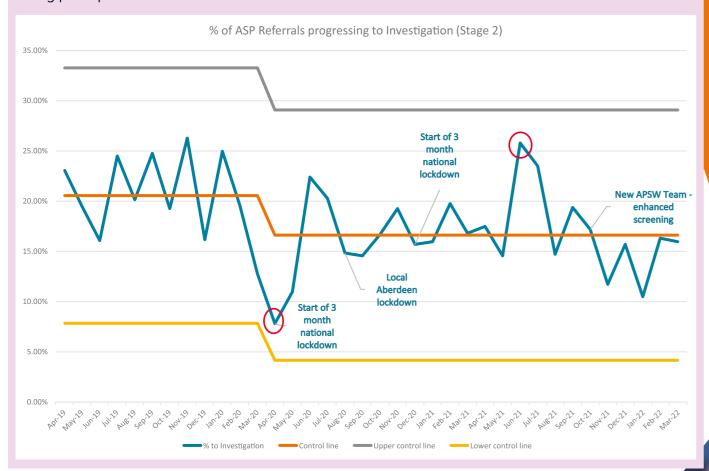


Police Scotland submitted the greatest volume of ASP Referrals in both 2020-21 and 2021-22, demonstrating their proactive response with regards to vulnerable adults at risk of harm, in the course of their work – see the chart below.

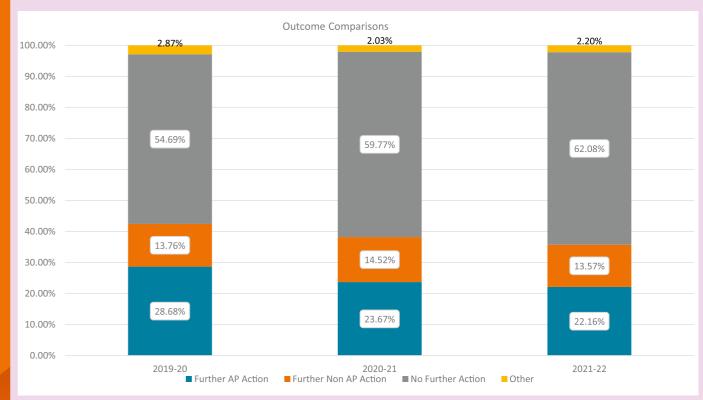




The chart below reflects that the 'typical performance' of the % of Referrals which went on to Investigation under ASP reduced from 21% in the year before Covid to 17% over the biennial reporting period. This reflects the focus of Social Work colleagues on earlier intervention and the 'least restrictive' principles of ASP. The continuation of this trend can be clearly seen from October 2021 onwards, with the formation of a new Adult Protection Social Work team applying a consistent approach to enhanced screening of all referrals from this time. The use of a formal multi agency Initial Referral Discussion process for particularly complex cases also commenced during this period, albeit multi agency conversations were very much taking place prior to that.



As can be seen in the chart below, across the three years, the highest proportion of Referrals resulted in an outcome of No Further Action. This outcome is recorded for the following reasons: concerns/risks were not evidenced or substantiated during the screening process; the provision of advice or information was deemed to be sufficient; adequate services were already in place; or the person was already subject to an adult protection investigation.

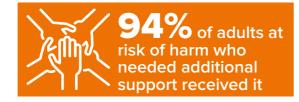


Outcomes, achievements, and service improvements

The recent inspection report concluded that the partnership had demonstrated clear strengths in supporting positive experiences and outcomes for adults at risk of harm, in terms of key ASP processes, and that the partnership's strategic leadership for Adult Support and Protection was evidenced to be very effective and demonstrated major strengths in this regard.

Findings from the review of case files which took place as part of the inspection indicated that:



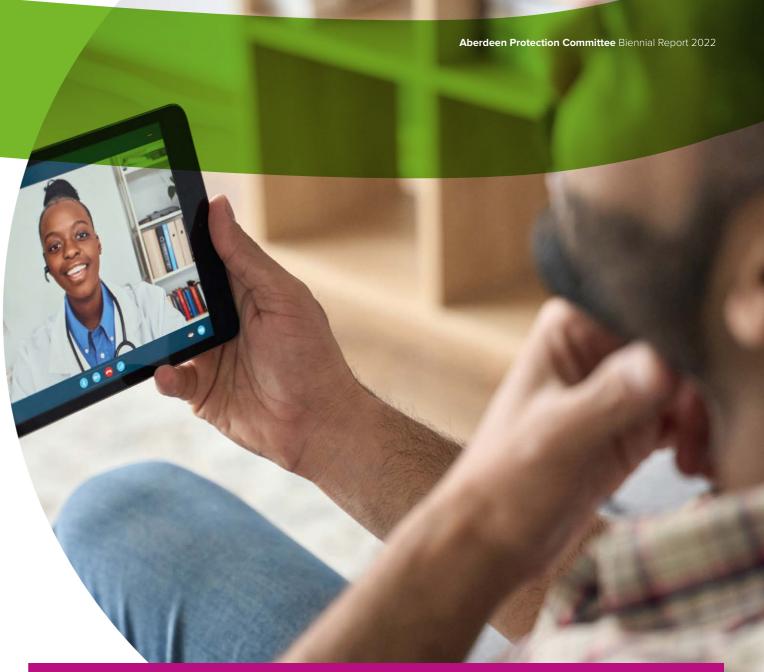


OUR STRATEGIC APPROACH

In order to improve how we focus on reducing the risk of harm and improving outcomes for adults at risk of harm, in December 2021 the APC approved an over-arching ASP Strategy (January 2022 to March 2024), informed significantly by a recent APC Self-Evaluation (facilitated by the Improvement Service) and development day, which sets out our strategic priorities, and from which all other strategic documents and our Improvement Plan flow. The development of the Strategy led to a review of APC structures to ensure the Committee is best placed to progress agreed priorities. This resulted in the formation of four new Sub-Committees, to replace an existing 'Operational Sub Group'. Each Sub-Committee is linked to a priority area - Performance & Quality Assurance, Stakeholder Engagement, and Learning & Development, plus an additional Sub Committee to oversee Case Reviews — and is chaired by a member of the APC itself. The APC Terms of Reference were revised to reflect these new structures.

The APC's vision statement is "Partners in Aberdeen are committed to an inclusive approach to preventing and responding to harm and protecting adults at risk". The vision was reviewed and re-endorsed at the APC's development day in November 2021. This appears on all strategic documents, is on the <u>Aberdeen Protects website</u>, and was promoted widely by the APC Convener to 135 multi-agency staff at an Aberdeen ASP <u>Moving Forwards on-line event</u> in September 2021. The inspection report recognised that the partnership's vision was well embedded and supported by a strong culture of strategic change and improvement, and was well understood by staff.

The COG fosters a culture of active governance leadership and provides robust support and scrutiny to the APC and our wider Adult Support and Protection activities. The COG has been refreshed in recent years with a strong emphasis on the alignment of policies, systems, practices, improvement agendas and quality assurance frameworks across the entirety of the public protection portfolio.



OUR OPERATIONAL APPROACH

Adult Support and Protection (ASP) has been operationally 'live' in Aberdeen City for over 12 years following the passing of the 2007 legislation. In that time, although changes have been made to operational procedures and practice, the actual operational model for delivery of the lead agency ASP statutory functions in Aberdeen have not been formally reviewed. As a result, the Lead for Social Work requested a formal options appraisal be undertaken to determine the best operational model for the delivery of lead agency ASP activity going forward, to bring the focus to that of early intervention, prevention and improved system wide outcomes for the vulnerable people who use our services. This work was completed in August 2020 and set in motion the creation of the Adult Protection Social Work Team. The team as advised are the central point of all ASP referrals, Police concern reports and emergency/crisis response. Work was undertaken to create the vision, values and objectives of this team who work system wide to protect people across the city.

This significant shift in ASP operational practice is in its infancy but we are already starting to see positive changes that this has made. The vision for adult social work is based on the prevention and early intervention locality model, working in collaboration across our systems to prevent, intervene and deliver services to those who require it. In order to achieve our ambitions, we saw the need for a fundamental shift in the balance of care and a targeted joined up approach to prevention and early intervention.

INITIAL REFERRAL DISCUSSION (IRDS)

The principles of the legislation and the 3-point test are at the heart of all of our local Adult Support and Protection interventions. In addition to the establishment of the new Adult Protection Social Work Team, the multi-agency implementation of a Grampian Initial Referral Discussions (IRD) protocol and local IRD Operational Procedures has enhanced the screening process with key professionals from all three of the statutory partners now meeting to support early professional discussion, referral screening and decision-making although we would stress that previously, enquiries were always taken forward on a multi-agency basis.

	June – Sept 2021	Oct 21 – Jan 2022	Total
IRD Meetings	5*	32	37

*Informal multi agency meetings held prior to the introduction of the formal IRD process

The gathering of information and Initial Referral Discussion must be completed within five days and should be wholly based on an adult's personal circumstances. Immediate safeguarding and safety concerns will always be prioritised at this stage and appropriate actions undertaken without delay in respect of these - 30 safeguarding visits were undertaken between June and September 2021 and 36 between October 2021 and January 2022.

The introduction of IRDs has led to improved multi-agency information sharing and joint decision making for Adult Support and Protection reports across Grampian.

IRDs – A Case Study Ms Cs Story – Benefits of an IRD



An Initial Referral Discussion was convened for Ms C due to concerns being raised about her relationship with her friend/carer. The concerns were that Ms C was subject to potential undue pressure from this friend/carer, who was attempting to act as a legal representative for her.

Social Work held very little information about Ms C apart from that there had been previous similar ASP concerns raised when she resided in another local authority.

From past history of health records, we were able to establish that from an admission to hospital she had been discharged to women's shelter. Health were also able to confirm a diagnosis of a learning disability and depression, therefore establishing that she could meet the 3-point

test. In addition, this also raised concerns for her mental health as the GP confirmed that her medication was no longer being ordered. Police were able to identify previous concerns about her friend/carer and told us of a number of aliases they previously went by. Information was also shared from prior locations in Scotland where she had resided.

The IRD was able to give the three agencies clarity to enable them to decide that Ms C met the 3-point test and that there should be a progression to full investigation.

RISK ASSESSMENT

Our standardised framework for assessing risk enables us to sufficiently demonstrate that we are taking appropriate action to minimise the harm by managing and controlling the risk and/or reducing its impact. The recent inspection report found that "Risk assessments were comprehensive, timely and completed to a high standard. These were a clear strength in the partnership's key processes".

CAPACITY ASSESSMENT TOOL

A Grampian-wide Decision-Specific Capacity Assessment Tool for mental capacity has been developed to support practitioners to consider the various factors in the decision-making process – this was recognised as good practice in the IRISS overview of Biennial Reports 2018-2020. As a result of an interim evaluation, further work was undertaken on the tool and greater clarity was built into the process and more explicit statement of the timescales was made, leading to an updated version of the document being rolled out in November 2021.

The tool also allows professionals to consider whether a more formal, health capacity assessment is required to pursue measures under the Adult with Incapacity (Scotland) Act 2000. The use of the tool has significantly improved the quality of capacity requests being made and the response from clinicians.

LARGE SCALE INVESTIGATIONS (LSIs)

There have been two LSIs during the biennial period 2020-22.

A Grampian-wide <u>Large-Scale Investigation (LSI) protocol</u> is in place to assist in the investigation process in respect of concerns around the safety of residents primarily in care homes, but also in other care settings and home care settings. This protocol was revised and updated in 2021.

Our trigger for carrying out an LSI involves the reporting of potential abuse or harm of more than one adult and our procedures assist senior managers to undertake such investigations. The responsibility for coordinating Adult Support and Protection arrangements lies with Aberdeen City Council as the lead agency, however, the implementation of the procedures is a collaborative, multi-agency responsibility, and as such all agencies are accountable.

Our large-scale investigations are of a high standard and positive outcomes for the adults are seen in all cases. The action plans are specific regarding those responsible and timescales for implementation. In addition, if an action plan has been agreed, a date for review of the plan will be set at the outcome meeting.

When considering the safety of adults within managed care settings and home-based care we consider the responsibilities of partner agencies and scrutiny processes and what is the basis for proportionate and timely interaction. The adult protection trainer delivers additional training on a local basis to all care establishments and independent providers who are under large scale investigation and training sessions are tailored to meet the needs of the individual providers or as part of other identified training requirements. Such training took place in four care home settings in 2021. It was identified that there was the need to support both providers and referrers in understanding reporting thresholds, the 3-point test and what their role would be in adult protection investigations and protection planning. As a result a short course on "What is my role within ASP?" has been developed.



Those same statutory partners are also part of the Aberdeen City Adult Support and Protection Partnership and Committee whose vision is that "Partners in Aberdeen are committed to an inclusive approach to preventing and responding to harm and protecting adults at risk". That approach is underpinned by the comprehensive Grampian Inter-agency Procedures for Adult Support and Protection which were most recently reviewed and updated in June 2021 and are widely available on our 'Aberdeen Protects' website. These procedures were developed and adopted by all the key partners and ensure that all professionals have a shared vocabulary and understanding related to supporting and making safe adults who are either being harmed or who are at risk of being harmed.

where all people can prosper". Adult Support and Protection is a significant part of that ambition to ensure

that everyone feels safe, supported and included.

There is effective collaborative operational management of Adult Support and Protection processes across the multi-agency partners, and we are confident that if operational concerns do arise, they can be escalated and resolved quickly. In December 2021, the APC adopted a Grampian-wide <u>Escalation Policy</u> which sets out the agreed approach to be taken in such circumstances.

Our statutory agencies, Aberdeen City Council, NHS Grampian and Police Scotland all have committed senior strategic and operational leads overseeing their agency's statutory responsibilities and the multiagency collaborations in the best interests of the individuals with whom we work. These colleagues strive to ensure effective practice across the adult protection partnership and are keen to demonstrate the effectiveness of our partnership working helped by, for example, the North East Integration Project which has facilitated the co-location of Police Scotland staff with Aberdeen Council staff in Marischal College and also the development of shared health and care services in mental health and learning disability, sexual health and most recently, the establishment of the frail elderly pathway.

Inter-agency reporting at the APC with regards to operational need and delivery focusing on preventing individuals from being harmed has remained a core principle throughout the coronavirus pandemic. APC partners remain fully focused on assessing the impact of risk and mitigation, via regular consideration of a Risk Register, with Chief Officers providing local leadership and oversight.

Lead agency quality assurance undertaken in April 2021 showed that 82% of scrutinised cases evidenced good quality investigations and in 100% of cases, partners were appropriately involved. This is an area of strength within Aberdeen with Council Officers reporting that they get appropriate and positive cooperation from partners as and when required. Significant resources have been put in place to ensure that relevant information and expert advice is accessible to support ASP investigatory activity. NHS Grampian has, for example, put in place a dedicated pathway for Council Officers to seek clinical advice on skincare and pressure ulcer concerns where there is risk of neglect – with NHS Tissue Viability staff providing Council Officers with training and awareness in this area. There are also plans in place for practitioner groups to be developed around areas of interest/specialisms such as self-neglect and hoarding and service user engagement.

OUR APPROACH TO IDENTIFYING AND PROGRESSING LEARNING OPPORTUNITIES

On 9th June 2021, the APC adopted a Learning Strategy and Framework which promotes a 'positive learning culture' across partners involved in ASP. It also sets out how learning opportunities might be identified, provides guidance about the case review process, states how learning should be disseminated and embedded and outlines how the APC will receive assurance about this. A local log is maintained of all case reviews undertaken in line with the Grampian Case Review Protocol. Case Reviews are overseen by the APC's Case Review Sub-Committee, which links in as relevant with the APC's Learning & Development and Stakeholder Engagement Sub Committees to deliver practice improvement in relation to issues identified. The APC continues to focus efforts on improving how learning from case reviews is rolled out and embedded, as recognised in our Improvement Plan.

One case review for which a notification was received during the period resulted in a multi-agency review meeting, rather than progressing to a significant case review. A plan was developed in relation to disseminating learning from this review, which related to self-neglect and hoarding. This resulted in the development of local <u>Self-Neglect and Hoarding Guidance</u> - a good example of multi-agency collaboration to develop required guidance in light of a previous (2019) case review. The APC's Operational subgroup which was in place at the time was key in helping to develop the guidance by utilising the evident informed insights and skill sets across our lead agencies and stakeholders.

In addition, a Grampian-wide External Significant Case Review (SCR) group (chaired and facilitated by NHS Grampian) has recently been established to enable appropriate reflection, discussion and learning from national SCRs. So far, two external SCR have been considered by the group – with actions and findings appropriately taken forward via reporting to the APC and the COG. This model of multi-agency learning from activity in other areas is considered by all partners to be exceptionally useful. [NB Case Reviews are now referred to as Learning Reviews.]

SELF-NEGLECT AND HOARDING GUIDANCE

As a result of learning from a local multi agency case review, guidance on self-neglect and hoarding was put in place to give professionals a framework for appropriate intervention and decision making in these complex cases. This is currently being implemented and has included the dissemination of the local Guidance developed for frontline staff and managers and a '7-minute briefing'. A session for multi agency staff was held in June 2021 to launch this guidance, which was attended by 170+ participants, reflecting the interest in improving knowledge about this complex issue. The event received very positive feedback about how the guidance will impact on practice going forwards, and a survey seeking initial feedback four months on (46 respondents in total) found that 25% of respondents who were aware of the guidance (28) had already found it useful in practice, and 93% felt they will be more confident working with such cases as a result of the guidance. Further follow-up work is planned, including quality assurance work to evidence impact to both the APC and COG.

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OUR APPROACH TO QUALITY ASSURANCE

One of the APC's current priorities was to develop a robust multi agency Performance and Quality Assurance Framework, based significantly on learning from the approach undertaken in the local Child Protection arena. A dedicated Performance & Quality Assurance Sub-Committee was be established in December 2021 to progress this work, and a comprehensive framework was approved by the APC in May 2022. Revisions to our information sharing protocols to facilitate and support more robust and effective multi-agency quality assurance activity have recently been agreed. This work will then be planned and overseen by the Performance & Quality Assurance Sub-Committee.

Within the lead agency, an overarching quality assurance framework has been developed and incorporated into our operational Procedures. This involves the sampling and reading of ASP casework where adults at risk have progressed to the investigation stage and beyond. The framework is based on relevant Care Inspectorate quality indicators and focuses on those positive outcomes that have been achieved with and for the person, procedural adherence within timescales by the practitioners and also appropriate multi-agency collaborations that are proportionate to the levels of need and risk. Random sampling of the quality assurance outcomes seeks to provides assurance to both the APC and senior managers that adults are safer because of our interventions and that a key factor in this is the quality and effectiveness of our collaborative decision-making.

This quality assurance framework promotes reflective practice and shared learning. Staff receive feedback on their practice to be discussed and reviewed in supervision using a local development tool that helps identify skills gaps or areas of good practice. The framework sets a target for individual audits of cases. The aim is to undertake at least 200 case audits a year, representing approximately 26% of the total caseload. We recognise the need to integrate this framework more fully into our practice so that it is able to withstand the significant demand pressures on our available resources.

The Public Protection team in NHS Grampian (NHSG) quality assures all ASP reporting going to lead agencies – feedback, including suggestions for practice improvements, is provided to staff/clinical teams as necessary.

Police Concern Hub colleagues' complete regular quality assurance on Police Concern Reports and there is an escalation process for raising issues identified, alongside regular managerial overview and scrutiny as appropriate. In addition, a wider, Internal Adult Support & Protection Divisional Concern Hub Quality Assurance Health Check was undertaken by NE Division in January 2020, which identified good practice, learning and improvement opportunities.





Learning and development

The APC understands the importance of its function in 'improving the skills and knowledge of staff' and in June 2021, approved a Learning Strategy and Framework and then in August 2021, its Plan for Practice Improvement which sets out annual priorities for L&D as applicable to;

- the wider workforce (staff, from Local Authority, Police, NHS or third sector (including staff employed through self-directed support),
- the specific workforce (staff with a direct care role, a requirement to be professionally qualified and/or a management responsibility e.g., social workers, care managers, occupational therapists, physiotherapists, speech and language therapists) and
- the specialist workforce (staff employed by local authority identified as meeting legal requirements of Council Officers).

The Plan aligns to the Grampian Learning & Development Strategic Framework which was reviewed and approved by the three Grampian APCs in December 2021.

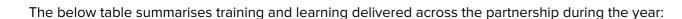
The Framework and Plan are being progressed by the new APC Learning & Development Sub-Committee, with regular reporting back to the APC. Mechanisms to collate, record and report on information about the impact of appropriate L&D activity are to be further developed.

To fulfil a key commitment to support training across boundaries, the APC's partners have jointly invested in the provision of a multi-agency trainer, hosted by NHS Grampian. This post chairs the Grampian Learning and Development sub-group and develops and delivers (in conjunction with all partners) multi-agency training and development opportunities. Police Scotland's adult protection co-ordinator, Advocacy Service Aberdeen's service manager, and representatives from Aberdeen City Council's Legal Service also contribute to the delivery of ASP training in the City, which is led by the Council's Adult Protection Trainer. Further plans are in place to develop the provision of modules 1 and 2 though a supported Train the Trainer programme. This programme will be key to moving forward and modernising the approach for learning and development activities.

To complement single agency training, we have a robust training programme in place to include bespoke training delivered jointly with other partners in accordance with the need of the learner. To ensure ongoing compliance with relevant ASP policies and procedures, and to make sure they are fulfilled effectively, staff across all statutory agencies and other stakeholders are appropriately trained and supported to carry out their roles. 'Introduction to ASP' sessions are promoted for staff across all agencies as it gives the right message to individuals and their agencies that Adult Support and Protection is everyone's business.

Learning and Development which has taken place during the period:

- To ensure ongoing compliance with relevant ASP policies and procedures, and to make sure they are
 fulfilled effectively, staff across all statutory agencies and other stakeholders are appropriately trained
 and supported to carry out their roles. 'Introduction to ASP' sessions are promoted for staff across
 all agencies as it gives the right message to individuals and their agencies that Adult Support and
 Protection is everyone's business.
- A Council Officer Teams Channel offers local peer support and guidance around issues raised. This is
 based on the principle that all Council Officers should have access to a positive environment where
 they can discuss in more detail their anxieties or where they are struggling with various issues in their
 practice. Over the last two years, sessions for Council Officers have been held on a range of topics
 including cuckooing, chronologies, capacity, COVID, domestic abuse and older adults, investigative
 interviewing, decision-making tool, and ASP governance. During 2020-21, some social workers
 attended Council Officer training hosted by Aberdeenshire, a pragmatic approach, given the context of
 the pandemic. This training was delivered in Aberdeen in 2021-22 five sessions were attended by 46
 individuals.
- Council Officer refresher training was redesigned from the beginning of 2022. There is the recognition that Council Officers require support and practice development opportunities, rather than "training".
 12 Council Officer Support Groups have been formed to include practitioners from a range of service areas with varying levels of experience. These groups are running once a quarter and based predominantly on an action learning model. Each group also has an online Teams chat where they can support each other more regularly. This form of learning for Council Officers has proved highly successful and engagement is high. These are held in addition to specific topic-based learning.
- Specific training was delivered to a group of new Senior Social Workers who would be chairing ASP professionals meetings and case conferences.
- Social Workers in Training have had the opportunity to attend the Adult Protection Social Work team huddles where they have been part of Duty to Inquire case discussions.
- Aberdeen City Council's mandatory ASP e-learning module was completed by 385 people between August 2020 and June 2021, and a further 1460 between July 2021 and February 2022.
- 33 people attended Dewis training, on the impact of domestic abuse on older adults, over two sessions in 2020-21.
- NHS Grampian offers a strong ASP training portfolio which varies from electronic e-learning modules, which support 'basic' awareness and understanding (3,512 individuals accessed e-learning during 2020-21 and 3,564 in 2021-22), a facilitated, mandatory session for all patient facing staff with 73 sessions being carried out over the two years and 1,203 participants.
- In addition to the basic awareness raising e-learning within NHS Grampian ASP is also included in the mandatory "Welcome and Orientation" training which is the main corporate induction e-learning and been completed by 4,840 members of staff. Non patient facing staff complete an annual mandatory Public Protection e-learning since January 2021 and has been completed by 3,295 staff.
- Given the critical role of GPs in relation to the identification of adults at risk of harm, there has been a significant 'push' with more GPs trained in the past two years than in previous years. (Twenty-seven sessions held, which were attended by 310 GPs from across Grampian. Importantly this has included the out of hours GP service and GP trainees.
- NHS Grampian has now made it mandatory for all patient facing clinical staff to attend facilitated/in
 person ASP training, and for this to be renewed/refreshed every three years. This has been set down in
 a formal public protection training framework for NHS Grampian staff.



	2020-21		2021-22	
Training / Learning	No. of Sessions	No. of Participants	No. of Sessions	No. of Participants
Multi Agency Introduction to ASP	14	377	1	5
Other Multi Agency ASP Training	15	91	4	51
Dewis – training on impact of domestic abuse on older adults	2	33	-	-
Council Officer Refresher Training***	1	15	12	50
Aberdeen City Council wider staff mandatory ASP e-learning (individuals)	n/a	*385	n/a	**1460
NHS Grampian basic awareness-raising e-learning modules (individuals)	n/a	8,512	n/a	3,564
NHS Grampian more specialist ASP training	25	369	48	834
Training for GPs & trainees (Grampian-wide)	5	94	22	216

^{*}between August 2020 and June 2021

In August/September 2021, a Grampian-wide multi-agency Training Needs Assessment was undertaken, and the findings of this relating to Aberdeen will help to inform future planning. As a result of this assessment, work has intensified, in particular, in encouraging and supporting NHS staff to access ASP training. The HSCP is also planning a more detailed activity focused on Council Officers to better understand their learning needs.

A new training course is being offered to NHS Grampian staff that will support preparation for case conference attendance. Additionally, NHS Grampian, on behalf of the multi-agency partners, supports nationwide training of GPs via the "CPD Connect" series of training sessions – which have been well received and had good feedback.

The adult protection trainer delivers additional training on a local basis to all care establishments and independent providers who are under large scale investigation and training sessions are tailored to meet the needs of the individual providers or as part of other identified training requirements. Such training took place in four care home settings in 2021. It was identified that there was the need to support both providers and referrers in understanding reporting thresholds, the 3-point test and what their role would be in adult protection investigations and protection planning. As a result a short course on "what is my role within ASP?" has been developed.



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^{**}between July 2021 and February 2022

^{***}redesigned from 2022 – quarterly peer support groups now held



Engagement, involvement, and communication

The APC's Terms of Reference include the statement that the "Committee will, as part of its functions, be responsible for: Engaging with service users, (or their representatives), their carers and wider communities in ensuring their views and needs are considered throughout the process of monitoring and improving services." The APC recognises the inherent challenges and has a specific risk identified in its Risk Register relating to the risk of the voice of the adult and carer not being heard within the adult protection system and their rights not being respected. The APC has recently established a dedicated Stakeholder Engagement Sub-Committee which is progressing work relating to this identified priority.

The inspection report findings commented favourably on Aberdeen City's engagement with adults at risk of harm, recognising a 'golden thread' that flowed from strategic decision-making to hands-on activity. It was clear from the staff survey that most staff agreed that adults at risk of harm were involved in decisions that affected their lives. This positive view was aided by the partnership's inclusive and person-centred approach. Positive feedback was also received in relation to the Stakeholder Engagement Sub Committee of the APC and the APC User Forum (see below) which evidenced important steps to strengthen the voice of adults and unpaid carers. The inspection did however highlight that "More adults at risk of harm needed access to independent advocacy". This had previously been identified as an area for improvement locally, and the APC is to progress a strategic assessment to help understand how we can make further improvements in this area.

The multi-agency partners have now put in place the <u>Strategy and Guidance for Meaningful Engagement with / Involvement of ASP Clients</u> which sets out their approach to ensuring the voice of service users, their unpaid carers and representatives (where relevant) is heard. In addition, a <u>Communication Strategy and Action Plan</u> was endorsed by the APC at its meeting in April 2021. This includes a communications objective 'To listen to the 'voices' of those we seek to support and protect, and their carers, in order to ensure a person-centred approach focused on equalities and human rights in line with the national Health & Social Care Standards and to continue to improve the way we work'. Both documents have been disseminated widely across the partnership, and to staff within partner organisations.

During Autumn/Winter 2021, Advocacy Service Aberdeen, at the behest of the APC, instigated the formation of a User Forum which meets in advance of APC meetings and provides views on a range of topics and 'user feedback' received. The Sub-Committee aims to support the further development of the role of this Forum, so that those who have been or are going through 'ASP', and their unpaid carers, are substantially informing what we do/plan to do, to improve individual experiences and outcomes. Examples of the work the group are progressing include working on a peer support video, developing an ASP 'best practice' document, and reviewing the partnership's easy read materials as well as providing input to a new 'Learning Review Engagement Guide'. The APC Convener is closely involved with the Forum, attending meetings from time to time.

During the ASP process, adults at risk of harm are asked if they know about and would like access to independent advocacy services as this may be crucial to helping them understand their rights and be supported to participate at each stage of the process and make more informed choices. The adult's views and wishes are central to Adult Support and Protection and Advocacy Service Aberdeen (ASA) plays a very important role in gathering information from the adult both during and at the end of the process regarding their experience. Practical steps were taken by ASA during the pandemic to ensure that IT exclusions did not impact on an individual's participation in virtual case conferences by facilitating an iPad borrowing scheme.

"On the second meeting X was able to use an iPad and was pleased that this meant they did not have to have a support worker with them"

[Feedback from an adult via Advocacy]

We recognise the importance of ensuring that the adult at risk is encouraged to participate at the case conference – the adult will always be invited unless it has been identified and documented that it would cause them further harm. Family carers or those closest to the adult will also be involved in case conferences when it is in the adult's best interests. If the adult does not wish to attend the case conference, they will be consulted beforehand about their views, and these will in turn be represented at the meeting by the Council Officer or independent advocacy. There will always be consideration by the chair as to who is best placed to go back to the adult after the case conference and provide them with an update of relevant matters.

	2020-21	2021-22
No. supported by independent advocacy to attend case conference meetings	19	23

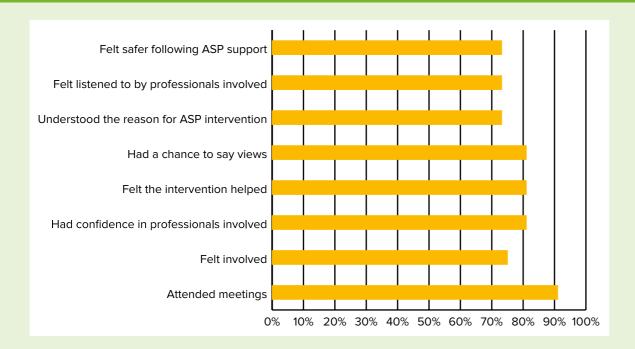
Those supported to attend case conferences included people with learning disabilities, mental health disorders, older adults and carers. Increasing the number of people offered/accepting advocacy support was identified as an area for improvement in the inspection, having been already recognised as such and incorporated into our Improvement Plan.

To better understand outcomes related to adult protection practices in Aberdeen, the APC requested a pilot of the Making Safeguarding Personal Outcomes Framework tool. Advocacy Service Aberdeen (ASA) were asked by the APC to collect this feedback, meaning those who had gone through an ASP intervention were able to discuss their experience with an independent source. The framework tool was used by ASA alongside the National Health and Social Care Standards to provide both qualitative and quantitative data. It was felt that there were challenges in previous years with understanding what outcomes were being met due to low numbers of respondents. To improve numbers, feedback was gathered whilst the adult was open to ASP as opposed to waiting until the intervention was closed. Additionally, ASA's iPad borrowing scheme allowed for more people to be reached and provide feedback. Feedback from individuals and carers is also collated via a questionnaire on ASA's website, which includes information about how that feedback is used.

	2020-21	2021-22
No. asked during ASP if they would be happy to give feedback at end of process	68	75
No. who agreed during ASP to give feedback at end of process	15	20
No. who gave feedback at end of process	8	7*
No. who gave feedback to ASA during the process	8	12

*Included two carers

FEEDBACK GIVEN TO ASA BETWEEN JANUARY 2021 AND JANUARY 2022



People generally spoke positively of their experience of ASP. Some positive comments provided to ASA included:

"I think the meeting went well.
They talked about my housing situation and they understood that I would like to live with a partner one day."

"The staff member really listened to me and so did the nurse. Things got resolved quickly." "I found the meeting helpful and it was good for helping us care for xxxx. The information we got from the meeting was invaluable".

Some of the things people told ASA that they did not enjoy about their experience of ASP was that some felt the intervention was "heavy handed" and others did not like having to wait to attend their case conference, knowing a group of professionals were discussing their situation while they waited.

"It's my meeting. Why should I wait to get into my meeting?" "In a way we could understand it but it felt like the change of equipment was making a mountain out a molehill – it was this that led to the problems that had to be investigated."

"I didn't like being spoken about when I wasn't there" User feedback, including from the User Forum, has been utilised to make specific changes to practice, including working with staff to look at the best way to undertake case conferences for the adult.

Meeting Guidance is being developed which will reflect the need to consider a person-centred approach, and a training session is also to be held, in August 2022, regarding use of advocacy and user involvement. In another instance, feedback highlighted that the person did not know what the conclusion of their ASP intervention had been, or even if it had concluded. When fed back to ASP colleagues it was agreed that this

"The staff who supported me were very sensitive, worked with me and pleasantly surprised with their listening and support." [Feedback from an adult]

should be addressed so that everyone who goes through an ASP intervention should be written to when it is closed detailing its conclusion. This change has since been operationally implemented. Improving user engagement and involvement in ASP remains an area identified for inclusion in our Improvement Plan so that it becomes as substantive and enduring as possible.

A chronology of developments based on feedback from users are logged on ASA's website.

On a limited number of occasions (five in 2019-20 and one in 2020-21) ASA have provided support to those who were the alleged perpetrators of abuse e.g., a family member of an alleged victim to help them engage productively with the adult protection process and to understand why their behaviours cause concerns of harm and the action that is being taken.

During 2019-20, ASA also provided independent advocacy support to a group of 18 older adults living in a nursing establishment following a large-scale inquiry. The work undertaken supported those living within this setting to have their views made known on the quality of support and care that they were receiving and what they felt could be improved. This form of group advocacy within an LSI framework is an area of good practice that the Adult Protection Committee is keen to learn from and encourage this practice going forward. Several instances have been reported to ASA where the adult at risk did not feel consulted with or involved in the ASP process. Local solutions through the partnership were to communicate more effectively with adults and their carers regarding the process and the outcome of the investigation.

ASA have designed a leaflet outlining how they can support people, what their ASP rights are and some general information on the process itself. ASA in partnership with the Adult Protection Social Work team are taking steps to effectively communicate this information, including via the ASA and <u>Aberdeen Protects</u> websites, to enable us to understand better the adult's experience at each touch point in the process. In addition, ASA has produced a specific ASP referral form which Council Officers can send directly to ASA from their own case management system. Work has been completed on the production of a short film which is being included in ASP training. This involves an individual who has been open to ASP and is a user of advocacy.

ABERDEEN PROTECTS WEBSITE

The Aberdeen Protects website was launched in September 2021 and provides a 'one stop shop' for all matters relating to public protection in Aberdeen, for both staff and citizens, including information about how to get help and support, resources for professionals, and details of events and training. In addition, a multi-agency ASP bulletin is circulated widely on a quarterly basis, providing relevant updates to staff.



Aberdeen Protection Committee Biennial Report 2022

Section 8

Challenges and areas for improvement

This biennial reporting period has coincided almost entirely with the Covid-19 pandemic. Aberdeen City, building on existing structures and processes, were able to quickly respond to the extremely challenging demands placed upon all partners.

Areas identified for improvement from the recent inspection are set out below:

- · Use of chronologies and risk management plans;
- · Recording of health role in ASP work;
- Timeliness of investigations and case conferences and use of IRD's and professional meetings in complex cases;
- · Use of independent advocacy;
- · Joint work with Police Scotland in cases involving criminality;
- · Involvement of front line staff in self-evaluation and improvement activity.

The priorities and actions contained in the existing APC improvement plan, which was developed from self-evaluation supported by the Improvement Service, were confirmed by the inspection report findings as being good practice. The additional areas for improvement identified have been incorporated within the existing Improvement Plan and delivered in partnership with the Care Inspectorate Link Inspector. Our move to use of Microsoft Dynamics 365 (D365) will significantly address many of the issues raised in the inspection findings – and we have shared this with the Care Inspectorate, who are very interested in following that journey.

Our own internal audit data highlighted some screening recording inadequacies where screening was not undertaken within required timescales and sometimes without appropriate explanation, (a lack of appropriate reasons for any delay were recorded in 7% of cases in 2019-20 and in 10% of cases in 2020-21). It was also noted that there was an inconsistent approach to signing off screening decisions by Senior Social Workers. These screening inconsistencies were highlighted in the options appraisal which led to the merging of the Adult Protection Unit and the Duty Social Work team to form the Adult Protection Social Work team. This has already resulted in greater oversight, consistency, and compliance in how the screening of ASP referrals is being managed with all Stage 1s being authorised by either a Senior Social Worker or the Adult Protection Co-ordinator.

There are a number of appropriate reasons why there may be no further action at the screening stage however we recognise that we need to ensure that these individuals continue to be safe and free from the risk of harm. Ensuring appropriate follow-up — whether at initial screening or at investigation stage — has been identified as an area for improvement in our Improvement Plan and we will modify our quality assurance framework to include those referrals which do not meet the 3-point test or which are deemed to be 'no further action'.

Internal audit had also highlighted some concerns relating to timescales for completion of the Stage 2 investigations. It is thought that this was the result of a changed operational process in 2019, however a subsequent revision in September 2021 has ensured that the three distinct stages of the ASP process are much clearer. There are now subsequently, a number of professionals meetings held within Stage 2 and it is hoped that the introduction of Initial Referral Discussions together with increased support for Council Officers will mean that investigations will be completed in a more timely manner.

Chronologies is another area which has been identified for improvement work as quality assurance has shown that chronologies are not always recorded, and where they are, the content is not of a consistent quality. Lead agency quality assurance activity in April 2021 showed that six out of 18 case files had a chronology recorded, and two out of six of these included appropriate content.

Looking forward

On 1st December 2021 the APC approved its over-arching <u>Strategy</u> for the period January 2022 to March 2024. This encompasses the below re-focussed Priorities. These are being delivered by progression of a related Improvement Plan (via which much of the work which commenced during the period covered by this Report, including the inspection findings, will continue to be taken forwards) – the delivery of these is being progressed by the APC's Sub-Committees.

STAKEHOLDER ENGAGEMENT

We commit to continue to develop appropriate mechanisms for effective communication:

- recognising how diverse our communities are, to ensure the 'voice' of all those we aim to support and protect is at the centre of all we
- ii) to raise awareness about ASP, so that staff and public recognise the risks of harm to vulnerable adults and know how to respond, report and connect to appropriate supports, and
- iii) to ensure we understand each other's roles, responsibilities and aims (including via sharing of updates and good practice across all partners' staff groups).

PERFORMANCE / QUALITY ASSURANCE FRAMEWORK

We will develop a robust Data Performance and Quality Assurance Framework, to enable us to:

- i) identify trends, areas for improvement and areas of good practice; and
- ii) establish a process for continuous improvement and ensure learning is embedded into practice.

This will enable us to deliver safe and effective services with improved outcomes for those at risk of harm.

LEARNING AND DEVELOPMENT

We will continuously improve ASP practice, learning and development by reaching all our people, ensuring effective support, preventative measures and protection of adults at risk of harm.

In addition, the monitoring and analysis of our ASP data and outcomes will be significantly enhanced in 2022 with the introduction of our new whole sector – children's and adults – database, D365 which will replace our existing CareFirst system. D365 has been designed by social work for social work in conjunction with other internal and external partners and will, amongst other things, make a significant improvement to the quality, consistency and transparency of our adult protection activities.

We will also ensure we maximise all opportunities for learning through our Learning Review Sub Committee. They continually monitor national and local cases from which further learning and improvements can be made and changes where appropriate implemented. [NB Learning Reviews were previously referred to as Case Reviews.]

PUBLIC PROTECTION - WIDER CONTEXT

The partnership is on a journey to further enhance the alignment of Child and Adult Support and Protection, taking cognisance of the interdependencies of ADP, VAW and Homelessness, although that list is not exhaustive. Furthermore, with the development of the Family Support Model, there are opportunities to further develop our strategy and operational delivery, recognising the potential for positive impact within communities and for our staff, both statutory and voluntary sector. The 'Family Support Model' will focus consistently on whole system early intervention and prevention, supported by coordinated multi-agency data and information management. This will inform commissioning, to ensure adequate provision of family support to address current and emerging risks, with arrangements having sufficient flexibility to enable an agile response to changing and emerging needs to children, young people and families. The applicability of these proposals to other public protection areas, including Adult Support and Protection is being actively considered.

NATIONAL ISSUES

These areas for improvement will also take cognisance of a number of national pieces of work. These include the implementation of the National Guidance for ASP and a number of other frameworks including guidance on Learning Reviews. Work is in hand to ensure our policies and procedures dovetail into these processes.

Aberdeen City is already in discussion with IRISS in relation to their publication of a national minimum dataset for ASP. We will be actively contributing to the development of this work, focussing on better outcomes for individuals.

Partners in Aberdeen have already contributed to the consultation of the National Care Service and we will continue to monitor closely developments aligned not only to Adult Support and Protection but also the wider public protection agenda. We are also very cognisant of the emerging risks arising from the challenges to the economy / cost of living, and are playing our part in the national response to aiding those fleeing crisis in other countries.



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ABERDEEN CITY COUNCIL

COMMITTEE	Communities, Housing and Public Protection
DATE	1st November 2022
EXEMPT	No
CONFIDENTIAL	No
REPORT TITLE	Tenant and resident engagement
REPORT NUMBER	CUS/22/248
DIRECTOR	Andy MacDonald
CHIEF OFFICER	Derek McGowan
REPORT AUTHOR	Derek McGowan
TERMS OF REFERENCE	1.1.1

1. PURPOSE OF REPORT

1.1 To advise the Committee of progress on tenant and resident engagement in the city.

2. **RECOMMENDATIONS**

2.1 That the Committee note the developing approach to tenant and resident engagement outlined in the report.

3. BACKGROUND

- 3.1 Tenant and resident engagement remains an intrinsic aspect of being a responsible landlord. Housing, Planning and Transport legislation all require a high level of engagement and consultation with local communities. With over 22,000 Council homes neighbouring privately owned properties, privately tenanted properties, and other socially rented properties it is important that we seek the views not only of those who call our houses home, but those who share common land and areas with us.
- 3.2 Aberdeen City Council has enjoyed the support of a strong tenant scrutiny panel, who for many years have helped us review our processes, identify improvements, and help us deliver them. Most recently this related to our estate and asset management procedures. Our approach to collaborating with our tenants has won numerous national awards, including from the Chartered Institute of Housing, Tenant Participation Advisory Service Scotland and the Tenant Information Service. Members of this group have been invited to

- present at National Tenant Participation Conferences and have travelled all over Scotland to promote their work to landlords and their tenants.
- 3.3 Aberdeen City Council has continued to evolve our tenant and resident participation strategy, with a greater degree of digital engagement now appreciated. We have the email addresses for over 50% of our tenants and this is increasing. Gov.Notify is used to send out relevant information monthly on issues like Fly Tipping, using Housing Online and Bonfire Night. At the last long term rent strategy setting exercise, over 1800 digital responses were received, more than were received through traditional means. This meant that meaningful consultation outcomes were able to be considered by Council as part of the budget discussion in March 2020. Importantly, through this exercise over 700 respondents expressed a desire to be more involved in tenant participation.
- 3.4 A tenant established Facebook based Multi Storey Network has around 1400 members and has improved both communication and community spirit, with all our mainstream multi storeys having their own page as well as a citywide page. This has enabled the Council and Partners to have material posted, for example information videos about Fire Safety, information on Resident Led Inspections and Community Led Walkabouts, and how tenants and residents can recycle furniture within their multi storey block. Wellheads New Build has also set up a Face Book Page to bring the community together. For the last four years the annual return on the charter report to our tenants has been digital with a paper copy provided through Newsbite.
- 3.5 The North East Tenants Residents and Landlords forum was established over 10 years ago Aberdeen City, Aberdeenshire and Moray Councils working with all the Housing Association. From members of this group we were able to work with other local housing providers to establish a Young Persons in Housing group. The initial work of this group has been to establish the views of young people in the city of their housing options. This complements the existing Citywide Sheltered Housing Group, the Citywide Multi Storey Group, both as strategic groups who want to work with the Council to improve the services they receive. This demonstrates our commitment to working with key communities to plan and deliver sustainable housing and communities.
- 3.6 This work with tenants and residents on Housing issues is complemented by ongoing engagement as required on important local issues such as education, roads and greenspace. Our aim is to ensure that local people continue to have the opportunity to influence local decisions and help improve the quality of their local environment. Often the most effective engagement can be done in local areas, through routine contact with tenants and residents. We have established procedures that have been reviewed post-pandemic and that are being re-energised through the new Housing and Support Officer role to ensure we continue to benefit from the views of local communities. Offering this personal interface allows residents to highlight these concerns with elected members and staff, and to gain commitment that issues will be addressed.

3.7 Community led walkabouts are an opportunity for local communities to meet with relevant Councillors, council staff and partner agencies in their area, and walk through the issues concerning them. Over the last year 16 of these have been held across the city, as follows:

Area	Number of events
Garthdee	2
Kincorth	2
Seaton	3
Tillydrone	3
George Street	1
Old Aberdeen	2
Hazlehead	1
Woodside	2

These have been led by the Director of Customer Services, and seen a wide range of partner agencies, Housing Associations and Council staff come together to meet with Councillors and residents in their area.

- 3.8 At the last Woodside Walkabout, five pupils from Woodside Primary School participated and brought a different dynamic to the walk, tying in with our aim to be a Child Friendly City. This will be rolled out across the city. These walkabouts give the Community the opportunity to tell us about their wishes for their own community areas, and brings the Council and our Partners into those communities. The Council's Target Operating Model includes key themes aimed at customer and community empowerment, and we can become not only a much more customer focussed organisation by listening to our tenants and residents through these events, but also be more transparent by informing our tenants and residents if we cannot do something and why. These events also provide an opportunity for us to visibly demonstrate our partnership working, for example it was great for the community to see Langstane Housing Association work with the Council to improve lighting, fencing and seating in an area of Seaton.
- 3.9 Resident led inspections follow a similar format but for multi-storey blocks. In addition to those listed above, the Property Factor, Cleaning Services and the Fire Service will be involved in these. Fire safety is critically important in our multi-storey blocks, and there are often issues raised through these relating to combustibles being left in buildings, and goods being left that may block the corridors in the event of a fire. In the last twelve months resident led inspections have been undertaken in all the main stream multi-storey blocks in the city, and continue to be carried out every six months. A video was recently made of a resident of Thistle Court participating in a Resident Led Inspection, which we have promoted to encourage tenants and residents to get involved in their own multi storey block.
- 3.10 One of our Housing & Support Officers developed an App which Officers can download to their mobile device to significantly improve the recording of issues raised during both community walkabouts and resident led inspections, with drop down boxes for recording issues, automatic attachment of

photographs to evidence the concerns raised. This means that an action plan is automatically generated and recorded, with improved efficiency. The issues raised normally include roads, green space, antisocial behaviour and the cosmetic condition of properties. This action plan can be emailed to all relevant services, community representatives, and posted on local Notice Boards in Multi Storeys. This ensures effective feedback and can be updated to show the community what has been done. Participatory Budgeting will be used to develop the suggestions from the Community, in line with our commitment to ensure 1% of budgets are decided by participative means.

- 3.11 This App has achieved national recognition for the Council with the Officer who developed it presenting to Supporting Communities Northern Ireland; presenting to North East Tenants, Residents and Landlords Together; running a workshop at Tenant Participation Advisory Service National Conference; presenting as a key speaker at the Tenant Participation Advisory Service workers conference and receiving the runner up award for Tenant Participation Officer of the year from the Tenant Participation Advisory Service. The Housing & Support Team have been shortlisted for the Chartered Institute of Housing Team of the Year for using this app to engage with our tenants and residents.
- 3.12 As we move forward, our intention is to identify a member of the Extended Corporate Management Team as lead for each of the 13 wards in the city. They will organise and lead on four community led walkabouts a year in each ward. A lead service will be identified depending on the issues in that ward. The lead service will appoint an appropriate officer to organise the walkabout send out invitations and contact community representatives to identify areas for improvements or concerns. Housing and Support Officers and our Communities Team will be responsible for identifying local tenants and residents to participate in these walkabouts, including liaising with local schools to encourage pupil participation. Resident Led Inspections will be led by Locality Inclusion Managers, supported by Senior Housing & Support Officer and undertaken by the local Housing and Support Officer. These will take place every 6 months in all main stream multi storey blocks.
- 3.13 This approach will not only significantly increase the opportunities to work with tenants and residents on issues which affect them but also increase ownership by the Council's senior management team for community empowerment. These events will be inclusive of all communities and publicised widely. It is intended to purchase 6 tablets 2 for each locality for tenants and residents to use at these Community Led Walkabouts and Resident Led Inspections. Tenants and residents will be encouraged to use these to record issues raised during the walkabouts and inspections with the aim of improving participation and empowerment in each community. A page on Aberdeen City Council web site will be developed for Community Led Walkabouts and Resident Led Inspections showing the dates in advance but also the improvements that have been made.
- 3.14 The recently approved Target Operating Model 1.2 includes a Prevention and Early Intervention strategy that sets out key aims for improving community

empowerment and independence, and ensuring a stronger customer voice in decision making. Our engagement through tenant and resident participation is a key strand of this approach and will complement Community Planning Aberdeen's developing Community Participation Strategy.

4. FINANCIAL IMPLICATIONS

4.1 There are no direct financial implications arising from the recommendations of this report.

5. LEGAL IMPLICATIONS

5.1 There are no direct legal implications arising from the recommendations of this report

6. ENVIRONMENTAL IMPLICATIONS

6.1 There are no direct environmental implications arising from the recommendations of this report.

7. RISK

Category	Risks	Primary Controls/Control Actions to achieve Target Risk Level	*Target Risk Level (L, M or H) *taking into account controls/control actions	*Does Target Risk Level Match Appetite Set?
Strategic Risk	Failure to consult and engage with local communities.	Promotion of community led walkabouts and resident led inspections.	L	Yes
Compliance	Failure to comply with relevant legislation requiring engagement and consultation.	Relevant processes in place.	L	Yes
Operational	Failure to understand local issues and address them	Relevant processes in place.	L	Yes

Financial	Potential for costs to arise through inspection and walkabouts.	Budget management.	L	Yes
Reputational	Failure to address local concerns and issues, and to meaningfully engage and consult.	Ongoing use of walkabouts and inspections, in addition to other established methods such as Community Councils.	L	Yes

8. OUTCOMES

COUNCIL DELIVERY PLAN	
	Import of Poport
	Impact of Report
Aberdeen City Council Policy Statement	 Explore options to make travel to school safer and more child-friendly and to reduce vehicle congestion at school gates. Work with communities, review the management of council-managed open spaces to create more sustainable and safer green areas and open spaces and develop Community Environmental Improvement Fund, for communities to access, to implement their own small-scale local environmental improvements. Establish a task force to identify disused and derelict land and buildings and help bring them back into use, including investigating the purchase and conversion of upper floors along Union Street. Work with communities to establish trusts, community enterprises, charities or other entities that support community empowerment and community wealth building. Increase the amount of land available for community market gardens, orchards and allotments for community food growing and support the expansion of community food pantries. Aim to devolve at least 1% of the council's annual budget to communities, allowing them

	 to decide their spending priorities through participative budgeting. Investigate options to install more outdoor gyms in the city. Improve community safety by continuing to invest in the Council's Anti-Social Behaviour Investigations Team, in City Wardens, in community safety projects.
Aberdeen City Local Outcom	me Improvement Plan
Local Outcome Improvement Plan	The proposals in this paper impact on the four pillars of the Local Outcome Improvement Plan: • Economy • People (Children and Young People) • People (Adults) • Place
Regional and City Strategies	Regional Skills Strategy Local Housing Strategy Customer, Digital and Data Strategy Prevention and Early Intervention Strategy

9. IMPACT ASSESSMENTS

Assessment	Outcome
Integrated Impact Assessment	Stage 1 IIA completed.
Data Protection Impact Assessment	Not required

10. BACKGROUND PAPERS

None.

11. APPENDICES

None.

12. REPORT AUTHOR CONTACT DETAILS

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ABERDEEN CITY COUNCIL

COMMITTEE	Communities, Housing and Public Protection
DATE	1 November 2022
EXEMPT	No
CONFIDENTIAL	No
REPORT TITLE	Warm Spaces
REPORT NUMBER	CUS/22/239
DIRECTOR	Andy MacDonald
CHIEF OFFICER	Derek McGowan
REPORT AUTHOR	Margaret Stewart
TERMS OF REFERENCE	1.1.1

1. PURPOSE OF REPORT

1.1 This report shares the progress made on the Warm Spaces initiative by the Library and Community Learning service.

2. RECOMMENDATIONS

That the Committee:-

2.1 Note the support being offered to communities through the Council's Warm Spaces initiative.

3. CURRENT SITUATION

- 3.1 Over the last year the cost of energy has risen significantly. The energy price cap, set by OFGEM, exists to protect consumers by limiting the cost of a unit of energy. In October 2021, the energy price cap rose by 12%, followed by a 54% increase in April 2022. On the 1st October it was forecast to rise by a further 80%.
- 3.2 To mitigate against these increases, the Scottish and UK Governments have made a series of protections available to both private and business consumers. These are listed in Appendix 1. Aberdeen City Council has moved to further support residents with the disbursement of £1.1m to tackle food and fuel poverty in the city.
- 3.3 With growing fuel bills contributing to the cost of living, there is an opportunity to ensure that the Council's already heated buildings can welcome individuals, families, and communities to stay warm, share space and potentially so much more.
- 3.4 Warm Spaces is a now recognised term for public spaces where people have a choice of where they go and what they do while keeping warm. Warm

Spaces are welcoming safe spaces offering valuable and varied facilities unique to the venue. The promotion of Warm Spaces complements commissioned work delivered by Community Food Initiatives North East (CFINE) and Scarf by promoting and connecting people to resources, information and benefits to reduce the cost of heating homes this winter.

- 3.5 Our Library and Community Learning national bodies are also invested in Warm Spaces and it is hoped that approaches, successes and resources can be shared with colleagues across the sector regionally and nationally through; The Association of Public Libraries Scotland (APLS) and Scottish Library Information Council (SLIC) and The Northern Alliance, Regional Improvement Collaborative.
- 3.6 A directory of Warm Spaces that welcomes people, providing spaces to come and stay warm without judgement is available on the Aberdeen City Council Help with the Cost of Living web pages. The first of these venues to offer themselves as Warm Spaces are our Central and 16 Community Libraries and four Learning Centres.
- 3.7 These spaces are already being promoted and are available, and our aspiration is that the directory will grow and evolve as more services and organisations contribute and promote their spaces for public use. Invites to be involved in Warm Spaces as hosts or to provide information and experiences have been shared across community, cultural and health partnerships. Warm Spaces will be promoted in a range of languages, to raise awareness and encourage as many people and communities as possible to use the spaces, including those more likely to experience poverty. In doing so, we are promoting these as 'Welcoming, Respectful, Supportive' spaces, as set out in Appendix 1.

Libraries

- 3.8 Our Central and 16 community Libraries remain some of the few public spaces which are free and open to all, already offering a warm and inclusive welcome to all who come through our doors. Library spaces have always been non-judgemental, offering universal free access to:
 - print and digital resources
 - programmes of events and activities to inspire people of all ages and abilities
 - free access to PC/internet and wi-fi is available alongside a small number of sockets for charging devices.
 - free period products, including reusable products, in partnership with CFine
 - free toothpaste/brushes for under 5's in partnership with Childsmile
 - all libraries have TV licenses to allow customers to access live TV on iPlayer etc on devices/PCs if they don't have their own TV licence.

3.9 With support from volunteers and partners including Community Learning and 3rd sector the existing Libraries offer can be extended to offer more targeted activities and workshops for example covering budgeting, food growth, cooking, knitting/sewing etc. Larger libraries could host pop-up stalls with warm clothing etc to take away.

Community Learning and Development

- 3.10 Community Learning staff are working with communities and partners in piloting a Warm Spaces approach at four Learning Centres, starting with: Cummings Park, Rosemount, Kincorth and Seaton. The learning from setting up the successful Ukrainian pop-up community centre has informed the Warm Spaces approach, with the first four centres opening and tested as Warm Spaces from October 2022. Leased Community Centres are also encouraged to open as Warm Spaces with many already having published their offer.
- 3.11 The Community Learning and Development team is working to develop the capacity of willing local community groups to contribute to the success of Warm Spaces. The ambition of all centres would be to operate over as much of the day and evening as possible, and seven days a week, however initially Monday to Thursday is seen as more feasible to test capacity and take up. Where there is a need to adapt our Warm Spaces offer we will look to do so.
- 3.12 Partnerships between Community Learning, ACC and NESCol have been utilised to match and support students to volunteer at community Warm Spaces. Community Learning will continue to develop the Warm Spaces volunteering offer to include; volunteer recruitment with further ideas to develop a Warm Spaces volunteer pool, identifying and matching training needs, developing volunteering and community action beyond this winter's Warm Spaces.
- 3.13 Warm Spaces present multiple positive opportunities to improve outcomes for individuals, families and communities in Aberdeen. Our community and cultural services offer so much more than a warm space, with many opportunities for exploration across our cultural and library collections to spark imagination, resource to develop new skills and access to physical and digital information. Our Community Learning staff are in the heart of communities supporting many initiatives including volunteer roles that build community capacity and enhance individuals' employability skills. Warm Spaces' success will be measured not just on the number of people who turn up but also the connections made, the learning opportunities accessed and impacts on individuals' health and wellbeing as a result of maximising resources and working collaboratively.
- 3.14 Communication inviting colleagues, partners and services to host, contribute, resource and promote Warm Spaces has been shared across health and wellbeing, community, employability, education, culture, faith and 3rd sector networks, maximising the connections points for services, individuals families and communities to access and build on the diverse Warm Spaces offer across the city.

3.15 As we head further into winter, we will have a better understanding of the demand on Warm Spaces and on the resources required to best support the people who access them. Warm Spaces presents opportunities to listen to and better understand individuals and communities; needs, interests and ambitions and enable them to access the right services to progress these.

4. FINANCIAL IMPLICATIONS

4.1 There are no direct financial implications arising from the recommendations in this report.

5. LEGAL IMPLICATIONS

5.1 There are no direct legal implications arising from the recommendations in this report.

6. ENVIRONMENTAL IMPLICATIONS

- 6.1 The current Warm Spaces initiative will have minimal environmental impact. Warm Spaces will maximise use of already open and heated buildings, dependent on demand there may be an increase in the use of electricity as more people come to use library and community centres to plug in devices and more fully use facilities. Additional energy costs for Aberdeen City Council buildings will be monitored throughout the Warm Spaces initiative.
- 6.2 It is important that Warm Spaces support people to be warm in their own homes, and information and support on how to do so in a way that reduces environmental impact will be encouraged and promoted across Warm Space venues.

7. RISK

Category	Risks	Primary Controls/Control Actions to achieve Target Risk Level	or H) *taking into	*Does Target Risk Level Match Appetite Set?
Strategic Risk	Risk of not fully using the opportunity to support those in most need	Communication plan that includes a wide range of partners across: communities, H&SCP, Education	L	Y
Compliance	Risk of not meeting statutory requirements.	The offer of warm spaces provides evidence that statutory requirements are met and are documented in statutory plans such as		Y

Operational	Staff and volunteer capacity	the Child Poverty Action Plan and Equalities Outcome Mainstreaming Report. Monitor uptake carefully to determine any remedial action required. Apply guidance to settings as required	L	Y
Financial	No risks identified		L	Y
Reputational	Risk of being considered as not helping to mitigate the increase in household energy costs being experienced across the city.	The provision of warm spaces is an important mitigation for households, along with £1.1m financial support already committed to communities, and ongoing work such as free school meals, school clothing grants, heat and power network, and financial advice.	L	Y
Environment / Climate	No significant risks identified			

8. OUTCOMES

COUNCIL DELIVERY PLAN		
	Impact of Report	
Aberdeen City Council Policy Statement	The proposals within this report support the following policy statement:	
	 Continue to promote diversion activities for youths and adults in our city with enhanced focused on our three locality areas. 	
	 Commission an urgent report, to identify how the Council could further support struggling and vulnerable people throughout this crisis. Ensure the Council follows best practice as a corporate parent to get the best outcomes for looked-after young people, those in kinship 	

	care and those with additional support needs such as autism, developmental disorders or mental health problems - Work with communities to establish trusts, community enterprises, charities or other entities that support community empowerment and community wealth building - Support voluntary groups and other partners that help people tackle loneliness and isolation
Aberdeen City	y Local Outcome Improvement Plan
1. No one will suffer due to poverty by 2026	Warm Spaces will offer some relief to the cost of heating homes, venues on the Warm Space directory will be encouraged to provide information on financial support and benefits as well as information on insulating homes.
11.2 Increase opportunities for people to increase their contribution (volunteering) to communities by 10% by 2023.	Warm Spaces will provide opportunities for volunteering across libraries and community venues and seeks to build capacity to maintain and extend opening hours and venues.
D	<u> </u>
Regional and City Strategies	Community Learning and Development Plan 2021- 2024
	Culture Aberdeen - A Cultural Strategy for the City of Aberdeen 2018-2028

9. IMPACT ASSESSMENTS

Assessment	Outcome
Integrated Impact Assessment	Stage 1 IIA complete.
Data Protection Impact Assessment	Not required
Other	None

10. BACKGROUND PAPERS

10.1 Operational Delivery Committee 31st August 2022- Cost of Living report

11. APPENDICES

11.1 Appendix 1: Warm Spaces Aberdeen – Welcoming, Respectful, Supportive

12. REPORT AUTHOR CONTACT DETAILS

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Warm Spaces Aberdeen – Welcoming, Respectful, Supportive

Our Warm Spaces will be welcoming

Everyone will find a safe, supportive environment.

Our Warm Spaces will respect your privacy and dignity

Aberdeen's Warm Spaces are non-judgmental, welcoming places. Staff and volunteers will be available to assist you, but if you prefer to enjoy the space without interruption this will be respected.

Our Warm Spaces will support you

If you have specific needs we will work to address them with you, this may include us working with or introducing you to partner agencies who can offer the appropriate support. We will only share your information with your permission, unless safeguarding policies require us to.



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