



## RISK, AUDIT AND PERFORMANCE COMMITTEE

<b>Date of Meeting</b>	19 <sup>th</sup> September 2023
<b>Report Title</b>	ASP Inspection 2022 - Update
<b>Report Number</b>	HSCP.23.061
<b>Lead Officer</b>	Claire Wilson, Chief Officer Adult Social Work, HSCP
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<b>Consultation Checklist Completed</b>	YES
<b>Appendices</b>	n/a

### 1. Purpose of the Report

- 1.1. To update members about progress regarding Next Steps following the Joint Inspection of Adult Support and Protection in Aberdeen which was published in June 2022. [[Joint inspection of adult support protection in the Aberdeen City partnership \(careinspectorate.com\)](https://www.careinspectorate.com/joint-inspection-of-adult-support-protection-in-the-aberdeen-city-partnership)]

### 2. Recommendations

- 2.1. It is recommended that the Risk, Audit and Performance Committee:
  - a) Note the update provided below which gives assurance regarding Next Steps following the inspection of ASP in Aberdeen published in June 2022.

### 3. Summary of Key Information

- 3.1. The findings of the Joint Inspection Report on Adult Support and Protection in Aberdeen, as published on 21<sup>st</sup> June 2022, and related Next Steps, were provided to the Committee on 9<sup>th</sup> August 2022. This report provides an update on the Next Steps.
- 3.2. The inspection programme was led by the Care Inspectorate in collaboration with Her Majesty's Inspectorate of Constabulary Scotland (HMICS) and



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Healthcare improvement Scotland (HIS). The inspection focused on key processes and leadership (see national [quality indicator framework](#)). The key activities included submission of a short position statement, submission of supporting evidence under specific themes, a case file audit and a staff survey across social work, health and police, which was completed by 327 staff across the multi agency partnership.

3.3. The main findings of the inspection were as follows:

- Our **Key Processes** are effective, with areas for improvement which are outweighed by clear strengths supporting positive experiences and outcomes for individuals;
- Our **Strategic Leadership** is very effective, demonstrating major strengths in supporting positive experiences and outcomes for individuals.

3.4. Key Strengths were identified as:

- The new Adult Protection Social Work Team undertaking collaborative and effective screening of referrals;
- Communication and information-sharing, at every stage of the process;
- Our commitment to joint learning and development;
- Our Vision being well embedded, with a strong culture of strategic change and improvement; and
- Our user engagement strategy and initiatives – including seeking feedback from users at the end of the process, and the Adult Protection Committee's User Forum.

3.5. Priority Areas for Improvement were identified as:

- Quality of chronologies and protection planning (albeit the inspectors noted that we have well-designed tools and templates in place);
- Length of time taken to complete some investigations and case conferences;
- Lack of consistent and accurate recording by Health staff of their involvement in ASP;
- Need for more adults at risk to access independent advocacy; and
- Need to develop multi-agency evaluation approach, and better involve staff in change and improvement work.

It should be noted that all of these issues had previously been identified as areas for improvement, through local quality assurance and self evaluation work, and related activity had been incorporated into the Adult Protection Committee (APC) Improvement Plan.



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- 3.6. The following Next Steps were identified, and related update information is provided:

**Next Step 1:** *Following receipt of the final published report, the APC will review its Improvement Plan in light of the detailed findings. This is required to be submitted to the Care Inspectorate by 3rd August 2022.*

Update: The APC reviewed its Improvement Plan to ensure that areas for improvement identified in the inspection were clearly identified as priorities therein. This review was progressed in collaboration with the Care Inspectorate Link Inspector on the APC, and was 'formally' submitted to the Care Inspectorate as required,

**Next Step 2:** *Progress in relation to the areas identified for improvement will be overseen by the Care Inspectorate Link Inspector, who is a member of the APC.*

Update: Work has been progressed in relation to the areas for improvement, by the relevant APC Sub Committees, with regular updates being provided to the APC (including the Link Inspector). All actions have either been completed or are being actively progressed towards completion, albeit national work in relation to chronologies, which it was hoped would feed in to local improvement work, is still at an early stage.

**Next Step 3:** *A session has already been held with Council Officers to thank them for their engagement and involvement in the inspection process, and to advise them of issues which have emerged as a result of our own quality assurance as well as queries and issues raised by the inspectors during the course of the inspection.*

Update: Regular Council Officer peer support sessions continue to be held to consider specific issues including those which derive from the APC Improvement Plan where these relate to practice.

**Next Step 4:** *It is intended to hold a multi agency session to update staff across the partnership about the findings of the inspection and our approach going forwards in terms of addressing areas for improvement.*

Update: The APC hosted two multi agency 'Moving Forwards Together' sessions in October and November 2022 for this purpose – these were attended by over 50 members of staff in total, and received very positive feedback.



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### **4. Implications for IJB**

#### **4.1. Equalities, Fairer Scotland and Health Inequality**

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

#### **4.2. Financial**

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

#### **4.3. Workforce**

There are no direct workforce implications arising from the recommendations of this report. Staff will be involved on an ongoing basis in driving forward required improvements.

#### **4.4. Legal**

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

### **5. Links to ACHSCP Strategic Plan**

#### **5.1. This report links to the Strategic Plan 'Caring Together' Strategic Aim:**

Strategic Priority: Undertake whole pathway reviews ensuring services are more accessible and coordinated

Programme / Project: Implement the recommendations from the current Adult Support and Protection inspection

### **6. Management of Risk**

#### **6.1. Identified risks(s)**

Risk that an essentially positive inspection report leads to complacency in delivering high quality operational services and driving forwards improvement.



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This risk is being mitigated by continual oversight by the APC and accountability of the members thereon in undertaking duties and responsibilities.

### **6.2. Link to risks on strategic or operational risk register:**

This report links to the below from the IJB Strategic Risk Register as at May 2023:

#### Risk 4

Cause: Performance standards/outcomes are set by national and regulatory bodies and those locally-determined performance standards are set by the board itself.

Event: There is a risk that the IJB, and the services that it directs and has operational oversight of, fails to meet the national, regulatory and local standards.

Consequence: This may result in harm or risk of harm to people.

### **6.3. How might the content of this report impact or mitigate these risks:**

The findings of the inspection were overall very positive. Progression of work to address areas identified for improvement is close to completion and is being monitored by the APC. The risk is therefore low.