



Teams	Who	When	Why
Core Group	ZS =Zandra Smith, IM =Iain McGregor, JM =Jane Mackie, SC =Sean Coady, EM =Emma Gormley CG =Carmen Gillies, MN =Marie Noble BS = Bridget Stone	Virtual Meetings 3 week (if required) 1/2/21	To be accountable and consult
Operational Working Group	CORE GROUP PLUS, CM =Charles McKerron, LM = Lesley McLean (Police Scotland) or FT =Fiona Topping (Police Scotland), CP =Claire Powers, CSH =Cheryl St Hilaire, IMD =Iain MacDonald, BS =Brendan Stephens, LA =Lesley Attridge SG =Suzy Gentle, VL =Vicky Logan, MS =Michelle Stephen , AA =Ashleigh Alan (NHSG) KOB = Kenny O'Brien(NHSG)	Virtual meetings every 6 weeks as invited 05/11/20 11/1/21 22/2/21 15/04/21. 17/05/21. 28/06/21. 09/08/21. 20/09/21. 01/11/21. 13/12/21	To be accountable and consult
Operational Working Group +	BW =Bruce Woodward, GM =Garry MacDonald, EM =Eilidh MacKetchnie, TW =Tracie Wills, TA =Tracey Abdy, YW =Yvonne Wright, NM – Neil McGlinchey (legal)	Receive updates via email	To be kept informed
Committees	ASPC =Adult Support & Protection Committee,	Receive updates via email	To be kept informed

The plan is divided into 2 phases. Phase 1 will focus on developing and agreeing the core process. Phase 2 workstreams will be prioritised after the completion of phase 1.



Phase 1.0 - Policy, Process & Procedure			
	Work stream	Description	Timeline
1.1	<p>Develop Core Process – ASP processes 1-4</p> <p><i>This will involve creating and embedding a robust screening tool into procedures, created with multi-agency input</i></p>	<p>Create small team to finalise process</p> <p>Support Access Team to improve the use of the screening tool</p> <p>OWG endorse process</p> <p>Screening Tool LIVE Aug 21</p>	<p>Mar-21 now Aug 21</p>
1.2	<p>Training & Data</p> <p><i>To support the project though identifying which training can be offered in Phase 1 to assist with improving the core process</i></p>	<p>Identify and share with OWG what existing training is on offer (Jackie Macintosh – Grampian trainer)</p> <p>Identify what data we need to collect</p> <p>Through monitoring data, identify any patterns where re education and training may be required across all environments.</p>	<p>Jan-Mar 2021 now Aug 21</p>
1.3	<p>Develop Core Process - IRD</p> <p><i>To create a robust IRD process created with multiagency input</i></p>	<p>NHSG Public Protection lead to support on the creation of a skeleton IRD process pan Grampian. Aim March for draft IRD to be endorsed.</p> <p>Moray IRD process to be developed incorporating Pan Grampian approach</p> <p>IRD LIVE Dec 21</p>	<p>Mar - Jun 21</p> <p>Aug – Dec 21</p>



1.4	<p>Documentation and ICT</p> <p><i>To ensure all forms are reviewed to ensure that they support information sharing between partners and are consistent with the revised Moray policy and procedures</i></p>	<p>Systematically identify forms which need created/amended as the project progresses</p> <p>Support process through modifications to Care First</p>	<p>Mar—May 21—now Nov 21</p>
Phase 2.0			
	Work stream	Description	Timeline
2.1	<p>Multi Agency - Training and Development</p> <p><i>Support staff by offering training and information sessions</i></p>	<p>Develop a package of training materials and information sessions to support the delivery of change management</p>	<p>May – Dec 21</p>
2.2	<p>Communication and Engagement</p> <p>Inform all stakeholders of the change process and explain the rationale</p>	<p>Develop a communication plan to explain the change process and the reasons why this change has taken place</p>	<p>ongoing</p>
2.3	<p>Continuous Professional Development</p> <p><i>Support change management through coaching, mentoring and supervision.</i></p>	<p>Deliver an on-going programme of materials to re-enforce new way of working</p>	<p>May – Dec 21</p>
2.4	<p>Performance Management</p> <p><i>Create a performance report which is clear, concise and timely to produce</i></p>	<p>Develop performance measures to support statutory requirements and continuous improvements. Sample test IRDs like Care Inspectorate 1-6 scale for CI.</p> <p>Sample internal processes – ASP 1-4</p> <p>Begin with Screening tool – sample Asp referral form</p>	<p>Sep -Dec 21</p>



Summary of Meeting 17/5/21	Action	Who
<p>1.1 Develop Core Process</p> <p>1.1.1 ASP Process 1 - Screening Tool: Interim process prior to IRDs in place for Access Team and ASPs has been created. As well as exceptions of practitioners when they identify ASP risks with people they already assigned to. Mapping of pathways have been created and written guidance from Zandra to be finalised before Screening tools goes live at the Access team. Screening tool will be in use when IRDs are being developed, then pathways will be further refined to incorporate IRD process.</p> <p>Access to start using screening tool as 2 APs are screening but no evidence of improvement. So using the tool will aid this.</p> <p>Access team have funding for 3.5FTE Social Workers for 12months, with a review in Dec 21.</p> <p>Issue/Snagging log was created by VL for access team to offer data to refine screening tool</p> <p>MILESTONE: Screening tool will be functioning and used on Care first by end Aug 21</p> <p>Deadline for Phase 1: End of March 21- Now Beginning of Aug 21</p>	<p>ACTION: Screening tool date to go live to be agreed with ZS and EG.</p> <p>ACTION: Zandra to support access team to embed change management</p> <p>ACTION: Zandra to create guidance notes for screening tool</p> <p>ACTION: Emma to add issue Log to teams share drive – Margaret to direct team to issue log and capture as they go once screening tool goes live</p>	<p>ZS with EG</p> <p>ZS</p> <p>ZS</p> <p>EG</p>
<p>1.1.2 Further Development of Core Process:</p> <p>ASP process 2 – Process for Practitioners (when they identify their own service user as potentially being at risk of harm under ASP legislation)</p> <p>ASP Process 3- ASP Team Process (when screening tool is forwarded from Access team -<i>This is an interim process whilst the IRD process is being developed</i>) – Go Live same time as Screening tool Process</p> <p>ASP Process 4 - ASP Investigation Meeting (including when 3pt test is met and no longer required)</p>	<p>ACTION: Zandra to create guidance notes</p>	<p>ALL</p> <p>VL</p>



<p>MILESTONE: ASP Processes 2-4 will be embedded between March through to June until IRDs are developed and core processes are further adapted and refined.</p> <p>Deadline for Phase 1: End of Aug 21</p>	<p>for ASP all other processes. Focus on ASP Process 3 – ASP Team process.</p> <p>ACTION: Date to be decided for ASP 2 and 4</p> <p>ACTION: Under ASP Process 4 : When a person meets the 3pt test a new event is required to be added called ASP Monitoring alongside ASP screening and ASP investigations. Vicky to add this into care first</p> <p>ACTION: FCAs required an additional drop down on ASP referral form. EG emailed VL for this to be actioned.</p> <p>ACTION: Under IRD need a minute of the meetings added to CF</p>	<p>VL</p> <p>VL</p>
<p>1.2 Training & Data</p>		



<p>Training: ASP module 1 and 2 training has been delivered to staff over TEAMS for MC employees and outside agencies. Module 3 / 4 harder to deliver online. Risk – training online is not as valuable as F2F. Reluctancy to discuss online. ZS – Council Officer Refresher training to be rolled out</p> <p>NHSG Training: – Training offer for Adult Protection for all NHS staff. Also offering level 3 training for GPs via CPD connect. Request from internal adult protection to provider training to nursing and AHP, level 2 is over subscribed. Liz Tait will see first draft of NHS Public Protection framework. Co-define who goes on what courses and training.</p> <p>Quality Assurance: for Phase 2 – sample 5 IRDs – look at the quality of the screening tool and grade 1-6 like Care Inspectorate. Look for areas of improvement.</p> <p>Deadline for Phase 1: End of Aug 21</p>	<p>ACTION: SG run Council Officer Training</p>	
<p>1.3 Develop care Process</p> <p>Background:</p> <p>IRD Process: Involvement from Public Protection Officer is essential to streamline the process across Grampian. Draft process to be shared end Jan for consultation and finalised by end Mar. A short life working group has been created to offer a consistent response across Grampian. Grampian IRD process will offer strategic guidance (Skeleton structure) which will need to be implemented into local IRD processes. Likely to have a phased approach to IRDs during June/July across Grampian.</p> <p>NHS requires a single point of contact between each HSCP. This person would not be the person to take forward the IRDs, they would need to access the clinical systems then identify the right person to nominate for take forward the IRD. KOB is consulting with GPs.</p> <p>Change management and culture change is required to support Adv Prac to chair IRDs, formally record on care first.</p> <p>Latest Update May 21:</p> <p>Grampian group have created an IRD process, just required sign off and implementation. Update will be given regarding single point of contact for NHSG.</p>		



<p>IRD training will be created through online presentations. First 6 slides will be IRD and the remaining will be specific to Moray.</p> <p>MILESTONE: Grampian IRD developed and in test phase for a period of review.</p> <p>Deadline for Phase 1: End of March 21 – COMPLETED</p> <p>MILESTONE: Develop Moray IRD pathway incorporating Grampian framework</p> <p>Deadline for Phase 1: March – July 21 – Delayed Dec 21</p>	<p>ACTION: ASP Team to work with KOB to add Morays IRD info to training package</p>	<p>KOB / ASP Team</p>
<p>1.4 Documentation and ICT</p> <p>VL has made great progress with updating Care first. Drop down options have been created, Also Police Concern Form is now Live in Care first and being used by Access Team. Stats regarding how many forms being created and the outcome are going to Emma Gormley. Need to discuss what is required to be audited and can we use care first to do this?</p> <p>Self-evaluation for health board required – legal duties sit with health board and local authority. Base lining where NHS and staff are.</p> <p>Deadline for Phase 1: End of Dec 21</p>	<p>EG and VL to work on data and share with OWG at next meeting. Gap analysis required</p>	<p>EG/VL</p>
<p>AOCB</p> <p>Police: Meeting with Fiona Topping Detective Inspector in charge of Aberdeen Hub met on 17 March 2021. LA – Is there any changes required form the police concerns report?</p> <p>ASP Adv Prac – new role to job advert and interviews planned middle May 21.</p>	<p>ACTION: Lesley to liaise with Fiona re police concern reports. Any changes required by Police?</p>	<p>Lesley McLean</p>



Adult Support & Protection: Moray Improvement Action Plan

19/05/21

APPENDIX 1



Adult Support & Protection: Moray Improvement Action Plan

19/05/21

APPENDIX 1

Description	ASP Improvement Plan - Phase 1									
	May '21	Jun '21	Jul '21	Aug '21	Sep '21	Oct '21	Nov '21	Dec '21	Jan '22	Feb '22
Develop Core Process	Re-establish Project Team									
	Screening tool developed	█								
	Screening tool tested and reviewed	◆		█	█					
	ASP processes mapped, tested and reviewed	█	█	█	█	█				
	Care First - test to live	◆		█						
Develop IRDs	Consult across pan Grampian	█	█							
	Sign off by Moray	◆	█							
	IRD training developed by NHS Grampian		█	█	█					
	Moray to add to IRD training package					█	█			
	Create Moray IRD process					█	█	█		
	Test Moray IRD process						█	█	█	
	Review IRD process before launch	◆							█	
Documents	Review Police / Health concern reports	█	█							
	Finalise all document changes					█	█	█		
Data	Record number of referrals	█	█	█	█					
	Adapt Care First to support data gathering			█	█	█	█	█		
Training	Screening tool training to staff		█	█	█	█	█			
	IRD training to staff					█	█	█	█	█
	Identify and deliver staff training	█	█	█	█	█	█	█	█	█
Go LIVE	Screening tool				█	█	█	█	█	█
	IRDs									



Legend: ◆ Milestone is complete ◆ Milestone is behind schedule — Current date

Phase 1

Develop Core Process
This will involve creating and embedding a robust screening tool into procedures, created with multi-agency input



Develop IRD Pan Grampian

To create a robust IRD process created with multiagency input



Training and Data

To support the project though identifying which training can be offered in Phase 1 to assist with improving the core process



Documentation and ICT

To ensure all forms are reviewed to ensure that they support information sharing between partners and are consistent with the revised Moray policy and procedures



Test Documents and Tools

Find out what people think about the new process. Implement feedback to improve the process.



Launch Phase 2

Once we are confident in our new processes and tools, we will move to Phase 2 - implementing the change agenda, focusing on communication, engagement and work force development



Dec 21