

ADULT SUPPORT & PROTECTION IN CARE HOMES & INDEPENDENT HOSPITALS SETTINGS PROJECT

SUMMARY OF ANALYSES

(Scottish Care, Local Authorities, Care Inspectorate, Healthcare Improvement Scotland, Scottish Independent Hospital Association)

1. Background

1.1 As part of the development for the above named project, the project team commissioned surveys with the 5 named bodies above. The aim was to identify trends and ultimately gaps in the knowledge and training of Adult Support & Protection (ASP) in Care Homes and Independent Hospitals settings. The surveys were conducted in July 2013 and are a snapshot up to that period.

1.2 The project team agreed that the responses should remain in the project domain. The results helped the project team to develop the different products and recommendations the project seeks to deliver.

1.3 However the project team agreed that a summary of the analyses be published.

2. Summary

2.1 Each survey asked different questions to suit the needs of the organisation. Accordingly this analysis concentrated on the trends and common themes. However 3 of the surveys are analysed from a different perspective, i.e. from a process perspective.

2.2 All the surveys responses were positive and showed the amount of work that is being done to raise awareness of ASP and the development of training and co-operation to ensure adults at risk of harm are being referred appropriately. There is also a trend towards prevention.

2.3 The key questions asked in the analyses can be found in Annex A.

3. Common themes from all analyses

3.1 The analyses provided the following common themes:

- Support is improving such as:
 - Improved training and more accessible
 - Greater consistency in practice and inspection
 - Better information and communication
 - More local guides and resources
- A rise in referral numbers following ASP Awareness training to care home staff is acknowledged.

The below are aspirations:

- More multi-agency training, prevention rather than reactive and responsive in nature – illustrative of best practice.
- Contribution in case conference meetings as partners.
- More feedback to Care Homes is needed on cases following referrals.

4. Summary of key points from 5 analyses

4.1 Scottish Care (representing x% of providers of Care Homes):

The main points from the analysis were:

- Concerns over the involvement of other agencies in the ASP process, with fears of how the service is perceived when a referral is made.
- Concerns over what constitutes an ASP matter and thresholds
- Concerns about who should be contacted – e.g. does the Police need contacted in every instance?
- Concerns over the disparity in practices and lack of consistency between local authorities (LA) – problem for care providers who have care homes in many different local authorities.
- Training and time for training are an issue for care homes
- Training is usually too lengthy and technical – care homes found it difficult and challenging to simplify it to suit all kind of jobs in the care home
- Issues in rural settings.

4.2 Scottish Independent Hospital Association

The main points from the analysis were:

- Policy and procedures are made available to staff online and at inductions and refresher courses.
- The use of West of Scotland Inter-agency Support & protection Practice Guidance (July 2012).
- ASP awareness is included in the recruitment process and reference/screening system.
- ASP referral process is imbedded into the 'Complaints' process; written information for service users and their family (posters and information available).
- Information sharing is discussed with staff at inductions and training.

4.3 Local Authorities (Adult protection teams)

The main points from the analysis were:

- Acknowledgment that care homes receive mixed messages from the LA and the Care Inspectorate (CI) on what should be reported.
- Acknowledgment that there are challenges with information sharing and communication between agencies – an area needing further work.
- Concerns around processes and reporting, mainly around thresholds and clarity on reporting.
- The suggestion of national guidelines for care homes and reporting under Adult Support & Protection (Scotland) Act 2007.
- Examples of good practice from various LA who responded.

4.4 Care Inspectorate (Care Homes inspections)

The main points from the analysis were:

- The need to follow local procedures for referrals.
- The CI are involved in joint investigation – positive approach which leads to good outcomes.
- The need to check levels of referrals and training with staff
- Most cases are via the ‘Complaints’ process; referrals are then passed on to the relevant local authority.

4.5 Healthcare Improvement Scotland (Independent hospitals inspections)

The main points from the analysis were:

- Ensuring Independent Hospitals contact the relevant local authority.
- Prevention response with the relevant local authorities where there is a known high risk organisation/provider.
- ASP referrals are either via e-forms from the service or ‘Complaints’ process.
- Concerns from services about what ASP referrals are and what should be referred (most do not know they must refer to the local authority and the police if necessary).
- ASP awareness and training is variable across all services.

5. Conclusion

5.1 The analyses provided by the 5 organisations listed in section 3 have helped informed the following products:

- Learning Outcomes for staff training in Care Homes and Independent Hospitals.
- Information leaflets for general public.
- Best practice pilots run in 4 LA.
- Recommendations and Action Plan.

5.2 The project team also recommended to run the surveys 6 months after conclusion of the project in March 2014 to evaluate where changes have been most notable.

Annex A

Survey questions:

Scottish Care – to Care providers:

1. What has been your experience of using and embedding adult protection legislation in your organisation and service delivery in the last couple of years?
2. What have you found to be the challenges and obstacles to adult protection and support in general within your service delivery?
3. What sort of support do you think would be helpful in terms of further fostering an environment of adult protection and support in your service? For instance additional training resources, changes in practice, inspection etc?

Local Authorities (Adult protection teams):

- 1) What is the level of concern in your area around adult support and protection issues in care homes?
- 2) What do you do about it?
- 3) What would help?
- 4) Do you have any examples of good practice?

Care Inspectorate

1. Areas of concern where adults have been reported to be at risk in recent years in Scottish care homes actions taken to address problems. Examples of success stories.
2. Adult protection training in care homes (type, relevance, quality) - what is the role of the CI.
3. Level & type of adult protection referrals made by CI to Councils -system/process for this.
4. Information on existing processes for handling of complaints made to the CI or concerns reported.

Healthcare Improvement Scotland

1. What information do you have on the number and type of adult protection referrals from HIS to Councils in the last few years? The level and type of harm recorded?
2. Of the adult protection inquiries and investigations that HIS has been involved in the last few years (as a result of these referrals or others) what have been the successes i.e. good practice examples?
3. Other than by making adult protection referrals how else are concerns about harm/potential harm to residents picked up / recorded? via inspections/ complaints processes?
4. What have been the failures/problems ? Have you identified any changes which would reduce the re-occurrence of these problems?
5. What is the level of awareness of adult protection amongst staff in independent hospitals?
6. What is the level of training of staff in independent hospitals? (is the effectiveness of the training evaluated?)

Scottish Independent Hospital Association

1. Policy & Procedures
2. Training & Inductions
3. Safer Recruitment
4. Complaints and Allegations
5. Information Sharing

A series of questions were asked under each of the above headings. A copy of the survey can be obtained if requested.