



East Lothian and Midlothian Public Protection Committee

Adult Support and Protection Biennial Report 2014-2016

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1) Introduction

This biennial report reflects the changes to the structure of the East Lothian and Midlothian Adult Support and Protection Committee as reported in the previous biennial report (2012-14). It has been recognised for some time that there have been cross cutting issues for service users across all aspects of public protection. In recognition of this and in order to take a lifespan approach to Public Protection, the East Lothian and Midlothian Critical Services Oversight Group (CSOG) agreed to streamline its Committee structures and establish a single Public Protection Committee to address the significant overlaps.

The East Lothian and Midlothian Public Protection Committee is chaired by Anne Neilson (Director of Public Protection, NHS Lothian) and was established in July 2014. It is constituted in terms of the provisions of the Adult Support and Protection (Scotland) Act 2007, National Guidance for Child Protection Committees (2005), Equally Safe – Scotland’s strategy for preventing and eradicating Violence Against Women and Girls (Scottish Government 2014) thereby incorporating all functions and responsibilities of constituent committees and continuing to maintain robust links with Midlothian and East Lothian Drug and Alcohol Partnership (MELDAP). The EMPPC is responsible for local oversight of the Multi-agency Public Protection Arrangements (MAPPA), introduced under the Management of Offenders etc (Scotland) Act 2005, enabled in April 2007. MAPPA provides a framework to manage the risk posed by registered sex offenders and restricted patients (mainly violent offenders, with a small number of sex offenders). As of 31st March 2016 MAPPA also provides a framework for the management of offenders who are subject of statutory supervision, assessed as presenting a serious risk of harm, which requires an active multi-agency management at MAPPA level 2 or 3. The committee monitors the performance and quality of local service delivery, provides strategic direction to local member agencies and develop local policy and practice. Please refer to [appendix 1](#) – East Lothian and Midlothian Public Protection Governance diagram.

Structure

EMPPC is the key strategic group dealing with public protection matters across East Lothian and Midlothian and includes representatives from key partners (e.g. Social Work, Police Scotland, NHS Lothian, Scottish Fire and Rescue Service, Education, Housing, 3rd sector etc). The committee reports to Chief Officers through the East Lothian and Midlothian Critical Services Oversight Group. Our core values of respect, integrity and commitment underpin our work towards supporting and protecting all people who may be at risk of harm in our communities. All public protection activity takes place within two axes:

- Preventative ↔ Reactive;
- Individual ↔ Community Engagement.

The EMPPC has two sub-groups, the Performance and Quality Improvement sub-group and Learning and Practice Development sub-group. The Performance and Quality Improvement sub-group lead on the development of the Public Protection Performance Framework which includes the Adult Support and Protection Improvement Plan, performance indicators, evaluation calendar and evaluation summary. The Performance Framework was implemented on 1st April 2015 and provides a framework for self-evaluation, scrutiny and continuous improvement. The sub-group also co-

ordinates and manages the governance of all levels of case file audits, self-evaluation and case reviews, ensuring that learning is incorporated into practice across all public protection areas.

The Learning and Practice Development sub-group, oversee the development and delivery of the EMPPC Learning and Development Strategy. The scope and remit of this strategy includes:

- Adult Support and Protection;
- Child Protection;
- Alcohol and drugs;
- Violence Against Women and Girls;
- Multi-agency Public Protection Arrangements (MAPPA).

The Learning and Development Strategy takes cognisance of the cross cutting themes of public protection across all sectors of our communities and the aim of EMPPC is to create a more integrated approach to public protection “across the lifespan”, which will promote the understanding of the impact of trauma for all ages and stages of life. It is hoped that this approach will provide innovative opportunities for a seamless response and will support operational staff and partner agencies to improve outcomes for our most vulnerable service users.

Public Protection Team

We have also established a Public Protection Team which leads and supports the work of the EMPPC. The team includes the lead officers for adult support and protection and child protection, the violence against women and girls strategy co-ordinator and learning and development co-ordinator. The team is also co-located with staff from the Police Scotland ‘J’ Division Public Protection Unit and Midlothian and East Lothian Drug and Alcohol Partnership (MELDAP). The primary aim of the team is to work in a more integrated way to strengthen practice across the whole public protection arena.

Activities which are supported by the Public Protection Team include community and agency staff awareness raising, education and risk management initiatives and specific initiatives to address identified harm to groups (e.g. financial harm, sexual exploitation and investigation and protection planning).

There are strong and positive working relationships and links established with the NHS Lothian Public Protection Team and the development of the EMPPC office ‘hub’ has provided valuable opportunities to further promote and raise awareness of the NHS Lothian roles of Adult Support and Protection Advisor and MAPPA Health Liaison Officer. The role and function of the Child Protection Advisors while already well established, has also been enhanced. These key health roles all make a significant contribution to operational working, helping to build effective communication and liaison across the core agencies and support timely information sharing.

The NHS Lothian learning and development leads actively collaborate in the development and delivery of a broad range of training opportunities to promote best practice and encourage learning.

The East Lothian and Midlothian Public Protection Office (EMPPPO) is well placed at the hub in the centre of the spectrum of activity, both having an overview and offering support and guidance to operational staff across all agencies, working towards a more holistic approach.

Some of the main benefits and impacts which have been identified are:

- Taking a “Lifespan” approach by considering support and protection issues at all ages and stages of life;
- Putting the person at the centre of the process and looking at the situation with a wider lens;
- Sharing staff capacity and knowledge, resulting in a broader more flexible base;
- Less duplication of effort;
- More effective and efficient processes.

2) Adult Support and Protection

EMPPC are committed to delivering on the development of the national work streams and will work alongside practitioners to raise awareness and share information of all national developments in relation to the support and protection of adults at risk of harm.

This report reflects the implementation of the Scottish Government national data set introduced in April 2014. EMPPC has fully supported the implementation of the national data set and continues to work with Scottish Government.

The implementation of the national data set led to a review of the EMPPC adult support and protection procedures with a focus on section 4 *Duty to Inquire* and section 7 *Duty to Investigate*. This was also an area that the Care Inspectorate considered during their recent inspection of older peoples' services in East Lothian between June and October 2015. A number of briefing sessions were delivered to all Council Officers across East Lothian and Midlothian in respect of the changes and planned implementation from 1st April 2015.

National Data Set

EMPPC acknowledge that that the data provided is out with the reporting parameters of the biennial report (October 2014 – 2016). However, the data reported provides a more accurate picture of the adult support and protection activity within East Lothian and Midlothian and has been collated within the annual reporting periods (1st April – 31st March 2014-15 and 2015-16).

There has been a small increase in the number of adult support and protection referrals in both East Lothian and Midlothian in 2015/16 when compared to 2014/15. Midlothian Council received 501 referrals in 2015/16, an increase of 11% when compared to 452 in 2014/15. East Lothian Council received 493 referrals in 2015/16, an increase of 15% when compared to 427 in 2014/15. Police Scotland continues to be the main referrer to both Councils. This is reflective of the data collated by Scottish Government (2014/15) with Police Scotland being the biggest referrer of adult concern forms to local authorities with 53%.

Both authorities have experienced a reduction in the number of investigations undertaken in 2015/16, more notably East Lothian Council with a decrease of 45%. This has been attributed to a recording issue where the investigation was being recorded as part of the enquiry process and has now been resolved.

East Lothian:

Measure	2014 / 15	2015 / 16
Referrals	427	493
Investigations	125	69
Protection orders	3	3
Number of Large Scale Investigations	3	2

Midlothian:

Measure	2014 / 15	2015 / 16
Referrals	452	501
Investigations	94	129
Protection orders	1	1
Number of Large Scale Investigations	2	2

Given the volume of police referrals submitted to East Lothian and Midlothian Council and the co-location of Police colleagues from the public protection unit based within the public protection office, this offered an opportunity for agencies to work more cohesively and provide a co-ordinated approach to the screening and outcomes of all the adult concerns forms received to each local authority. An adult concern form consultation process was developed and piloted from August 2015 to December 2015 and comprised of twice weekly meetings attended by Police, social work from the respective local authority and health.

The purpose of the consultation process was to share information between core agencies enabling shared and informed decision making, the early identification of risk and whether the adult met the criteria of an adult at risk of harm, timely intervention where necessary and identifying the most appropriate route for information sharing and referral.

The adult concern form consultation process reduced the number of adult concerns submitted to social work in both authorities throughout the duration of the pilot (Aug – Dec 2015). During the pilot East Lothian Adult Wellbeing received 49% of the adult concern forms in comparison to 88% during the same period in the previous year. Police Scotland received 13% of the adult concern forms in comparison to 12.4% in the same period of the previous year and NHS Lothian received 38% of the overall referrals discussed during the adult concern form consultation. NHS Lothian did not previously receive direct referrals from police as there is no direct referral route between police and health and all adult concerns considered relevant for health are processed through social work.

Midlothian Adults and Community Care Team received 51% of the adult concern forms during the pilot period in comparison to 92% received in the same time period of the previous year. Police Scotland received 11% of adult concern forms in comparison to 8% the previous year. NHS Lothian received 38% of the overall referrals discussed during the adult concern form consultation.

A workshop was held with all staff involved in the adult concern form consultation, who evaluated the pilot very positively and described the benefits as:

- Having access to multi-agency information;
- Enabled more informed decision making;
- Identified the most appropriate route for referral / information sharing;
- Earlier identification of an adult at risk of harm;
- Earlier intervention where necessary;

- Clearer identification of roles and responsibilities;
- Availability of information from health and an identified health professional that enabled ease of access to information from other health professionals (e.g. GPs more willing to share information with another health professional).

As well as recognising the benefits of the pilot there were also a number of challenges:

- Volume of referrals and the impact this had on resources and time;
- Time lapse between meetings (twice a week);
- Health not always represented.

The adult concern form consultation was considered a good practice example by the Care Inspectorate during their Inspection of Older People's Services in East Lothian. The pilot was discontinued due to challenges in identifying a single point of contact within NHS Lothian and the implementation of the Police Scotland proof of concept within 'J' Division. As a result the pilot was deemed too resource intensive to implement on a permanent basis. A copy of the report on the Joint Inspection of Adult Health and Social Care Services for Older People in East Lothian is available [here](#).

Good practice example of multi-agency working

An adult with autism and mild learning disabilities who was subject to adult support and protection for a lengthy period of time in the past year was of concern due to his aggressive and threatening communications with various members of the public and professionals. Within a few months the adult had been subject to 60 police concern forms. As a result of close collaborative multi-agency working the adult is now subject to a local authority welfare guardianship order which helps to meet his complex needs.

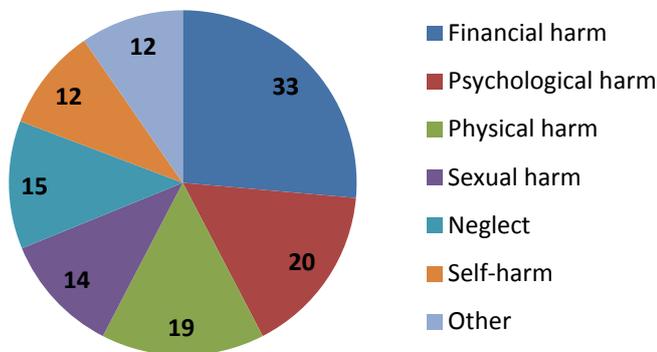
Key points that made a difference in this case were:

- Close collaboration between police and social work from the outset. At some points there was daily contact between the social work team leader and the public protection unit (police);
- Multi-agency discussion meetings at the Public Protection Office ensured an immediate plan was put in place and issues relevant to individual agencies taken forward without delay. The involvement of the adult support and protection advisor from NHS Lothian was extremely valuable in this case;
- The involvement of a psychiatrist and their investment in the process;
- Core group meetings were arranged which supported the communication process;
- Health facilitated an extremely quick assessment of the adult's capacity which enabled professionals to progress under the Adults with Incapacity (Scotland) 2000 Act immediately;
- Health set up immediate access to psychological therapy for the adult to address anger issues. This continues to be facilitated by social work.

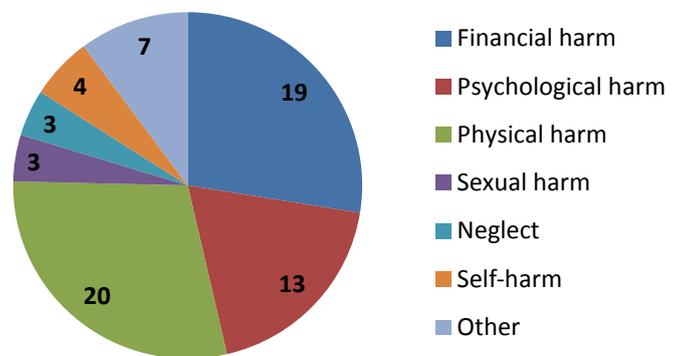
3) Principal type of harm

East Lothian

2014/15

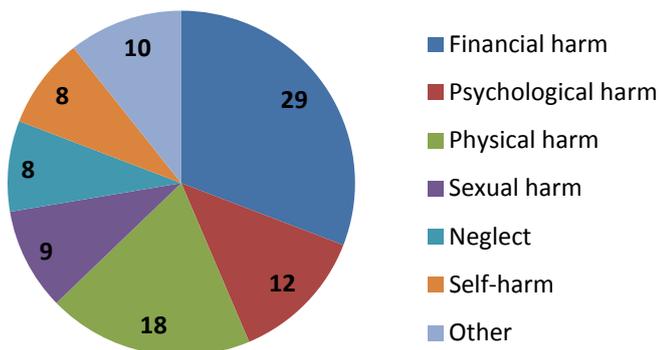


2015/16

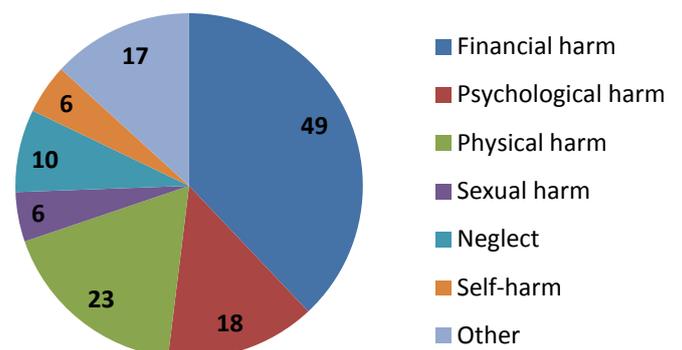


Midlothian

2014/15



2015/16



Financial Harm

Financial harm continues to be reported as one of the main principal types of harm in both Council areas, which correlates with the national picture identified via the national data set. EMPPC welcome the increase of investigations into financial harm as a progressive development as this suggests that there is an increased awareness throughout our services, stakeholders and the wider community and once identified this is being reported to the local authority for further inquiry and investigation.

EMPPC have developed a financial harm group, the focus of which is to establish links with partner agencies and raise awareness of financial harm locally. Initially this group was established with the adult support and protection lead officers from neighbouring authorities and representation from some of the local banks. This group did not continue because the National Financial Harm Prevention Group was formed which has strategic oversight. However local operational staff from trading standards, police, social work and the Fire and Rescue Service continue to meet to look at

preventative ways of identifying and providing a proportionate response to financial harm. A number of initiatives have since been developed.

EMPPC have developed financial harm training which provides information on the roles and responsibilities of each agency in response to the disparate range of financial harm. This training was reviewed and updated in 2015/16. The training is delivered to an inter-agency audience which includes third sector staff. The following is an example of where the training has been effective and illustrates a clear understanding of roles and responsibilities:

“An occupational therapist (OT) was visiting a family with a disabled child. The family had been approached by a local company who were persuading the mother to buy a specialist bed at an astronomical cost. The mother felt considerable pressure from the company to buy the bed for her son which was well out of her budget and was not necessary. The OT shared her concerns with trading standards who were aware of the company, which had previously operated under a different name and were known for their rogue practices. A joint visit to the family was undertaken to inform the mother of the information known to trading standards. The circumstances became a criminal matter and were subsequently investigated by Police”.

EMPPC have shared their training materials on financial harm with local banks at their request. This will assist the banks to raise awareness of financial harm with their staff.

Using the funding received from Scottish Government, the EMPPC, in conjunction with Midlothian Council, funded a *No Cold Calling Zone*. Trading standards subsequently reported that the number of complaints received in relation to bogus workmen and scammers in this zone had reduced significantly. EMPPC have also supported local advertising on buses using the materials from the national adult support and protection campaign in order to raise awareness of financial harm amongst members of the public.

EMPPC are in the process of developing a guidance document for multi-agency staff to raise awareness of roles / functions of the relevant agencies and of the varying types of financial harm. Financial harm will continue to be an ongoing area of development as it evolves.

Physical harm

Physical harm features highly in the data collected and it is thought that this is related to large scale investigations of care at home services where a number of service users may have had missed visits, medication errors or experienced poor manual handling. This type of physical harm often affects multiple people supported by the organisation. EMPPC are committed to undertaking further analysis of this data to determine the nature of the physical harm and if there is a correlation with a specific client group.

Large Scale Investigations

Large scale investigations continue to feature in the landscape of adult support and protection work. In 2015/16 both East Lothian and Midlothian Council have undertaken two large scale investigations each with three of these being specific to care at home services. This picture appears to be changing as previously large scale investigations were more prevalent although not exclusive to care homes. EMPPC have developed a Large Scale Investigation Protocol which has been reviewed to include care

at home services. This provides guidance to inter-agency staff in the investigation of harm within care homes and care at home services.

EMPPC implemented inter-agency quality in care meetings that continue to meet every 2 months in relation to care homes and every 3 months for care at home services. This provides a forum for agencies (NHS Lothian, social work and the Care Inspectorate) to share information and discuss concerns in relation to the quality of care delivered to residents within care homes and adults supported at home.

“Thank you for the train the trainers course, it was an enjoyable and informative course and I cannot wait to start the training”

Quote from attendee at train the trainers course

A train the trainers pack on adult support and protection has been developed and delivered to care home managers. This training has also been adapted and delivered to care at home service managers who are contracted with the Council.

An example of where the training has been effective:

“I actually can’t wait to deliver it to our staff and volunteers. I see this as a great way forward for managers. Ensuring their staff have instant training at induction and not having to wait months to get a place on level 1 adult support and protection training. This is very vital training and this awareness makes such a difference to protecting our vulnerable adults”.

EMPPC also carried out an audit of all care homes and care at home services adult support and protection policies and procedures within East Lothian and Midlothian. This work was progressed following a similar audit of child protection policies where it became clear that some organisations were attempting to combine their child protection and adult support and protection policies and procedures. A questionnaire style audit tool was used to evaluate policies and procedures which were devised from work already undertaken in another local authority area.

In total 28 care homes were contacted across both authorities with 16 responding. 4 of the care home providers that did not respond had previously been subject to large scale investigations. We also contacted 28 care at home agencies with 17 responding. 3 of the care at home providers that did not respond had previously been subject to a large scale investigation. The agreed recommendations from the above audit were as follows:

- Develop an adult support and protection policy template, based on the evaluation tool with examples of good policy information and a guidance note;
- Send the policy template to the agencies who have not yet provided their adult support and protection policy and request that their policy is checked against the template and if necessary to subsequently update / amend their policy prior to submitting it for review;
- Give specific feedback to the agencies that have been evaluated;

- Agree specific wording for future contracts with external agencies providing a direct service to adults and their families in East Lothian and Midlothian that clarifies expectations in relation to adult support and protection policies and training;
- Share the outcome of the evaluation with strategy and policy teams;
- Share information with operational teams of agencies identified with poor policy / procedures for staff;
- Provide “Train the Trainers” training for care at home managers on adult support and protection:
 - How to identify harm;
 - Roles and responsibilities;
 - When and where to report any concerns and / or adult support and protection concerns.

EMPPC continue to review, scrutinise and evaluate the adult support and protection policy and procedures of care homes and care at home services and share their findings with the Care Inspectorate.

4) Outcomes and strengths

Adult Support and Protection Improvement Plan

The EMPPC Performance and Quality Improvement sub-group continue to develop and monitor the progress of the adult support and protection improvement plan. The initial focus of the plan was informed by the Scottish Government national priorities: the national data set, financial harm, care homes and independent hospitals, service user and carer involvement and aspects of these areas continue to feature within the plan. The improvement plan also focuses on key areas of practice development highlighted through multi-agency case reviews and single agency case file audits which have identified areas of practice development through relevant training and guidance documents.

A single agency case file audit identified a gap in the recording of chronologies and the benefits of a chronology in the assessment and management of risk. A case file audit was undertaken and practitioners were consulted via an online questionnaire of their understanding of the purpose of a chronology in the support and protection of adults at risk of harm. The outcomes of the combined process identified the need for practice development for staff and this was delivered through workshops and supported by the development of a guidance document for practitioners. The continued improvement of chronologies in adult support and protection is monitored through the performance framework indicators and reported through the Performance and Quality Improvement sub-group (please see [appendix 2](#) – Adult Support and Protection Performance Indicators).

5) Challenges and priorities

Service Users and Carers Involvement

The evaluation of service user and carer feedback is essential to the development of all adult support and protection practice across East Lothian and Midlothian. This area of practice is monitored as part of the performance framework indicators (ASP11 and ASP12), which record whether adults attend their own adult support and protection case conferences and whether or not they feel safer as a result of the intervention.

The validity of the data reported to the EMPPC has been questioned and in light of the discussions a more robust approach was taken in an attempt to capture more qualitative data. It was thought that the most effective way to do this is to interview adults who have experienced the adult support and protection process whilst being mindful not to revisit the actual harm experienced.

“As a family we were very apprehensive at being made a ‘case’. However the meeting was extremely well chaired and did not get sidetracked from the main issues. The plan put in place is an undoubted improvement”

Adult Support and Protection Case Conference
service user feedback

Some of the difficulties experienced locally in engaging and capturing service user feedback in a timely manner are also reflected nationally. This area of practice continues to present challenges and further discussion is necessary to develop more robust and effective ways of engaging and obtaining the views and experiences of service users and their carers within the adult support and protection process.

Presently there is no direct service user and / or carer representative on the EMPPC and this was reflected in the Care Inspectorate report of older peoples’ services in East Lothian and is an area of consideration for the EMPPC.

Learning from Case Reviews

EMPPC support and facilitate learning informed by practice through recommendations and outcomes of Initial / Significant Case Reviews and have developed a protocol for conducting Significant Case Reviews based on the Scottish Governments guidance *Protecting Children and Young People: Interim Guidance for Child Protection Committees for conducting a Significant Case Review*. The EMPPC are in the process of planning a learning event for multi-agency practitioners, taking cognisance of recommendations of local and national significant case reviews and local initial case reviews and of the benefits that learning brings to practice.

Within this reporting period (2014-2016) there have been four initial case reviews (ICRs) for adult support and protection, there have been no significant case reviews.

Although independent of each other there were three ICRs that had similar themes of self-neglect, non-engagement with services and the assumption of capacity without full investigation. The combined set of circumstances presented agencies with a number of challenges specific to information sharing, when and how to intervene without the adults consent and the clear

comprehensive assessment of risk. The recommendations relate to information sharing guidance, a review of existing referral systems, the inclusion of adult support and protection in assessment and discharge planning and the provision of a carer's assessment. More significantly one recommendation highlighted the need for national guidance on the transfer of adult support and protection cases between local authorities. The development of this document has included the involvement of the National Co-ordinator for Adult Support and Protection and Lead Officers of the Adult Support and Protection sub-group of Social Work Scotland. This also informed the review of the *EMPPC – Adult Support and Protection Procedures* which now includes a section on the transfer of cases between local authorities.

A number of the recommendations identified locally are comparable to other recent case reviews undertaken nationally (e.g. the Glasgow Adult Protection Committee Significant Case Review on Mrs Ellen Ash). All recommendations from the case reviews are incorporated within the adult support and protection improvement plan to ensure the development of practice. This includes the development of practice learning sessions for staff which include multi-agency training on: the Interaction of the three acts; Risk assessment and risk management; Awareness raising of roles / responsibilities and Reporting routes of agencies.

In collaboration with our neighbouring authorities EMPPC have also developed an inter-authority adult support and protection investigation protocol to assist practitioners when investigating the risk of harm where an adult is temporarily placed in another authority (e.g. hospital admission) following a number of cases where Adult support and protection investigations were complicated by cross boundary residency. This protocol addresses the following scenarios;

- a) When the alleged harm has occurred within the temporary service, hospital or clinic;
- b) When the alleged harm has occurred in their home area to where the adult will return.

6) Self-evaluation

Multi-agency case file audits

The last multi-agency self-evaluation concluded in December 2013 under the previous East Lothian and Midlothian Adult Protection Committee and the recommendations are embedded within the current adult support and protection improvement plan (2015-18). Since the implementation of the EMPPC a number of single agency (social work) audits have been undertaken with a specific focus on information sharing and the assessment and management of risk. Areas for practice development have been included within the improvement plan and operational staff are working hard to improve specific areas of practice (e.g. chronologies and risk assessments) and their achievements are reflected in the performance framework indicators for quarter 1 of 2016/17. To ensure the quality of the support and protection of adults at risk of harm, future audits must focus on the multi-agency arrangements of information sharing and the assessment and management of risk through multi-agency case file audits.

Critical Services Oversight Group (CSOG)

An internal self-evaluation of the role and function of CSOG was undertaken in June 2015 with core areas being identified as: communication and engagement; equality and diversity; self-evaluation and scrutiny; governance and accountability. A number of actions were identified in regard to communication and engagement with recognition that a communication and engagement strategy is to be developed and embedded into practice. This would assist with raising awareness and the understanding of CSOG and its vision, strategy and priorities across agencies, at all levels with a particular focus on practitioners. The self-evaluation of CSOG will be incorporated into the wider public protection performance framework with set dates included within the evaluation calendar.

East Lothian and Midlothian Public Protection Committee Performance and Quality Improvement sub-group

A further self-evaluation of the role and function of EMPPC and the performance and quality improvement sub-group was undertaken on 15th October 2015. The outcome of the self-evaluation noted that the majority of themes indicated “some areas of good practice with some areas for improvement”, whilst people practices and approaches were generally noted as areas of good practice. Those areas noted as little or no evidence, and therefore a priority focus for improvement are as follows:

- **Service planning** – particular areas noted for improvement relate to:
 - Communication and consultation with customers, partners and stakeholders;
 - Performance management;

- **Processes and services** – development for this theme was noted against managing customer needs and expectations;

- **Customer results** – the self-evaluation noted that improvements were needed in measuring both customer perception / satisfaction and in identifying indicators related to outcomes;

- **Community results** – as for customer results the self-evaluation noted that improvements were needed in measuring both community perception / satisfaction and in identifying indicators related to outcomes.

In addition to the above priority areas for improvement / action further areas for consideration were identified by the group as follows:

- **Engagement** – further consideration to ensure engagement across a range of groups:
 - Front line staff (including criminal justice);
 - Public;
 - Service users.

7) Engagement with communities and service users

EMPPC fully supported the Scottish Government's national campaign on adult support and protection and used the materials to engage with members of the public, local communities and service users. A combination of campaign posters and leaflets were distributed to all council buildings, community centres, libraries, health centres, chemists and dentists within the local areas. A number of "pop up" stalls were constructed within local supermarkets to assist with the engagement of the general public and raise awareness of adult support and protection. Attendance at local community events, such as Midfest (family festival in Midlothian) and sharing a stall with our colleagues in trading standards, attendance at a local Age Scotland event held in East Lothian as well as publications in local newspapers and an interview on local radio.

EMPPC have worked hard to engage the public and to raise awareness of adult support and protection within our local communities and this is an area of continued development.



8) Conclusion

The East Lothian and Midlothian Public Protection Committee (EMPPC) has now been operating for two years and while there have been considerable challenges in bringing the four aspects of public protection together into one Committee there are advantages for all agencies in taking this approach to Public Protection. These advantages relate to the centralisation of the Public Protection Team which includes the lead officers for adult support and protection, child protection and violence against women and girls. The team have been co-located with staff from the Public Protection Unit of Police Scotland. This has provided the opportunity to have immediate access to police colleagues which has improved the response rate to adult protection concerns.

Further benefits of the joint Committee has been the work related to the development of the Significant Case Review Guidance and the work around Sexual Exploitation. The Committee have developed joint guidance for conducting Significant Case Reviews for all areas of Public Protection based on the initial guidance provided to Child Protection Committees. This has ensured consistency in the way both Initial and Significant Case reviews are conducted and discussions at the EMPPC have benefited from the wider perspective of both adult and children's services when considering the circumstances and identifying areas for improvement. In addition the development of the Child Sexual Exploitation guidance and action plan will influence and assist in the future work of the Committee around Sexual Exploitation and Human Trafficking.

This report demonstrates that partner agencies have committed to taking a lifespan approach to Public Protection and the EMPPC is now firmly established. All agencies across both local authority areas have demonstrated a high quality response to adults at risk of harm and recognise the key to ensuring good outcomes for adults at risk is collaborative working, good information sharing and confident and competent practitioners. The joint Committee has provided the opportunity to develop policies and guidance across both local authority areas and the recent completion of the local authority adult protection guidelines is a good example of cross authority working.

The Committee are currently setting out an ambitious programme of improvement for the next two years and face considerable challenges as a result of the increasing numbers of adults at risk in a difficult economic climate.

The implementation of the Integrated Joint Boards (IJB's) has been a key development within the timeframe of this report. This is a major change for both local authority areas and good communication between the Public Protection Committee and the IJB's will be crucial as we move forward.

East Lothian & Midlothian Public Protection Governance

Appendix 1



Appendix 2 – Adult Support and Protection Performance Indicators

Ref	Measure
Adult Support and Protection	
ASP01	Total number of cases with a live Adult Support and Protection plan
ASP02	Number of repeat Duty to Inquires within a 12 month period following Adult Support and Protection Case Conference
ASP03	Percentage of Duty To Inquires that have been completed within procedural timescales (within 5 working days)
ASP04	Number of Adult Support and Protection IRD's undertaken
ASP05	Number of adults with a repeat IRD within a 12 month period
ASP06	Percentage of Adult Support and Protection initial case conferences held within procedural timescale (from date of IRD rather than referral)
ASP07	Percentage of Adult Support and Protection review case conferences held within procedural timescales (within a maximum of 3 months of the initial / review case conference)
ASP08	Percentage of Adult Support and Protection initial case conferences where council officer reports were completed within procedural timescale (within 5 working days of the date of the case conference)
ASP09	Percentage of adults, at Adult Support and Protection initial / review case conference that have a single agency chronology in place
ASP10	Percentage of adults where a comprehensive multi-agency risk assessment has been completed within 28 days of the case conference
ASP11a	Percentage of Adult Support and Protection case conferences where the adult attended
ASP11b	Percentage of Adult Support and Protection case conferences where an advocate / guardian / power of attorney attended
ASP12	Number of adults reporting that they feel safer as a result of intervention (following Initial Case Conference)