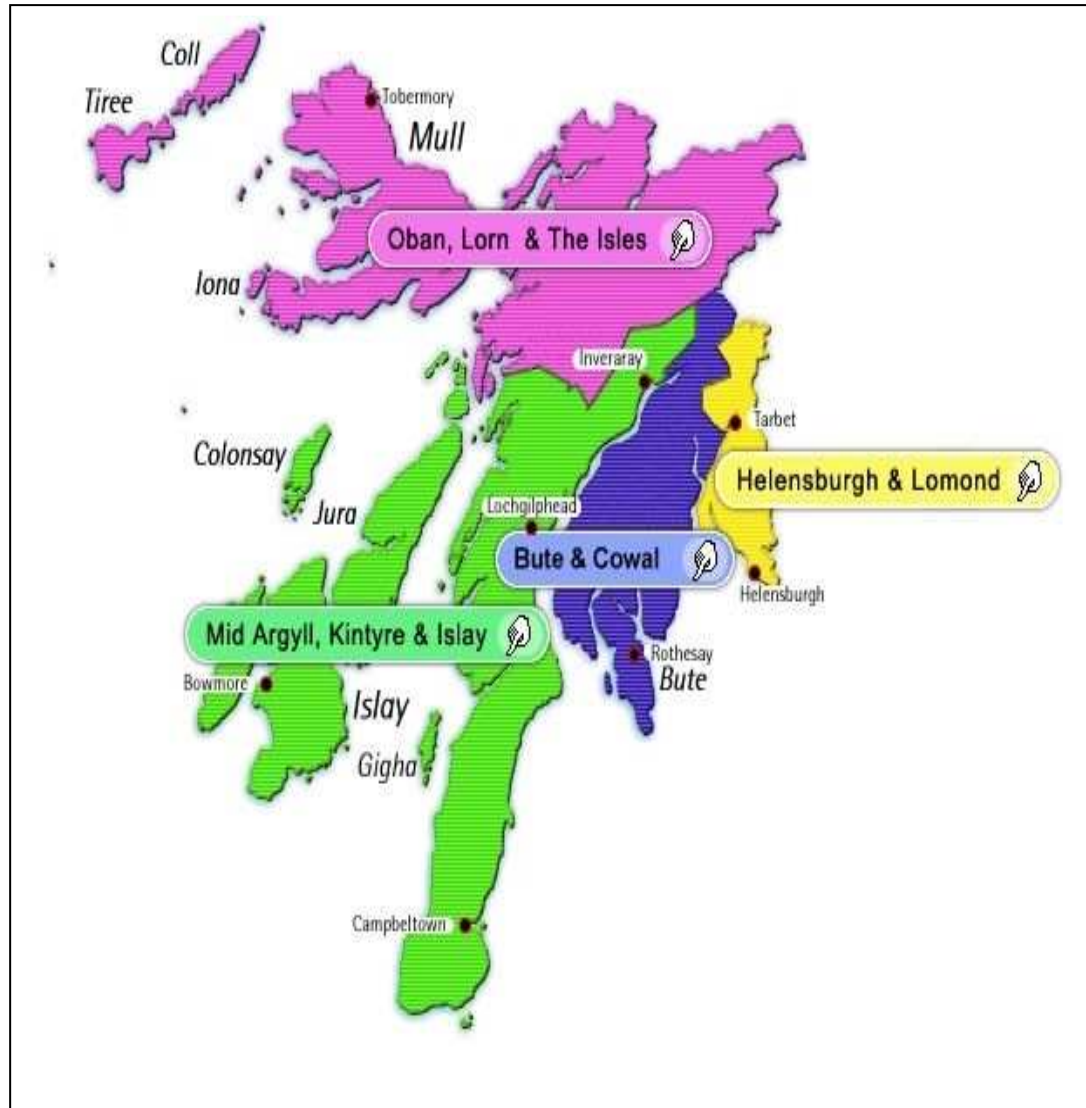


**Act  
against  
harm**

Argyll and Bute Adult Protection Committee



## Argyll and Bute Adult Protection Committee - Biennial Report April 2010 – March 2012



## **CHAIRMAN'S FOREWORD**

This is my second Biennial Report as the Independent Chairman of the Argyll and Bute Adult Protection Committee. My first report covered the period from April 2008 to March, 2010. This report covers the period from April 2010 to March 2012.

My message in my first report was essentially, "We are started". My message of this report is more complex. It is, "We are established; we have made much progress but we know there is more progress still to be made." Delivering robust protection to all adults at risk of harm in Argyll and Bute is still to some extent "work in progress"; it probably always will be!

### **Referrals**

Procedures for identifying and referring adults at risk of harm and for dealing with them when they are referred have been developed. These procedures are often being well observed within the Statutory and non-Statutory Agencies. This is not to say that implementation is perfect but the weaknesses are identified and there are plans to improve implementation. The full implementation of these procedures in all parts of all the agencies will require some considerable behavioural change by some. The Committee will be monitoring the achievement of that change closely.

However, I have concerns that there are many adults in Argyll and Bute who are at risk of harm but who are not referred.

I am concerned that the number of referrals coming from most non-Police sources is less than I would have expected.

I am also concerned that referrals from our islands and very remote mainland areas are very low indeed. In these close communities, it is very difficult for professionals to fulfil their responsibilities and refer adults who are at risk; they may well be a close friend or neighbour of the victim – or even of the perpetrator – but they owe it to all to allow their professionalism to shine through. The Committee will be monitoring this position closely.

The majority of referrals have come from Strathclyde Police. Most result in no further action under Adult Support and Protection (ASP) legislation. However, very importantly, these referrals mean that many vulnerable adults are "brought into the system" and are offered support from one agency or another, even although it is not under ASP legislation. Strathclyde Police are to be congratulated on how they have embraced the legislation.

Importantly referrals are increasing rapidly. This is good news. Unless adults at risk are referred, help cannot be offered.

## **Awareness**

Clearly there is a way to go yet in getting the message about the provisions of The Act across not just to the general public but also to professionals who see vulnerable adults in the course of their work. We have now provided training, at various levels, to 1386 people in Argyll and Bute. I believe that the organisations in which these people work need to reinforce the notion that it is the responsibility of all professionals in all the agencies to identify adults at risk of harm and also to follow the procedures for referring these adults at risk.

We have also taken a number of initiatives to make sure that the 90,000 or so people who live in Argyll and Bute are aware of the provisions of the Act. There are posters and handbills around. We have also asked the many local newspapers in Argyll and Bute to help us get the message across. I am grateful to them for their ready co-operation.

Delivering the message to the public locally is very inefficient. It would be much more efficient – and much more effective if this was done nationally. I therefore encourage the Scottish Government act to raise awareness of the provisions of The Act with the public. I was very pleased that we were able to join together with a number of other APCs mostly in the West of Scotland, under the leadership of East Renfrewshire APC, to commission an advertising campaign on STV to significant effect. Such initiatives, however, do not compensate for the lack of national awareness raising campaigns using all the appropriate media.

## **Argyll & Bute Council**

Argyll and Bute Council is the lead Agency for the implementation of the legislation. I am glad that the Council has maintained the budget allocation for Adult Protection. “It is important to note, however, that this is not the only resource committed to Adult Protection in Argyll and Bute. Many front line Social Work staff commit a lot of time to Adult Protection. There is a huge amount of Police time devoted to Adult Protection. Likewise NHS Highland commits substantial resources to Adult Protection – as do many non-Statutory agencies.” However, as the numbers of adults referred continues to rise, the time will come when it will not be possible to deliver adult support and protection within the current modest resources.

As Chair of the APC, I am a member of Argyll and Bute Council’s Child and Adult Protection Chief Officer Group – CAPCOG. I am grateful to my colleagues on CAPCOG for their encouragement and for their well-prepared challenge; their encouragement and challenge help my Committee ensure provisions are in place for adults in Argyll and Bute who are at risk to be offered support and protection.

## **Appreciation of those who deliver**

Importantly, I am grateful to the hundreds of professionals across Argyll and Bute who have reacted to the Act's provisions. Because of their reactions, hundreds of adults in Argyll and Bute who were at risk are now not at risk.

My Committee holds its meeting all around Argyll and Bute, which is only right in such a massive geographical area. My thanks go to my Committee colleagues for undertaking yet more long journeys – even although long journeys are the stuff of working in Argyll and Bute. After each meeting, the Committee meets with local staff to understand how adult protection is being addressed on the ground and to understand how the agencies are working together at the local level. I have been extremely impressed at how professionals from the various agencies work enthusiastically and closely together. I would be happier if their close co-operation was better documented.

## **Ronnie McIlquham**

Since 2009, Ronnie McIlquham, Area Manager, Adult Protection has made a huge contribution to Adult Support and Protection in Argyll and Bute – its introduction, development and operation. He retires in August, 2012. He has inspired hundreds of people to embrace the agenda and, very importantly, has set out clear plans for the way forward now that we have not just “started the journey” (as reported in my last report) but have “identified the issues we need to address” as set out in this report. I am very grateful to Ronnie for the huge contribution he has made.

He will be a very hard act to follow. The Committee and I acknowledge his huge contribution.



Bill Brackenridge

Independent Chair

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## 1. The Argyll & Bute Adult Protection Committee

***'Each Council must establish a committee'*** S42 (1) ASP(S)A 2007

The Members of the Argyll & Bute Adult Protection Committee are:

Bill Brackenridge		Independent Chair	Chairman
Ronnie McIlquham	Area Manager Adult Protection	Argyll & Bute Council	Member
John Dreghorn	Project Director (Mental Health Modernisation)	NHS Highland	Member
Barry McEwan	Superintendent	Strathclyde Police	Member
Anne-Lise Dickie	Professional Lead Learning Disability	NHS Highland	Member
Jim Robb	Head of Adult Care	Argyll & Bute Council	Member
Jim Littlejohn	Service Manager Operations	Argyll & Bute Council	Member
Allen Stevenson	Service Development Manager/ Lead Officer	Argyll & Bute Council	Member
Katrina Sayer	Project Co-ordinator	Argyll Voluntary Action	Member
Jon Belton	Service Manager – Criminal Justice	Argyll and Bute Council	Member
Douglas Whyte	Service Officer Homelessness	Argyll & Bute Council	In Attendance
Scott Rorison	Advocacy Manager	Lomond & Argyll Advocacy Service	In Attendance
Peter Robertson	Senior Solicitor	Argyll & Bute Council	In Attendance

There is a standing invitation to the Procurator Fiscal Service, The Public Guardian's Office, the Care Inspectorate and The Mental Welfare Commission for Scotland to attend meetings of the Argyll & Bute APC.

The APC wishes to offer their thanks to the following members who left the committee during this reporting period : Supt Raymond Park (Strathclyde Police), DI David Tassie (Strathclyde Police) and Anne Helstrip (NHS Highland).

## **2. Introduction:**

The Argyll and Bute Adult Protection Committee (APC) continues to meet on a quarterly basis to deal with the many and varied challenges of taking forward the adult protection agenda in Argyll and Bute. As noted in my first biennial report the Committee continues to strive for a consistent approach to adult protection across the extended geography in Argyll and Bute and the islands.

To allow the APC and its work to be visible to staff throughout the area the Committee now holds its quarterly meetings across Argyll and Bute. Thus the Committee holds its meetings, on a rotating basis, in Oban, Lochgilphead, Dunoon and Helensburgh.

The Committee conducts its business in the morning and then meets with local staff in the afternoon of the same day. These afternoon meetings have become a key interface with staff allowing the Committee to share key aspects of its deliberations and plans under discussion. Thereafter the meeting is opened to staff comment on their experience of 'the front line' and debate local issues and demands facing front line staff. Feedback from participants at the meetings indicates that they are welcomed by staff and the Committee has appreciated the direct feedback from staff on the challenges facing them in dealing with the complexities of the follow up of adult protection concerns.

To further develop adult protection, the Committee, following its last self-evaluation day, decided to set up a more localised system for the development and management of adult protection. Arrangements are underway to set up Adult Protection Development Forums in Oban Lorne and the Isles, in Mid-Argyll Kintyre and Islay, in Cowal and Bute and in Helensburgh and Lomond. These Groups, initially convened by Area Managers from Social Work will have representation from local managers from the key partners and will take forward the agenda in ways that are more responsive to local needs. The Chair of each Forum will be 'in attendance' at the APC meeting convened in their area/locality and the Agenda for that meeting will, as a primary agenda item, address issues arising from the report of the local Forum. It is the committee's expectation that through such mechanisms the challenge of developing a consistent approach across Argyll and Bute will be addressed.

The Committee has one sub group the Training and Policy sub group which meets on a quarterly basis. With the change in arrangements noted above the role of this group will change to be involved in the development of integrated training plans for the public sector agencies with locality training needs/developments being followed up within the development Forums in localities.

The Committee continues to receive the critical support of the Argyll and Bute Child and Adult Protection Chief Officers Group (CAPCOG) who bring commitment to the development of joint working arrangements between public and third sector partners in addressing the challenges of adult protection. CAPCOG meets on a quarterly basis and it also meets with local managers after

convening its business session. Furthermore, through CAPCOG, the Adult Protection Committee has developed useful links to the Child Protection Committee and to the Alcohol and Drugs Partnership.

The Committee is confident that in our approach to the follow up of adult protection concerns that the 'adult' is at the heart of decision making and where the 'adult' lacks capacity that any 'proxy' is involved in deliberations and decision making. These arrangements, and with the provision of advocacy, leads us to the view that the principles of the Act are complied with.

The Committee is clear that, with the consent of the 'adult', that carers and other representatives are involved in the process of decision making about adult protection responses.

The Committee continues to seek other ways of consulting with service users and carers about the development of adult protection. The independent service user evaluation carried out by the Lomond and Argyll Advocacy Service (Page 10) also gives key information on the 'adult's' experience as subject of adult protection referrals which has been critical to the development of our service in Argyll and Bute.

A recent consultation with adults with learning disabilities has led to the development of a proactive 'STAY SAFE' project being taken forward within the learning disabled communities in Argyll and Bute.

This being noted the Committee continues to identify the need for improvement in this area but is clear that involvement to be meaningful has to be within structures which enable understanding of the issues by users and carers and that this may be best developed within the Development Forum responsibilities.



### 3. Users and Carers

*A public body must have regard to  
and  
‘any views of’*

*‘the adult’s ascertainable wishes and feelings’  
‘the adult’s nearest relative...’  
‘any primary carer, guardian or attorney...’*

S2 (b) & (c) ASP(S) A 2007

In the Minister’s letter following the publication of the 2008 – 2010 biennial report the issue of engagement of service users and carers was identified as an on-going challenge. In the intervening period the Committee has continued to wrestle with the challenges of developing the meaningful involvement of, and dialogue with, service users and also with their carers.

#### **Inquiries**

Our self-assessments lead the Committee to believe that in our approach to inquiring into adult protection concerns, the ‘adult’ is at the heart of decision making and where the ‘adult’ lacks capacity that any ‘proxy’ is involved in deliberations and decision making.

The operational guidance for Argyll and Bute provides for a default to the ‘adult’ being present at case conferences and that where the adult is not present that the reason for this noted. Where necessary arrangements are made to maximise the contribution of the adult identified as being ‘at risk of harm’. Case Conference chairs have responsibility for ensuring that service user involvement in case conferences is maximised. The APC’s ability to report on the effectiveness of this guidance will be improved following the upgrading of electronic reporting systems adopted in April 2012.

The Argyll and Bute guidance also provides for the default that advocacy is offered to all service users who are followed up through adult protection investigations and any reason for non-involvement is noted. Again this will be reported in detail in the 2012 – 2013 Annual Report and thereafter in the biennial report for 2012 - 2014.

The Committee is clear that, with the consent of the ‘adult’, carers and any other representatives the adult may choose are involved appropriately in the process of adult protection case conferences.

## **Service user evaluation**

Following discussion with West Dunbartonshire Council and the Lomond and Argyll Advocacy Service (LAAS) a service user evaluation survey was designed and carried out with 'adults' who had been the subject of adult protection investigations which went to Case Conferences. There follows a report by the Manager of LAAS into the outcomes noted from this survey – thereafter comment by the APC.

## **Independent Advocacy**

Section 6 of The Adult Support & Protection (Scotland) Act (2007) places a duty on the local authority, if it considers that it needs to intervene in order to protect an adult at risk of harm, to consider the provision of appropriate services, including independent advocacy services, to the adult concerned. Independent advocacy services in Argyll and Bute are provided by Lomond and Argyll Advocacy Service (LAAS). The Adult Protection Committee has provided some additional investment to ensure that all adults subject to interventions under the Act are able to access independent advocacy should they require it. During the period covered by the report 18 of the 44 adults who were the subject of an initial case conference received support from an independent advocate, representing an uptake rate of approximately 40%.

## **Service User Evaluation**

Following discussion with West Dunbartonshire Council and Lomond and Argyll Advocacy Service, which operates across both local authority areas, a service user evaluation survey was designed. The evaluation survey aims to offer an opportunity for people who have been subject to adult protection interventions to share their feelings and experiences of the process. The service user evaluation surveys have been facilitated by independent advocates. All of the 18 individuals who received support from an independent advocate in relation to adult protection processes were invited to participate in the service user evaluation. Eleven people accepted the offer to participate and were supported to do so. Over recent months efforts have been made to engage with those individuals, subject to adult protection interventions, who had declined the offer of an independent advocate. Two people who fell into this category have subsequently completed the service user evaluation.

To date a total of 21 people have been invited to participate in the evaluation, with 13 taking up the offer.

Feedback from the service user evaluation shows: (the categories below being drawn from the Scottish Government guidance of 2008)

- **68% of people “felt confident about the process”**
- **64% of people “feel safer because of the process”**
- **85% of people “feel better protected as a result of the process”**
- **67% of people “felt listened to throughout the process”**
- **79% of people “felt well informed throughout the process”**
- **82% of people “were able to access independent advocacy”**
- **100% of people who accessed advocacy “found it helpful”**
- **77% of people “had all the support they needed during the process”**
- **69% of people felt that things are “better” because of the support offered**

Fuller detail of this work can be accessed through the following link:

[Link to full report](#)

The Adult Protection Committee recognises the importance of getting independent feedback on the service user experiences of adult protection interventions and is committed to continuing this work in coming years.

Whilst the information above gives a sense of the outcomes of the work carried out the detailed comments made by service users (see full report) present particular insights into the widely varying views of the adults, from the person who speaks clearly about the value of the support offered to the woman who felt totally disempowered by the interventions she experienced. This key learning from the service user survey has been taken into training for staff and gives very clear messages to staff and the Committee about our need to seek to improve the knowledge experience and practice of those from all sectors who work with ‘adults at risk’.

## **Consultation**

The Committee continues to develop ways of consulting with service users and carers about the development of adult protection.

A recent consultation with adults with learning disabilities at their Service Development Conference has led to the development of a proactive 'STAY SAFE' project being taken forward within the learning disabled communities in Argyll and Bute. This project was launched in March 2012.

The APC Chair and Adult Protection Area Manager have consulted with each of the four Area Committees in Argyll and Bute at their meetings in Campbeltown, Rothesay, Helensburgh and Oban. These meetings allowed the Chair and Adult Protection Area Manager to raise the profile of Adult Protection with key opinion formers significantly. It is the intention that such engagement will continue on an annual basis, linked to our developing annual reporting structure

The Committee continues to identify the need for improvement in this area but is clear that involvement to be meaningful has to be within structures which enable understanding of the issues by users and carers and that this may be best developed within the Local Adult Protection Development Forum responsibilities with its focus on local issues and communication.

## 4. Management Information

Set out over the next few pages is some important management information about adult protection in Argyll and Bute. A vast suite of data is collected by staff and brought to the Committee for consideration. The information set out here is but a small part of the total.

The Committee analyses all this information closely to identify how volumes are changing over time and how there is variety of practice across Argyll and Bute. The primary purpose is to redirect resources that we might ensure that all adults who are indeed at risk are identified and protected.

While analysis of the position within Argyll and Bute is possible and valuable, it is disappointing not to be able to make robust comparisons with the position in other Authorities or indeed with the position all across Scotland. The Act is silent on what data should be collected and Government Guidelines on the implementation of the Act are also silent on the issue. As a result, each Authority has determined the data it will collect. Not surprisingly, practices vary considerably making accurate or detailed comparisons impossible. Broad comparisons are possible – and these would suggest that the issues in Argyll and Bute are not very different from those elsewhere.

Because of the lack of a National Data Set, APC Conveners, as a group, decided to establish a data set so that robust benchmarking across Scotland might be possible. Unfortunately, the initiative was not a success; authorities have developed their own definitions and ways of collecting data and the initiative's definitions and methods of collection proved to be too different. Therefore, there is still no reliable means to quantify accurately how the position in Argyll and Bute differs from the position elsewhere – or nationally. I am delighted that the Scottish Government will now be taking on the role of collecting a standard set of data. Being able to benchmark is critical to knowing where to direct resources to best effect.

Our data tells an interesting picture of Adult Protection in Argyll and Bute.

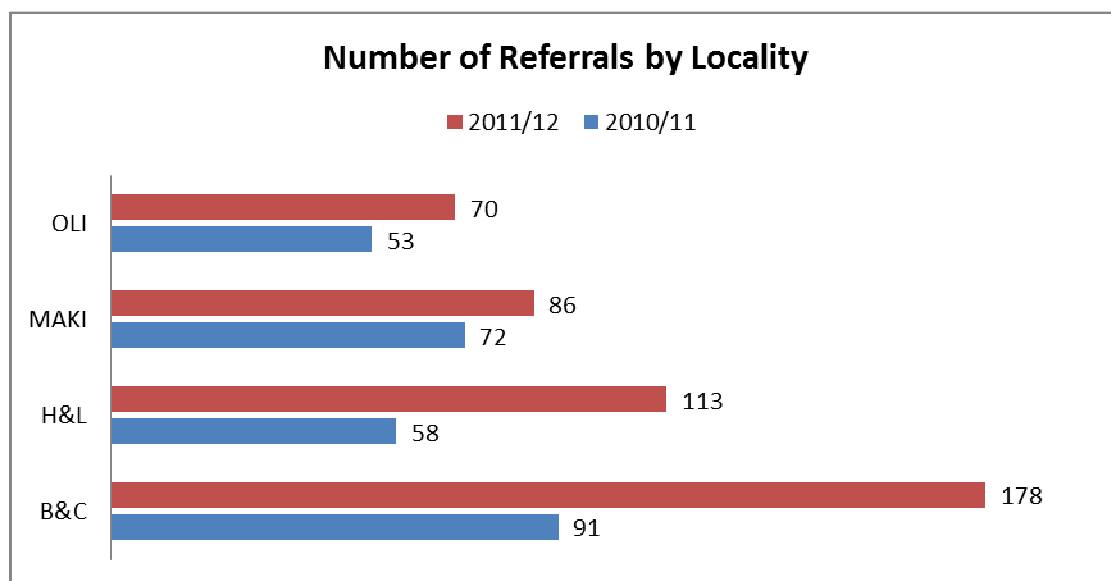
- The total number of referrals continues to rise and to rise fast. Until March 2010, there were just 172 referrals. Since then there have been 721 referrals – 274 in 2010-11 and 447 in 2011-12. In 2011-12 (the second year covered by this report) there were 63% more referrals than in the previous year.
- Almost 20% more women than men have been referred in the two years covered by this report.
- Age appears not be a major factor in determining referral.
- However, those with mental health problems are the most significant group referred – by a wide margin. The main other groups, other than age, are those addicted to drugs or alcohol and those with learning disabilities.

- Self-harm is by far the greatest risk to which those who are referred are exposed, followed by emotional or psychological harm and physical harm.
- Only 6% of those referred had the risk of financial harm as the principal reason for referral. However, professionals of the ground report anecdotally to the APC that there is financial harm element about half the cases referred. The APC is taking steps to investigate this issue further to ensure that vulnerable adults in Argyll and Bute at risk of financial harm are identified and protected. I am pleased that the Scottish Government is undertaking a major study to understand financial harm better.
- The vast majority of referrals in the two year period came from the police. These referrals are most welcome. They identify adults who might be at risk of harm; these adults can then be offered support, whether or not it is ASP support. However, Strathclyde Police are changing their procedures significantly; they will make more detailed assessments of individuals within the force and refer those whom they believe do not meet the criteria for an ASP intervention directly to an agency that can provide the support these vulnerable adults need. This will have the effect of reducing formal police referrals in all probability. This development is to be welcomed. I appreciate Strathclyde Police going to greater lengths to ensure that only adults at risk (as defined by the Act) are referred under the Act's provisions.
- I am surprised that over the two years covered by this report, there have only been 37 referrals from the NHS. This reflects experience all across Scotland. The APC is taking steps to ensure adults at risk in NHS settings are and are all referred.
- Likewise, it is surprising that only 73 referrals have come through Social Work staff, although this reflects practice all across Scotland. Again the APC is redoubling its efforts to make sure those adults identified with a Social Work setting as being at risk are indeed referred.
- It is also surprising that only eleven members of the public have made a referral in the two years. This clearly underlines the need for there to be a powerful national communications campaign to raise awareness of adult protection substantially.
- Less than 15% of referrals result in an ASP case conference being convened. This is not to say that the vast majority of referrals were wrong. About 75% of referrals resulted in some non-ASP intervention. More than 500 people in Argyll and Bute, who would have "fallen through the net" were it not for the ASP Act, received some kind of help and support. That is a huge achievement.
- Throughout the period, about ten people have been subject to Support Plans. It is interesting that this number has not risen in line with referrals.

### i) Total Referrals

The total number of referrals for 2010 – 2011	274
The total Number of Referrals for 2011 – 2012	<u>447</u>
Total	721
 Total Number of Referrals 2010 – 2012	 172

### ii) Referrals by Locality



The referral numbers have continued to rise significantly over the last two years.

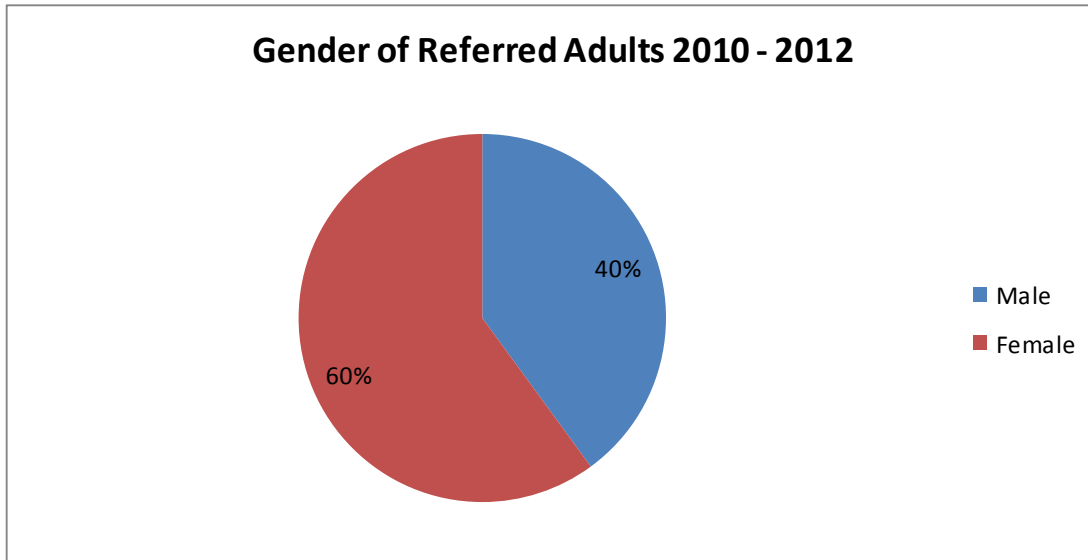
Of significance is the wide variation in referral rates across Argyll and Bute with particular pressure on services in the Bute and Cowal area.

Following a recent decision of the APC the management of police referrals will alter to distinguish ‘adults at risk’ from referrals of ‘vulnerable persons’

OLI	Oban, Lorn and the isles	MAKI	Mid Argyll, Kintyre and Islay
H&L	Helensburgh and Lomond	B&C	Bute and Cowal

### iii) Referrals by Gender

Male	Female
288	433



Figures for 2008 – 2010

54% Female

46% Male

### iv) Ethnicity

99% of all referrals were adults who are of White British origin.

<b>White British</b>	713
<b>White - Other</b>	3
<b>African - Caribbean</b>	1
<b>Mixed Race</b>	3
<b>Asian</b>	1

Argyll and Bute population

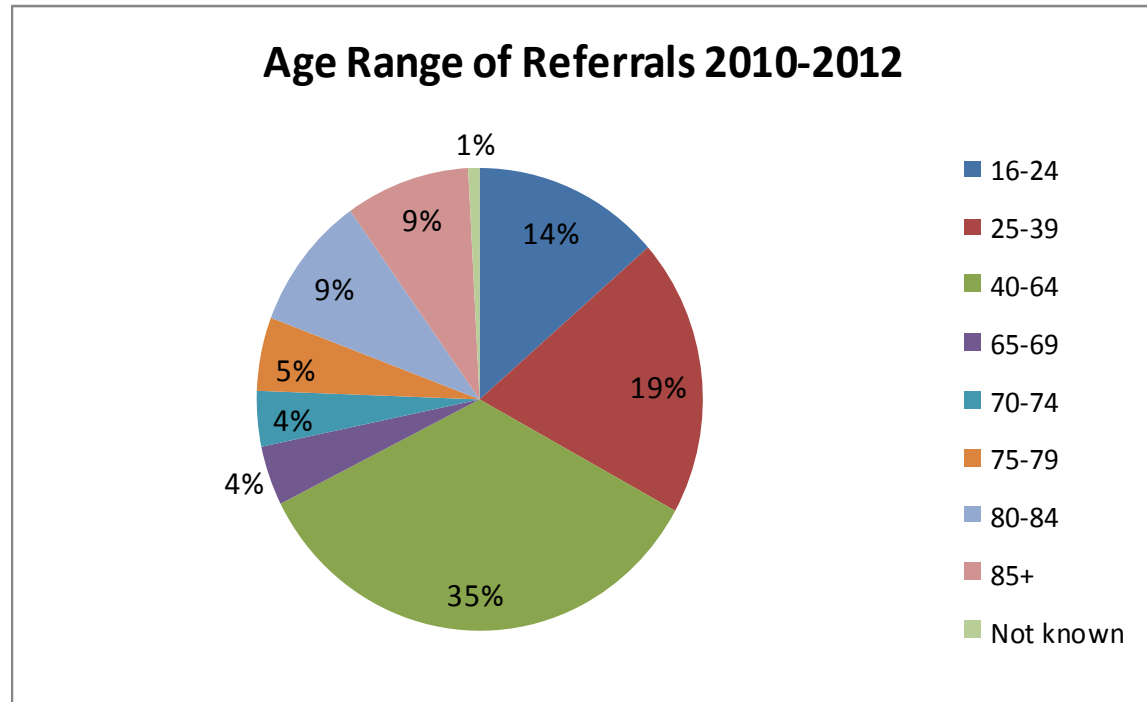
96.88% of population are of White British origin (Census 2001)



## v) Referrals by Age

### Age Range

AGE RANGE	TOTALS
16-24	98
25-39	140
40-64	249
65-69	30
70-74	28
75-79	37
80-84	68
85+	65
Not known	6
	721

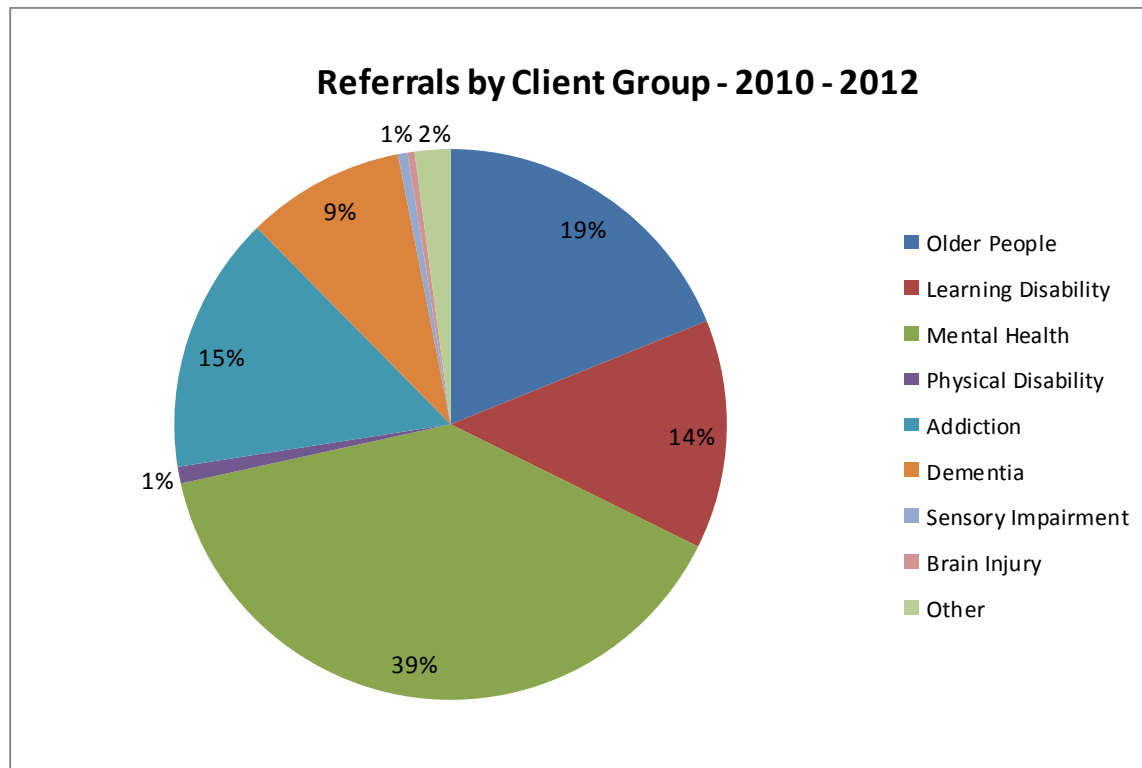


The figures for 2010 – 2012 are categorised differently from those reported in the 2008 – 2010 report and thus direct comparisons are problematic.

Referral rates vary very little indeed with age. Those just past retirement age are a little less likely to be referred than the norm; those over 85 are more likely to be referred.

## vi) Referrals by Client Group

Older People	Learning Disability	Mental Health	Physical Disability	Addiction	Dementia	Sensory Impairment	Brain Injury	Other	Total
136	97	283	7	109	67	4	3	15	721



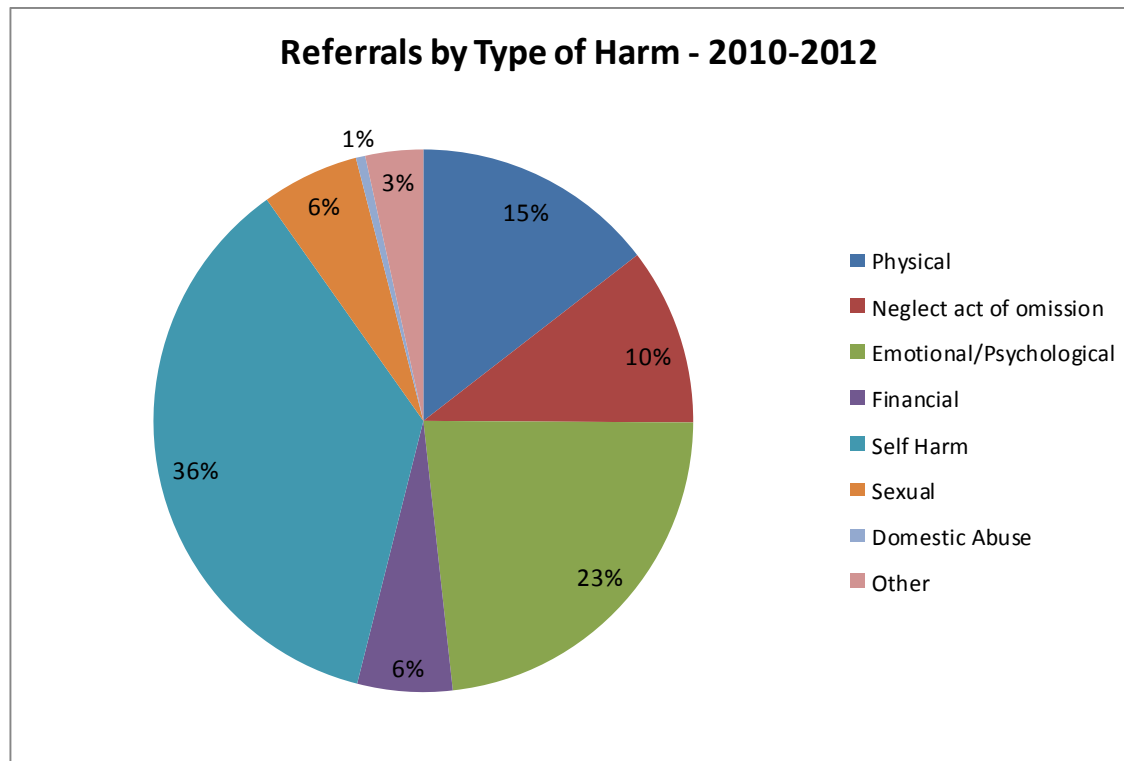
This information reports on the “Client Group” of those referred under the Act. The largest group comprises those identified by the referrer as having mental illness. It should be noted that many of these referrals are of adults already supported by mental health services or those who have no diagnosed mental disorder. Those in this Group are often offered advice re follow up of their health issues through primary care.

Older people and those with dementia comprise 28% of all referrals – up from 24% in 2008 – 2010.

Referrals of those with Learning Disabilities have declined from 20% to 14% in the same period.

## vii) Referrals by Type of Harm

Physical	Neglect act of omission	Emotional/Psychological	Financial	Self Harm	Sexual	Domestic Abuse	Other	Total
105	76	167	41	261	42	4	25	721



The reporting of self-harm incidents remains the biggest category – by far.

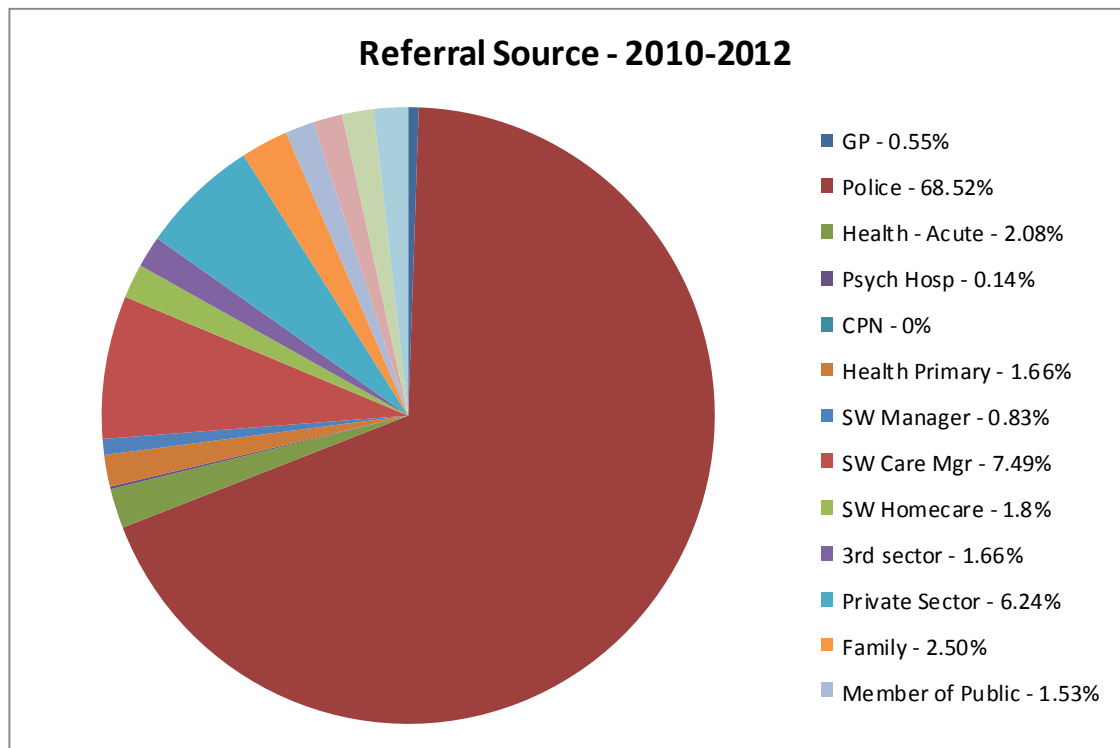
The identification of emotional harm by referrers is also significant and in many cases is linked to intoxication and concerns about mental health.

Concern in relation to neglect has risen from the previous reporting period

Referrals in relation to allegations of financial harm now feature in our referrals – none being recorded in the 2008 – 2010 period.

viii) Referral Source

GP	Police	Health - Acute	Psych Hosp	CPN	Health Primary	SW Manager	SW Care Mgr	SW Homecare	3rd sector	Private Sector	Family	Member of Public	Self	Homeless/ Housing	Care Inspectorate	Other
4	494	15	1	0	12	6	54	13	12	45	18	11	11	12	0	13



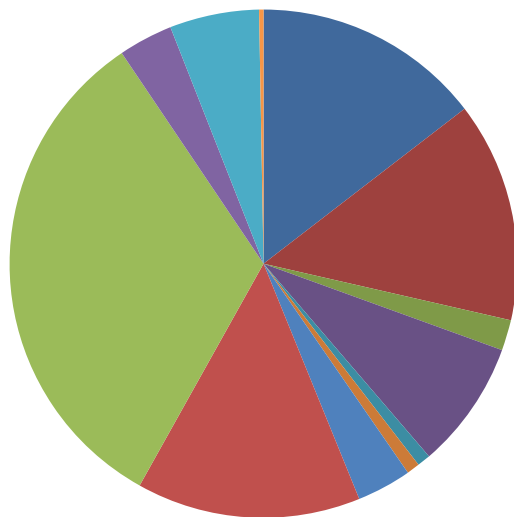
Police referrals continue to dominate however with the change in referral systems agreed by the APC this area may be significantly altered whilst noting that the overall referral rate, inclusive of 'adults at risk' and of 'vulnerable persons' may remain similar to that currently reported.

Several sources of referral are much lighter than was expected when the Act was introduced suggesting that those at risk of harm may not be being noticed and also that, even if noticed, they are not referred. This must be the biggest concern about Adult Protection in Argyll and Bute.

## ix) Outcome of Referrals

Case Conf./ Discussion	Community Mental Health Team	NHS	AWI/ MH ACT Act	Criminal Justice Services	Residential Care Assessment	Refusal	Addictions Team	Community Care/ Social Work	Childrens Services	No Further Action	Other	Total
105	101	14	59	6	6	25	103	234	25	41	2	721

### Outcome of Referrals 2010 - 2012



- Case Conference/ Discussion - 14.56%
- Community Mental Health Team - 14.01%
- NHS - 1.94%
- AWI/ MH ACT Act - 8.18%
- Criminal Justice Services - 0.83%
- Residential Care Assessment - 0.83%
- Refusal - 3.47%
- Addictions Team - 14.29%
- Community Care/ Social Work - 32.45%
- Childrens Services - 3.47%
- No Further Action - 5.69%
- Other - 0.28%

The range of responses to referrals continues to evidence a tailored response to 'adults at risk' and 'vulnerable persons'.

The number of referrals where no action was taken has fallen from 16% to 5.69%. This probably indicates a rise in the quality of referrals.

14.56% of referrals resulted in a case conference being convened this being a rise from 11% in the previous reporting period.

Those refusing to accept support again has fallen from 5% of referrals to 3.47%

In a single case an application was granted for a banning order.

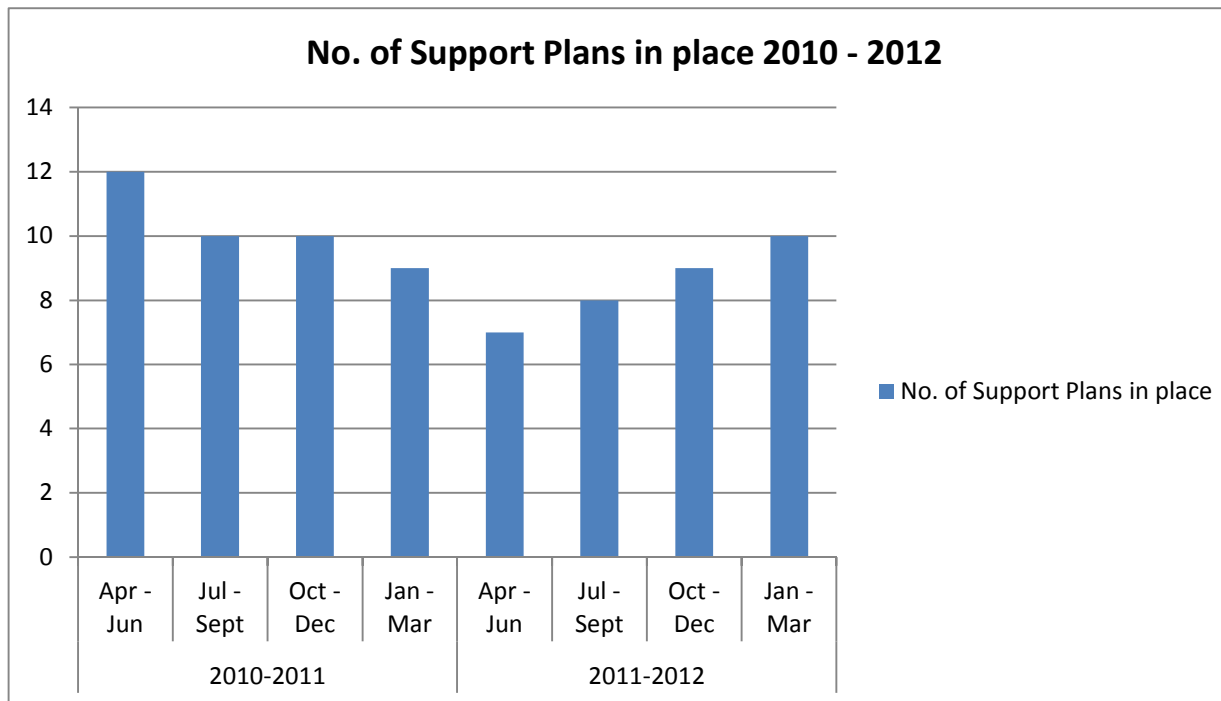
x) Number of Adult Protection Case Conferences

	2010-2011				Total	2011-2012				Total
	Apr - Jun	Jul - Sept	Oct - Dec	Jan - Mar	2010-2011	Apr - Jun	Jul - Sept	Oct - Dec	Jan - Mar	2011-2012
<b>Initial Case Conference</b>	5	8	4	4	<b>21</b>	1	6	6	10	<b>23</b>
<b>Review Case Conference</b>	5	4	5	7	<b>21</b>	8	7	4	10	<b>29</b>
<b>Total</b>	10	12	9	11	<b>42</b>	9	13	10	20	<b>52</b>

Case conferences and reviews held during 2010 – 2012 have amounted to 94.  
 The number of Case Conferences held in 2009-2010 was 47.

xi) Support Plans

	2010-2011				2011-2012			
	Apr - Jun	Jul - Sept	Oct - Dec	Jan - Mar	Apr - Jun	Jul - Sept	Oct - Dec	Jan - Mar
No. of Support Plans in place	12	10	10	9	7	8	9	10



Total Number of People Supported in 2010 - 2011 **20**

Total Number of People Supported in 2011 - 2012 **17**

Support Plans run for variable periods often covering several quarters thus the numbers of adults supported does not directly co-relate to the totals on the bar graph.

## 5. Serious Case Reviews:

The Committee approved its Serious Case Review Procedure at its meeting on 28<sup>th</sup> July 2011.

During this biennial reporting period the Committee has not held a Serious Case Review.

However, in response to an adult protection referral in July 2011 relating to the treatment of a resident of a care home, the following actions are on-going:

- The specific concern was subject to a police investigation and report to the Procurator Fiscal, currently under consideration. A Multi-Agency Liaison Group was established to ensure that the health and welfare needs of all the residents within the Care Home are being met effectively.
- The Multi-Agency Liaison Group, under the chairmanship of the Residential Services Manager, has co-ordinated the work of all the agencies involved in the monitoring of provision of health and of social care support to all the residents of the care home. This has been undertaken - including contract compliance, registration and inspection – in the context of ongoing police and Procurator Fiscal investigations. This approach has been formalised through the approval by the APC of the Argyll and Bute Multi-Agency Liaison Protocol which will be applied to any similar concerns which arise in any similar future cases.
- Through the implementation and review of a Multi-Agency Action Plan, the APC has reported to the Argyll and Bute Child and Adult Protection Chief Officers Group (CAPCOG) on the range of interventions by Health Services, Care Management, the Care Inspectorate and the Commissioning Team. Its proactive monitoring and inspection of this service has led to improvements in the quality of health and social care provision in this service.
- The APC will consider the establishment of a Serious Case Review at the point when there is clarity as to the actions planned by the Procurator Fiscal Service.
- In following up the concerns within this care home the Multi-Agency Liaison Group identified the need for a reconsideration of the structure of reviews within the care home sector. Following a period of consultation a new review structure has been designed which, through the active involvement of health colleagues, ensures that where complex health concerns are present these are reviewed by health staff. While only at the stage of running a pilot, there is confidence that the effective



review of complex health needs will result in a preventative approach to health care management which will reduce risk to this vulnerable population.

## 6. Public Information

Initially the APC adapted the Scottish Government's 'Act Against Harm' publicity information for use in Argyll and Bute with local contact points identified on materials. The Act Against Harm logo remains the identifier for the work of the APC in Argyll and Bute.

In partnership with other West of Scotland Adult Protection Committees and the support of the Renfrewshire Council Media Team the APC supported the development of a series of TV adverts which ran on commercial channels from 2011 onwards. This together with 'stills' from the adverts have now been adopted for publicity throughout Argyll and Bute.

The Committee has developed a range of posters, and information leaflets which have been distributed throughout Argyll and Bute and these alongside the development of a single contact centre number for council services has improved our ability to more effectively respond to inquiries.

We have also had the support of local press and radio in taking the adult protection message forward. With radio stations and 16 local newspapers servicing Argyll and Bute their support is a valued channel of communication with residents of this remote, rural and sparsely populated area.

The committee recognises the complexity of seeking to deliver effective communications across such a wide area.

The issue is to open the 90,000 pairs of eyes and the 90,000 pairs of ears of the people of Argyll and Bute to the issue of adult protection and to have them looking out for their friends, neighbours and relations – even just the people they pass by in the street. For this to happen they need to be aware of the provisions of the ASP Act. While the APC is working to raise awareness in Argyll and Bute, it is something that can be done so more effectively and so much more efficiently if it is undertaken nationally. The APC hope the Scottish Government will embark on another campaign to further raise awareness. It believes that this will be the best approach to ensuring that those at risk are identified and referred. If we are really going to protect all those at risk, we need to have more than just 11 referrals from members of the public in two years.

## **7. Management of Services and Staff**

In response to our last report the Minister recognised the appropriateness of our particular response to the deployment of staff resources to cover the increased operational pressures resulting from the implementation of the Act. I am happy to report that staffing resources funded from the adult protection allocation have been maintained in spite of the ongoing financial pressures facing Argyll and Bute Council.

The assessment of adult protection referrals continues to be overseen by operational managers in each of the four service delivery areas of Argyll and Bute, with the duty of inquiry and investigation being carried by all Council Officers based in that area. Currently referrals are allocated to a council officer with the most appropriate experience and knowledge of the area of concern. Thus workers from learning disabilities, mental health, sensory impairment, addictions and operations teams follow up inquiries within their sphere of operation. In recognition of the limited availability of staff there is flexibility built into this system to meet the operational pressures particularly experienced by teams with limited staffing.

The work of adult protection continues to be overseen by the Area Manager, (Adult Protection). He is supported by a dedicated adult protection administrative officer.

It would be remiss if it was not recorded that adult protection in Argyll and Bute benefits from the commitment of a wide range of officers from both public and private sectors. The support of the legal team, training section, finance and staffing sections of the council; the CHP Management Team and operational staff throughout the NHS services and front line officers and managers of Strathclyde Police all give willingly of their time to take forward the protective work in relation to 'adults at risk'.

Recruitment and retention of qualified and experienced staff can be problematic in the more remote parts of Argyll and Bute, however all four Adult Protection funded posts remain filled and will continued to be so following the ongoing restructuring of social work services in Argyll and Bute.

## 8. Communication and Cooperation between Agencies

The Argyll and Bute Adult Protection Committee works within the West of Scotland Network. Links with other APCs, locally and nationally, are supported and there is a commitment to working both within the 'West of Scotland Group' and nationally to address issues covering policy development, audit, training and practice needs.

Having adopted the 'West of Scotland Inter Agency Guidance' the Committee has welcomed the recent update of this guidance which takes into account more recent enactments of legislation and developments in national guidance.

The Argyll and Bute Area Manager for Adult Protection continues to support the West of Scotland Coordinators group which provides a forum for lead officers and co-ordinators to share and learn from developments throughout the area. The APC also welcomed the setting up of the ADSW Adult Protection Sub Group.

Through the reporting period the support and co-operation of statutory and voluntary agencies has been welcomed. We are pleased to have representation from the Argyll and Bute 3<sup>rd</sup> Sector Partnership on the APC this filling a clear gap identified at the time of our last biennial report.

The APC now has appropriate representation from all statutory agencies (membership of the Committee is noted earlier in this report). Continuity of representation at the APC, however, is critical if there is to be the development of a fully effective partnership to take forward the duties placed on the Adult Protection Committee. The level of engagement of partners in relation to the joint planning and delivery of "support and protection" activity will be monitored to ensure that the Committee's functions under the Act are achieved.

This report notes the joint delivery of 'Awareness' training to staff throughout Argyll and Bute. The delivery and uptake of joint training is being monitored to ensure appropriate involvement from all agencies. The commitment to, and uptake of, joint training opportunities is recognised as being at the heart of the development of effective responses to reports of 'adults at risk'. Nevertheless, it has been disappointing at how often people have had to pull out of training at short notice "for operational reasons". The Committee recognises that in the current financial climate, operational priorities may conflict in relation to the uptake of training but the APC is clear that the risk associated with poor understanding of the Act and duties conferred by the Act is one which must be addressed. The Committee hopes that a higher priority will be given to the important issue of training by all agencies.

The development of local Adult Protection Forums is the next key development in building up of strong partnerships between all public, 3<sup>rd</sup> sector and Independent agencies with is at the core of best practice in the following up of reports of 'adults at risk'.

The involvement of the Housing/Homelessness Services in the Committee has been critical to dealing with some of the most vulnerable households in the area. The involvement of the housing sector ensures that housing services know how to access support for 'adults at risk' through use of the single referral process.

The Committee recognises the major challenge it faces in relation to developing effective communications with, and engagement of, the 'Community' in its work. Whilst we are able to report that all remote and Island communities have access training and publicity input within the last two years that this remains a significant challenge especially when there are limited resources available within island communities to 'champion' this area of development.

## **9. Training and Workforce Development:**

*'... Making arrangements for improving the skills and knowledge of officers.. of public bodies'* S42(1)(c) ASP(S)A 2007

The APC through the work of its Policy and Training sub group has continued to address the needs of delivering a wide range of training across Argyll and Bute. The training framework and training plan are depicted on the pages following.

In taking forward the training agenda throughout Argyll and Bute the Training and Policy Sub Group recognise the key role of the training team who have delivered a high quality awareness training programme throughout the area.

### **Awareness Training**

In the period 2010 – 2012 awareness training has been delivered to 874 attendees from both public and private sectors. Awareness training was initially delivered in the training suite in Lochgilphead but in recognition of the time and travel costs of this approach this is now delivered in service areas. During the reporting period awareness training has been delivered in the following places; Helensburgh, Dunoon, Rothesay, Lochgilphead, Campbeltown, Islay, Oban, Mull, Colonsay and Tiree. Whilst the Training and Policy Sub Group and the Training team recognise the value of delivering this training to multi-agency groups there is also recognition of the challenge for smaller agencies in freeing staff for such sessions. In recognition of this training is also delivered in work settings. In the reporting period training has been delivered in Care Homes, Hospital settings, GP Practices, to community groups, community nursing teams and to voluntary agencies.

As we move into the 2012 – 2014 reporting period we can report that the trainers Group has updated/refreshed our Awareness training pack, this to ensure the continued commitment to maintaining active involvement of staff throughout Argyll and Bute.

### **Council Officer Training**

Council Officer Training is mandatory training for qualified staff and is delivered over 5 days.

This training consists of a one day briefing which focusses on the presentation and discussion of the legislative framework of adult protection, the Code of Practice and Inter Agency Guidance. Thereafter Council Officers complete 2 days Investigative Interviewing training and a further 2 days Risk Assessment and Protection Planning training (JIT Model). This training is delivered

by local staff and by an external trainer. This training is ongoing with the expectation that refresher training will be developed during the next 12 months for those who completed their council officer training some years ago.

At this stage Argyll and Bute Council recognises that with its decision to set up its own Standby system in 2013 that there will be additional challenges to be met to ensure that all professional staff who respond to Standby referrals are suitably trained and experienced in the follow up of adult protection referrals. The APC will take forward arrangements to ensure that any deficits in this area are addressed with an initial introduction to this area being addressed in the ***Adult Protection/Child Protection – Initial Responses*** being delivered in spring 2012.

### **Managing Inquiries**

This training, run as a pilot in 2011 sought to provide a forum for front line Managers who assess and lead on initial adult protection inquiries to share experiences and learning gained during the period following the introduction of the Act. This session was planned and led by our external trainer. Whilst there was positive feedback on this session it was clear that future sessions would benefit from the attendance of the Adult Protection Manager as the identification of operational issues and interpretation of local guidance had to be addressed following this session. Whilst the questions raised at this session were followed up at a later stage it would have been more beneficial to have taken them forward in this key staff grouping.

With the restructuring of operational management of services in Argyll and Bute Council this training will become a priority as new managers take up their new responsibilities.

### **Minute Taking**

This course builds upon the standard training in minute taking in order to prepare minute takers for the technical skills required for this task as well as the potential emotional challenges of listening to reports of adults and children who have been harmed.

This training is assessed by the trainee completing an adult or child protection minute which is reviewed by the case conference chair. Future training of this type may be extended to include the minutes of AWI case conferences.

### **Chronologies**

Following the introduction of the SWIA guidance on 'Chronologies' a training pack relating to this was developed and training delivered to care and case managers in spring 2012. The effectiveness of this training will be assessed in the multi-agency audit of case files.

## Forced Marriage

Following the introduction of legislation and guidance on Forced Marriage a training pack was prepared and this delivered to front line staff in Spring 2012

## Case File (Peer) Audit

Argyll and Bute Council welcomed the support of our Care Inspectorate Lead Inspector who took managers through the process of Case File audit using the SWIA audit guidance and audit tool.

This training was well received and again will be monitored through our Multi-Agency Case File audit process now to be held annually in May of each year.

## Adult and Child Protection – Call Centre Staff

Following the development and launch of an area wide central call management system the call centre staff accessed training on responding to calls about adult and/or child protection.

In addition to the above the following training was delivered:

- On-going development and consultation with Case Conference Chairs.
- Sessions for the Continued Professional Development for G.P. practices (3 sessions), community groups (3 sessions) and specialist services (3 sessions).

## Training for Learning Disabilities Support Staff

- In recognising the specific challenges facing staff that support adults with learning disabilities a specific training programme was prepared and delivered to staff groups throughout Argyll and Bute. This training, which was well received, recognises the challenges facing staff who support adult with learning disabilities as they seek to encourage them to access mainstream community services whilst supporting them to STAY SAFE! This training is now linked to the STAY SAFE! Programme launched on 29<sup>th</sup> March 2012 which seeks to take a consistent and proactive





approach to developing the skills of the service users to be aware of, and to report risks/harmful action they face in their everyday life. This programme will be reported on more fully in the 3<sup>rd</sup> biennial report.

Inter-agency training is and will remain a primary priority going forward. The delivery of training within the four localities is designed to encourage participation by smaller agencies and local groups by reducing time and travel commitments significantly.

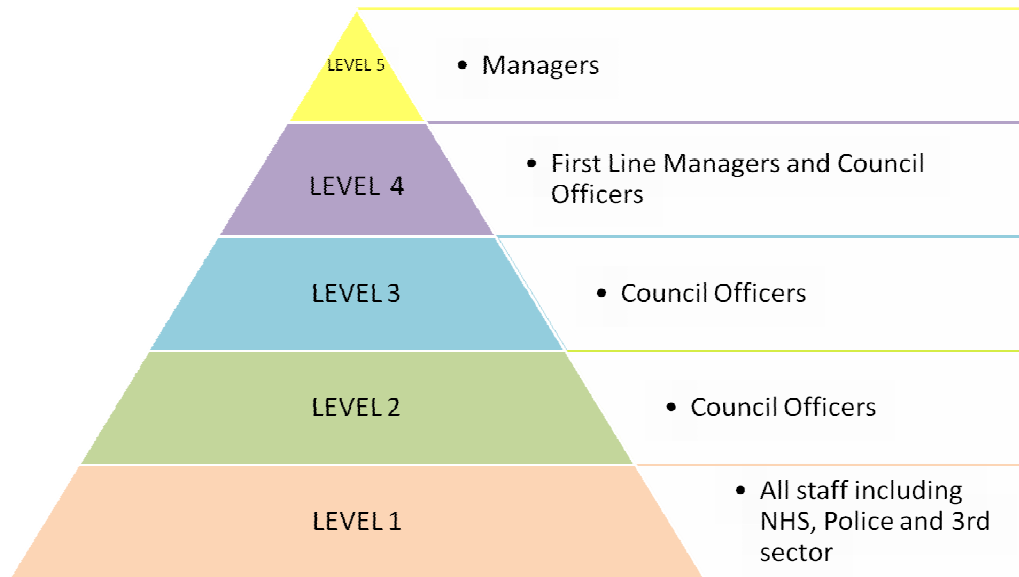
The Training and Policy sub group has identified its initial training/development plan which is outlined in tabular form below. The training needs of staff throughout Argyll and Bute is and will remain a continuing priority over coming years.

<b>Training Course Title</b>	<b>Course Level</b>	<b>Number of courses 2010 - 2012</b>	<b>Total Number of Attendees</b>	<b>Evaluation</b>
Adult Protection Awareness Training	1	56	874	4.37
Awareness – Learning Disabilities Support Staff	1	4	55	4.51
Council Officer Training - Briefing	4	10	118	4.00
Council Officer Training – Investigative Interviewing	4	6	70	4.00
Council Officer Training – Risk Assessment/Management	4	6	60	4.00
Adult Protection/Child Protection – Initial Responses	3	3	84	3.66
Managing Inquiries	5	1	10	4.00
Adult Protection/Child Protection – Minute Taking	1	1	21 (18 assessed competent)	4.27
Chronologies	3	6	67	4.05

<b>Training Course Title</b>	<b>Course Level</b>	<b>Number of courses 2010 - 2012</b>	<b>Total Number of Attendees</b>	<b>Evaluation</b>
Call Centre staff	1	2	12	N/A
Case File Audit – (Peer training)	4/5	4	15	3.91
Case Conference Chairs Briefings	5	4	7	N/A

Total Training attendances      1386

**Figure 1 Adult Protection Training Framework**



The redesign of management structures in Argyll and Bute Council in 2012 will require the revisiting of some aspects of training with new and promoted staff. Additionally the attention of the training groups will turn to 'refreshing' aspects of training to ensure staff and the public remain engaged with the adult protection agenda.

**Figure 2 Training Plan**

<b>LEVEL</b>	<b>DESCRIPTION</b>	<b>OUTCOME SOUGHT</b>	<b>TARGET GROUP</b>	<b>MANDATORY</b>	<b>NOTES</b>
Level 5	Adult Protection Inquiry Management	Managers training in overseeing responses to referrals, managing inquiries and decision making in relation to AS&P referrals.	Service Managers Area managers Team Managers	Yes (PRD)	Other Managers NHS
	Case Conference Chairing	Chairing of formal Adult Support and Protection Case Conferences and Reviews	Service Managers Lead Professionals NHS Area Managers Team Managers	Yes (PRD)	Social Services NHS
Level 5	Case File Audit Multi-Agency Audit	Skill development for managers involved in Multi-Agency Audit	Social Services NHS File Auditors Police Auditors	Essential requirement to be involved in annual Multi-Agency Case File Audit	Commencing Spring 2013
Level 4	Chairing Core Groups/ Case Discussions	Training for Chairs of Case discussions/ core groups. Chairs aware of task/outcome focus of these groups.	First Line managers/ Council Officers (PRD)	PRD	Commencing 2012 - 2013
Level 4	Investigative Interviewing	Practice development in relation carrying out investigative visits and interviews	Council Officers NHS Professional Staff	Yes As Agreed	
Level 4	Risk Assessment and Management	Practice training in relation to Risk Assessment and Protection Planning	Council Officers NHS Professionals 3 <sup>rd</sup> Sector Managers	Yes On requested On request	Open to all applicants 2012 - 2013
Level 3	Ethical and effective recording	To ensure Council Officers are aware of standards of record keeping and that records are fit for purpose.	Council officers NHS Professional staff	On basis of identified need (PRD) On request	To be developed
Level 3	Chronologies	To develop skill level in relation to this key task	Social services staff NHS Staff 3 <sup>rd</sup> Sector staff	No Mandatory – Identified through PRD	Ongoing
Level 2	Council Officer Briefing	To ensure that Council Officers are fully aware of the Act, the duties of the Council and role and responsibilities of the 'Council Officer.'	All qualified social workers, nurses and OT's employed by Argyll and Bute Council.	Yes	This will be opened to other agencies following initial briefings of qualified Council staff.
Level 2	1st Line Managers in	Awareness of key role of first line	1st Line Managers in all	To be decided	2012 – 2013 onwards

LEVEL	DESCRIPTION	OUTCOME SOUGHT	TARGET GROUP	MANDATORY	NOTES
	Care Homes	manager in supporting staff through AP and ensuring effective reporting of concerns	Care Homes throughout Argyll and Bute.		
Level 1	Awareness Raising**	To enable staff to recognise and report adult protection concerns, and thereafter to support service users who have experienced abusive situations.	All staff in public, private and 3 <sup>rd</sup> sector who deliver services to adults and children.	All social work staff. Council staff from other departments as per PRD	Open to NHS, Police and 3 <sup>rd</sup> Sector staff.
	Protecting 'Adults at Risk'	Staff supporting 'AAR' to be aware of their role in protection planning.	Support /care staff	Developmental – from PRD	Open to all agencies.
	Core Group Participation	To be developed	Support staff	Developmental – from PRD	Open to all agencies
	Minute taking	Effective minute taking	Minute takers of AP case conferences	All admin staff in partnership with the CPC	Not at this point
Level 1	Awareness LD staff	To enable staff to recognise and report adult protection concerns, and thereafter to support service users who have experienced abusive situations.	Staff working with LD clients. May be developed further for service users (AP Champions)	Opened to all agencies on request	Delivered on request

## 10. Workforce Issues

For the period of this report, the workforce has been remarkably stable. Staff turnover has been minimal. Those recruited to help implement the Act have been well integrated into local teams.

However the demands imposed by Argyll and Bute having many islands and remote and rural mainland locations are substantial. This makes the provision of training much more difficult. It also adds challenges in the undertaking of adult protection inquiries, especially on the islands with no resident Council Officers. Given the huge size of Argyll and Bute, providing cover when staff are absent, off for training or undertaking inquiries presents challenges in maintaining services, and maintained they must be.

Whilst this remains a challenge and impacts upon services the APC is pleased to report that delays in carrying out inquiries has been kept to a minimum. Nevertheless the Committee has accepted the pragmatic judgement that case conferences, inquiries and investigations are best done well, rather than undertaken at a time when all those who ought to be there cannot be present. The Committee, however, monitors the timeliness of action to ensure that action is never delayed without good reason.

All the agencies – statutory and non- statutory – are under huge financial pressures. No doubt, changes will be forthcoming. The Committee hopes that all the agencies will maintain the resources required to provide the necessary level of support. Furthermore, the Committee hopes that agencies will do everything possible to maintain the continuity of staff deployed on ASP duties.

## **11. Formal Evaluation**

### **Service User Evaluation**

As reported on page 7/8 the Lomond and Argyll Advocacy Service (LAAS) undertakes independent service user evaluation and reports to the APC. The APC believes that this reporting lies at the heart of our learning about the impact, intended and unintended, of interventions carried out under adult protection legislation and guidance.

It is our intention to continue with the key action however we do recognise the resource implications of this work on the advocacy service. The APC will continue to seek to prioritise this work however in recognition of the current financial climate may not, as we would wish, be able to extend this work further to gain the views of those whose referrals do not proceed to the Case Conference stage.

### **Training**

As can be seen from the table of training on page 26 of this report, every course is evaluated by participants. This recording covers key areas of planning, content, participation and 8 other factors. Each aspect is scored on a numerical basis from;- 1 – Poor to 5 – Excellent. As will be seen from the table the average over all courses is 4.07 – this being ‘good’ with a number of courses nearing the excellent standard. The Training and Policy sub group now has the challenge of retaining this standard as we move into the new reporting period.

The APC records its appreciation of the work carried out by the training team and our external trainer in delivering AP training to this high standard.

### **Self Evaluation**

On an annual basis the APC has convened a self-evaluation event. At these events managers and front line staff from across Argyll and Bute, including those from the island communities, come together to evaluate the effectiveness of the partnership in addressing the needs of ‘adults at risk’. The events are also attended by all the members of the APC and by the Argyll and Bute Lead Inspector from the Care Inspectorate.

On the basis of these discussions areas for improvement are identified and plans for address them developed. Following the most recent event held during November 2011, the APC made the key strategic decision to move from an Argyll and Bute- wide approach to Adult Protection to the development of a more local focus. This key outcome of the self-evaluation event led to the formation of four Adult Protection Area Development Forums. These forums will be convened in Helensburgh and Lomond, in Bute and Cowal, in Mid-Argyll, Kintyre and Islay and in Oban, Lorn and the Isles. They will concentrate on the particular needs of these areas and will develop the necessary partnerships to address the priorities within their areas. The formation of the Forums is agreed in the context of the APC recognising its key role in ensuring the development of consistent practice throughout Argyll and Bute.



## 12. Future Plans

In my introduction to this Biennial Report I indicated that fully implementing the provisions of the ASP Legislation in Argyll and Bute is still “work in progress”. However, I believe that we now have enough experience of the legislation to have robust plans for the coming years.

The [2012-14 Improvement Plan](#) is an important document for Adult Protection in Argyll and Bute. It aims to be a simple and clear plan which sets out what has to be done, and by whom, to achieve success. The Committee will monitor its implementation closely and expect any delays to be made up quickly.

It has two over-riding themes:

1. Making sure that all “Adults at Risk” are identified and referred.
2. Making sure that all those referred are dealt with in line with established procedures.

The plan comprises six core initiatives. These are:

1. To improve the effectiveness of initial responses to “Adults at Risk”.
2. To ensure “Adults at Risk” receive a person centred response.
3. To ensure “Adults at Risk” and their families and carers are involved in all ASP processes.
4. To ensure Adult Protection policies and processes are fully implemented.
5. To ensure there is clear leadership from the Committee and Senior Managers in all Agencies.
6. To ensure we build on our successes and work on our areas for improvement.

Some of the more important specific actions that are part of the plan and some of the cross cutting actions that will ensure we achieve the improvement we seek are worth highlighting:

- Ensuring that all adults who are indeed at risk are identified and referred
  - This will involve training yet more people in all the Agencies.
  - It will involve the APC ensuring each and every Agency – both statutory and non-statutory – makes sure that all their staff look out for Adults at Risk and know how to refer them.
  - It will involve more information going to those 90,000 pairs of eyes and 90,000 pairs of ears in Argyll and Bute about Adult Support and Protection.
  - It will, hopefully, involve the Scottish Government commission a significant public awareness campaign.

- An annual Multi-agency case file audit
  - We have already undertaken one and come to learn how difficult it is.
  - We have now developed a procedure which will first be implemented in May 2013.
- Service User Evaluation
  - We have some modest experience of soliciting the opinion of service users.
  - Offering advocacy is already a default position but we will ensure that the default never fails.
  - We will seek to obtain much more information from service users.
- An annual Self Evaluation
  - We have already held two self-evaluation events.
  - Future self-evaluation events will aim to be significantly more robust.
- The full development of Local Area Development Forums
  - We believe these forums to be a key element to the delivery of the ASP provisions.
  - We will develop a standard agenda and operating procedures.
- Developing the Adult Protection Committee
  - The Committee will review its Standing Orders in the light of the expected revised Guidance from the Scottish Government on the implementation of the Act.
  - The Committee will review its membership to ensure that all those agencies which impact upon Adult Protection are at least connected to the Committee.
  - The Committee will continue to support national, as opposed to local, initiatives where that approach produces economies of scale.

These plans are substantial. They are devised from a now considerable understanding the challenges to fully implement the legislation in Argyll and Bute. The Committee is confident that will move implementation significantly further on. It is, however, utterly critical that *all* the agencies – both statutory and non-statutory – understand and accept their responsibilities under the legislation. They *all* need to look out for adults at risk of harm vigilantly and they *all* need to refer these adults promptly and in line with the established process.

However, it is not just the agencies that need to be looking out and referring. Everyone in Argyll and Bute needs to be involved. To fully engage the 90,000 pairs of eyes and ears, awareness of the Act needs to be raised. The Adult Protection Committee has significant raising awareness initiatives in the Improvement Plan. However, this issue would be best addressed at a national level; it would be both more efficient and more effective. I hope the Scottish Government will take steps to raise awareness in the population at large of the provisions of the Act.