

## **Co-designing a Minimum Dataset for Adult Support and Protection – FAQs**

This document hopes to respond to FAQs. It also contains information on indicators that learning partners considered and tried out, but discounted for the reasons provided. These can be found at the end of this document.

### **What's a minimum dataset?**

Put simply, a minimum dataset is a collection of agreed indicators, measures, criteria, or categories that are quantifiable.

A Minimum Dataset is designed to create a robust and shared understanding of information that works both locally and nationally to generate meaningful and comparable data.

### **What's the purpose of an ASP Minimum Dataset?**

Its purpose is to inform planning and support the improvement of services at local and national level. It can provide a baseline, map trends (or progress) to this end. Its value must also be considered alongside other local data and different types of data, including the views of supported people to show the difference that ASP services make and how they can be improved.

It should involve all relevant multi-agency stakeholders in learning from it.

It should inform bi-ennial reports submitted by Convenors of ASPCs to Scottish Ministers every two years, which analyse, review, and comment upon APC functions and activities in the preceding two years.

### **Frequency of ASP Minimum Dataset returns?**

Data will be returned quarterly within a Financial Year, April-March. The data will be submitted by ASPCs to the Scottish Government, via their designated data processor, which is currently Iriss.

### **Who will use the ASP Minimum Dataset?**

It will be used by the Scottish Government to inform national improvement strategies and plans. The current Improvement Plan will run 2022-25. The minimum dataset will help identify national agenda items that the Scottish Government and ASPCs can usefully take forward together.

Data arising may also contribute to policy developments in policy areas that interact with or have an interest in ASP. Analysis and extracts of national data may be used to contribute to communications in the public domain relating to ASP.

It will be used locally by multiple-agencies with duties and responsibilities to support vulnerable adults and those at risk. Data should be used to support shared learning, drive improvement and inform forward planning.

### Why did we need to improve on what we had?

The [Adult Support and Protection National Strategic Forum and Improvement Programme](#) was set up in 2019 by the Scottish Government to provide a strategic and cross-sectoral view of what was needed to improve ASP across Scotland. Improving data and information, in particular strengthening the focus on outcomes, was identified as one of the priority areas. It was also informed by the [2018 thematic inspection by Care Inspectorate and scrutiny partners](#).

We know from speaking with ASPCs across Scotland that different recording practices, different understandings and inconsistent use of terms means that statistical data from different ASPCs is not comparable. It makes data 'unreliable' and non-publishable, it casts doubt on its veracity in revealing accurate national trends or in providing useful benchmark data.

We know from ASPCs that they are dissatisfied with what SOLACE ASP returns and Annual ASP returns can tell them locally. These provide basic statistical data, with a focus on the start of the 'ASP journey' and are limited in what they can tell us about people in the system – who they are, what happens to them and the support they receive to enable their fullest possible participation. This also reflects the move to supported decision-making as the Scottish Government looks to incorporate the principles of the UN Convention on the Rights of Persons with Disabilities into Scots Law.

Duplication of effort is also a significant issue for ASPCs, especially when capacity is already stretched.

### How did you go about creating the new ASP Minimum Dataset?

We carried out a mapping exercise to start – Iriss asked all ASPCs in Scotland to share what indicators they collect locally on a frequent basis. This was an appreciative exercise, to identify indicators in common use, and others with potential for national roll out.

Co-design and testing – Iriss was commissioned by the Scottish Government, to lead a **co-design** approach, working with learning partners embedded in the system. Following an open call for learning partners, and an expression of interest from 14 Adult Support and Protection Committees (ASPCs), five core learning partners were

selected. They are: East and South Ayrshire, Dumfries and Galloway, East Dunbartonshire and Renfrewshire.

The various stages are summarised below:

1. Co-design a prototype 'good enough' to test – informed by the mapping exercise and by learning partners knowledge
2. Test over two quarters – using July-Sep 2022 and Oct-Dec 2022 data, with time to reflect and refine
3. Roll the Minimum Dataset out across the sector – with it agreed to do this in a phased way.

### **Did anything else inform the work?**

During the project, we sought feedback on our prototype set from those who applied to be learning partners, but who were not selected. The work is also supported by the Data Reference Group. This is a national group with multi-stakeholder representation, co-chaired by the Scottish Government and Iriss.

We have also been mindful of aligning any indicators and their descriptors to the [Adult Support and Protection \(Scotland\) Act 2007: Code of Practice \(revised July, 2022\)](#).

### **Does the ASP Minimum Dataset come with supporting materials?**

Yes. We have created a workbook to support submission and reporting of data. This includes a list of indicators, dropdown lists, and scrutiny questions to help local committees interrogate, apply and reflect on what the data is telling them. This may also help determine if additional local data / intelligence is needed.

We have also produced a glossary of terms, aligned to the [Adult Support and Protection \(Scotland\) Act 2007: Code of Practice \(revised July, 2022\)](#).

The glossary and workbook can be found here: [www.iriss.org.uk/aspdataset](http://www.iriss.org.uk/aspdataset)  
Password: aspdataset2023. If there are any up-dates to guidance, these can also be found here, date-stamped.

### **What's different about the new ASP Minimum Dataset?**

It has been co-designed – with the sector, for the sector.

It includes indicators that see the whole ASP journey, rather than focusing disproportionately on the start, and tells us more about the people in the system. There are indicators that tell us about processes, to understand demand and referral

or onward pathways. There are indicators that tell us about the use of legislative powers. There are indicators that tell us more about the characteristics of people in the system; their attendance at case conferences – or the support they receive in this from family members, unpaid carers or friends, or via independent advocacy. We also collect data on the number of Adult Support and Protection Plans in place.

It includes data on the number of Learning Reviews, and asks about LSIs by service type. This is an area likely to be informed by the LSI Framework in development going forward.

### **How will it evolve over time?**

Undoubtedly, the first iteration of a quarterly national ASP Minimum Dataset won't be its last. In Child Protection, work on their Minimum Dataset began in 2018. It is currently in its second iteration. Future iterations of the ASP Minimum Dataset will be overseen and supported by the national Data Reference Group, which has multi-stakeholder representation.

### **What's the relationship of the ASP Minimum Dataset to SOLACE and other collections?**

The ASP Minimum Dataset will ultimately replace the Annual ASP Data returns as it will cover all of the annual indicators and more once it is 'up and running.' The ASP Minimum Dataset provides quarterly data which can be aggregated.

SOLACE data collections begun during COVID-19 for Chief Officer Groups (COGs) have moved from weekly to fortnightly, to four-weekly collections. They contain data on vulnerable children and adults, with ASP and Public Protection indicators. To support migration to the ASP Minimum Dataset, SOLACE will start using the definitions created through the Minimum Dataset project where there is 'a match' and crossover. This will support transition and alignment in understanding. It has also been agreed that SOLACE will collect a shadow collection until we are all confident that the transition to the Minimum Dataset has been successful. We will review quarterly Minimum Database returns to determine this, after which SOLACE ASP data collections will cease.

### **What are the timescales for roll out of the ASP Minimum Dataset?**

Roll out of the Minimum Dataset will be approached in a phased way. A sub-set of indicators from the ASP Minimum Dataset prototype have been identified for early roll out from April 2023-24 (Phase 1). These are indicators that are already collected

or which learning partners have identified as feasible and achievable to collect from this date.

There will be a longer lead-in time for any Phase 2 indicators to be rolled out, with the intention to identify these in Autumn 2023 for 2024-25 roll out and implementation. Phase 2 indicators will be tested by learning partners. Future plans for roll out will be communicated to ASP Leads and relevant others.

### How will the data be captured?

The data will be submitted via an excel spreadsheet template for the time being. The data will continue to be in an aggregated form i.e. no personal identifiable information will be shared. This is a similar process to what has been done for the ASP annual collection.

### Sharing data

We know you will be considerate of sharing potentially sensitive information about adults; especially when they may have been harmed and your role is to support and protect them from harm.

In line with Scottish Government data governance practices we have provided a Data Protection Impact Assessment (DPIA). This outlines how the data will be processed, the purposes of the processing etc. The DPIA was completed with and approved by our data governance colleagues.

Please note:

- ❑ No personal data eg. names, date of birth, postcode etc. have been requested to be shared. Some categorical data has been requested that include a person's attributes e.g. sex, age group, client group (i.e. disability), ethnicity etc. but this data has been requested at such a level that it's not specific to an individual eg. age group rather than age. Given that there are more than one person with each attribute in your area, sharing 1s in tables isn't disclosive.
- ❑ Each attribute is collected in a separate table and from these tables you can't put more than one together and learn anything new about an individual. For example, if there's one person who had a learning disability and one person had been financially harmed there's no way to tell whether they are the same person or not. If this were to change, and more categories were put together in one table or to reflect one person, we would need to revise the DPIA.
- ❑ Iriss are working on behalf of the Scottish Government and must follow the same governance rules on our behalf regarding confidentiality, data storage etc.

Please **do not** include or offer any personal identifiable information, e.g. names, in the workbook template as we do not want to collect any personal identifiable information.

### Will the ASP Minimum Dataset be published?

The Scottish Government is yet to decide what will or will not be available in the public domain. The quality of the data received will inform this along with a Data Protection Impact Assessment considering any risks of identifying individuals within the data.

### What doesn't it contain?

The following type of indicators were considered as part of the project, but excluded from the prototype set for the reasons provided.

**Statistical data based on the expressed views of adults at risk** – it was determined that we have no way to ethically collect whole population data, or reliable sample data through surveys to allow for meaningful comparison across ASPCs. We also concluded that there are better ways to seek this type of feedback, through dialogue and relationship building at individual or group level with adults at risk or family members/designated friends/unpaid carers.

**Individual outcomes** – this cannot meaningfully be supported in a Minimum Dataset without use of unique personal identifiers to track people through a system. Rather, APCs might consider that user journeys or chronologies can support the tracking of outcomes at the individual level.

**Information about alleged perpetrators of harm** – presently, only a few APCs collect this type of information.

**Data on IRDs** – with this standing for inter-agency or initial referral discussions in different ASPCs. These are used by some ASPCs as an indicator of multi-agency working, however, IRDs are not universal practice in Scotland.

**Target timescales** – responsibility for setting these is held at local level. As such these will be variable, and we discussed the risk of targets driving behaviour with negative unintended consequences.

**Data on repeat or re-referrals** – there was no consensus on a consistent measure. From the mapping exercise, we know that indicators with similar names were being used for different purposes – to identify multiple referrals for the same person from different agencies at a point in time; to identify people who were receiving referrals despite being in or being supported by the ASP system; to identify those who had left

the ASP system, but were returning to it. Arguably, these might indicate if someone had been 'missed' or that there were still issues to resolve that required continuing support, or by bringing them back into the ASP system. This indicator may be revisited in the future, but in the short- to medium-term the ambition is to ensure we make more consistent use of, and have a shared understanding of 'ASP referral' as outlined in the ASP Minimum Dataset glossary.

**Count of (repeat) requests where there has been use of S10 investigatory powers to obtain financial records** – the intention of this indicator was to provide data on where financial institutions were not responding to requests at all or in a timeous manner causing delays, with the hope that this might inform Scottish Government policies around fraud prevention. However, it was noted that there are no common or statutory requirements for responses within a set time frame; and that alternatives, such as 'refusal' to provide, would not be appropriate.

**Police or welfare concerns** – learning partners saw little value in collecting this as part of what is an ASP Minimum Dataset.

**Data on Large Scale Investigations (LSI) that tell you about i) the volume of adults at potential risk in an LSI, or ii) volume of work inputted by staff.** These were discounted as 'too difficult' to count in any consistent way for now. It was noted that LSIs can happen in many different places, including registered and non-registered services; that 'the edges' of a service are difficult to determine (but required to count the potential number of people at risk.) Should this be understood as a wing or a ward, an organisation or a business with multiple sites? In terms of counting staff hours invested, this information was not available or could not easily be obtained as a FTE. It was also highlighted that 'near misses' that did not translate into an LSI, nevertheless constituted hours of staff time invested.

**'New descriptives'- relating to adults with care experience, adults with dependent children, and recent prison leavers** - Learning partners trialled capturing the number of those in the ASP system meeting these descriptions. It was initially agreed these would be captured for all those going to a case conference and with a subsequent Adult Support and Protection Plan put in place.

The rationale for the inclusion of these indicators was to:

- highlight links between systems (ASP, prison and children and young people) and to help raise useful questions as to how well systems are joined up to best support people at transition points
- identify the volume of people in ASP with these life experiences to make these vulnerable groups visible in ASP work, and
- further consider what this means for developing trauma-informed practice.

In the testing phase, however, issues in implementing this were raised including:

- i. whether the data was being collected at an early enough point to be really useful
- ii. whether definitions for 'care experienced' or 'recent prison leaver' (including its relationship to parole) could be agreed; and whether this should be limited, for example to the last five years or determined on a case by case basis 'where relevant'?
- iii. There was also a raft of practical issues to do with knowing where previous trauma or care experiences would be recorded (if indeed it was) with this relying on manually checking scanned records or accessing other local authorities records.
- iv. It was also recognised that records may be 'partial' or incomplete given adults' longer life histories.
- v. It was felt that chronologies would not necessarily capture what was needed given the recognised need for improvement in this area; that chronologies may not 'go all the way back'; that they cannot be completed for every inquiry due to capacity in the system, with this generally prioritised for adults in the system going to case conference.
- vi. The alternative of asking people to self-identify at a given point and record this in the system posed its own challenges. Where and how would we routinely ask this using consistent questions? How would we do this in a sensitive and trauma-informed way (and do we need additional training to support this)? How would we address issues of capacity affecting some adults to ensure equitable and/or reliable responses? And importantly, are we clear on *why* we are asking and being transparent with the adult on how we are categorising them in records and what we will do with this information? Is this also necessary and proportionate? Are there GDPR issues?

Given the complexities that arose and questions as to whether this data is really about i) capturing trauma and its relevance to the adult in question, ii) the intersection between services or iii) both – it was agreed to drop the 'new descriptives', certainly for Phase 1 or 2 of the ASP Minimum Dataset.

Instead, learning partners decided to collect data on adults in the system with dependents, mindful of guidance in the Code of Practice (2022) p 24 that 'When making inquiries as a result of either adult or child protection referrals, consideration should also be given to the potential vulnerability of other members of the household.' As such they are trialling the following indicators to inform Phase 2: 'Number of adults at risk with childcaring responsibilities' and 'Number of adults at risk with caring responsibilities for other adults.'