
Report To:	Inverclyde Integration Joint Board	Date: 17th May 2021
Report By:	Louise Long Chief Officer Inverclyde Health & Social Care Partnership	Report No: IJB/17/2021/AS
Contact Officer	Allen Stevenson Head of Health and Community Care	Contact No: 715212
Subject:	Inverclyde Adult Support and Protection Partnership – Feedback Findings From Completed Joint Inspection Activity	

1.0 PURPOSE

- 1.1 The purpose of this report is to advise the Board of the outcome of the Inverclyde Joint Adult Protection Inspection led by the Care Inspectorate, Health Improvement Scotland and Her Majesty's Inspectorate of Constabulary.

2.0 SUMMARY

- 2.1 The Inverclyde Joint Inspection commenced in January 2020 with progress being made until the suspension of the programme as a result of the Covid 19 pandemic. The inspection was incomplete with two key elements outstanding which were, caseload reading of social work, health and police records along with staff focus groups.
- 2.2 As part of their Pandemic Recovery Plan the lead inspector from the Care Inspectorate has advised that they wish to reconvene the inspection. This would also be seen as a Proof of Concept to see if remote inspection was effective and possible as well as learning around how IHSCP responded to the challenge of the Covid Pandemic.
- 2.3 In terms of the remote inspection process this proved to be successful with Inspectors completing their file reading outwith Inverclyde as well as holding two focus groups via a web meeting.
- 2.4 No assessment grading will be made but a Report on the findings is expected by the summer of this year. Formal Feedback has been provided which is very positive particularly around practice, partnership working and outcomes for vulnerable adults subject to the ASP process.
- 2.5 The Inspection team were able to feedback to the Chief Officers Group in March.
- 2.6 The Inspectors found overall strengths in the Partnership approach to ASP work across Inverclyde. Staff reported they were engaged in the work and were confident in their role around keeping people safe protected and supported.

Based on the evidence the Inspectors reported "that adults subject to adult support

and protection, experienced a safer quality of life from support they receive” and furthermore “Adults at risk of harm were supported and listened to” “to keep them safe and protected” during the key processes of ASP process.

- 2.7 There are as would be expected some areas where the partnership could improve its performance. The Partnership acknowledges these recommendations and note that these were identified in the Position Statement submitted to the Inspection Team at the beginning of the process and that these actions are part of the Inverclyde Adult Protection Committee Business Plan for 2020 - 2022.

The implementation of the Business Plan has been stalled due to the current pandemic. A quality improvement plan has been developed by the Adult Protection Committee and will eventually be encompassed into a refreshed business plan. The plan is to refresh the Business plan in light of the Inspection and to progress the necessary improvements within the next 12 months.

3.0 RECOMMENDATIONS

- 3.1 The Inverclyde Integration Joint Board is asked to:

Note the contents of the report and the positive outcome regarding the recent Adult Support and Protection Inspection in particular the area of improvement and the key strengths identified.

To request a progress report on improvement plan in May 2022 to advise the Board of progress of the improvement actions.

Louise Long
Chief Officer

4.0 BACKGROUND

- 4.1 The Inverclyde Joint Adult Protection Inspection commenced in January 2020. File reading was due to commence in March 2020 at which time inspectors stood down due to the COVID 19 pandemic.
- 4.2 IHSCP was the first partnership to be part of a two year national programme which would focus on reassurance that the Adult Support and Protection Act was implemented successfully and did contribute to safe guarding vulnerable adults.
- 4.3 Due to the impact of the pandemic the inspection was put on hold, we were keen to complete the process and agreed to restart the inspection on a virtual basis as a test of change. This was a complex activity given the range and scope of protection work which was successful in allowing the inspectors full access to Inverclyde Partners case files and staff.
- 4.4 The inspection did not intend to provide an inspection report or offer a grading, however feedback was provided to provide assurance around the efficacy of the procedures and guidance of Adult Protection work as well as any recommendations where such performance could be improved.

5.0 PROOF OF CONCEPT

- 5.1 The Care Inspectorate came back to us in September and advised that they wish to test two proof of concepts in order to conclude the Inverclyde inspection which, if successful, will become the recognised methodology for future inspections across Scotland.

The first proof of concept is for one team of inspectors to be based securely in a central Care Inspectorate location with remote, read only access to systems in order to undertake file reading.

- 5.2 The second proof of concept is for a smaller team of inspectors to be based securely in their own homes with remote, read only access to systems in order to undertake file reading.
- 5.3 The most effective and efficient way to access health and social work records was to provide inspectors with Inverclyde Council laptops with read only access to SWIFT and CIVICA, enabled access to the Adult Protection module and associated records and documents.
- 5.4 Inspectors will be issued with Inverclyde Council laptops to undertake the file reading. SWIFT and CIVICA will be installed to enable read only access for social work records and VM WARE will be installed to enable access to EMIS and the Clinical Portal for health records.
- 5.5 Her Majesty's Inspectorate of Constabulary in Scotland made separate arrangements with Police Scotland to have access to the appropriate platform for remote, read only access to police records.
- 5.6 This process allowed the inspectors to use the Inverclyde Joint Inspection to test proof of concepts involving file reading case files remotely in order to comply with COVID 19 regulations rather than visit Inverclyde.
- 5.7 The Inspection Team have concluded this proof of concept was successful allowing the team to reach a full conclusion and allow inspectors to adopt the proof of concepts as the recognised methodology for future joint Adult Protection Inspections across Scotland.

6.0 METHODOLOGY

6.1 The Inspectors looked in detail at the following areas of evidence:

- Position Statement from Partnership.
- Supporting evidence from Partnership.
- Staff survey (187 responses).
- Focus Group with frontline staff.
- Social work, Health and Police records for 50 individuals subject to ASP Process.
- Audited 38 recordings of initial Duty to Inquire referrals where no further adult protection related action was taken.

6.2 The Inspectors spent 5 days in January auditing the procedures and 50 case files subjected to ASP as well as 38 cases where the partnership had a duty to enquire and took the decision not to progress to ASP Investigation. The Inspectors also carried out two focus groups with staff across the Partnership.

7.0 FINDINGS OF THE INSPECTION

7.1 As noted no formal report or assessment grading is part of this report (at this time). Feedback has been provided which is very positive in particular around practice, partnership working and outcomes for vulnerable adults.

Identified Areas Of Improvement

There are as would be expected some areas where the partnership could improve its performance.

- Chronology, risk assessment and protection planning tools and templates need to be standardised to ensure a more consistent adult support and protection approach.
- The Practice Standards and Operating Procedures should be updated to provide a more consistent approach to critical elements of adult support and protection work.
- The partnership should review its key processes documentation to ensure it more accurately records matters in relation to the three-point-test.
- The partnership's quality assurance performance framework needs further developed and more consistently applied.
- The partnership needs to scrutinise quality assurance activity more thoroughly and accelerate the speed of change and improvement work.

7.2 Identified Areas of Strength

The Inspectors found overall strengths in the partnership approach to ASP work across Inverclyde. Staff reported they were engaged in the work and were confident in their role around keeping people safe, protected and supported.

Based on the evidence the Inspectors reported "that adults subject to adult support and protection, experienced a safer quality of life from support they receive" and furthermore "Adults at risk of harm were supported and listened to, to keep them safe and protected" during the key processes of ASP process.

The 6 Key areas of strength were:

- Staff survey showed staff across the partnership held generally positive and confident views about adult support and protection, and the partnership's efforts to keep adults at risk of harm safe, protected and supported".
- Operational adult support and protection practice across the partnership

was sound in many areas, with effective collaborative working to keep adults at risk of harm safe.

- Partnership staff effectively shared information to identify and protect adults at risk of harm
- Adults at risk of harm were supported and listened to for the key processes undertaken to keep them safe and protected.
- Police and health staff worked collaboratively to manage the risks for adults at risk of harm, and improve their health and wellbeing.
- Almost all case file records read concurred that adults subject to adult support and protection, experienced a safer quality of life from support they receive.

8.0 IMPLICATIONS

FINANCE

8.1 Finance – None.

One off costs

Cost Centre	Budget Heading	Budget Years	Proposed Spend this Report £000	Virement From	Other Comments
N/A					

Annually Recurring Costs / (Savings)

Cost Centre	Budget Heading	With Effect from	Annual Net Impact £000	Virement From	Other Comments
N/A					

LEGAL

8.2 Information Governance – Completion of DPIA by Care Inspectorate with view from Information Governance within Inverclyde Council and NHS Greater Glasgow & Clyde being sought.

HUMAN RESOURCES

8.3 There no specific human resources implications arising from this report.

EQUALITIES

8.4 Has an Equality Impact Assessment been carried out?

√

YES (see attached appendix)

NO – This report does not introduce a new policy, function or strategy or recommend a change to an existing policy, function or strategy. Therefore, no Equality Impact Assessment is required.

8.4.2 How does this report address our Equality Outcomes?

Equalities Outcome	Implications
People, including individuals from the above protected characteristic groups, can access HSCP services.	None
Discrimination faced by people covered by the protected characteristics across HSCP services is reduced if not eliminated.	None
People with protected characteristics feel safe within their communities.	None
People with protected characteristics feel included in the planning and developing of services.	None
HSCP staff understand the needs of people with different protected characteristic and promote diversity in the work that they do.	None
Opportunities to support Learning Disability service users experiencing gender based violence are maximised.	None
Positive attitudes towards the resettled refugee community in Inverclyde are promoted.	None

CLINICAL OR CARE GOVERNANCE IMPLICATIONS

8.5 There no clinical or care governance implications arising from this report.

Repopulation

8.6 No implications

How does this report support delivery of the National Wellbeing Outcomes?

National Wellbeing Outcome	Implications
People are able to look after and improve their own health and wellbeing and live in good health for longer.	None
People, including those with disabilities or long term conditions or who are frail are able to live, as far as reasonably practicable, independently and at home or in a homely setting in their community	None
People who use health and social care services have positive experiences of those services, and have their dignity respected.	None
Health and social care services are centred on helping to maintain or improve the quality of life of people who use those services.	None
Health and social care services contribute to reducing health inequalities.	None
People who provide unpaid care are supported to look after their own health and wellbeing, including reducing any negative impact of their caring role on their own health and wellbeing.	None
People using health and social care services are safe from harm.	None
People who work in health and social care services feel engaged with the work they do and are supported to continuously improve the information, support, care and treatment they provide.	None

Resources are used effectively in the provision of health and social care services.	None
---	------

9.0 DIRECTIONS

9.1

Direction Required to Council, Health Board or Both	Direction to:	
	1. No Direction Required	x
	2. Inverclyde Council	
	3. NHS Greater Glasgow & Clyde (GG&C)	
	4. Inverclyde Council and NHS GG&C	

10.0 CONSULTATION

10.1 The report has been prepared by the Chief Officer of Inverclyde Health and Social Care Partnership (HSCP) after due consideration with relevant senior officers in the HSCP.

11.0 BACKGROUND PAPERS

11.1 Inspection Team Power Point Presentation.