

CHILD AND ADULT PROTECTION ANNUAL REPORT
TO
THE CLINICAL GOVERNANCE COMMITTEE
1 October 2023 until 30 September 2024

Table of Contents

1	Core Purpose of Child and Adult Protection in The State Hospital	5
2	Summary of Core Activity for the last 12 months	8
3	Comparison with Last Year's Planned QA/QI Activity	10
4	Performance against Key Performance Indicators	11
5	Quality Assurance Activity	12
6	Quality Improvement Activity	13
7	Stakeholder Experience	13
8	Planned Quality Assurance/Quality Improvement for the next year	14
9	Next review date	14

1 Core Purpose of Child and Adult Protection in The State Hospital

The protection of children and adults from harm remains a key priority for The State Hospital. Staff from all disciplines within the hospital have clearly defined responsibilities. We work in accordance with the relevant statutory frameworks and our practice is underpinned by local policies and procedures, primarily The State Hospital Keeping Children Safe Policy, and The State Hospital Adult Support and Protection Policy.

The Child and Adult Protection Forum has continued, and the group has continued to meet via Teams to ensure that the priorities continue to be addressed and issues of child and adult protection remain at the forefront of work within The State Hospital.

Statistics contained within the report are based upon the 12-month reporting period dating from 1 October 2023 until 30 September 2024.

(i) Child Protection

The State Hospital has clear roles and responsibilities to ensure that children are safe and that their interests are paramount in relation to decisions made at The State Hospital which may affect them. The protection of children depends upon an understanding of when to be concerned about their safety and knowing when and how to share any concerns. The investigation and assessment of such concerns and the steps required to ensure the child's safety and well-being are critical components of this.

Within The State Hospital, our work in relation to the protection and welfare of children seeks to ensure that:

- Every child is assessed and reviewed on an individual basis.
- The core principle - that the welfare of the child is paramount - is fully embedded into practice and remains the primary consideration.

Key areas of assessment in relation to child contact are:

- When children are part of families visiting our patients and when patient outings to family homes, or other venues, with children present are proposed.
- Other forms of patient contact with children such as video contact, telephone, letters, gifts and photographs are requested

Child welfare and protection also necessitates:

- Multi-agency risk assessment and management of those patients with an offending history which suggests that they may present a risk of harm to children.
- Multi-agency risk assessment and management of those patients who are parents or guardians of children and have a history of substance abuse.
- Risk assessment of all proposed suspension of detention outings, in terms of potential risk arising from inadvertent or planned contact with children in a community setting.
- Multi-agency information sharing and robust reporting, recording and investigation of child protection concerns.

In fulfilling our duties, The State Hospital engages with a variety of stakeholders and is a partner in the South Lanarkshire Child Protection Committee which provides guidance and supports the governance of our activities.

(ii) Adult Protection

The Adult Support and Protection (Scotland) Act 2007 (the Act) provides measures to identify and protect 'adults at risk of harm'. The primary responsibilities under the Act have been placed upon the local authority, which must make enquiries if it knows or believes that an adult is at risk of harm. If necessary, the local authority must also intervene to protect the adult at risk's wellbeing, property or financial affairs.

Other key responsibilities include a requirement upon public bodies to co-operate with Council Officer inquiries and a requirement upon each local authority to introduce multi-agency Adult Protection Committees (APC) with an independent chair. The South Lanarkshire Council APC is well established, and is part of the governance arrangements in relation to adult protection activity within The State Hospital.

Within The State Hospital, all of the Social Workers and Mental Health Officers have completed South Lanarkshire Council's Adult Protection training and are authorised to carry out statutory roles and functions as Council Officers under the Act.

Examples of instances where this legislation may apply include harmful interactions between patients, allegations of inappropriate or neglectful staff conduct and harmful behaviours by members of a patient's family or other third parties.

(iii) The Child and Adult Protection Forum

An integrated approach to Child and Adult Protection at the State Hospital is now embedded into practice with work and priorities overseen and driven by the Child and Adult Protection Forum. The meetings are held bi-monthly and are chaired by the Director of Nursing and Operations.

The purpose of The State Hospital's Child and Adult Protection Forum (CAPF) is to:

- Act as a dedicated resource for the Hospital to assess our risks in relation to Keeping Children Safe and Adult Protection, prioritise them, and develop a plan of work to mitigate the risks and monitor the impact of our interventions.
- Discuss and critically appraise national, regional and local reports and proposals on Keeping Children Safe and Adult Protection and make recommendations, as appropriate, to the Board or Organisational Management Team.
- Have responsibility to develop, approve and monitor compliance with operational policies and procedures with regard to Keeping Children Safe and Adult Protection.
- Ensure all staff are aware of the risks associated with child and adult protection in our setting and their individual and organisational responsibility to protect children and adults at risk of harm.
- Ensure the establishment and maintenance of robust information sharing protocols and procedures between all health and social care professionals with regards to child and adult protection.
- Continue to maintain relevant links with South Lanarkshire Council's Child and Adult Protection Committees and sub-groups, and any other appropriate regional or national bodies.
- Support and lead on the implementation of any Scottish Government recommendations as appropriate.
- Receive reports on Keeping Children Safe and Adult Protection issues or incidents that occur in the Hospital, consider the reports and make recommendations on learning and improving practice.
- Consider opportunities for the audit of clinical practice in Keeping Children Safe and Adult Protection, as well as research and development, ensuring wide dissemination of any relevant findings.

- Report annually to the Clinical Governance Committee on activities related to Child and Adult Protection in the Hospital and beyond.

(iv) Corporate Parenting

The State Hospital has Corporate Parenting responsibilities for all patients up to and including the age of 25, who were looked after by their local authority at any point up to, and including, their 16th birthday. The aim is to support care experienced young people to feel healthy and safe, to take responsibility for their future wellbeing, and to achieve the best possible outcomes.

The TSH Corporate Parenting Plan (CPP) 2024 – 2026 is being finalized following consultation with internal colleagues and external partners. Within The State Hospital, care experienced young people are identified upon admission by multi-disciplinary assessment and with the support of colleagues within the Health Records department. Individual Corporate Parenting plans are developed in conjunction with the relevant local authority and community health services to meet TSH Corporate Parenting duties. These plans contain a mix of immediate needs requiring to be met in TSH, and extended needs following transfer.

At the present time, there are 3 patients within The State Hospital for whom there are Corporate Parenting duties. For these patients, there has been ongoing communication between The State Hospital and the relevant local authority in order to promote their needs and rights as care experienced young people.

(v) United Nations Convention on the Rights of the Child

The United Nations Convention on the Rights of the Child (UNCRC) was incorporated into Scots Law in July 2024 under the United Nations Convention on the Rights of the Child (Incorporation) (Scotland) Act 2024. The Act aims to ensure that children's rights are respected and protected within law in Scotland and places responsibilities on public authorities to respect and protect children's rights in the work they do. Public authorities (including councils and health boards) will be required to comply with the UNCRC requirements when delivering devolved functions conferred by or under Acts of the Scottish Parliament or under common law powers.

Key features of the act are as follows:

- Making sure the voice and lived experience of children and young people informs our planning and delivery of public services and how those services help realise children's rights.
- Carrying out Children's Rights Wellbeing Impact assessments (CRWIA) when a new strategy, policy is being developed, or when there is a change in public services planned.
- Public bodies publishing Children's Rights Reports to communicate how they are complying with the new act.
- Ensuring all children and young people know about their rights.
- Public bodies having child friendly complaints procedures in place.

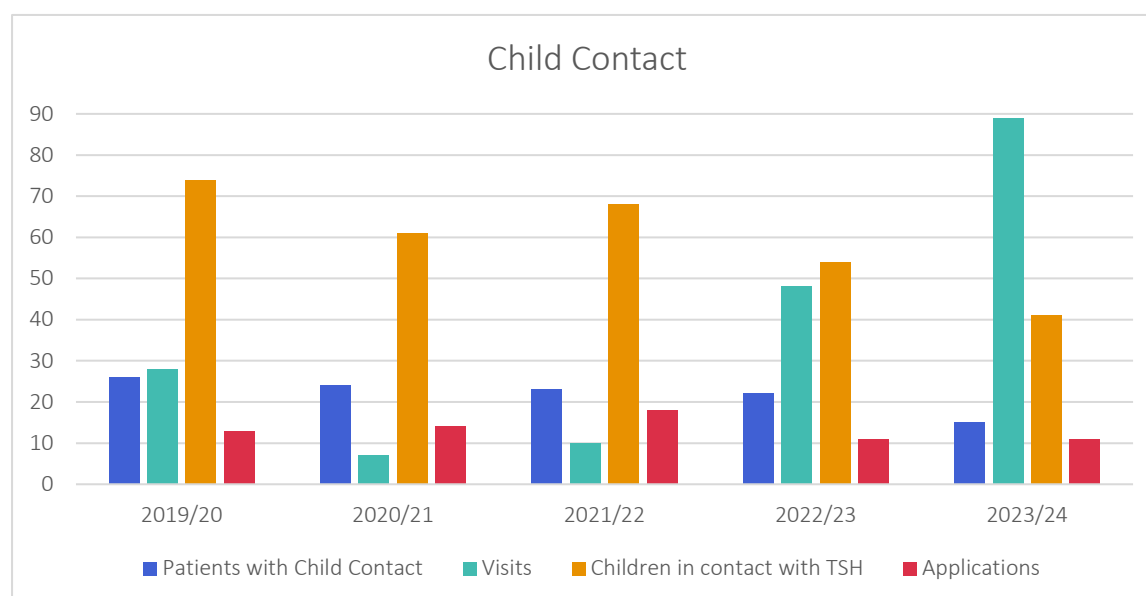
Within The State Hospital, work has commenced in order to meet our responsibilities under the Act. The Director of Nursing, AHPs and Operations and the Social Work Manager met with the Scottish Government lead to discuss our role and functions. Subsequently, there has been involvement in national fora to consider and develop key objectives and the practical implementation of the Act. A workplan is being developed to ensure that we meet our obligations and we are scheduled to report on our progress by 2026.

2 Summary of Core Activity for the last 12 months

(i) Keeping Children Safe

The following data reflects the work of the hospital in meeting our commitments, the key performance headlines and achievements of the past 12 months:

- Issues pertaining to Child and Adult Protection and Child Contact continue to be routinely discussed at Clinical Team meetings and form part of the Care Programme Approach (CPA).
- There are currently 20 parents within the patient group at the State Hospital. Of these patients, 4 have some form of contact with their own child aged under 16 years and 9 have contact with their adult children.
- In total, 15 patients are authorised to have some form of child contact. This represents a reduction in last year's figures and is a consequence of patients having moved on and children becoming adult visitors.
- There were 89 child visits to the hospital during the reporting period which represents a significant increase in numbers when compared to the previous year (48). Social Work continue to work with families to discuss child contact and provide support. The Person Centred Improvement Team continue to support child visiting within the Family Centre.
- 11 child contact applications were received during the reporting period which is the same number as the previous reporting period.
- 14 children were removed from the authorised child visitor list in the reporting period. 10 were removed as a result of patient transfers. In the other four cases, the child transitioned to adult visiting arrangements.
- At the end of the reporting period 41 children were approved to have some form of contact with a State Hospital patient.
- Child visitors are routinely supported to make the transition to adult visitors. However, where it is in their best interests they may continue to be supported as child visitors beyond the age of 16 years.

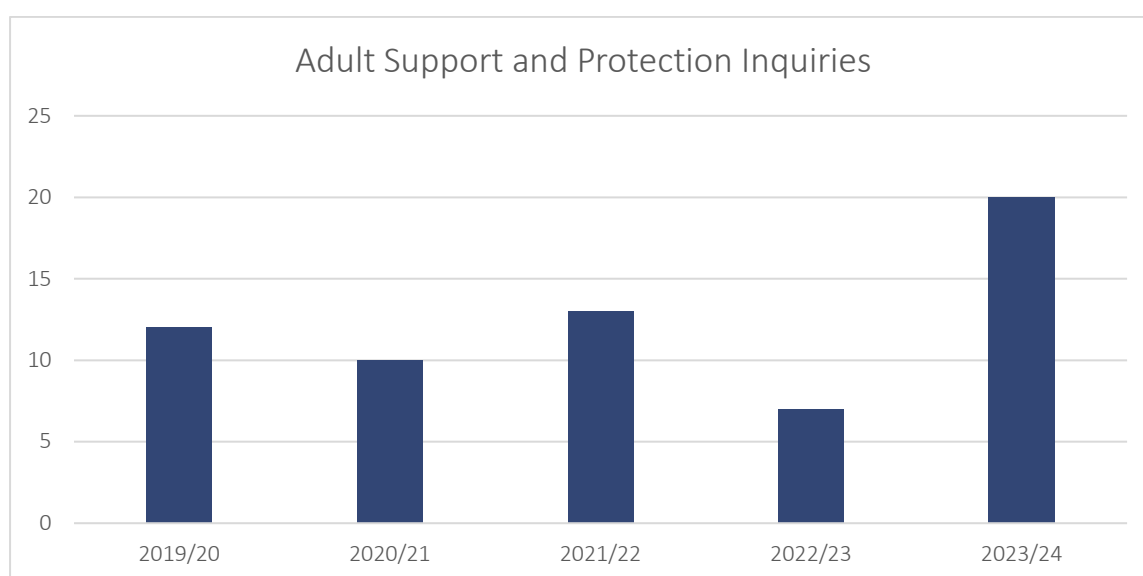


(ii) Adult Support and Protection

Adult Support and Protection issues continue to be regularly monitored and reviewed. Over the past 12 months there has been a significant increase in figures in terms of activity. All referrals and inquiries have been able to proceed in accordance with the policy and procedures.

The following represents many of the key performance headlines and achievements of the year's Adult Support and Protection activity:

- 20 Adult Protection inquiries were undertaken during the reporting period. This represents an increase from 7 during the previous year.
- Of the 20 inquiries undertaken, 11 related to patients with a diagnosed intellectual disability.
- The most common source of harm noted was patient/patient interactions which accounted for 15 inquiries, with 2 referrals relating to patient/staff interactions, 2 related to self-harm and 1 related to family issues.
- The breakdown of inquiries by hub is as follows: Iona 11, Lewis, 5 and Arran, 4. There were no ASP referrals arising from the Transitions Service within Mull.
- DATIX reports continue to be screened by social work for possible adult protection issues and adult protection remains a standing item on the Duty of Candour Group agenda.
- The majority of referrals required no further action be taken under the auspices of the Act following the conclusion of inquiries. The most common outcome was an amendment to the patient's care and treatment plan to promote their safety and well-being.
- 2 referrals resulted in an Adult Protection Case Conference being convened due to the complexity of the presenting situation. An Adult Protection Plan was developed and monitored via 3 further Core Group Meetings and reviewed at a further Case Conference when the Adult Protection referral was closed following significant amendments to the patient's care plan, supported by senior management within the hospital. These meetings were well supported by clinical staff within the hospital, the relevant local authority and the patient's Named Person and advocacy worker.
- There is evidence of clinical staff working in a pro-active manner to avert risk and maintain patient safety.
- Ongoing education and awareness sessions for staff continue to be delivered.
- Similar to Child Protection, positive and productive links with South Lanarkshire Council's Adult Protection Committee have been established.



(iii) Training

- The e-learning modules on Learnpro for Keeping Children Safe training and Adult Support and Protection are well established.
- Half day Workshop sessions on Keeping Children Safe and Adult Support and Protection continue to be rolled out across the hospital and are currently facilitated by the social work service with support from both nursing and Learning Centre staff.
- Figures received from the Learning Centre for the review period demonstrate workforce training in these areas as follows:

Module	2021/22 Compliance	2022/23 Compliance	2023/24 Compliance
ASP Level 1 Online Module	96.3%	97.6%	98.1%
ASP Level 1 Online Module - Refresher	79.1%	82.7%	84.2
ASP Level 2 – Training	72.8%	81%	88.9%
KCS Level 1 Online Module	95.7%	97.8%	98.2%
KCS Level 1 Online Module - Refresher	77.6%	85.1%	84.6%
KCS Level 2 - Training	79.3%	81%	85.2%

Over the last 12 months, a total of 6 Keeping Children Safe Level 2 training courses were scheduled for delivery, with capacity to train 72 staff. 5 courses were delivered with one cancelled. Of the courses that were delivered during this period a total of 50 staff attended and uptake on available places was 69.4% - an improvement on the previous year.

In the reporting period a total of 8 Adult Support & Protection Level 2 training courses were scheduled for delivery, with capacity to train 96 staff. 7 courses were delivered with a total of 64 staff in attendance. Overall uptake on available places was 67.7% which is a positive increase from last year's data.

Feedback from delivered sessions continues to be positive. Training materials have continued to be reviewed and updated to reflect legislative changes, emerging significant case reviews and experiences within The State Hospital.

Social Work have continued to maintain positive links with the Nursing Practice Development Team and are able to support training inputs being delivered during the induction of new staff.

3. Comparison with Last Year's Planned QA/QI Activity

Future areas of work stated in previous report	Achieved / In Progress / Not Achieved	Progress to Date
Further migration of Child and Adult Protection related templates etc. from word-based docs to RiO.	Achieved	Social Work will continue to work with the Rio Oversight and Development Group to ensure systems are fit for purpose.
Continuing to deliver KCS and ASP Level 2 Training and promote attendance.	Achieved	KPIs have been achieved in relation to training delivery.
Support transition to the new video visit platform.	Achieved	All families who have video contact with a patient were offered advice and support to transition to the new system. Families have reported that the system is easier to operate and a more stable platform.
Develop and publish the State Hospital Corporate Parenting Strategy 2024-2026.	In Progress	Following review and stakeholder engagement, the new strategy will be published in the coming weeks.
Develop child friendly literature in relation to The State Hospital.	In progress	Engagement with partner agencies, stakeholders and professional groups has been concluded. Literature has been developed and designed and is nearing readiness for publication.

4. Performance against Key Performance Indicators

No	Improvement Indicator	Outcome Measures	Update
1.	Child Contact Assessments	To be completed within 31 days of application being received	11 applications were received and 73% of assessments completed within timescales. Delays were as a result of external factors – family and local authority issues.
2.	Child Protection Summaries	All patients to have a Child Protection Summary by Admission Case Conference	This was achieved for all admissions during the review period.
3.	Child Protection Summaries	All patients to have a Child Protection Summary updated in line with Intermediate and Annual CPA Review Meetings	183 Child Protection Summaries were completed with 100% compliance achieved.
4.	Child Protection Referrals	Initial Referral Paperwork to be completed within 1 day of concerns arising	One CP Referral was received and paperwork completed within 1 day.
5.	Adult Protection Referrals	Referrers to receive initial response within 24 hours	This was achieved in 95% of cases.
6.	ASP Inquiries	Initial inquiries to be completed within 5 working days	Achieved in 100% of cases.
7.	Training – ASP Level 1	90% Target completion rate for target group.	98.1% achieved. This represents a 0.5% increase from the previous period.
8.	Training – ASP Level 2	85% Target completion rate for target group.	88.9% achieved. This is an increase of 7.9% from the previous period.
9.	Training – KCS Level 1	90% Target completion rate for target group.	98.2% achieved. This is an increase of 0.4% from the previous period.
10.	Training – KCS Level 2	85% Target completion rate for target group.	85.2% achieved. This is a 3.6% increase from the previous period.

There has been a continued collaboration between Social Work, Nursing Practice Development, the Learning Centre and heads of departments in order to achieve the training targets. We have seen improvements across all areas in the number of staff being trained over the past 12 months.

Training rates will continue to be monitored via the Child and Adult Protection Forum with feedback provided to relevant departments and the Organisational Management Team in relation to any emerging areas of concern.

5. Quality Assurance Activity

Performance across key areas of business is routinely monitored by the Child and Adult Protection Forum supported by data from Social Work, Clinical Effectiveness and Learning and Development.

The Social Work Manager meets with the Director of Nursing on a monthly basis to discuss current child and adult protection activity and are a standing item within Social Work team meetings.

Training figures are produced every two months by the Learning and Development team and passed to the CAPF for discussion. Departmental leads assume responsibility for addressing any deficits within their remit with communication to the Organisational Management Team as required.

The Social Work Manager participates in the Lanarkshire Child and Adult Protection Committee with regular updates provided to CAPF of developments pertinent to The State Hospital.

Policy and guidance in relation to child and adult protection are developed in collaboration with external partners who provide assurance that our policies and procedures are aligned with local and national practice.

6. Quality Improvement Activity

Training materials continue to be updated and developed to ensure they provide up to date information and practice guidance. Developments arising from emerging national guidance on Child Protection have been integrated into the Keeping Children Safe Level 2 and Adult Support and Protection Level 2 sessions.

The Social Work Manager has liaised with colleagues across the high secure services in terms of auditing and review of child contact and child protection practice.

New training is being developed to support staff who regularly have contact with children in their roles within the hospital including security colleagues.

The Director of Nursing and Allied Health Professionals and the Social Work Manager have met with Scottish Government representatives in relation to embedding the UNCRC within the hospital. We continue to participate in regular developmental forums to inform our progress in this area. A task group is being established in order to support The State Hospital to achieve its responsibilities under the UNCRC Act.

7. Stakeholder Experience

i) Keeping Children Safe

The views of key stakeholders, patients, carers and children are a key part of our work in relation to Keeping Children Safe. All assessments of child contact seek to reflect the views of the child, their responsible adults and the patient within the assessment paperwork.

For the second consecutive year there has been a significant increase in the number of child contact visits which have taken place within the review period. Consultation with families indicated a high level of satisfaction with their experiences of visiting in The State Hospital. As with the previous reporting period, it has been noted that the volume of child visits can contribute to challenges around booking adult visits. The Person Centred Improvement Team continue to work with visitors to support additional visits and ensure a degree of equity.

Engagement with patients and families in relation to Storybook Dads indicated that stakeholders were satisfied with current practice in relation to family contact and that there was no appetite at this time to implement the scheme within The State Hospital.

ii) **Adult Support and Protection**

Adult Support and Protection practice is underpinned by key principles which include having regard to the adult's past and present wishes, supporting their participation and considering the views of others in all interventions under the Act. All patients involved in these processes are offered access to advocacy services and their views are always considered during inquiries.

iii) **Training**

As noted, there has been further improvement in the number of staff who have participated in face-to-face training over the past 12 months. Feedback is sought after every session and has been largely positive.

8. **Planned Quality Assurance/Quality Improvement for the next year**

Planned Activity	Action Required
Implement UNCRC within The State Hospital	Continue to engage with local and national partners and stakeholders. Develop a TSH Workplan for implementation in relation to key responsibilities. Publish our UNCRC Report in 2026.
Publish the State Hospital Corporate Parenting Strategy 2024-2026.	Draft document to be reviewed at CAPF and prepared for publication on TSH website.
Publish child friendly literature in relation to The State Hospital.	Design and content being finalized. Final documents to be accessible on the web and via direct communication with families.
Quality improvement work in relation to child visiting.	Development of training for staff involved in child searching and update policy as required.

9. **Next review date**

Next year's Annual Report to the Committee on Keeping Children Safe and Adult Protection is scheduled for November 2025.