MEETING

SPECIAL SAFEGUARDING OVERVIEW AND SCRUTINY COMMITTEE

DATE AND TIME

MONDAY 24TH SEPTEMBER, 2012

AT 7.00 PM

VENUE

HENDON TOWN HALL, THE BURROUGHS, NW4 4BG

TO: MEMBERS OF SAFEGUARDING OVERVIEW AND SCRUTINY COMMITTEE (Quorum 3)

Chairman:	Councillor Bridget Perry (Chairman)
Vice Chairman:	Councillor Kate Salinger (Vice-Chairman)

Councillors

Alison Cornelius Barry Evangeli Brian Gordon

Anne Hutton Ross Houston Brian Salinger Agnes Slocombe Zakia Zubairi

Substitute Members

Julie Johnson	Anthony Finn
Sury Khatri	Ansuya Sodha

You are requested to attend the above meeting for which an agenda is attached.

Aysen Giritli – Head of Governance

Governance Services contact: Andrew Charlwood 020 8359 2014 andrew.charlwood@barnet.gov.uk

Media Relations contact: Sue Cocker 020 8359 7039

CORPORATE GOVERNANCE DIRECTORATE

ORDER OF BUSINESS

Item No	Title of Report	Pages
1.	Minutes	
2.	Absence of Members	
3.	 Declarations of Members' Interests a) Personal and Prejudicial Interests b) Whipping Arrangements (in accordance with Overview and Scrutiny Procedure Rule 17) 	
4.	Public Question Time (if any)	
5.	Members' Items (if any)	
6.	Adult Social Care and Health - Caring for Our Future White Paper; Draft Care and Support Bill; and Funding Reform	1 - 10
7.	Adult Social Care and Health Annual Complaints Report 2011/12	11 - 50
8.	Ofsted Inspections of Schools	
9.	Members' Visits to Children's Homes and Young People's Hostels - Options Paper	
10.	Cabinet Forward Plan	71 - 80
11.	Safeguarding Overview and Scrutiny Committee Forward Work Programme 2012/13	81 - 90
12.	Motion to Exclude the Press and Public	
	That under Section 100A (4) of the Local Government Act 1972 the public be excluded from the meeting for the following items of business on the grounds that they involve the likely disclosure of exempt information as defined in paragraph 9 of Part 1 of Schedule 12A of the Act (as amended).	
13.	Members' Visits to Barnet's Children's Homes and Young People's Hostels	91 - 110
14.	Statutory Regulation 33 - Officer visits to Barnet's Children's Homes	111 - 152

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AGENDA ITEM 6

Meeting	Special Safeguarding Overview and Scrutiny Committee		
Date	24 September 2012		
Subject	Adult Social Care and Health – Caring for Our Future White Paper; Draft Care and Support Bill; and Funding Reform		
Report of	Cabinet Member for Adults		
Summary	This report describes the main points from the three key adult social care policy documents; Caring for Our Future the white paper; the draft Care and Support Bill; and the Government's interim statement on funding reform for Adult Social Care. All three documents were published in July 2012. The report sets out the implications for Barnet and outlines work required to manage the implementation of the new requirements arising from the White Paper and legislation.		
Officer Contributors	Dawn Wakeling, Deputy Director Adult Social Care and Health		
	Helen Coombes, Head of Transformation, Adult Social Care and Health		
	Kerry Anne-Smith, Head of Finance (Children's and Adults), Deputy Chief Executives Service		
	Mathew Kendall, Assistant Director Transformation and Resources, Adult Social Care and Health		
	Kate Kennally, Director of Adult Social Care and Health / Interim Director of Children's Services		
Status (public or exempt)	Public		
Wards Affected	All		
Key Decision	No		
Reason for urgency / exemption from call-in	N/A		

Function of	N/A
Enclosures	N/A
Contact for Further Information:	Dawn Wakeling, Deputy Director Adult Social Care and Health, <u>dawn.wakeling@barnet.gov.uk</u> 020 8359 4290

1. **RECOMMENDATIONS**

- 1.1 The Committee note the contents of the report and consider the impact of this new national policy framework on Barnet Council's Adult Social Care function.
- 1.2 The Committee endorse the establishment of a dedicated programme of work that will analyse the impact of the new framework and implement a series of actions to ensure that Barnet Council can meet its new responsibilities successfully
- 1.3 The Committee note the indicative resource implications arising from the new framework and note that further work is to be done to develop a detailed resource model and mitigation plan for consideration by the relevant decision making body.

2. RELEVANT PREVIOUS DECISIONS

2.1 None.

3. CORPORATE PRIORITIES AND POLICY CONSIDERATIONS

- 3.1 The draft Corporate Plan responsibility of 'Sharing Opportunities and Sharing Responsibilities'; accords with the underpinning principles set out in the White Paper. In addition the Corporate Plan contains the objectives of: safeguarding vulnerable children and adults; supporting residents to lead healthy and independent lives; and offering greater personalisation for users of social care services, a positive experience of care and support for carers. These themes are all in keeping with the direction of travel set out in the White Paper and the council's future plans for adult social care will need to be within the policy and legal framework set out in the White Paper and Care and Support bill.
- 3.2 The draft Health and Wellbeing Strategy 2012-15 sets out two themes of relevance to the new policy framework: Keeping well, Keeping independent. The White Paper agenda links directly with three of the main themes in the strategy: Wellbeing in the community; how we live; and Care when needed. In particular 'Care when needed' identifies plans for developing support for older people, improving support for residents in care homes and improving support for carers.

4. RISK MANAGEMENT ISSUES

4.1 Whilst the overall direction set out in the White Paper is positive for users and carers, an initial review of the White Paper has identified some potential risks for the council in implementing its requirements. These are particularly the resource and financial implications of providing enhanced services to carers, to people who fund their own care along with the deferred payments scheme.

- 4.2 A number of new statutory requirements and duties are set out in the new policy and legislative framework and there would be risk for the council in failing to meet these new statutory requirements.
- 4.3 The demographic challenges and increasing complexity of need faced by adult social care are already being addressed through a focus on prevention and early intervention, with improved information and advice, and better access to telecare and enablement for adult social care key mitigating strategies. However with an increased focus on an integrated care and accommodation approach, a council wide response will need to be developed that plans for a range of private and social housing that is able to meet different people's needs and requirements and maximises the opportunity provided by recent changes to the Housing Revenue Account. This approach would mitigate the demand and financial pressures that will continue to be faced by adult social care.

5. EQUALITIES AND DIVERSITY ISSUES

- 5.1 The White Paper sets out that age discrimination in health and social care is to be unlawful from October 2012. This is in line with the duties incumbent on all public bodies through the Equalities Act 2010. Adult Social Care works within the council's policy framework for equalities, offers services to users within this framework and undertakes relevant positive action to ensure social care is accessible to groups with different equalities characteristics; for example, producing easy-read information for people with learning disabilities and offering interpreters for service users.
- 5.2 Age discrimination should be considered broadly: younger people may perceive that older people receive more favourable treatment from services as well as older people perceiving that they are less favourably treated. The prohibition does not mean that all age groups should therefore be offered identical supports or services. However, it does require the council to have a transparent and fair rationale for different approaches or supports offered to different age groups, just as it already does for current positive action in place, such as providing interpreters.
- 5.3 However, there is a general risk from this prohibition applicable to all councils, which may face an increased level of potential legal challenge from individual users or groups, using this prohibition as its basis. Nationally, there have been legal challenges based on equalities legislation: for example, the 2011 challenge to Birmingham City Council on its proposed change to adult social care eligibility criteria.
- 5.4 In order to ensure Barnet Council is compliant with this requirement, consideration will need to be made of existing social care supports specific to different age groups, along with wider universal services, to ensure there is a transparent and fair approach to the offer to social care users based on age.

6. USE OF RESOURCES IMPLICATIONS (Finance, Procurement, Performance & Value for Money, Staffing, IT, Property, Sustainability)

- 6.1 The White Paper and draft Care and Support Bill set out a number of additional requirements for councils and has provided a high level impact assessment as to the resource required to meet them. However, it is currently unclear how the additional requirements will be funded at a national level and it is anticipated that more information will be issued by the DoH in the future. This report contains initial estimates of the impact for illustrative purposes. In modelling these estimates, this report has assumed that where a national assessment of the financial impact has been set out in the White Paper, the Barnet proportion of that is equivalent to 0.6%. This report recommends that a work programme to investigate and review the resource and other implications of the White Paper is established. When there is clarity about funding nationally and the local work programme is completed, detailed work to address the use of resources implications of the White Paper in the council's Financial and Business planning process will take place.
- 6.2 The White Paper proposes to offer extended rights of assessment and a right to services for carers. The Department of Health estimates the changes will cost councils on average £144m per year. The Council currently supports carers with a budget of £1m. Therefore based on the assumption above, implementing the White Paper requirements therefore could necessitate spending levels to be increased to £1.86m per annum.
- 6.3 The proposals also include the requirement to offer assessment, support planning and review to people who fund their own care. This is not a service we currently provide to self funders and it would involve additional resourcing costs in terms of social work time and capacity. The council currently spends approximately £10m on social work services and supports a relatively low number of people given the high proportion of self funders within Barnet (2.8% of the Barnet population, compared to London average of 3.4% and England average of 4.4%). Assuming an increase to the England average, for illustrative purposes, this could necessitate an increase in social work spend of approximately £5m per annum.
- 6.4 The White Paper proposes that there will be a national minimum eligibility threshold for case assessments from 2015 with an estimated annual cost of £18m. The Barnet Council threshold for eligibility under the national Fair Access to Care Services eligibility criteria is set as being at critical or substantial in line with over 85% of councils. A reasonable assumption is that the impact of this change for Barnet will be £108k per annum.
- 6.5 The government's response to funding reform sets out a requirement for council's to offer deferred payments for social care on a universal basis from 2015. Under this scheme, the council would fund the service user's social care costs, which would then be re-paid to the council after the demise of the user, from their estate. Barnet does not currently offer this to local residents, having not implemented a deferred payments scheme. Whilst the details of the proposed scheme are still to be published there may be financial and resource implications from running such a scheme, including an additional pressure on the existing financial assessment team and treasury management implications. The impact of this has not been quantified. However it is

anticipated by central government that Local Authorities will be funded for this new responsibility and in the long term this scheme will become self funding.

6.6 The White Paper states there will be an additional £300M funding for social care to local authorities via national NHS commissioning board for integrated care in 2013/14 and 2014/15. For Barnet, this can be assumed at a level of £1.8m over two years. However it is unclear as to whether this will be recurrent funding. Despite this being welcome given the financial implications of the White Paper, Adult Social Care continues to experience high levels of demand pressures arising from demographic pressures. Given this context, Adult Social Care and Health is working to manage demand and cost and it will be important that it continues to do so. Nationally the King's Fund has calculated that a funding gap of £1.2bn could open up between 2011-15 due to the government's 28% real term cuts to council budgets reflecting Barnet Council's own analysis of the financial implications of growing needs for children and adults care. The additional responsibilities that the White Paper will confer and the funding levels required have been based on current budgets and not reduced future budgets. It will be important that this level of financial risk for the Council is guantified through the Finance and Business Planning process at the appropriate time.

7. LEGAL ISSUES

7.1 The current social care legislation has evolved over a number of decades and in a piecemeal manner. The current legislation is complex and sometimes confusing and the Courts have commented on these difficulties in several cases. As with the Equality Act 2010, the draft Care and Support Bill sets out to consolidate several pieces of legislation and will replace over a dozen different pieces of legislation with one Act. The new legislation is designed to be less complex and easier to apply for practitioners within the council, their legal advisers and, in the case of legal challenges, the Courts.

8. CONSTITUTIONAL POWERS

- 8.1 The scope of Overview and Scrutiny Committees is contained within Part 2, Article 6 of the Constitution.
- 8.2 The terms of Reference of the Scrutiny Committees are in the Overview and Scrutiny Procedure Rules (Part 4 of the Constitution). The Safeguarding Overview and Scrutiny Committee has within its terms of reference the following responsibility:
 - To scrutinise the provision of Adult Social Care services (including those who have physical disabilities, sensory impairment, learning disabilities, mental health needs or other special needs) to ensure that residents are safeguarded and supported to lead as independent lives as possible in their own homes.
 - To scrutinise the Council and its partners in the discharge of statutory duties in relation to safeguarding.

9. BACKGROUND INFORMATION

- 9.1 In July 2012, the government published the following key documents:
 - Caring for Our Future: Reforming Care and Support (White Paper)
 - The draft Care and Support Bill
 - Caring for Our Future: progress report on funding reform
- 9.2 The White Paper, Caring for our Future, describes a vision of a new role for local authority adult social care. In the new system, the local authority becomes a system leader as opposed to a provider of care management and service provision reflecting the direction of the council. Councils are expected to concentrate on needs assessment, supporting social capital, promoting Direct Payments, information and advice and market development. The Care and Support Bill is in pre-legislative scrutiny and will be introduced to Parliament in 2013
- 9.3 The strategic and business plans of Adult Social Care and Health are in line with many of the White Paper themes. The Directorate is already working on promoting and increasing direct payments, enhancing support to carers, new on-line information, support, and building social capital through schemes like the Supporting Independence Fund.
- 9.4 The plans for the new Adults and Communities Delivery Unit include an increased focus on prevention and information and advice. The focus on commissioning and system leadership for local authorities has strong synergy with the vision of the Commissioning Council. However the proposals carry significant potential resource implications, especially in the areas of the deferred payments scheme, support for carers and additional services for self-funders. Further work is required to understand the full impact of these proposals through a dedicated programme of work.

9.5 The Key themes of the White Paper: Promotion of social capital and prevention

This includes Central and Local Government promotion or a range of initiatives to help reduce the need for formal care. It is proposed that there is the setting up of a national health and social care volunteering fund, national pilots of social impact bonds and promotion of time banks enabling people to find ways of giving of their time whilst they are able in exchange for care when needed. The White Paper also proposes establishing a £200M housing fund which is to be used to develop extra care schemes for older people, and a stated aim of increasing the use of telecare in social care. Details of how to access the £200M housing fund have yet to be published.

9.6 Better information and advice

The Department of Health has established a national website with social care provider profiles which will be added to over time. It also wants to establish national comparison and feedback sites for social care services. The White Paper requires local authorities to provide on line information about local services and how to access them. To assist councils to develop on line information, start up funding of £32.5M will be made available. Details of how to access this have yet to be published.

9.7 Dignity, standards and workforce

There will be a new code of conduct and minimum training standards for care workers. The government will appoint a national chief social worker and recommends principal social workers in local adult social care. Work will start to develop a national evidence base led by The National Institute for Clinical Excellence and a new system of national care audits will be implemented. There are measures to improve the quality of personal assistants and registered managers and to increase entrants to social care as a career.

9.8 New entitlements for service users and carers

The Care and Support Bill draws together existing social care law into a single statute and replaces outdated legal aspects. Both the draft Care and Support Bill and White Paper set out a range of new entitlements.

- 9.8.1 The right to a personal budget and direct payments will be enshrined in law for the first time. (It should be noted that Barnet residents already have this legal right through the 'Right to Control'
- 9.8.2 Social care eligibility thresholds will be set nationally from April 2015, removing local authority discretion to set their own Fair Access to Care thresholds. At the moment, the vast majority of councils set their threshold at Substantial and Critical (from the four levels of Low, Moderate, Substantial and Critical). It is likely that the effect of this will be to prevent councils from moving thresholds to Critical only).
- 9.8.3 Users will have a right to continuity of care after a move to a new area and care cannot be stopped pending a new assessment by the new host authority. Councils can still conduct their own assessment but will need to put in writing the reasons for a different outcome to the user. This will mean that councils may pay for care longer after a user has moved; or that the receiving council has to take up the cost of care earlier than is the case in the current system. The aim of this change is to prevent disruption of care for users and should reduce debate between councils about residence requirements and care entitlements.
- 9.8.4 The documents set out significant changes to Carers' entitlements. They are to receive extended assessment rights and for the first time, a legal entitlement to support services and review. The entitlement in law to support is new and could have significant financial implications in terms of meeting these needs. However, it is possible that it could in some cases lead to reduced costs in direct care, as carers should in theory be more supported to carry on their caring role. The impact of this new entitlement is significant. In 2011/12, the council carried out 2424 carers' assessments but did not provide services to all of them. In addition, the new entitlements are likely to encourage more carers to come forward for support. Detailed modelling of the potential impact will be carried out.
- 9.8.5 Carers' needs are to be considered as equal to the needs of the service user. For the first time, a national eligibility threshold for carers will be set. The thresholds are not yet known.
- 9.8.6 Councils will be required to offer assessment, support planning and care management to people who fund their own care (self-funders). Under current

legislation anyone can request a community care assessment but not support planning and care management. The extent to which this service will be requested by self-funders is unknown but will have resource implications in terms of capacity required to provide this service.

9.9 New requirements on local authorities

In addition to the requirements described above, there will be the following new requirements on local authorities:

- 9.9.1 There will be a legal duty to commission and provide preventative services and information and advice, although the level and nature of these services is not prescribed. This will have implications for many councils who have reduced or cut these type of services as part of their response to the Comprehensive Spending Review funding reductions
- 9.9.2 There will be a duty in law for the first time to inform users about rights to direct payments (DPs) and what needs could be met by DPs. This, like the new right to a personal budget, is in effect an update of the legal framework to reflect current best practice.
- 9.9.3 There will be a duty to open up council community buildings for local use, as part of the DoH drive to promote social capital and prevention. This has synergy with work already being carried out by the council to map community assets.
- 9.9.4 Local authorities will be required to take on the leadership role in situations of social care provider failure, such as the recent situation with Southern Cross. More details of this will be published and council duties will be set out in legislation
- 9.9.5 Commissioning home care "by the minute" is to be banned.
- 9.9.6 There will be a duty to ensure that adult social care and housing work together effectively in the area of adaptations and home repairs.
- 9.9.7 There will be a duty to promote diversity and quality in care and support provision.
- 9.9.8 There will be a duty to promote the integration of services.

9.10 Safeguarding

The draft Care and Support Bill sets out a continued leadership role for councils in adult safeguarding. Adult Safeguarding Boards will become statutory bodies, in the same way as Children's boards, with a defined core membership of the Council, NHS and Police. The council will be required to publish an annual strategic plan which is a new requirement, and an annual report, which it already does. The council will have a legal duty to make safeguarding enquiries or ask others to do so. Previously, the council role in adult safeguarding was set out in statutory guidance as opposed to primary legislation. This change strengthens the role of the council in adult safeguarding and gives councils a clearer footing on which to work.

9.10.1 The government is also consulting on a new power of entry for social workers to make safeguarding enquiries. This would apply only in a very limited

number of situations where there is evidence that access to the adult at risk to make those enquiries is being prevented by a suspected abuser.

9.11 Funding reform

The government has accepted the two principles of the Dilnot Commission report on social care funding. These are firstly to introduce a cap on lifetime care costs, which Dilnot had set at £35,000. Secondly to raise the threshold at which people lose means tested support, which is currently set at £23,200. However the progress report makes *no commitment to introduce these*. The decisions about whether this is affordable and when it should be introduced will be made at the next spending review.

9.11.1 The level of a cap has not been defined. However, it would cover council 'benchmark' care costs and users would be expected to pay top ups if they chose more expensive services. User would still be required to pay hotel costs in residential care ('board and lodging'). Similarly, the threshold for loss of means tested support has not been set out.

9.12 **Deferred payments**

However, the government has announced that it plans to legislate to introduce a national system for deferred payments for residential care from April 2015. Deferred payments mean that users or their partners do not need to sell their home in their lifetime to pay for care. The local authority will be required to fund the costs of the care and will be refunded from the estate of the service user. Details of how the scheme will work have not been published. The DoH plans to work with the care sector in 2013/14 to finalise the scheme.

- 9.12.1The progress report on funding reform sets out a government commitment to fund local authorities for this new requirement but does not describe how this will be done. It is understood that councils will be able to levy charges or interest to cover the costs of the scheme.
- 9.12.2 Whilst some local authorities already offer deferred payments to some extent, Barnet does not. Detailed work is required to model the impact of the scheme and prepare for implementation in 2015. Barnet has a large number of owner occupiers among its older population and this scheme will potentially be attractive to significant numbers of residents.

10. LIST OF BACKGROUND PAPERS

- 10.1 Caring for our future: reforming care and support (White Paper) <u>http://www.dh.gov.uk/health/2012/07/careandsupportwhitepaper/</u>
- 10.2 Draft Care and Reform Bill <u>http://www.dh.gov.uk/health/2012/07/care-and-support-bill-comment-online/</u>
- 10.3 Caring for our future: progress report on funding reform <u>http://www.dh.gov.uk/health/2012/07/scfunding/</u>

Cleared by Finance (Officer's initials)JH/MCCleared by Legal (Officer's initials)LC



AGENDA ITEM 7

Meeting	Special Safeguarding Overview and Scrutiny Committee		
Date	24 September 2012		
Subject	Adult Social Care and Health Annual Complaints Report 2011/12		
Report of	Cabinet Member for Adults		
Summary	Adult Social Care and Health is required under statutory regulations, to report annually to the relevant Council committee on adult social care complaints and to compile an annual report.		
Officer Contributors	Mathew Kendall, Assistant Director Transformation and Resources, Adult Social Care and Health		
	Helen Coombes, Head of Transformation Transformation and Resources, Adult Social Care and Health		
Status (public or exempt)	Public		
Wards affected	All		
Reason for urgency / exemption from call-in	Not applicable		
Function of	Council		
Enclosures	Appendix A: Adult Social Care and Health Annual Complaints Report 2011/2012		
Contact for further information:	Helen Coombes, Head of Transformation E. <u>Helen.coombes@barnet.gov.uk</u> T. 020 8359 7466		

1. **RECOMMENDATION**

1.1 That the Safeguarding Overview and Scrutiny Committee make comments and /or recommendations to the Cabinet Member for Adults on the contents of the Annual Complaints Report.

2. RELEVANT PREVIOUS DECISIONS

2.1 None.

3. CORPORATE PRIORITIES AND POLICY CONSIDERATIONS

- 3.1 The Overview and Scrutiny Committees must ensure that the work of the Scrutiny is reflective of the council's priorities.
- 3.2 The Corporate Plan 2012/13 has the following priorities relevant to the work of Adult Social Care and Health:-

Better services with less money:

- Safeguarding vulnerable adults
- Ensure our support services effectively serve the organisation through high quality, high value services

Sharing opportunities and sharing responsibilities:

- Support residents to live healthy and independent lives
- Promote personalisation of services and enhance quality of life for adult social service users.

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- Ensure a positive experience of care and support for carers
- 3.3 Listening and acting on customer feedback is essential to achieving these priorities. It also enables us to monitor our progress and focus on key areas to improve customer experience in relation to Adult Social Care and Health.

4. RISK MANAGEMENT ISSUES

- 4.1 The quality of services is assured by regular monitoring as part of the procedures for internal control within Adult Social Care and Health.
- 4.2 Advocacy support is available to complainants to assist them in making their complaint and all staff are advised to promote the use of advocates. All public information booklets also promote the use of advocates. Advocacy services are commissioned through a contract with Barnet Centre for Independent Living, who has sub-contracts with two voluntary sector groups, Advocacy in Barnet and Mind in Barnet to provide advocacy services.
- 4.3 The complaints process provides the council with an additional means of monitoring performance and improving service quality, and provides an important

opportunity to learn from complaints. Key learning with actions taken in 2011/2012 is included in Section 6 of the Annual Complaints Report (Appendix A).

- 4.4 Where complaints are received and highlight any safeguarding issues, we would deal with these under the Multi-Agency Adult Safeguarding Policy and Procedure.
- 4.5 Adult Social Care and Health works closely with the Care Quality Commission (CQC) who are responsible for the inspection and registration of the following services:
 - Care homes, including care homes with nursing
 - Home care agencies
 - Independent health care establishments
 - Adult Placement Schemes

With the permission of the complainant, CQC are on occasion informed if the complaint is about any of the services listed above.

- 4.6 The Local Government Ombudsman (LGO) was given new powers in 2010 to investigate complaints from people who fund and arrange their own care. This means that self-funders now have the right to complain to the LGO. The LGO provides a free, independent and impartial complaints service.
- 4.7 Prior to this, it has only been service users who have had their care arranged and funded by the council who would have access to the independent complaints service.
- 4.8 All clients should in the first instance take up their complaint with the service provider and go through their complaints process. If the issue is not resolved to the client' satisfaction, the following process is followed:
 - If funded and arranged by the council, the Adult Social Care and Health complaints and representations procedure is followed
 - If self-funding or arranging care privately, individuals must contact the LGO Advice Team
- 4.9 The council is committed to tackling fraud and other forms of malpractice and treats these issues seriously. It recognises that some concerns may be extremely sensitive and has therefore developed a system under the Whistle Blowing Procedure, which allows for the confidential raising of concerns.

5. EQUALITIES AND DIVERSITY ISSUES

- 5.1 Pursuant to the Equality Act 2010 ("the Act"), the council has a legislative duty to have 'due regard' to eliminating unlawful discrimination, advancing equality and fostering good relations in the contexts of age, disability, gender reassignment, pregnancy, and maternity, religion or belief and sexual orientation.
- 5.2 In addition to the Terms of Reference of the Committee, and in so far as relating to matters within its remit, the responsibility of the Committee is to perform the Overview and Scrutiny role in relation to:
 - The council's leadership role in relation to diversity and inclusiveness, and

- The fulfilment of the council's duties as employer including recruitment and retention, personnel, pensions and payroll services, staff development, equalities and health and safety.
- 5.3 The complaints procedure supports the council in meeting the legislative duties outlined above, and a number of steps have been taken to ensure that it is accessible to all service users and their carers. See Section 3 of the Annual Complaints Report (Appendix A).
- 5.4 Adult Social Care and Health welcomes complaints from advocacy services such as Disability Action in the borough of Barnet (DabB), Citizens Advice Bureau, Disability Law Service, Mind in Barnet etc. from people who are not able to make representations and complaints in their own right to ensure that they too have a voice and are listened to.
- 5.5 The report includes data which outlines the number of complaints recorded in Adult Social Care and Health from 1 April 2011 to 31 March 2012 by ethnicity. See Sections 9p, 9q and 9r of the Annual Complaints Report (Appendix A). Analysis of complaints data in the previous two years suggested that the proportion of complaints from people of a Black or Minority Ethnic (BME) background was disproportionately high compared to the ethnic profile of social care users, particularly Asian/Asian British and Black/Black British groups.

The data was studied by the Adult Social Care and Health Equalities Network subgroup (attended by managers from across the department), in which it was agreed that the data did imply that users from BME groups were more likely to make a complaint; but:

- that the numbers of complaints each year were too small to draw any firm conclusions about whether there were any inherent systemic or operational problems; and
- that further in-depth analysis of individual complaints cases could be necessary to draw out particular issues, but that a clearer picture would be gained by waiting until 2011/2012 complaints data was ready and pulling together three years of case information.
- 5.6 The 2011/2012 ethnic profile of complainants does not follow the same pattern as the previous two years, and is much more reflective of the ethnic profile seen among the service user population as a whole. Only 20% of complaints this year (where the ethnicity was actually recorded) came from BME groups, with much lower numbers from Asian/Asian British and Black/Black British groups than the year before.

6. USE OF RESOURCES IMPLICATIONS (FINANCE, PROCUREMENT, PERFORMANCE & VALUE FOR MONEY, STAFFING, IT, PROPERTY, SUSTAINABILITY)

6.1 As Adult Social Care and Health continues to make changes to how services are managed and delivered, we anticipate that we will receive more complaints from our customers. It is anticipated that any increase will be contained within the current staffing establishment and budget.

6.2 To reduce the number of complaints we may receive, we will continue to fully consult with service users and carers on any planned service changes to ensure they feel engaged in the process.

7. LEGAL ISSUES

7.1 Adult Social Care and Health is required to operate a statutory complaints procedure under the Local Authority Social Services and National Health Services Complaints (England) Regulations 2009 and the Local Authority Social Services and National Health Service Complaints (England) (Amendment) Regulations 2009.

8. CONSTITUTIONAL POWERS

- 8.1 The scope of Overview and Scrutiny committees is contained within Part 2, Article 6 of the Constitution.
- 8.2 The Terms of Reference of the Overview and Scrutiny Committees are in the Overview and Scrutiny Procedure Rules (Part 4 of the Constitution).
- 8.3 The Safeguarding Overview and Scrutiny Committee has within its terms of reference responsibility:

"To scrutinise the provision of adult social care services (including those who have physical disabilities, sensory impairment, learning disabilities, mental health needs or other special needs) to ensure that residents are safeguarded and supported to lead as independent lives as possible in their own homes."

9. BACKGROUND INFORMATION

- 9.1 In discharging their responsibility to scrutinise the provision of adult social care services, the Committee are requested to consider the Annual Complaints Report 2011/2012 for Adult Social Care and Health, as attached as Appendix A to this report, and make appropriate comments to the Cabinet Member for Adults.
- 9.2 The report includes information on the statutory social care complaints procedure, statistical information over a 3-year period for compliments and complaints (including corporate complaints), the LGO role in social care, LGO complaints and enquiries, complaints managed by Contractors, learning from complaints and embedding the learning and the outcome of the complaint user survey.
- 9.3 For the second time in three years more complaints were received than compliments; however, this was anticipated due to the financial constraints the council faces.
- 9.4 The highest proportion of complaints received (25%) related to 'Quality of Service', which covers a wide range of different issues. See Section 9h of the Annual Complaints Report (Appendix A), which outlines specific examples. The issues raised do not represent a systematic departmental problem; however, it has highlighted general practice issues for individual members of staff. If the complaint

is upheld or partially upheld, actions are taken to put right the matter; and where necessary, the worker is supported through advice, supervision meetings and training.

- 9.5 As it is a requirement by the Department of Health for health and social care organisations to better understand the benefits of using information from complaints to improve services Adult Social Care and Health has embraced the expectation and introduced measures to ensure this happens in a systematic way. Following the investigation of each complaint managers are required and routinely asked to outline in writing exactly what lessons have been learnt, together with what actions have been taken as a result of the complaint. Key learning with actions taken in 2011/2012 is included in Section 6 of the Annual Complaints Report (Appendix A). The benefits of this include higher levels of satisfaction, more opportunities to improve services for everyone and an increase in our reputation with the people we serve.
- 9.6 In 2011/2012, we received 6 corporate complaints and followed the corporate complaints procedure to investigate and respond to them. Two were resolved at Stage 1 and three resolved at Stage 2. One escalated through to Stage 3 of the complaints process.
- 9.7 In 2011/2012 a complaint user survey was conducted to elicit feedback from our complainants on how they found the complaints process and how Adult Social Care and Health could improve the complaints journey in the future. The key issues which came from this are listed below and work is underway on learning from this through discussion and awareness raising with staff:
 - Managers will provide complainants with a detailed response to the whole complaint, by ensuring the response addresses the issues raised in the initial complaint, as well as any new matters raised during the subsequent telephone conversation.
 - Managers will demonstrate that complaints are taken seriously through their knowledge and understanding of the issues raised, and the empathy shown to the complainant
 - Managers will match their actions to their words and do what they say they will do, by ensuring decisions and actions that have been agreed with the complainant are implemented and followed through to conclusion; even when the tasks have been delegated to other workers.

10. LIST OF BACKGROUND PAPERS

10.1 None.

Cleared by Finance (Officer's initials)	JH
Cleared by Legal (Officer's initials)	LC



Adult Social Care and Health Annual Complaints Report

2011 - 2012

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London Borough of Barnet Adult Social Care and Health

Annual Complaints Report – 2011/2012

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1. Introduction

This report provides information on complaints and representations for Barnet Adult Social Care and Health for the period 1 April 2011 to 31 March 2012 dealt with through the statutory social care complaints procedure and corporate complaints procedure.

1.1 Background

Adult Social Care and Health is required under statutory regulations, to report annually to the relevant Council committee on adult social care complaints. Adult Social Care and Health is required to operate a separate statutory complaints and representations procedure in accordance with the Local Authority Social Services and National Health Services Complaints (England) Regulations 2009 and the Local Authority Social Services and National Health Service Complaints (England) (Amendment) Regulations 2009 (hereby referred to as 'the Regulations') and the Health and Social Care Act 2003. Any complaint which does not fall under these requirements will be considered under the council's corporate complaints procedure.

2. Adult Social Care and Health complaints procedure

Since 1 April 2009 complaints have been assessed in terms of their seriousness and how likely the issue is to recur, so that appropriate and proportionate action can be taken in response. This is in line with the Department of Health's Guidance 'Listening, Responding, Improving', where complaints are considered as low, moderate or high risk. Barnet Adult Social Care and Health then assigns low and moderate risk complaints as 'Straightforward' and high risk complaints as 'Serious and/or Complex'. A complaint can be re-assigned if new information arises during the investigation process.

Straightforward Complaints (Low or Moderate risk) - Local resolution

When a complaint is assessed as straightforward, it is dealt with by a member of staff and/or line manager in the team providing the services, within 20 working days with the aim of achieving resolution. Where possible, the response is provided within 10 working days.

The complainant is invited to comment on the response. Where there is disagreement, a meeting is offered to discuss the concerns with a manager and the Complaints and Representations Manager. A final decision on the complaint is then provided by the Head of Service.

Serious and/or Complex Complaints (High risk) - Independent investigation If the complaint is especially serious and/or complex an independent investigation will be arranged that produces a report. Adjudication with remedy is then provided within 25 working days (extendable to 65 working days) from the date the complaint is agreed.

The complainant is invited to comment on the response and if there is disagreement, a meeting is arranged to discuss the concerns with a senior manager and the Complaints and Representations Manager. A final decision on the complaint is then provided by the senior manager.

Local Government Ombudsman

The Local Government Ombudsman (LGO) is an independent organisation

authorised to investigate complaints where the Council's own investigations have not resolved the issues raised.

The person making the complaint retains the right to approach the Local Government Ombudsman at any time. However, the Local Government Ombudsman's policy is to allow the local authority to consider the complaint and will refer the complaint back to the Council unless exceptional criteria are met.

3. Accessing the complaints procedure

A number of steps have been taken to ensure that the complaints procedure is accessible to all service users, carers and their representatives. The Adult Social Care and Health complaints procedure continues to be widely publicised:

- The Comments, Compliments and Complaints booklets are widely distributed to public offices in the borough, including voluntary organisations and to Black and Minority Ethnic (BME) community groups.
- The Easy Read version of the booklet 'Comments, Compliments and Complaints' is also widely distributed. This is aimed at people with learning disabilities and people whose first language is not English.
- Information about making a comment, compliment or complaint in relation to Adult Social Care and Health is available on the Barnet Council website.
- Public information on making a complaint about Adult Social Care and Health is also available at public events. We held several public events including Barnet Older People's Assembly, Health and Wellbeing Event, Hate Crime Event and Safeguarding week, which were attended by a wide range of our service users and carers including older adults and people with learning disabilities and their carers. In addition, we also had information available at a GP event targeted at GPs in the London Borough of Barnet.
- We attended various meetings to share information about representations and complaints with key stakeholders representing various disability groups, including Barnet Centre for Independent Living (Bcil), Disability Action in the borough of Barnet (DabB), Mind in Barnet, Disability Law Service and the Adult Carers Strategy Partnership Board etc.,
- Meetings with Leadership Team and Care Services Delivery managers to share information about representations and complaints and to promote the complaints service.
- Managers are asked to feature compliments, representations and complaints as a standing item on their individual teams Information Centres. Staff and managers are also reminded and encouraged to utilise the support services provided by the Complaints and Representations Team.
- There is an interim joint agreement between Adult Social Care and Health and Your Choice Barnet - The Barnet Group on how to manage complaints, which involve the two organisations. Information will be provided and the service promoted once the policy is approved by senior management.

All staff are advised to promote the use of advocates for vulnerable people, and advocacy support is available to complainants if they wish to help them to make their complaint. All staff are advised to promote the use of advocates for vulnerable people, and advocacy support is available to complainants if they wish to help them to make their complaint. This support is commissioned through a contract with Barnet Centre for Independent Living, who has sub-contracts with Advocacy in Barnet and Mind in Barnet to provide advocacy services. All public information booklets promote the use of advocates.

4. Overview

From the 1 April 2011 to 31 March 2012 inclusive the department has dealt with 14017 people and carried out 7954 Community Care Assessments.

- The figure 14017 above consists of 6492 contacts and 7525 people receiving a service in 2011/2012.
- The figure 7954 above consists of 2466 new Community Care Assessments and 5488 reassessments.

In the same period the following communications were received from service users, carers and/or their representatives:

- compliments
- representations
- 100 complaints
- Local Government Ombudsman enquiries and complaints

Common themes of complaints received relating to Adult Social Care and Health are:

- Insufficient or incorrect information provided
- Assessment disagreement Community Care and financial
- Carers making short calls, being late or failing to attend when scheduled
- Faulty or incorrect adaptation
- Staff conduct and level of competence

Of which two-thirds (66%) of all the complaints received were considered justified in full or in part.

Customers expect their interaction with the department to be professional and positive, and in the main this is the case. When things go wrong they expect swift action to be taken to resolve the matters causing concern.

Lessons have been learnt from the complaints received throughout 2011/2012 and generally there is a need for the department and some of our care providers to improve on customer care. This is being addressed by adopting a more customer focused approach through council wide 'Think Customer' initiative, allowing more involvement from the service users and their carers/representatives and improving the communication processes in place to enable this to happen.

5. Learning from complaints and representations

The complaints process provides the council with an additional means of monitoring performance and improving service quality, and provides an important opportunity to learn from complaints.

There is an established system in place to capture a range of complaints information including the nature of the complaint, the action taken, the outcome of each complaint and whether there was compliance with the time periods specified in the Regulations. The information captured from this monitoring is used in a number of ways including:

- The provision of feedback and dissemination of information to line managers, to improve systems and procedures
- A quarterly update report to Leadership Team, which includes senior management
- Measurement of performance and quality control
- Where services are purchased under contract, informing both the appropriate service Commissioners and Supply Management Team who monitor each contract.

6. Service improvements

The nature and complexities of delivering social care means that some times things go wrong or we find as a result of our investigations that we could improve the way we do things and improve the experience of our service users. Some complaints outcomes are a matter of putting things right and apologising to our service user. Other outcomes have a wider significance on service delivery.

The following lessons have been learnt from complaints throughout the year, with changes already made based upon the learning, and include proposed changes for the future.

It should be noted that the complaints described below are in relation to individual members of staff' working practices, rather than a systematic departmental problem. The issues raised were discussed with the individual and dealt with by the line manager in supervision 1:2:1 meetings where support, advice and/or training were provided to deal with the shortcoming of the worker.

- Service users views should be involved in the assessment process, and not rely on previous contact and records to make decisions.
- Carer issues to take as higher priority as service user issues in discussing the best way of supporting individuals and families
- The need for social workers to prepare before community care assessment reviews, with a proper agenda and minute taker and in turn for the service user and/or carer to be informed prior to the meeting of what is to be expected, so they too are prepared.
- Controversial matters to be discussed outside of the review process, such as potential safeguarding or detailed financial issues
- Importance of transition planning to ensure that a smooth handover takes place between children's and adults' services, so that service users and their families are prepared for the transition and services are able to plan together for transfers of high cost complex care packages.

Customer Care and Communication

- The need to adhere to corporate standards, including timescales
- When appointments are cancelled the service user is informed of the change promptly.

- The need for staff to be mindful of how they communicate with the public, in relation to advice provided about services; for example, information requests should include details of the eligibility criteria, waiting lists times, and details of Adult Social Care and Health charging policy to ensure transparency
- The need to consider the spoken or written tone when communicating with the public
- The need for colleagues in health to ensure contact with the department takes place in a timely manner, in cases relating to joint funding
- The need to ensure accurate information is given in relation to Adult Social Care and Health's eligibility and funding criteria
- The need to ensure the views of the service user and their representatives are recorded accurately
- The need to be sensitive when asking questions about finances and a need to explain why the information is needed.

Contracts

Contracts Team to ensure service provider provides an efficient and timely service

Service Provider

- Care agencies to ensure their staff visit service users as set out in the care plan
- The line of communication between service providers and carers needs to be clearly established and agreed, to ensure that all changes are notified and acted upon swiftly; for example, changes to a care plan or a noticeable change in the service users behaviour and compliance
- The need to ensure communication between the service provider and service user is effective, such as notifying the service user or a change in carer or the carer running late
- Technicians to ensure equipment is checked before installation commences

Electronic database

• Need for Swift to hold the contact details of the person dealing with the service users finances, to ensure invoices and other related matters are sent to the appropriate person.

Miscellaneous

- The general rule when dealing with joint complaints involving other directorates, is to, on receipt of the complainants agreement, share the whole correspondence; however, in some cases it could be beneficial to share information on a need to know basis only, which would mean occasionally redacting documents. So that each service responds independently according to the issues raised and their individual records.
- Sometimes it is possible to authorise unusual requests from service users, even when the service is not normally provided by Adult Social Care and Health, but where such provision is imperative for the service user for example, arranging a handyperson service to undertake minor, but important repairs to service users adaptation
- When providing day care services managing the expectations of the service users by defining and being very clear about the role of the staff.

Staff have been informed of the learning relevant to their service area through emails, supervision sessions and team meetings. Adherence to the learning from complaints is monitored via regular quality assurance checks by respective managers.

In addition, a Practice Governance Working Group for managers across the department has been created and a section of the work programme is dedicated to complaints and is expected to examine the 'learning from complaints', including identifying and implementing training requirements that arise. Workforce Development is involved and will provide assistance to support the implementation of this.

Managers within Care Services Delivery have also been briefed on how compliments, enquiries and complaints can feature on their individual team Information Centres. The working of this is monitored periodically.

During this process managers are encouraged to remind their staff to review their own professional practices and to ensure that they share good practice and any new initiatives.

In June 2012 all Adult Social Care and Health staff were invited to a conference, which focused on the 'customer, client, service user' and three sessions within the programme included:

- Think customer good customer care, best practice and corporate standards
- Protecting customer information Data Protection requirements, and
- The customer journey in Adult Social Care and Health.

All designed to improve and deliver better customer services to our service users for the future.

All timescales contained within this report are in working days.

7. Compliments

a. Total number of compliments

Table 1a below shows the total number of compliments recorded in Adult Social Care and Health from 1 April 2011 to 31 March 2012 compared to the previous two years.

Table 1a: Compliments			
2009/2010 2010/2011 2011/2012			
Compliments	111	80	48

Table 1a: Number of compliments recorded in the last three years

There is a reduction in the numbers of compliments received over the last two years. It is difficult to benchmark performance in relation to this as compliments received in other directorates within the Council are not recorded and very few other local authorities' have a system in place for recording compliments.

The compliments received varied and ranged from individual messages of gratitude to specific social workers, care coordinators and managers, to thank you cards to whole teams for the work they had done for the service user and their carer. For example, one compliment was received thanking a worker for arranging for occupational therapy equipment to be fitted in their property whilst they were in hospital, which meant that on discharge they were able to return home and continue to live independently; another expressed appreciation for the 'understanding and committed' support provided in a time of need; another thanked staff for the 'effort and patience' shown once their financial contribution issues were resolved; and another wanted to thank a team within Mental Health Services for the new support group, citing how well the group was run and the positive support offered by the group facilitators.

Satisfaction in the national Adult Social Care Survey for 2010/2011 showed 88% compared to 90% nationally. The results for 2011/2012 showed satisfaction in Barnet has remained at 88%, however benchmarking data is not yet available.

b. Compliments by service area and period received

Table 1b below shows the total number of compliments recorded in Adult Social Care and Health from 1 April 2011 to 31 March 2012 by service area and gives a comparison to the previous two years.

Table 1b: Compliments by service area and period received						
Service Area	2009/2010	2010/2011	2011/2012			
Access	0	8				
Enablement	0	21	8			
Physical and Sensory Impairment	6	0				
Complex Planning	0	8	19			
Older Adults	73	0	13			
Learning Disabilities	13	8	9			
Mental Health	8	12	11			
Performance and Supply Management	11	0	1			
Strategic Commissioning	0	6				
Transformation and Resources	0	17	0			
Total	111	80	48			

Table 1b: Number of compliments recorded by service area and period received in the last three years

8. Representations

Service users may make representations about the contact they have had with Adult Social Care and Health or the service they have received without necessarily making a complaint under the formal procedure.

A representation may be regarded as a comment, enquiry or statement of a formal nature regarding matters such as the availability, delivery or nature of services. They will not necessarily be critical. They can be taken into account when assessing the quality of a service provided, but are not usually viewed as a complaint. They may be critical but the service user does not wish to go through the complaints procedure.

In 2011/2012, 22 Representations were received by the Complaints and Representations Manager, 4 escalated to the formal complaints procedure.

In 2010/2011, 25 Representations were received and all were satisfactorily resolved, as none escalated through to the formal complaints procedure.

In 2009/2010, 15 Representations were received. Of which 13 were satisfactorily resolved with no further action; 2 became formal complaints.

a. Total number of representations

Table 2a below shows the total number of new representations recorded in Adult Social Care and Health from 1 April 2011 to 31 March 2012 compared to the previous two years and the number of representations that escalated to a formal complaint.

Table 2a: Representations							
	2009/2010 2010/2011 2011/2012						
Representations	15	25	22				
Escalated to formal complaints procedure	2	0	4				

Table 2a: Number of representations recorded in the last three years, including the number that escalated to a formal complaint

b. Representations by service area and period received

Table 2b below shows a breakdown of representations recorded in Adult Social Care and Health from 1 April 2011 to 31 March 2012 by service area, compared to the previous two years.

Table 2b: Representations by service area and period received							
Service Area 2009/2010 2010/2011 2011/207							
Enablement and Rehabilitation	8	7	10				
Older People and Long Term Conditions	1	7	3				
Learning Disabilities Social Work	0	3	2 (1)				
Mental Health Services	1	1	1				
Strategic Commissioning	2	3	2				
Transformation and Resources	3	4	4 (3)				
Total no. of representations	15	25	22				

Table 2b: Number of representations recorded in the last three years by service area and period received

The numbers in the brackets are where the representation escalated through to the complaints process.

9. Complaints

a. Total number of complaints

Table 3a below shows the total number of new complaints recorded in Adult Social Care and Health from 1 April 2011 to 31 March 2012 compared to the previous two years.

Table 3a: Complaints						
	2009/2010 2010/2011 2011/2012					
Complaints	73	88	100			

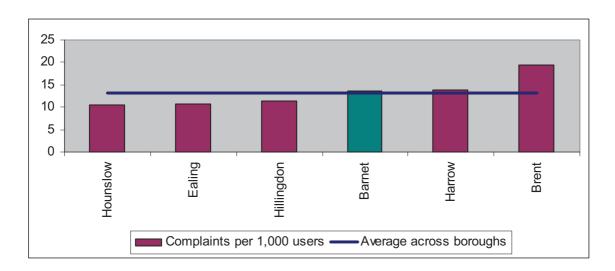
Table 3a: Number of complaints recorded in the last three years

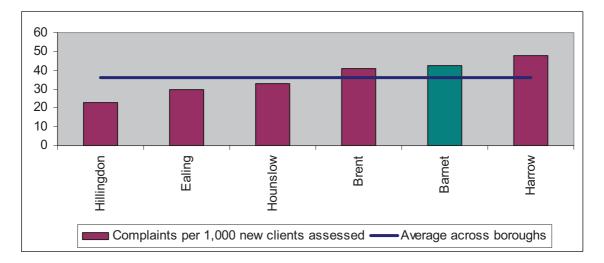
In 2009/10, 73 complaints were received. The number increased by 21% in 2010/2011, as 88 complaints were received. In 2011/2012 a further increase of 14% was seen when 100 complaints were received. Overall in the last three years the number of complaints received has increased by 37% from 73 to 100. Although the numbers of complaints received has increased over the past three years, given the small numbers concerned and the benchmarking data show below this should not be seen as significant. All complaints are reviewed to ensure that we identify any patterns in relation to reoccurring issues. In the same time period the number of people receiving a new social care assessment increased by 6% from 2,333 to 2,466; and the number of people receiving a service went up by 2% from 7,365 to 7,525.

b. Benchmarking - Boroughs within the North West London group

Table 3b: 20	Table 3b: 2011/2012 - Comparative boroughs in the North West London group								
Borough	Complaints 2011/12	Service users 2010/11	Complaints per 1,000 users	New clients assessed 2010/11	Complaints per 1,000 clients assessed				
Barnet	100	7,395	14	2,340	43				
Brent	121	6,260	19	2,960	41				
Ealing	102	9,555	11	3,435	30				
Harrow	92	6,610	14	1,920	48				
Hillingdon	69	6,050	11	3,035	23				
Hounslow	63	5,960	11	1,920	33				

The calculations for 'Per 1000 service users' and 'Per 1000 clients' assessed are based on 2010/2011 figures for service users and new clients assessed, as the 2011/2012 comparative data is not be available for a few months.





The above analysis shows that the number of complaints received in Barnet in the year 2011/12 is not unduly worrying. Given the relatively small numbers involved it is very difficult to say what good or bad would look like in relation to the number of complaints. For example having a very low number of complaints may not necessary signify good performance it could highlight that individuals do not know how to complain.

c. Compliments compared to complaints

Table 3c below shows the total number of compliments recorded in Adult Social Care and Health from 1 April 2011 to 31 March 2012, compared to the total number of complaints recorded and gives a comparison to the previous two years.

Table 3c: Number of compliments and complaints							
2009/2010 2010/2011 2011/2012							
Compliments	111	80	48				
Complaints 73 88 100							

Table 3c: Number of compliments and complaints recorded in the last three years

d. Complaints by procedure

Table 3d below shows the distribution of complaints recorded in Adult Social Care and Health from 1 April 2011 to 31 March 2012 by complaints procedure and gives a comparison to the previous two years.

Table 3d: Complaints by procedure							
Procedure 2009/2010 2010/2011 2011/2012							
Statutory complaints	67	78	94				
Corporate complaints	6	10	6				
Total	73	88	100				

Table 3d: Number of complaints recorded by complaints procedure in the last three years

e. Complaints by procedure and seriousness or stage

Table 3e below shows the total number of complaints recorded in Adult Social Care and Health from 1 April 2011 to 31 March 2012 by type and seriousness or stage.

Table 3e: 2011/12 - Complaints by procedure and seriousness/stage					
Number of complaints record under the statutory social ca procedure		Number of complaints recorded u Council's corporate procedure			
Straightforward (Low/Moderate risk)	93	Stage 1	2		
Serious and/or Complex	1	Stage 2	3		
(High risk)	I	Stage 3	1		
Total	94 Total 6				

Table 3e: Number of complaints recorded in 2011/2012 by procedure and seriousness/stage

A total of 100 complaints were recorded as received between 1 April 2011 and 31 March 2012 and of these, 94 complaints were dealt with under the statutory social care complaints procedure and 6 were dealt with under the corporate complaints procedure.

Of the statutory social care complaints received, 93 were considered as Straightforward and 1 was considered a Serious and/or Complex complaint.

Of the 6 corporate complaints received, two were resolved at Stage 1, three resolved at Stage 2 and 1 escalated through to Stage 3 of the process.

f. Complaints by service area

Table 3f below shows a breakdown of complaints recorded in Adult Social Care and Health from 1 April 2011 to 31 March 2012 by service area, compared to the previous two years.

Table 3f: Complaints by service area						
Service Area	2009/2010	2010/2011	2011/2012			
Access	-	8				
Enablement	-	20	26			
Physical and Sensory Impairment	19	-				
Complex Planning	-	21	11			
Older Adults	27	-	11			
Learning Disabilities	10	19	20			
Mental Health	11	10	13			
Performance and Supply Management	6	-	6			
Strategic Commissioning	-	3	O			
Transformation and Resources	-	7	24			
Total	73	88	100			

Table 3f: Number of complaints recorded by service area in last three years

g. Complaints by service area and period received

Table 3g below shows the total number of complaints recorded in Adult Social Care and Health from 1 April 2011 to 31 March 2012 by service area and period received.

Table 3g: 2011/12 - Complaints by service area and period received							
Service Area	Q1	Q2	Q3	Q4	Total	% of Total	
Enablement and Rehabilitation	3	6	9	8	26	26%	
Older People and Long Term Conditions	1	2	1	7	11	11%	
Learning Disabilities	6	5	6	3	20	20%	
Mental Health	5	0	4	4	13	13%	
Strategic Commissioning	0	1	2	3	6	6%	
Transformation and Resources	5	5	5	9	24	24%	
Total	20	19	27	34	100	100%	

Table 3g: Complaints recorded in 2011/2012 by service area and period received

In Transformation and Resources, 16 complaints were received regarding the implementation of the Fairer Contributions policy. The complaints were from service users, carers and/or their representatives who were against the financial assessment process i.e. the policy, being charged, the amount they were being charged, and/or inconsistent charges - e.g. being charged for commissioned hours not actual hours and the delay in completing the assessment process; 7 complaints related to no or unsatisfactory response to previous communications, and 1 related to staff conduct (attitude and perceived behaviour).

h. Complaints by subject category

Table 3h below provides a breakdown of complaints recorded in Adult Social Care and Health from 1 April 2011 to 31March 2012 by complaint subject and gives a comparison to the previous two years.

	Table 3h: Complaints by subject category									
Category	No. of Complaints 2009/10	% of Complaints 2009/10	No. of Complaints 2010/11	% of Complaints 2010/11	No. of Complaints 2011/12	% of Complaints 2011/12				
Assessment process	17	23.3%	-	-	-	-				
Assessment delay	-	-	6	6.8%	4	4%				
Assessment disagreement	-	-	22	25%	8	8%				
Assessment request	-	-	1	1.1%	-	-				
Conduct of staff	26	35.6%*	11	12.5%	10	10%				
Customer care	2	2.7%	-	-	-	-				
External service provision	5	6.8%	-	-	13	13%				
Finance	2	2.7%	-	-	-	-				
Financial Assessment Disagreement	-	-	-	-	10	10%				
Information	6	8.2%	4	4.6%	3	3%				
No response to previous comm.	-	-	4	4.6%	11	11%				
Quality of service	14	19.2%	30	34%	25*	25%				
Service delay	1	1.4%	5	5.7%	8	8%				
Unsatisfactory assessment	-	-	4	4.6%	5	5%				
Unsatisfactory response to previous comm.	-	-	1	1.1%	3	3%				
Total	73	100%	88	100%	100	100%				

Table 3h Number of complaints recorded in the last three years by subject category *Quality of service = 25 complaints – 6 (24%) upheld, 11(44%) partially upheld and 8 (32%) not upheld (see Table 3j)

'Quality of Service' complaints cover a wide range of different issues. Below is a list of examples of such complaints.

• Unhappy that an Independent Mental Capacity Advocate was appointed for the service user without the permission of the family

- Lack of help for the service user, who requested a home visit from a social worker. The social worker said she would get back to the service user to confirm an appointment, but never did.
- Poor service and advice from Social Care Direct
- Social worker late to meeting and lack of detailed information provided
- Request change of social worker as service user unhappy with her current one
- Family were excluded from decisions about her care. Inappropriate care package put into place
- Invoice submitted on time and has not been paid
- Service user's case poorly handled without care or detail to attention
- Service user initially qualified for a Disabled Facilities Grant, but the grant was withdrawn in August after a visit from the Occupational Therapist
- Failure to assess customers need for services no recommendations offered
- Barnet's publishing policy from 2008 promoting the "Right to choose". London Borough of Barnet officers were withholding choice from people.
- Staff from Community Space permitted a male member of staff to support and supervise a female service user whilst out for the day in the local community
- Been offered unsuitable types of accommodation, social worker's refusal to help with Dial- a-Ride issue and no assistance with home care
- Belief that Barnet Council is committing fraud and exploitation.
- Dispute with Barnet Council over care costs
- No support or assistance after service user is admitted to hospital and was on life support equipment
- Request for access to a wheelchair has not been met
- Unhappy with discharge from hospital

It should be noted that some of the complaints described above are usually in relation to an individual member of staffs working practice, rather than a systematic departmental problem. Where this is the case the issues raised within the complaint are discussed and dealt with by the line manager in supervision 1:2:1 meetings and support, advice and/or training provided to deal with the shortcomings of the staff.

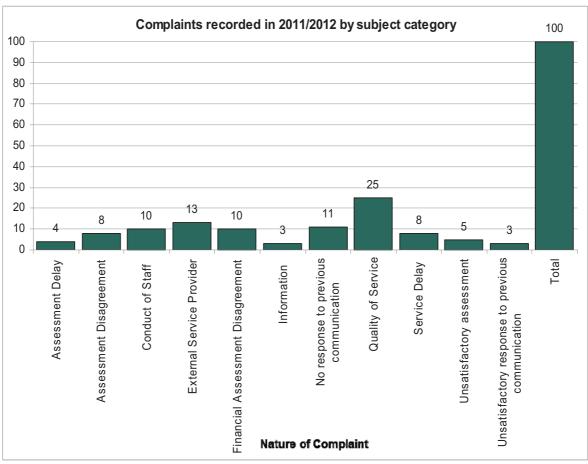
In the last three years there has been a significant reduction in the number of complaints received about the conduct (attitude and behaviour) of staff, which would indicate that there has been an improvement in how staff relate to service users and/or their carers.

There was an increase of complaints relating to how effective the department was in responding to routine correspondence, which then led to complaints being lodged and this was addressed during a departmental staff briefing which was mandatory for all ASCH staff to attend. During the briefing there was a segment on the programme specifically to address customer care issues, where staff were reminded of the

corporate and departmental expectations, including timescales in relation to how we communicate with members of the public and our service users.

i. Complaints by subject category - 2011/2012

Bar chart 3i below shows a breakdown of complaints recorded in Adult Social Care and Health from 1 April 2011 to 31 March 2012 in graphical format by subject category.



Bar Chart 3i: Number of complaints recorded in 2011/2012 by subject category

j. Complaints by outcome

Tables 3j below shows the total number of Adult Social Care and Health complaints made during the past three years that were upheld (well founded), partially upheld (partially founded) and not upheld (not founded), together with those which were carried forward into the next reporting cycle, these being incomplete at year end.

Table 3j: Statutory complaints by outcome						
Straightforward and Corporate complaints	Number of complaints 2009/2010	% of complaints 2009/2010	Number of complaints 2010/2011	% of complaints 2010/2011	Number of complaints 2011/2012	% of complaints 2011/2012
Upheld/well founded	21	29%	30	35%	28	28%
Partially upheld/ Partly founded	17	23%	14	16%	38	38%
Not upheld/ Not founded	34	47%	42	49%	33	33%
Other*	1	1%	0	0%	0	0%
Total	73	100%	86	100%	99	99%
Serious and/or Complex complaints	Number of complaints 2009/2010	% of complaints 2009/2010	Number of complaints 2010/2011	% of complaints 2010/2011	Number of complaints 2011/2012	% of complaints 2011/2012
Upheld/well founded	0	0%	0	0%	0	0
Partially upheld/ Partly founded	0	0%	2	100%	1	1%
Not upheld/ Not founded	0	0%	0	0%	0	0
Other*	0	0%	0	0%	0	0
Total	0	100%	2	100%	1	1%

Table 3*j*: Number of complaints recorded by outcome in last three years Other refers to complaints, which were incomplete at year-end and so carried forward to next reporting cycle.

In 2009/2010 and 2010/2011 just over 50% of the complaints received were justified in full or in part; however, in 2011/2012 this increased to two-thirds (66%), which means more complaints were found to be justified.

The target for Adult Social Care and Health investigating and responding to new complaints is 80%. Last year 2010/2011, of the 88 complaints received 71 (88%) were dealt with within timescale. In 2011/2012 of the 100 complaints received, 77 (77%) were completed within timescale. Although this performance fell short of the usual standard and expectation, it is recognised that the complaints received during 2011/2012 were particularly complex in nature, requiring very detailed, robust investigations.

k. Complaints by outcome and subject

Table 3k below shows the total number of Adult Social Care and Health complaints recorded from 1 April 2011 to 31 March 2012 by the outcome and subject.

Table 3k: 2011/12 – Complaints by outcome and subject					
Complaint subject	Upheld	Partially upheld	Not upheld	No. of complaints	
Assessment delay	1	1	2	4	
Assessment disagreement	2	2	4	8	
External service provision	5	4	4	13	
Conduct of staff	1	5	4	10	
Financial assessment disagreement	2	4	4	10	
Information	2	0	1	3	
No response to previous communication	3	6	2	11	
Service delay	3	3	2	8	
Quality of service	6	11	8	25	
Unsatisfactory assessment	1	2	2	5	
Unsatisfactory response to previous communication	2	1	0	3	
Total no. of complaints	28 (28%)	39 (39%)	33 (33%)	100 (100%)	

Table 3k: Complaints recorded by outcome and subject in 2011/2012

Complaints upheld and partially upheld vary in theme, and include some of the following:

- Severe delays in providing a replacement shower chair
- Damage to property by external service provider, whilst installing equipment
- Independent Mental Capacity Advocate appointed for service user without consent from the family
- Social worker arrived late to meeting and lack of detailed information provided
- Service user's case poorly handled without care or attention to detail
- No response to earlier letter concerning assessment and Direct Payments
- Poor advice and service from duty team
- Unhappy with external service provider
- Inconsistent charges from month to month. Assessment flawed and as a result, care was reduced, then reinstated.

Section 11 of this report outlines the lessons that have been learnt from some of these complaints and the service improvements that have been implemented.

I. Timeliness of statutory complaints acknowledgements

Table 3I below shows of the 94 statutory complaints recorded in Adult Social Care and Health from 1 April 2011 to 31 March 2012, 73 (78%) were acknowledged within the 3 working day statutory timescale.

Table 3I: 2011/12 – Statutory acknowledgment letter/email sent						
Completed within Timescale Timescale Total no. of complaints						
Total	73 (78%)	21 (22%)	94 (100%)			

Table 3I: Number of complaints acknowledged within 3 working day timescale

m. Timeliness of corporate complaints acknowledgments

Table 3m below shows of the 6 corporate complaints recorded in Adult Social Care and Health from 1 April 2011 to 31 March 2012, 5 (83%) were acknowledged within the agreed 2 working day timescale.

Table 3m: 2011/12 – Corporate acknowledgment letter/email sent				
Completed within timescaleTimescaleTimescaletimescalemetnot metTotal no. of complaints				
Total	5 (83%)	1 (17%)	6 (100%)	

Table 3m: Number of complaints acknowledged within 2 working day timescale

n. Timeliness of complaint responses

In 2011/2012 Adult Social Care and Health target for responding to new complaints was 80%. The timescale for responding to a Straightforward complaint is 20 working days, a Serious and/or Complex complaint is 25 working days (extendable to 65 working days) and a Corporate complaint is 10 working days.

Table 3n below shows of the 100 complaints recorded in Adult Social Care and Health from 1 April 2011 to 31 March 2012, 77 (77%) complaints were responded to within the set or agreed timescale. Complainants were kept informed and updated throughout the investigation process.

Table 3n: 2011/12 – Timeliness of complaint responses					
Completed within timescaleTimescale metTimescale not metTotal no. of complaints					
Total	77 (77%)	23 (23%)	100 (100%)		

 Table 3n: Timeliness of complaint responses

o. Timeliness of complaint responses by service area

Table 3o below shows the total number of complaints recorded in Adult Social Care and Health from 1 April 2011 to 31 March 2012 by service area and whether the timescale for responding to the complaint was met or not.

Table 3o: 2011/12 – Timeliness of complaint responses by service area					
Service Area	No. of complaints	-	scale et	_	scale met
Enablement and Rehabilitation	26	24	92%	2	8%
Older People and Long Term Conditions	11	10	91%	1	9%
Learning Disabilities Social Work	20	17	85%	3	15%
Mental Health Services	13	8	62%	5	38%
Strategic Commissioning	6	3	50%	3	50%
Transformation and Resources	24	15	63%	9	37%
Total	100	7	7	2	3

Table 3o: Timeliness of complaint responses by service area

p. Complaints by ethnicity breakdown

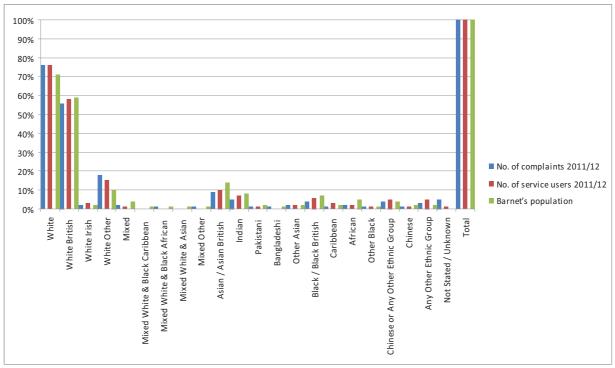
Table 3p and bar chart 3q shows the number of complaints recorded in Adult Social Care and Health from 1 April 2011 to 31 March 2012 by ethnicity.

Table 3p: 2011/12 – Comparative ethnicity data				
	No. of complaints 2011/12		No. of service users 2011/12	Barnet's population
White	76	76%	76%	71%
White British	56	56%	58%	59%
White Irish	2	2%	3%	2%
White Other	18	18%	15%	10%
Mixed	2	2%	1%	4%
Mixed White & Black Caribbean	0	0%	0%	1%
Mixed White & Black African	1	1%	0%	1%
Mixed White & Asian	0	0%	0%	1%
Mixed Other	1	1%	0%	1%
Asian / Asian British	9	9%	10%	14%
Indian	5	5%	7%	8%
Pakistani	1	1%	1%	2%
Bangladeshi	1	1%	0%	1%
Other Asian	2	2%	2%	2%
Black / Black British	4	4%	6%	7%
Caribbean	1	1%	3%	2%
African	2	2%	2%	5%
Other Black	1	1%	1%	1%
Chinese or Any Other Ethnic Group	4	4%	5%	4%
Chinese	1	1%	1%	2%
Any Other Ethnic Group	3	3%	5%	2%
Not Stated / Unknown	5	5%	1%	-
Total	100	100%	100%	100%

 Table 3p: Comparative data between number of complaints recorded in 2011/2012, total number of services

 users and London Borough of Barnet adult population

q. Complaints by ethnicity, service user and Barnet population



Complaints recorded by ethnicity, service user and Barnet population

Bar Chart 3q: Breakdown of complaints recorded by ethnicity, service users and Barnet's population in 2011/2012

Analysis of complaints data in the previous two years suggested that the proportion of complaints from people of a Black or Minority Ethnic (BME) background was disproportionately high compared to the ethnic profile of social care users, particularly Asian/Asian British and Black/Black British groups.

The data was studied by a subgroup of the Adult Social Care and Health Equalities Network, in which it was agreed that the data did imply that users from BME groups were more likely to make a complaint; but

- that the numbers of complaints each year were too small to draw any firm conclusions about whether there were any inherent systemic or operational problems;
- that further in-depth analysis of individual complaints cases could be necessary to draw out particular issues, but that a clearer picture would be gained by waiting until 2011/2012 complaints data was ready and pulling together three years of case information.

The 2011/2012 ethnic profile of complainants does not follow the same pattern as the previous two years, and is much more reflective of the ethnic profile seen among the service user population as a whole. Only 20% of complaints this year (where the ethnicity was actually recorded) came from BME groups, with much lower numbers from Asian/Asian British and Black/Black British groups than the year before.

These figures suggest that the trend identified in previous years may simply be due to the fact that the numbers of complaints each year are relatively very small and so any variation from the expected ethnic profile appears large in comparison. It is still worth monitoring this data, and indeed some in-depth work may be necessary to identify particular equalities-related issues, but certainly the profile this year helps negate any concerns that there are any particular problems related to race or

ethnicity.

r. Complaints by comparative ethnicity data

Table 3r below provides a percentage breakdown of complaints recorded in Adult Social Care and Health from 1 April 2011 to 31 March 2012 by ethnicity and service users and gives a comparison to the previous two years.

Table 3r: 2011/2012 – Comparative ethnicity data					
Ethnicity	2009/10 No. of complaints	2010/11 No. of complaints	2011/12 No. of complaints	2011/12 No. of service users	
White	70%	71%	80%	77%	
Mixed	1%	0%	2%	1%	
Asian / Asian British	13%	17%	9%	10%	
Black / Black British	4%	12%	4%	6%	
Chinese	1%	0%	1%	1%	
Any other ethnic group	9%	0%	3%	5%	
Total	100%	100%	100%	100%	

Table 3r: Percentage of complaints in last three years by ethnicity and service users

10. Local Government Ombudsman (LGO)

The Local Government Ombudsman (LGO) is an external body that looks at complaints relating to local authorities. The LGO is able to investigate matters where there is an alleged or apparent 'maladministration' or service failure. There are some situations in which the LGO will be unable to investigate a complaint such as conduct of Court proceedings. During an investigation the LGO will consider whether a member of the public has suffered injustice and whether that injustice arose as a result of a fault by the Council.

The LGO may prepare a statement of reasons, instead of a report where he decides a report is not appropriate. If satisfied with the action taken or proposed by the authority, he can also publish all or part of a report or statement, or a summary of a matter which is the subject of a report or statement.

When a local authority carries out a function entirely or partly by means of an arrangement with another person, the action taken by the other person shall be treated as action taken on behalf of the authority and in the exercise of the local authority's function.

The LGO is able to investigate complaints relating to failure in a service which was the local authority's function to provide and is carried out entirely or partly by means of an arrangement with another person, including through a partnership with another body.

If, during the course of an investigation into a complaint, a service failure or apparent maladministration comes to the attention of the LGO, his office may investigate, even where no one has complained of that particular service failure or maladministration.

The LGO may also make a finding of 'service failure', even where there is no maladministration.

The LGO, in a report where there is no injustice, is able to recommend action.

A complainant has the right to raise a complaint with the LGO at any time. Under the new 'Council First' procedure the LGO in summary, requires all complainants to go through all stages of their local authority's own complaints procedure before the Ombudsman will consider the complaint.

However, the LGO has decided that the following complaints will normally be treated as exceptions to this general requirement:

- Complaints where the subject means the matter is clearly urgent
- Complaints where the complainant's circumstances indicate a need for priority
- Complaints where the LGO or the local authority decide that completing the local authority's own procedure would be to the detriment of the complainant, (for example due to delay or to avoid different timescales for different procedures in a complaint which is made against two authorities within the jurisdiction of the LGO, or within the jurisdiction of the LGO and Parliamentary and Health Service Ombudsman).

In addition the LGO have the power to deal with complaints from people who self fund or arrange their own personal social care. The new service will give self-funded users the same access to the LGO service as those who have assistance from the local authority. Until then, a person using services under a private contract had no remedy other than to go to court if they had an unresolved dispute with their provider.

Category Managers within the department have written to all providers, with information relating to the new protocol with regard to dealing with self funders, reinforcing the first point of contact should be to the company/ care provider and the second port of call should be to the LGO office. For local authority service users the second port of call is the Adult Social Care and Health Department.

11. Local Government Ombudsman enquiries and complaints

a. Enquiries and complaints via the Local Government Ombudsman

Table 4a below shows the total number of new LGO enquiries and complaints received in Adult Social Care and Health from 1 April 2011 to 31 March 2012, compared to the previous two years.

Table 4a: Enquiries and complaints via the Local Government Ombudsman				
	2009/2010	2010/2011	2011/2012	
Enquiries	1	3	6	
Complaints	5	7	15	
Total	6	10	21	

Table 4a: Number of enquiries and complaints involving the LGO in the last 3 years

Over the last three years there has been a noticeable increase in the number of LGO enquiries and complaints, which could be as a result of the number of stages within the complaints process being reduced from three to one, following the introduction of the 2009 statutory social care complaints regulations, and complainants wanting an independent authority to adjudicate and sort out their issues of concern.

Tables 4b, 4c and 4d below shows the number of enquiries and complaints received involving the LGO for the last three years and summarises the outcomes.

Where a complaint has not been considered under the Council's complaints procedures and the LGO refers the complainant back to the local authority. Such complaints are described as 'premature'.

b. LGO enquiries and complaints - 2009/2010

Table 4b: 2009/2010 - Complaints via Local Government Ombudsman (LGO)					
LGO	Number of decisions	Outcome			
Enquiries	1	1 x Rejected as premature			
Complaints (Closed)	5	 2 x No or insufficient evidence of maladministration (no report) 2 x Local settlement (no report) 1 x LGO to discontinue investigation 			
Total	6				

Table 4b: Number of complaints involving the LGO concluded in 2009/2010, with the decision

c. LGO enquiries and complaints - 2010/2011

Table 4c: 2010/2011 - Complaints via Local Government Ombudsman (LGO)					
LGO	Number of decisions	Outcome			
Enquiries	3	3 x Rejected as premature			
Complaints (Closed)	7	 1 x Outside LGO jurisdiction 1 x Complaint withdrawn 3 x No or insufficient evidence of maladministration (no report) 1 x Local settlement (no report) 1 x LGO to discontinue investigation 			
Total	10				

Table 4c: Number of complaints involving the LGO concluded in 2010/2011, with the decision

d. LGO enquiries and complaints - 2011/2012

Table 4d: 2011/2012 - Complaints via Local Government Ombudsman (LGO)				
LGO	Number of decisions	Outcome		
Enquiries	6	6 x Rejected as premature		
Complaints (Closed)	14	 1 x No or insufficient evidence of maladministration (no report) 7 x To discontinue investigation (no report) 4 x To discontinue investigation: injustice remedied (no report) 1 x Local settlement (no report) 1 x Investigation complete, satisfied with authorities actions (no report) 		
Complaints (Active)	1	1 x Investigation incomplete		
Total	21			

Table 4d: Number of complaints involving the LGO concluded in 2011/2012, with the decision

At the time of writing this report, one complaint remains outstanding from 2011/2012

and is still being investigated by the LGO. The decision on the outstanding complaint will be reported in the 2012/2013 Annual Complaints Report.

The number of complaints escalated to the LGO has increased significantly over the last three years, and in the last two years from 2010/2011 to 2011/2012 they have increased by over 100%. Despite the increase the LGO have found maladministration or fault against the council in fewer cases.

e. Local settlements

In 2009/2010 the LGO found an element of maladministration or fault against the council in 2 (40%) of the 5 complaints they investigated and a local settlement was agreed by Adult Social Care and Health.

In 2010/2011 this number reduced to only 1 (14%) of the 7 complaints investigated by the LGO and in 2011/2012 again just 1 (7%) of the 14 complaints required a local settlement by the council.

This indicates that the LGO considers the department's intervention when investigating complaints to be fair and reasonable and the outcomes in most of the cases, just and appropriate.

The LGO have not reported formally on any of the complaints received in the last three years.

Table 4e: Complaints investigated by the LGO and maladministration or fault found					
	2009/2010	2010/2011	2011/2012		
Complaints	2 (40%) out of 5 cases	1 (14%) out of 7 cases	1 (7%) out of 14* cases		

Table 4e:

Number of complaints investigated by the LGO in the last three years and where maladministration or fault was found * = 1 complaint incomplete and remains active

f. LGO Annual review - 2011/2012

The LGO annual review report of Barnet is for the whole of Barnet and the statistics include the number of enquiries and complaints received by the LGO Advice Team. The report states that from 1 April 2011 to 31 March 2012, ASCH received 15 enquiries and complaints; however, ASCH dealt with 21 enquiries and complaints. (The LGO report on the number of decisions made in the period and ASCH record the number of enquiries and complaints received.) As stated above ASCH record shows that the LGO received 6 enquiries, which were rejected as premature and fifteen complaints for investigation; fourteen complaints are completed/closed and 1 remains outstanding.

The enquiries and complaints received were varied and ranged from concerns with the consultation process when implementing the Fairer Contributions policy, disagreement with the Community Care assessment process, disagreement with a DFG decision, to the delay in carrying out agreed OT adaptations.

Of the 14 ASCH completed complaints, just one led to a 'Local Settlement (without report)'. This complaint was a joint complaint with Barnet Homes and the outcome was that as a result of the delay in carrying out the agreed OT adaptations, the service user be compensated £250. There was acknowledgment the delays made it difficult for the service user to live independently, subsequently causing a negative impact to her health. The recommendation was accepted and ASCH contributed £85 towards the compensation, which is proportionate to the involvement.

The LGO reports that there are no concerns in relation to ASCH response times and there are no issues arising from any of the complaints referred to within the report.

12. Complaints managed by contractors (external service providers)

Adult Social Care and Health welcome complaints as a way of measuring how well the Home and Community Support Providers are providing services. Only complaints that are escalated are recorded by the Council, with Home and Community Support Providers also recording their own. Complaints and compliments are monitored by the Council when attending regular site visits carried out by the Supply Management Team.

In 2011/2012 the total complaints escalated through Supply Management were 139; this was an increase on last year by 25 (18%). This is as a result of the Council reducing care providers down from 11 contractors to three lead providers and one enablement provider in the later part of 2011/12. In doing so the Council transferred 661 service users. This understandably caused some service users anxiety; however, every effort was made to manage the situation by extending contracts so the process was carried out over a six month period. To help alleviate problems, we reviewed each service user, and offered various options including Direct Payments and the lead providers sub-contracted to two providers approved by the Council. This allowed service users to remain with their current care provider if they wished to do so, until such time as the lead providers were at full capacity.

During the year before moving down to the three providers, inadequacies were highlighted with 3 of the 11 home and community support providers. All three had embargos placed on new referrals as a result of an increase in complaints; whilst the department actively worked with the providers to improve quality This was achieved through the development of action plans and close joint working with the provider, the Council and Care Quality Commission.

a. Complaints managed by contractors (external service providers)

Table 5a below shows a breakdown of complaints managed by contractors (external service providers) on behalf of Adult Social Care and Health from 1 April 2011 to 31 March 2012, compared to the previous two years.

Table 5a: Complaints managed by contractors (External service providers)						
	2009/2010 2010/2011 2011/2012					
Complaints	90	114	139			

Table 5a: Number of complaints managed by contractors (external service providers)recorded in the last three years

13. Complaint User Survey

A complaint user questionnaire was sent to all the 2011/2012 complainants. The report containing the results from the survey captures the level of overall satisfaction with the complaints process, and includes the outcomes from the complainants' perspective (See Appendix 1).

Based on the survey's findings, a number of key actions to improve the complaints journey for future complainants have been established. To deliver these actions, the Complaints and Representations Manager will continue to work closely with managers to ensure that:

- The Comments, Compliments and Complaints booklet is distributed on receipt of each new complaint received
- They speak to complainants on receipt of each new complaint, where appropriate, a meeting is offered and that they:
 - Take the complaint seriously. Demonstrate empathy and real concern
 - Obtain as much information and facts about the complaint as possible
 - Inform the complainant about the complaints process, i.e. plan of investigation (interviews, files, policies, procedures, legislation)
 - Inform the complainant when they can expect a written response to their complaint.
 - Manage the expectations of the complainant in relation to outcomes
- The whole complaint is investigated and addressed in the response letter
- All the reasons for decisions taken are detailed in the response provided to complainant
- Managers do what they say they will do as a result of the complaint

14. Adult Social Care and NHS Complaints Network

The Complaints and Representations Manager continues to work closely with colleagues from the North West London Complaints Managers group to ensure that Adult Social Care and Health are kept informed and in a position to adopt as consistent an approach to complaints handling as possible.

In addition, the Complaints and Representations Manager joined colleagues in neighbouring local authorities and health departments within the North Central London area to formulate a joint agreement for the handling of integrated complaints and concerns in line with the requirements of the 2009 statutory complaints Regulations. The agreement was completed in February 2012 and is currently awaiting internal approval and sign-off. This will streamline and define how the organisations work together and will improve the complaints journey for our customers.

15. Training

In 2010/2011 the Complaints and Representations Manager provided briefing sessions to managers within care services delivery services (with the exception of Mental Health Services) on the complaints procedure and its processes, paying particular attention to reporting and the recording of lessons learnt from complaints received and actions put in place as a result.

Appendix 1 - Outcome of 2011/2012 Complaints User Survey

In 2011/2012, questionnaires were sent to each complainant, 100 in total. Reminder letters were sent to complainants who had not returned their questionnaire. Of the 100 questionnaires sent out, 24 (24%) were completed and returned.

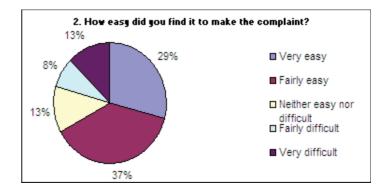
Of the 24 participants who took part in the survey 2 (8%) complainants accepted the offer of a resolution meeting with the investigating manager and in some cases, the Complaints and Representations Manager. The other 22 (92%) complainants were either offered the opportunity to meet, but declined the offer or the investigating manager did not feel that meeting with the complainant would add value to their investigation. The Complaints and Representations Manager will continue to encourage managers to consider the benefits of face-to-face discussions when investigating complaints.

Of the 24 participants who took part in the survey 9 (38%) complaints were upheld, 7 (29%) complaints were partially upheld and 8 (33%) complaints were not upheld.

Question 1 To what extent are you satis outcome of your comp		1 the
Very satisfied	5	21%
Fairly satisfied	4	16.5%
Neither satisfied nor dissatisfied	4	16.5%
Fairly dissatisfied	3	13%
Strongly dissatisfied	8	33%
Total	24	100%

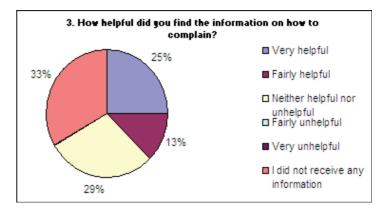
Of the 24 participants who took part in the survey 54% were satisfied to some extent with the outcome of their complaint. The complainants that tended to be dissatisfied were participants whose complaints were not upheld.

Question 2 How easy did you find it to make the complaint?					
Very easy	7	29%			
Fairly easy	9	38%			
Neither easy nor difficult	3	13%			
Fairly difficult	2	8%			
Very difficult	3	13%			
Total	24	100%			



Over 65% of the participants found it easy or relatively easy to make their complaint.

Question 3 How helpful did you find the information on how to complain?						
Very helpful	6	25%				
Fairly helpful	3	13%				
Neither helpful nor unhelpful	7	29%				
Fairly unhelpful	0	0%				
Very unhelpful	0	0%				
I did not receive any information	8	33%				
Total	24	100%				



Of the 24 participants that took part in this survey, 2 (8%) complaints were received on a Comments, Compliments and Complaints form. The Comments, Compliments and Complaints booklet explains how to make a comment, compliment and/or a complaint and the statutory adult social care complaints process.

The remaining 22 (92%) participants received a Comments, Compliments and Complaints booklet with their acknowledgement letter after they had lodged their complaint.

Over a third, 9 (38%) of the 24 participants who received the Comments, Compliments and Complaints booklet, found the information received about how to make their complaint useful or relatively useful. However, 8 (33%) participants stated that they did not receive any information.

The Complaints and Representations Manager will remind all managers who deal with complaints that they must send a Comments, Compliments and Complaints booklet or the internet hyperlink to the booklet, to all complainants on receipt of their complaint.

Question 4 How seriously did you feel yo taken?	our compla	aint was	4. How seriously did you feel our c	omplaint was tak Very serie
Very seriously	8	33%		Fairly seri
Fairly seriously	2	8%		
Not seriously enough	8	33%		Not seriou
Not seriously at all	6	25%		-
Total	24	100%	33%	Not seriou

Just over 50% of participants that took part in the survey felt that their complaint was not taken seriously enough.

The Complaints and Representations Manager encourages managers to speak to complainants and/or service users very early on during the complaints process, normally within 5 working days of the complaint being received into the council, and during that initial conversation they are advised to:

- obtain as much information and facts about the complaint as possible
- inform the complainant about the complaints process, i.e. plan of investigation (interviews,

Not seriously enough

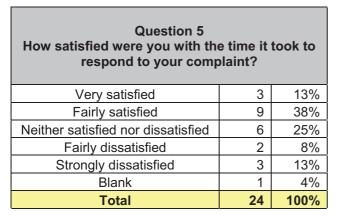
Not seriously at all

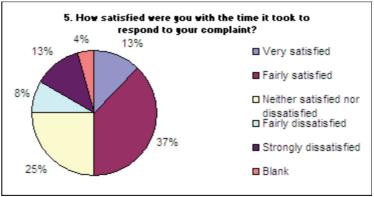
files, policies, procedures, legislation)

• inform the complainant when they can expect a written response to their complaint.

It is also expected that this conversation is used to manage the complainant's expectations in relation to outcomes, together with showing empathy and concern.

The Complaints and Representations Manager will remind all investigating managers on allocation of each new complaint of the requirements and expectations within that initial conversation when speaking to the complainant.





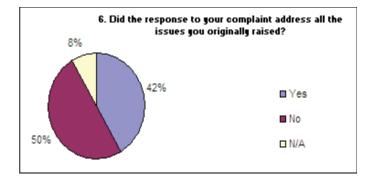
Only 20% of participants that took part in the survey were dissatisfied with the time it took to respond to their complaints.

It is the department's aim to respond in writing to Straightforward complaints within 20 working days and Corporate complaints within 10 working days. In 2011/2012, of the 100 complaints received 77% were dealt with within timescale. In 2010/2011, 88 complaints were received and 81% were dealt with within timescale, and in 2009/2010 of the 73 complaints received 96% were dealt with within timescale.

Of the 24 participants that took part in the survey over 80% (20 complainants) received a response to their complaint within the timescales as stated above.

The Complaints and Representations Manager is however reviewing the timescales for managers responding to statutory complaints and will consider how improvements could be made.

Question 6 Did the response to your complaint address all the issues you originally raised?				
Yes	10	42%		
No	12	50%		
N/A	2	8%		
Total	24	100%		



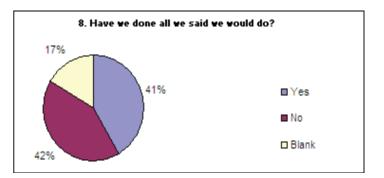
Half, 50% of participants that took part in the survey said the response received did not address all the issues they had originally complained about. This may be because the initial, early telephone conversations are not routinely happening or when they are, not enough information is being sought and so managers are only responding to the written complaints received.

The Complaints and Representations Manager will monitor this to ensure that conversations are taking place and that the whole complaint is being captured and addressed in the response letters.

Question 7 How easy was it to understar your complair	d the resp	onse to
y easy	10	42%
Fairly easy	6	25%
Fairly difficult	2	8%
Very difficult	5	21%
Blank	1	4%
Total	24	100%

Over 65% of participants that took part in the survey said it was easy to understand the response to their complaint and that is probably because all responses are in plain English.

Question 8 Have we done all we said w	e would (do?
Yes	10	42%
No	10	42%
Blank	4	16%
Total	24	100%



50% of participants said the department did not do all it said it would do.

The Complaints and Representations Manager will monitor this through receipt of the completed Complaints Recording Form (Action Plan and Feedback Form) and regular discussions with investigating managers.

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AGENDA ITEM 8

Meeting	Special Safeguarding Overview and Scrutiny Committee
Date	24 September 2012
Subject	Ofsted Inspections of Schools
Report of	Cabinet Member for Education, Children and Families and the Director of Children's Services
Summary	This report outlines recent and forthcoming changes to the Ofsted inspection of schools framework and the response of the Children's Service in terms of assisting schools in preparing for inspections and the outcomes of inspections for Barnet schools.
Officer Contributors	Mick Quigley, Assistant Director, Children's Service Chris Skinner, Learning Network Inspector, Central Network.
Status (public or exempt)	Public
Wards affected	All
Enclosures	Appendix A – Outcomes of Ofsted inspections
Reason for urgency / exemption from call-in	Not applicable

Contact for further information: Mick Quigley, Assistant Director, Children's Service. Tel: 0208 359 6350: mick.quigley@barnet.gov.uk

Chris Skinner, Learning Network Inspector, Children's Service. Tel: 0208 359 7748: chris.skinner@barnet.gov.uk

1. **RECOMMENDATIONS**

1.1 That the Safeguarding Overview and Scrutiny Committee consider and comment on the implications of the changing nature of Ofsted inspections of schools and the action being taken in Barnet in response to this.

2. RELEVANT PREVIOUS DECISIONS

2.1 None

3. CORPORATE PRIORITIES AND POLICY CONSIDERATIONS

3.1 The Children's Service supports and challenges schools around performance and outcomes to help deliver the Corporate Plan 2012-2013's strategic objective 'ensuring every school is a good school for every child and targeting support at young people at risk of not fulfilling their potential, which is also prioritised in the Barnet Children and Young People Plan 2010-2013. Achieving this objective continues to be the main driver for the work of the four Learning Network Inspectors.

4. RISK MANAGEMENT ISSUES

- 4.1 With successive Ofsted frameworks being introduced there is a continual 'raising of the bar'. If this results in fewer schools being judged outstanding and potentially more schools at the other end of the continuum, this could pose a reputational risk for the local authority. In order to mitigate this risk, the Children's Service has a termly Schools Review Group meeting where our schools causing concern are discussed. These schools receive enhanced levels of support and challenge through a series of additional visits.
- 4.2 Since the funding for school improvement moved to schools (in April 2011) schools, not local authorities, have had the responsibility for school improvement. However, parents look to the local authority as well as individual schools to ensure high standards of education within the borough. Barnet has a strong partnership of schools and the local authority works closely with all schools to help improve outcomes for children and young people through the work of the Learning Network Inspectors and the Narrowing the Gap Team and Early Years Standards Team.
- 4.3 Since the introduction of the Academies Act July 2010 and the Education Act January 2011 there has been a change in the relationship between the Local Authority and schools which have opted to become academies. Academies (which are no longer L.A. maintained schools) have greater freedom and, whilst some wish to continue to work closely with the Local Authority, others have exercised their freedom by working less closely with the Local Authority. However, as far as parents are concerned, a school located in Barnet is a 'Barnet school' regardless of whether or not it is an academy. At the time of writing this report, three secondary Academies previously judged to be 'Outstanding' have been inspected this academic year and are now judged to be 'Good.'

5. EQUALITIES AND DIVERSITY ISSUES

- 5.1 Barnet benefits from the diversity of its schools, which can help to meet parental preference. Barnet now has a growing number of academies and free schools, as well as maintained schools which includes voluntary aided, foundation trust and community schools. It also has a growing number of independent schools. Ensuring a parity of provision across the authority will be challenging, especially as more funding is delegated directly to schools, which reduces the support that the local authority can give to schools most requiring this.
- 5.2 As set out in 9.2, the Ofsted inspection framework used since January 2012 looks at how successful schools are on 'closing the gap' between different groups of pupils, particularly those who are underachieving nationally. In Barnet in 2011/12 there was an 18% attainment gap for children eligible for free schools meals at Key Stage 2 and 25% at Key Stage 4. The attainment gap at Key Stage 4 (GCSE) for children with SEN was 32%. Greater scrutiny of underachieving groups within the Ofsted framework could help to drive improvement.

6. USE OF RESOURCES IMPLICATIONS (Finance, Procurement, Performance & Value for Money, Staffing, IT, Property, Sustainability)

Staffing

6.1 The Local Authority continues to have a strategic role as the champion of children and young people. It is, therefore, essential that the Council maintains a good working relationship with schools. This is currently brokered through Director's meetings for Headteachers, Learning Network meetings and councillor representation on Governing Bodies. However, not all schools choose to attend meetings if they are not obliged to and there is no pre-requisite for there to be a Local Authority representative on the Governing Body of academies. The work of the four Learning Network Inspectors is still regarded as a vital link with our schools, and they undertake a programme of termly visits to schools. The purpose of these visits is to support and challenge schools around performance and help to broker school-to-school links. A crucial part of the role of the Learning Network Inspector is also to help schools prepare for Ofsted inspections and to validate their school self-evaluation. An annual 'keeping in touch' visit is offered to all Academies.

Finance

6.2 With an increasing number of schools converting/planning to convert to academy status or set up as free schools, their funding stream changes. They are funded directly by government on an equivalent basis to other schools. This includes funding for functions that the council previously carried out. As more schools convert to academy status, the centrally retained budget is decreased, reducing the funding available for the Council to support the remainder of the schools network. This has already impacted on our services as we are supporting schools with an increasingly depleted team.

7. LEGAL ISSUES

7.1 The Local Authority is bound by a number of Acts passed by the government, including the Academies Act 2010, the Education Act and the Education Acts 1996, 2002 and 2005. Under the terms of the 2005 Act, (as amended by the Education and Inspections Act 2006) the Local Authority is required to act quickly and decisively in relation to schools that have received an adverse Ofsted report. The role of the Local Authority in relation to an Academy receiving an adverse Ofsted report is still unclear.

8. CONSTITUTIONAL POWERS

- 8.1 The scope of Overview and Scrutiny Committees is contained within Part 2, Article 6 of the Constitution
- 8.2 The terms of Reference of the Scrutiny Committees are in the Overview and Scrutiny Procedure Rules (Part 4 of the Constitution). The Safeguarding Overview and Scrutiny Committee has within its terms of reference the following responsibilities:
 - To scrutinise the Council and its partners in the discharge of statutory duties in relation to safeguarding.
 - To scrutinise the provision of education (children and adults), special educational needs provision, and the protection and welfare of children.

9 BACKGROUND INFORMATION

- 9.1 Schools are regularly inspected by Ofsted and since January 2012, have been subject to a new Inspection framework. On average, schools are inspected once every three years. Satisfactory schools may be visited more regularly. Outstanding schools are not routinely re-inspected. However, Ofsted undertakes an annual 'desk top' exercise which may flag up concerns which would prompt an inspection, e.g. falling standards, falling rolls, significant changes in leadership, complaints from parents.
- 9.2 Under the new framework the bar has been raised. Schools are now inspected under four main criteria: Achievement of Pupils at the school; Quality of Teaching in the school; Behaviour and Safety of pupils at the school; Quality of Leadership and Management of the school. Standards are crucial to the final outcome of an inspection and there is an even closer synergy under the new framework between the four main areas inspected. Achievement focuses not just on final outcomes of pupils (e.g. end of Key stage results, GCSE results) but also on the progress made by pupils. Inspectors will look at how successful schools are on 'closing the gap' between different groups of pupils, particularly those who are underachieving nationally. This includes scrutiny of the performance of boys and girls, pupils on free school meals, pupils with special educational needs, EMA pupils and those with English as an additional language. More details can be found in 'The School Inspection Handbook': Published by Ofsted June 2012.
- 9.3 **Achievement:** Pupil achievement is one of the key issues examined by Ofsted inspectors. In judging achievement, inspectors look at pupils' levels of attainment when they join the school, the progress they make during their time at the school through to the standards they reach by the time they leave, compared with all pupils nationally.
- 9.4 **Teaching**: Under the new framework, inspectors spend even more time in classrooms observing lessons. An example is that in a one form entry primary school with a Nursery provision, inspectors observed 19 lessons/part lessons during a two day inspection. During these observations, inspectors look at how well pupils are learning and how effectively teachers assess and give feedback to children on their work and the next steps they need to take in their learning. There is a real focus on how effectively literacy and numeracy skills are taught, and inspectors will talk to pupils about their work and, in primary schools, will also listen to children read.

- **9.5** Behaviour and safety: Inspectors judge how well the school manages pupils' behaviour and attendance and promotes and ensures their safety from bullying and harassment. Particular attention is given to pupils' attitudes to learning, as well as to their conduct in lessons and around the school. Inspectors take into account the views of pupils, staff, parents and carers, and governors to get a view of what behaviour is typically like at the school.
- 9.6 **Leadership and Management**: Inspectors judge the effectiveness of leaders and managers of the school, (including Governors), in improving the quality of teaching and learning, raising standards and ensuring the health, safety and wellbeing of pupils at the school. They will also judge how well leaders and managers ensure that the curriculum meets the learning needs of the pupils and how effectively they lead and manage school improvement.
- 9.7 When considering the overall effectiveness of a school, inspectors take all of the above into account, including the spiritual, moral, social and cultural development provided for pupils and how well the school meets the range of pupils at the school, in particular, pupils with a disability and/or special education needs.
- 9.8 **Grading:** inspectors use a four-point grading scale to judge the quality of education provided in the school:
 - Grade 1: outstanding
 - Grade 2: good
 - Grade 3: satisfactory
 - Grade 4: inadequate
- 9.9 **Process:** most schools will receive up to two working days' notice of an inspection. Following the inspection, the lead inspector writes a report about the main findings of the inspection. The report is published on the Ofsted website and the governing body (or appropriate authority) are asked to send a copy to all parents and carers of pupils at the school.
- 9.10 Under the new framework, greater account is being taken of the views of parents. Parents are requested to complete a questionnaire during the course of the inspection. Ofsted have also introduced a new online questionnaire called 'Parent View' (October 2011). Using this tool, parents can rate their child's school on a range of issues, including the quality of teaching, bullying, behaviour and levels of homework. There is a final question asking whether or not parents would recommend the school to other parents. Once a small number of surveys are completed, the results for the school are visible in 'Parent View' although individual responses are not. Ofsted inspectors will use this additional information when making decisions about which schools to inspect and when.
- 9.11 The new Chief Inspector, Sir Michael Wilshaw, has consulted on further changes to the inspection of maintained schools from September 2012 to raise expectations even more. From September 2012, Ofsted will replace the current 'satisfactory' judgement with 'requires improvement' where schools are not inadequate but are not yet providing a good standard of education. Schools judged as requiring improvement will be re-inspected within two years and earlier if required. The current 'notice to improve' category will be replaced with 'serious weaknesses.' If a school is judged to 'require improvement' for two consecutive inspections, they will then be deemed to require 'special measures.'

9.12 The notice given for an inspection will reduce from the current two days to a phone call to the school on the afternoon before an inspection. There are other minor changes to the framework which can be found in 'The School Inspection Handbook': June 2012.

9.13 Preparation for Ofsted inspections:

The local authority takes a robust view in terms of the importance of rigorous preparation for the eventuality of an Ofsted inspection. Community and Voluntary Aided Schools are supported in this preparation, mostly through the work of the Learning Network Inspectors. Learning network inspectors undertake a rolling programme of visits to the above schools within their learning networks. In the course of these visits, they will check the school's own self-evaluation, undertake lesson observations in order to validate the school's judgements on teaching and learning, and have in-depth discussions on the standards reached by the school and how this compares with other schools both locally and nationally. A strong element of challenge is a feature of all of these visits and discussions.

- 9.14 Regular training has been held for senior leaders in schools on the new framework. Additionally, we have an Ofsted update at every Learning network meeting with Headteachers (twice a term). Bulletins are put in the school circular to alert Headteachers to any ongoing changes and training has been held for Governors. Learning Network Inspectors are always willing to undertake bespoke training for individual Governing Bodies on request.
- 9.15 When a school receives notification of an Ofsted inspection, they will (Community and Voluntary Aided schools) notify their Learning Network Inspector. The day before the inspection the LNI will go into the school and scrutinise the pre-Inspection briefing with the Headteacher and Senior leaders and offer support in terms of preparing an appropriate response. The pre-Inspection briefing sets the agenda for the course of the inspection. During the two days of the inspection schools may contact the LNIs for help, advice and support and the LNI will always attend the feedback from the inspection team at the end of the two days. If an Academy particularly requests support, the LNI will endeavour to respond. However, experience has indicated that not all Academies notify the local authority in the event of an inspection.
- 9.16 From September 2012 schools will be informed of their inspection by telephone the afternoon before. Learning Network Inspectors will as far as practicable, provide advice and support in advance and during the inspection.

9.17 The performance of L.A. schools in Ofsted inspections:

Barnet has 4 nursery schools, 88 primary schools, 22 secondary schools, 4 special schools and 3 pupil referral units.

Of the 88 primary schools, 11 are infant schools and 10 are junior schools. 1 Academy and 34 primary schools are voluntary-aided comprising 11 Roman Catholic, 14 Church of England and 9 Jewish schools.

Of the 22 secondary schools, 14 are Academies (as at July 2012), 7 are single-sex schools, 7 are voluntary-aided comprising of 1 non-affiliated, 1 Jewish, 1 Church of England and 4 Roman Catholic schools.

Our outcomes for Ofsted inspections statistics compare very positively with national, as follows:

9.18 The last inspection judgement for all Barnet Schools

Outstanding	38%
Good	54%
Satisfactory	7.5%
Inadequate	0%

9.19 National: 2011 – 2012 Academic year

11%
1 6%
88%
6%

9.20 National: Jan – March 2012

Outstanding	7%
Good	48%
Satisfactory	32%
Inadequate	13%

10. LIST OF BACKGROUND PAPERS

10.1 <u>The School Inspection handbook: June 2012</u>. The web link to this: <u>http://www.ofsted.gov.uk/resources/school-inspection-handbook-september-2012</u>

Cleared by Finance (Officer's initials)	JH
Cleared by Legal (Officer's initials)	LC

APPENDIX 1: Table of Ofsted Outcomes for Barnet Schools

Name of school	Judgement at most recent inspection	Date	Judgement at previous inspection	Date
Brookhill Nursery	1	12 Oct 10	V Good	29 Apr 02
Hampden Way	1	28 Jan 10	1	14 June 07
Moss Hall Nursery	1	16 Sept 09	2	18 Jan 07
St Margaret's	1	19 Jan 11	1	11 Dec 07
Akiva	2	11 Sept 08	-	-
All Saints NW2	2	7 Mar 12	2	7 Nov 06
All Saints N20	2	30 Mar 11	2	17 June 08
Annunciation Infant	1	23 Mar 09	1	9 May 06
Annunciation Junior	1	29 Nov 07	1	16 June 03
Barnfield	1	22 May 07	1	10 June 02
Beit Shvidler	2	19 June 12	-	-
Beis Yaakov	1	15 June 11	2	10 Oct 07
Bell Lane	3	27 Feb 12	3	17 June 09
Blessed Dominic	2	19 May 10	2	3 July 07
Broadfields	2	23 March 10	2	6 Dec 06
Brookland Infant	2	9 Dec 08	2	3 Nov 05
Brookland Junior	1	24 June 10	1	12 June 07
Brunswick Park	2	11 July 11	2	2 July 08
Chalgrove	2	23 July 10	3	25 Mar 08
Childs Hill	2	21 June 11	2	20 May 08
Christ Church	2	29 Sept 09	3	13 Nov 06
Church Hill	2	2 Nov 11	3	9 July 09
Claremont	2	5 July 11	2	25 June 08
Colindale	2	04 June 09	2	7 June 06
Coppetts Wood	1	19 Sept 11	2	7 June 07
Courtland	1	16 June 08	3	5 July 04
Cromer Road	2	1 March 12	3	22 Nov 05
Danegrove	2	28 Nov 11	2	1 Nov 06
Deansbrook Infant	1	14 Nov 07	2	19 Nov 01

Deansbrook Junior	2	30 May 12	1	12 June 09
Dollis Infant	2	24 Jan 11	3	19 Dec 07
Dollis Junior	2	20 Oct 09	3	14 Mar 09
Edgware Infant & Nursery	2	27 Jan 09	2	28 Sept 05
Edgware Junior	3	22 Nov 11	4	10 Jan 08
Fairway	2	23 May 12	2	18 Nov 08
Foulds	2	19 Nov 07	2	29 Oct 01
Frith Manor	1	12 June 07	2	31 Jan 02
Garden Suburb Infant	2	27 Jan 09	2	6 Dec 05
Garden Suburb Junior	2	31 Jan 12	2	11 July 07
Goldbeaters	2	14 March 12	3	15 Oct 08
Grasvenor Avenue Infant	2	09 Dec 09	2	12 Sept 06
Hasmonean Primary	1	21 May 08	2	14 June 04
Hollickwood	2	12 Feb 08	2	9 Nov 05
Holly Park	1	21 Nov 11	2	18 June 09
Holy Trinity CE	2	23 Sept 09	2	14 Sept 06
Hyde (The)	3	10 June 10	3	21 March 07
Independent Jewish Day	1	11 Dec 07	2	22 Jan 02
Livingstone	3	15 May 12	2	25 June 09
Manorside	2	27 March 08	2	12 Nov 08
Martin	1	01 Dec 11	2	12 Feb 09
Mathilda Marks Kennedy	1	28 June 07	2	19 March 01
Menorah Foundation	2	12 May 08	3	17 May 04
Menorah Primary	1	29 Feb 12	2	13 Nov 06
Monken Hadley CE	2	13 July 09	2	4 July 06
Monkfrith	1	13 Sept 11	2	10 Feb 09
Moss Hall Infant	1	26 Feb 09	2	11 May 06
Moss Hall Junior	2	15 March 11	2	10 July 08
Northside	1	29 Jan 09	2	22 June 06
Orion (The)	1	09 Feb 10	1	22 Nov 06
Osidge	2	07 Feb 12	2	27 Nov 06
Our Lady of Lourdes Catholic	1	25 Nov 11	2	15 Jan 08

Pardes House	2	22 March 11	3	12 Nov 08
Parkfield	3	13 July 10	3	24 Nov 08
Queenswell Infant & Nursery	2	23 April 12	2	2 Dec 08
Queenswell Junior	3	20 March 12	3	2 Dec 08
Rosh Pinah	2	12 Jan 10	2	25 Sep 06
Sacred Heart	1	25 Nov 08	1	29 Nov 05
St Agnes' Catholic	2	12 May 10	1	4 July 07
St Andrew's CE	2	18 Nov 11	3	26 Mar 09
St Catherine's CE	1	30 April 09	2	27 June 06
St John's CE N11	1	23 Feb 12	2	27 Nov 06
St John's CE N20	2	16 Jan 12	2	21 June 07
St Joseph's Catholic Infant	2	24 Nov 09	2	27 Feb 07
St Joseph's Catholic Junior	1	22 Jan 09	1	4 June 06
St Mary's & St John's CE	2	06 Oct 11	2	15 May 07
St Mary's N3	1	15 Nov 11	2	13 Nov 06
St Mary's EN4	1	24 March 10	2	5 Dec 06
St Paul's N11	2	10 March 09	2	4 May 06
St Paul's NW7	2	10 Oct 11	2	10 Oct 06
St Theresa's Catholic	2	22 Sept 10	2	16 June 08
St Vincent's Catholic	1	18 June 08	2	24 Nov 03
Summerside	2	9	2	21 May 09
Sunnyfields	2	28 Nov 11	2	12 March 09
Trent CE	2	12 Sept 11	2	14 May 07
Tudor	3	11 Jan 11	3	25 June 08
Underhill Infant	2	07 Oct 09	2	9 May 07
Underhill Junior	2	11 July 11	3	10 Oct 07
Wessex Gardens	2	01 Feb 09	2	7 Dec 05
Whitings Hill	1	10 Nov 10	3	12 Oct 06
Woodcroft	2	01 Dec 09	2	2 Oct 06
Woodridge	2	11 July 11	2	18 June 08
Ashmole	1	24 Jan 07	2	20 Mar 00
Bishop Douglass Catholic	2	14 Oct 10	2	16 Jan 08

Christ's College	2	16 Sept 10	3	14 May 08
Compton (The)	1	11 Sept 06	1	10 June 02
Copthall	2	14 Oct 10	2	30 Jan 08
East Barnet	2	25 April 12	1	6 Feb 07
Finchley Catholic High	2	06 Nov 08	2	12 Oct 05
Friern Barnet	1	10 Feb 11	2	28 Nov 07
Hasmonean High	2	09 Jan 08	2	7 Sept 04
Hendon	1	21 Nov 11	2	24 May 07
Henrietta Barnett (The)	1	4 Dec 07	1	17 Nov 03
JCoSS	2	15 May 12	-	-
London Academy	2	9 Nov 11	2	26 Feb 07
Mill Hill High	2	6 March 12	2	25 Apr 07
Queen Elizabeth's Boys'	1	9 Jan 08	1	13 Sept 04
Queen Elizabeth's Girls'	1	21 Nov 07	1	3 March 03
St James' Catholic High	3	13 Jan 10	2	17 May 07
St Mary's High	3	23 Sept 09	3	6 Nov 06
St Michael's Catholic Grammar	1	13 Jan 08	1	31 Jan 05
The Totteridge Academy	2	12 Sept 11	1	16 Jan 08
Whitefield	2	30 May 12	1	11 March 08
Wren Academy	1	1 Feb 11	-	-
Mapledown	1	31 Dec 08	1	11 Oct 05
Northway	1	10 June 10	1	14 June 07
Oak Lodge	1	28 Sept 10	2	10 Oct 07
Oakleigh	1	11 Mar 10	1	22 Feb 07
Etz Chaim Jewish Primary (Free school)	-	-	-	-
Pavilion Study Centre	2	5 July 11	2	2 Feb 08
Discovery Bay	2	11 Jan 12	2	6 May 09
Northgate	1	28 June 11	2	11 Sept 07

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AGENDA ITEM 9

Meeting	Special Safeguarding Overview & Scrutiny Committee
Date	24 September 2012
Subject	Members Visits to Children's Homes & Young People's Hostels, Options Paper
Report of	Assistant Director, Social Care
Summary	This report outlines how Member and officer visits to Children's Homes currently operate and statutory requirements in relation to this. The Committee are requested to provide their views on the continuation of Member visits to Children's Homes.
Officer Contributors	Debbie Gabriel, Service Manager, Children's Social Care Andrew Charlwood, Overview and Scrutiny Manager
Status (public or exempt)	Public
Wards affected	All
Enclosures	None
Reason for urgency / exemption from call-in	Not applicable

Contact for further information: Debbie Gabriel, Service Manager, Children's Social Care 020 8359 5702

1. **RECOMMENDATION**

1.1 That the Safeguarding Overview and Scrutiny Committee consider the background to Member visits to Children's Homes and identify a preferred option regarding the continuation of Member visits from those options identified at paragraph 9.28 below.

2. RELEVANT PREVIOUS DECISIONS

- 2.1 First Class Education and Children Overview and Scrutiny Committee, 13 June 2006 the Committee agreed that Members should undertake monthly visits to Children's Homes to review activity in relation to the five outcomes for children identified in the Children's Act 2004. Between 2006 and 2012, findings from Member visits to Children's Homes have been regularly reported to the following committees and considered in the exempt part of the meeting:
 - First Class Education and Children Overview and Scrutiny Committee (2005 2009);
 - Children's Services Overview and Scrutiny Sub-Committee (2009 2011); and
 - Safeguarding Overview and Scrutiny Committee (2011 to date)
- 2.2 First Class Education Overview and Scrutiny Committee, 7 May 2009 the Committee resolved that Member visits should be recommended to continue under the new scrutiny structure.
- 2.3 Policy and Performance Overview and Scrutiny Committee, 30 June 2009 the Committee approved the Children's Services Overview and Scrutiny Sub-Committee work programme which included the continuation of Member and Officer Visits to Barnet Children's Homes. The Committee also resolved that Member visits to Barnet's Children's homes should be undertaken by Members of the Children's Services Overview and Scrutiny Sub-Committee
- 2.4 Children's Services Overview and Scrutiny Sub-Committee, 28 April 2011 the Committee resolved that its successor committee should continue to facilitate Member visits to Barnet's Children's Homes and Young People's Hostels

3. CORPORATE PRIORITIES AND POLICY CONSIDERATIONS

3.1 The Corporate Plan 2012/13 includes the strategic objective to 'Safeguarding vulnerable children and adults'. Officer visits to Children's Homes help to support this priority. Member visits to Children's Homes and Young People's Hostels provide an opportunity for elected Members to discharging their responsibilities as Corporate Parents.

4. RISK MANAGEMENT ISSUES

4.1 Members are required to have Criminal Records Bureau (CRB) checks to undertake visits. Until recently, there were only been a limited number of Members of the Safeguarding Overview and Scrutiny Committee who had the required CRB clearance to undertake visits and some of these checks are still outstanding in the current cohort of committee members. Due to the limited pool of Members who have obtained the required checks over recent months, the majority of visits have been undertaken by a small group of Members. If Member visits are to continue, it is essential that all Members of the Committee obtain the required CRB clearance and that they are apportioned on an

equitable basis. Without the required CRB checks, the Council will not have the required level of assurance required to ensure that residents of children's homes and young people's hostels are not at risk.

- 4.2 Member visits are scheduled on a cyclical basis and occur approximately bi-monthly. Some of these visits have not been completed by Members that have been appointed to undertake them resulting in inconsistencies in the Member inspection cycle and reporting to Committee.
- 4.3 Elected Members may be exposing themselves to risk when undertaking visits to children's homes and hostels as they are interacting on a one-to-one basis with vulnerable children and young adults. In children's homes settings, council officers will be able to assess the risk that may be posed to councillors by the young people residing at the care home. When elected Members visit children's homes, staff will be on duty at all times and it is considered that in these circumstances, the risk is manageable. However, council officers do not undertake visits to young people's hostels so will not be aware of the potential risk that any young person may pose to Members when they undertake visits. Additionally, staffing levels at young people's hostels are lower than in children's homes meaning that there will be fewer staff to intervene should there be an issue.
- 4.4 Ceasing to carry out the visits removes the opportunity for an additional level of scrutiny to assure quality of service provision. To mitigate this, an alternative means of monitoring quality could be established (section 9.7 c) refers).

5. EQUALITIES AND DIVERSITY ISSUES

5.1 As at 31 March 2012, males were overrepresented in the children in care population, 59.7% of children in care were male, compared with 51.1% of males in Barnet's 0–19 population. 18.3% of the children in care population were Black/Black British children compared to 14.3% of the 0–9 population. In contrast, children with ethnicities of White British/White Irish/White other make up only 46.4% of the children in care population, but make up 56.9% of the 0–19 population. Children aged 0–4 years and 5-9 years are underrepresented in the children in care population, and children aged 10-14 and 15-19 are overrepresented in the children in care population. Ensuring that Children's Homes are of a high standard helps to support the children and young people placed there.

6. USE OF RESOURCES IMPLICATIONS (Finance, Procurement, Performance & Value for Money, Staffing, IT, Property, Sustainability)

- 6.1 Officer visits that are required under Regulations are contained within existing Children's Service Budgets.
- 6.2 Buildings used as Children's Homes are existing council assets.
- 6.3 There are no other resource implications relevant in the context of this report.

7. LEGAL ISSUES

7.1 As set out in sections 9.1 to 9.3.

8. CONSTITUTIONAL POWERS

- 8.1 The scope of Overview and Scrutiny Committees is contained within Part 2, Article 6 of the Constitution
- 8.2 The terms of Reference of the Scrutiny Committees are in the Overview and Scrutiny Procedure Rules (Part 4 of the Constitution). The Safeguarding Overview and Scrutiny Committee has within its terms of reference the following responsibilities:
 - To scrutinise the Council and its partners in the discharge of statutory duties in relation to safeguarding.
 - To scrutinise the provision of education (children and adults), special educational needs provision, and the protection and welfare of children.

9. BACKGROUND INFORMATION

Officer Visits to Children's Homes

- 9.1 The provision of Local Authority Children's Homes is not a statutory requirement. However, where provided, they are managed in accordance with the Children Act 1989, Guidance and Regulations, Volume 5: Children's Homes, and the Children's Homes National Minimum Standards, issued as guidance by the Secretary of State under section 7 of the Local Authority and Social Services Act 1970 and the Children's Homes Regulations 2001 (as amended) made by the Secretary of State under the Care Standards Act 2000.
- 9.2 The Governance arrangements for oversight of Children's Homes are contained within Regulation 33; local authorities are required to have quality assurance arrangements in place. Monthly Regulation 33 visits to the two Children's Homes are carried out by a Service Manager from within the Social Care Service who has no line management responsibility for the running of the homes. These reports are submitted to Ofsted as required by Regulation. This fulfils all statutory requirements for governance.
- 9.3 Regulation 34 requires that a system is in place to monitor some matters that are set out in Regulation 33, in order to improve the quality of care provided. This is also an officer function.

Member Visits to Children's Homes

- 9.4 Members' visits to Children's Homes are not a statutory requirement. Instead, they were an arrangement established under previous committee structures as a means of contributing to the Corporate Parenting function assigned to Members. The practice of Members regularly visiting Children's Homes is not universal and practice in other local authorities varies.
- 9.5 Member visits commenced in June 2006 when the First Class Education and Children Overview and Scrutiny Committee agreed that visits to Barnet's children's homes should be undertaken. The decision to visit children's homes was influenced by the enquiry findings into the death of Victoria Climbie conducted by Lord Laming and the subsequent publication of the Every Child Matters (ECM) Green Paper by the Department for Education and Skills. The Every Child Matters Green Paper affirmed a commitment to support all children and young people to achieve their potential through maximising

opportunities and improving life chances. It was given statutory force within the Children Act 2004 and identified five outcomes for children:

- Be healthy
- Stay safe
- Enjoy and achieve
- Make a positive contribution
- Economic well-being
- 9.6 The First Class Education Overview and Scrutiny Committee sought to achieve these outcomes for looked after children for whom they had corporate parenting responsibilities. The Committee proposed that Members of the Committee visit Barnet children's homes on a monthly basis and review activity in relation to the five outcomes.
- 9.7 A Members visit template was developed to provide a summary of the types of activity that could be considered under each of the outcomes. Members used the template as a guide to record their observations and findings.
- 9.8 When Members visit Barnet Children's homes their completed templates are sent to the Scrutiny Office. The Scrutiny Office then forwards the template to the Manager for Looked After Children/Head of Children's Social Care who co-ordinates an officer response to Members observations and comments, and addresses any issues that have been raised. These are then returned to the Scrutiny Office for publication in the Safeguarding Committee agenda and are discussed during the exempt part of the committee meeting.
- 9.9 All Members who visit the Children's homes are expected to have undertaken the necessary CRB check. All information is shared within appropriate bounds of confidentiality.
- 9.10 Staff and children/young people in the children's homes are made aware that during visits that it is not the role of Members to become involved in individual children's casework issues. Any individual issues raised during visits are referred by Members to the appropriate Children's Service Managers.
- 9.11 To support Members in obtaining the required skills to undertake visits to children's homes, a Member development session on being a good corporate parent and on conducting visits took place in 2006/07. During this session, Members of the committee discussed whether the visits should be based on the five key outcomes (as outlined at xx above) and it was agreed that visits should continue on that basis.
- 9.12 More recently, all Members of the Safeguarding Overview and Scrutiny Committee have been encouraged to attend annual safeguarding Member development sessions which provide an overview of the principles and practice of good safeguarding. Any new Members who are assigned a visit to a home or young people's hostel are paired with a more experience Member of the Committee who has undertaken several visits to provide support and guidance during the visiting process.

Visits to Young Peoples Hostels

9.13 Hostel provision is not an area of responsibility for the Social Care Division of the Children's Service and officer visits to these premises are not undertaken. There is no statutory officer requirement to conduct these visits.

- 9.14 In November 2009, a Task and Finish Group review was conducted into Homelessness and Young People. The Group made a number of recommendations to improve the provision of support to young people living in temporary council accommodation.
- 9.15 During the review, Members of the Group derived great benefit from visiting young people's hostels and meeting with hostel staff and residents. Members identified a number of issues relating to the estate management and provision of support. These included the availability of floating support for young people, the standards of furnishing and housekeeping provision, maintenance issues, and the availability of opportunities for young people to move on to more permanent accommodation and return to education or seek employment.
- 9.16 The Group did not make a formal recommendation for Members to visit young people's hostels. However, the Group strongly encouraged elected Members to visit council run establishments housing young homeless people in order to develop a greater understanding of issues relating to young vulnerable people and those that care for them.
- 9.17 In November 2010, the Children's Services Overview and Scrutiny Sub-Committee considered the findings of the TFG review on Homelessness and Young People and of the positive outcomes achieved by Members of the Group who had continued to visit Barbara Langston House and Adamson Court following the completion of the review.
- 9.18 In April 2011, the Children's Services Overview and Scrutiny Sub-Committee considered the findings of the TFG review on Youth Homelessness and resolved that Member visits should be extended to include hostels for young people with findings reported to the Sub-Committee.
- 9.19 In extending the remit of Member visits, the Sub-Committee believed that the visits would enable Members to engage with young vulnerable people and gain a better understanding of the issues they faced, in addition to improving the standard of support and opportunities available to young people living within these environments.
- 9.20 Since April 2011, Members of the Children's Services Overview and Scrutiny Sub-Committee and its successor committee, the Safeguarding Overview and Scrutiny Committee, have been visiting young people's hostels on a rota basis. Members are requested to submit their findings into a template for consideration by the Committee, but completion of these are not consistent across the board.
- 9.21 Members submit their visit reports for Adamson Court and Barbara Langston House to the scrutiny Office which is then passed to Children's Services (Adamson Court) and the Head of Social Housing (Barbara Langston House) for comment. These are then returned to the Scrutiny Office for publication in the Safeguarding Committee agenda and are discussed during the exempt part of the committee meeting.
- 9.22 In April 2012, the Divisional Manager for Youth Support Services informally met with Members who had visited Adamson Court to discuss with them their observations and findings. It was suggested that these meetings could be formalised (subject to committee approval) and used as part of the monitoring of the Metropolitan Housing Support contract.

Issues for Consideration

9.23 Member visits are not a statutory requirement and have emerged as custom and practice

over a number of years. Initially, visits were limited to children's homes and findings from Member visits complemented the Regulation 33 officer visits. Visits to young people's hostels have developed as an addition to already established arrangements for Member to visit children's homes.

- 9.24 Whilst Members have responsibilities as corporate parents, it is questionable as to whether site visits are the most appropriate way for them to fulfil their obligations in this regard. Children's homes are subject to regular visits by professional officers and Ofsted inspections at six monthly intervals. Young people's hostels are subject to Ofsted inspections at six monthly intervals. Ofsted also receive monthly quality assurance reports for both children's homes and young people's hostels. Key issues arising are identified through these mechanisms, bringing into question the usefulness and appropriateness of elected Member visits which are in addition to existing inspections carried out by experts.
- 9.25 Members who have undertaken visits have expressed concern that there is only a small cohort of Members visiting children's homes and young people's hostels on a regular basis. Other Members have not conducted visits as they either do not have a CRB check or have not been able to co-ordinate visits amongst themselves.
- 9.26 Initially it was envisaged that Members would undertake unannounced visits to children's homes and young people's hostels. On occasion, Members have attended premises and residents have been off-site. Consequently, suggested best times to visit were introduced. The introduction of such an arrangement could remove the benefit of unannounced visits as staff at homes and hostels may have an opportunity to prepare the accommodation and brief the residents.
- 9.27 The Committee considered the information set out above and some outline options at their meeting on 10th September 2012. The Committee were unable to reach a decision regarding which option(s) to adopt and requested that the options be revised and represented to the special meeting taking place on 24th September 2012.

Options

- 9.28 Options to the Committee to discuss are as follows:
 - a) Retain current arrangements, subject to clarification on officer support arrangements and all Committee Members having valid CRB checks.
 - b) Option a), but reduce frequency of visits (e.g. every four months, bi-annually or annually).
 - c) Discuss with the Corporate Parenting Advisory Group (CPAG) the feasibility of the Panel taking over responsibility for Member Visits, with findings reported to the Committee at regular intervals.
 - d) Consider alternative arrangements for Members to engage with young people placed in children's homes and young people's hostels (e.g. a one-off forum meeting or other arrangement) to ensure that issues of concern can be raised and subsequently addressed by officers and the home / hostel.
 - e) Consider alternative means of quality assurance, such as:
 - i) Detailed officer monitoring reports to the Committee (or CPAG) on all matters set out in Regulations 33 and 34 (frequency to be determined); and/or

- ii) Detailed monitoring reports to the Committee (or CPAG) following Ofsted inspections of homes.
- f) Cease carrying out the visits as they are not a statutory requirement;
- 9.29 The list above is not exhaustive and Members may have alternative options that they wish to propose and consider. One or more of the options above can be implemented.

10. LIST OF BACKGROUND PAPERS

10.1 None

Cleared by Finance (Officer's initials)	MC/JH
Cleared by Legal (Officer's initials)	LC



AGENDA ITEM 10

Meeting	Special Safeguarding Overview & Scrutiny Committee
Date	24 September 2012
Subject	Cabinet Forward Plan
Report of	Scrutiny Office
Summary	This report provides Members with the current published Cabinet Forward Plan. The Committee is asked to comment on and consider the Cabinet Forward Plan when identifying future areas of scrutiny work.
Officer Contributors	Andrew Charlwood, Overview and Scrutiny Manager
Status (public or exempt)	Public
Wards affected	All
Enclosures	Appendix A – Cabinet Forward Plan, July 2012
Reason for urgency / exemption from call-in	Not applicable

Contact for further information: Andrew Charlwood, Overview and Scrutiny Manager, 020 8359 2014, <u>andrew.charlwood@barnet.gov.uk</u>

1. **RECOMMENDATION**

1.1 That the Safeguarding Overview and Scrutiny Committee comment on and consider the Cabinet Forward Plan for July 2012 when identifying areas of future Scrutiny work.

2. RELEVANT PREVIOUS DECISIONS

2.1 None.

3. CORPORATE PRIORITIES AND POLICY CONSIDERATIONS

- 3.1 The Overview and Scrutiny Committees must ensure that the work of Scrutiny is reflective of the Council's priorities.
- 3.2 The three priority outcomes set out in the 2012/13 Corporate Plan are: -
 - Better services with less money
 - Sharing opportunities, sharing responsibilities
 - A successful London suburb

4. RISK MANAGEMENT ISSUES

4.1 None in the context of this report.

5. EQUALITIES AND DIVERSITY ISSUES

- 5.1 In addition to the Terms of Reference of the Committee, and in so far as relating to matters within its remit, the role of the Committee is to perform the Overview and Scrutiny role in relation to:
 - The Council's leadership role in relation to diversity and inclusiveness; and
 - The fulfilment of the Council's duties as employer including recruitment and retention, personnel, pensions and payroll services, staff development, equalities and health and safety.
 - The Council is required to give due regard to its public sector equality duties as set out in the Equality Act 2010 and as public bodies, Health partners are also subject to equalities legislation; consideration of equalities issues should therefore form part of their reports.

6. USE OF RESOURCES IMPLICATIONS (Finance, Procurement, Performance & Value for Money, Staffing, IT, Property, Sustainability)

6.1 None.

7. LEGAL ISSUES

7.1 None save those contained within the body of the report.

8. CONSTITUTIONAL POWERS

- 8.1 The scope of the Overview and Scrutiny Committees is contained within Part 2, Article 6 of the Council's Constitution.
- 8.2 The Terms of Reference of the Scrutiny Committees are included in the Overview and Scrutiny Procedure Rules (Part 4 of the Council's Constitution).

9. BACKGROUND INFORMATION

- 9.1 Under the current overview and scrutiny arrangements, the Safeguarding Overview and Scrutiny Committee will ensure that the work of Scrutiny is reflective of Council priorities, as evidenced by the Corporate Plan and the programme being followed by the Executive.
- 9.2 The Cabinet Forward Plan will be included on the agenda at each meeting of the Safeguarding Overview & Scrutiny Committee as a standing item.
- 9.3 The Committee is encouraged to comment on the Forward Plan.
- 9.4 The Committee is asked to consider items contained within the Forward Plan to assist in identifying areas of future scrutiny work, particularly focussing on areas where scrutiny can add value in the decision making process (pre-decision scrutiny).

10. LIST OF BACKGROUND PAPERS

10.1 None.

B A R N E T LONDON BOROUGH

Putting the Community First

London Borough of Barnet

Forward Plan of Key Decisions

July 2012

Jeremy.williams@barnet.gov.uk

Contact: Jeremy Williams, Governance Service, 020 8359 2042

Subject	Decision requested	Cabinet Member	Consultation	Last date for reps	Documents to be considered
Cabinet, 27 September 2012	ber 2012				
Parking Review	To approve changes to current car park charges and addition of new charges/vouchers	Environment			
Early Intervention and Prevention commissioned contract variations	 Approval to extend early intervention and prevention service contracts (1 Nov 2011 – 31 Mar 2012) for three months until 30 Jun 2012 to allow for re- commissioning and prevent a gap in services. 	Education, Children and Families			
	 Approval to waive Contract Procedure Rules: 5.6.2.2 to allow for additional expenditure to exceed 10% of original contract values, and; 5.6.1.2 to allow for a second extension for two of the 21 contracts 				
Cabinet Resources (Cabinet Resources Committee, 27 September 2012				大学の生ませんが
Leisure Strategic Review	Approval of Strategic Outline Case	Customer Access and Partnerships			
Early Intervention and Prevention Strategic Review	Approval of Strategic Outline Case	Education, Children and Families			
Mental Health Day Opportunities	Approval to award the contract	Adults			
Quarter 1 Monitoring and Performance Report 2012/13	To seek the Committee's approval of the recommendations and forecast within the report and to approve virements and transfers.	Resources and Performance			
7					

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Granville Road New Housing Development	To report on the competitive dialogue process to procure a developer partner, to recommend a developer partner, to authorise Officers to enter into contract with the recommended developer for the new housing development at Granville Road.	Resources and Performance	
Older Adults Day Opportunities		Adults	
IS Contract Waivers	Agreement to waive contract procedure rules in relation to a number of IS contracts including the 2e2 managed service provider.	Resources and Performance	
Asset Management Plan	Approval of Asset Management Plan.	Resources and Performance	
Music Service	Approval to move towards a new model.	Resources and Performance	
Cabinet, 7 November 2012	r 2012		
Business Planning 2013/14-2015/16	Approval of Budget Headlines	Leader / Resources and Performance	
Strategy for investment in school places	To agree strategy for investment	Education, Children and Families	
West Hendon Regeneration Scheme		Leader	

Cabinet Resources (Cabinet Resources Committee, 7 November 2012		
Waste and Street Scene Strategic Review	Approval of Options Appraisal and Business Case	Environment	
Corporate Procurement Forward Plan	Approval of all future procurements listed on the forward plan for 2013/14.	Resources and Performance	
Cabinet (Special Meeting) Date TBC	eting) Date TBC		
New Support and Customer Services Procurement	Approval of Preferred Bidder and Final Business Case	Resources and Performance	
Cabinet, 17 December 2012	er 2012		
Edgware Town Centre Strategy	To approve the Strategy.	Leader	
Sustainable Design and Construction Supplementary Planning Document	Adopt Supplementary Planning Document on Sustainable Design and Construction	Planning	
Residential Design Guidance Supplementary Planning Document	Adopt Supplementary Planning Document on Residential Design Guidance	Planning	
Council Tax Support	To consider results of the consultation and to agree a new scheme for publication and implementation	Resources and Performance	
Raising the Participation Age	Preparing for Raising of the Participation Age.	Adults	

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Cabinet Resources C	Cabinet Resources Committee, 17 December 2012		
Quarter 2 Monitoring and Performance Report 2012/13	To seek the Committee's approval of the recommendations and forecast within the report and to approve virements and transfers.	Resources and Performance	
Community Safety Strategic Review	Approval of Outline Business Case, including Options Appraisal	Safety and Resident Engagement.	
Leisure Outline Strategic Review	Approval of Outline Business Case, including Options Appraisal	Customer Access and Partnerships	
Preferred proposer for new school at Mill Hill East	To agree a preferred proposer	Education, Children and Families	
Cabinet (Special Mee	Cabinet (Special Meeting) 17 January 2013		
Development and Regulatory Services Procurement	Approval of Preferred Bidder and Final Business Case	Environment	
Cabinet, 25 February 2013	2013		
Business Planning 2013/14-2015/16	Report setting out Corporate Plan, Budget, Council Tax and MTFS	Leader / Resources and Performance	
Fees and charges (Children's Service)	To agree fees and charges	Education, Children and Families	
Independent schools joining the maintained sector	To take decision on independent schools joining the maintained sector	Education, Children and Families	

Cabinet Resources C	Cabinet Resources Committee, 25 February 2013	
Quarter 3 Monitoring and Performance Report 2012/13	To seek the Committee's approval of the recommendations and forecast within the report and to approve virements and transfers.	Resources and Performance
Early Intervention and Prevention Strategic Review	Approval of Outline Business Case	Education, Children and Families
Cabinet, 18 April 2013	3	
Children and Young People Plan	To agree Children and Young People Plan	Education, Children and Families
Cabinet Resources C	Cabinet Resources Committee, 18 April 2013	



AGENDA ITEM 11

Meeting	Special Safeguarding Overview & Scrutiny Committee
Date	24 September 2012
Subject	Safeguarding Overview & Scrutiny Committee Forward Work Programme
Report of	Scrutiny Office
Summary	This report outlines the Committee's work programme for 2012/13.
Officer Contributors	Andrew Charlwood, Overview and Scrutiny Manager
Status (public or exempt)	Public
Wards affected	All
Enclosures	Appendix – Safeguarding Overview and Scrutiny Work Programme 2012/13
Reason for urgency / exemption from call-in	Not applicable

Contact for further information: Andrew Charlwood, Overview and Scrutiny Manager, 020 8359 2014, <u>andrew.charlwood@barnet.gov.uk</u>

1. **RECOMMENDATION**

1.1 That the Committee consider and comment on the items included in the 2012/13 work programme of the Safeguarding Overview & Scrutiny Committee (Appendix).

2. RELEVANT PREVIOUS DECISIONS

2.1 None.

3. CORPORATE PRIORITIES AND POLICY CONSIDERATIONS

- 3.1 The Overview and Scrutiny Committees must ensure that the work of Scrutiny is reflective of the Council's priorities.
- 3.2 The three priority outcomes set out in the 2012/13 Corporate Plan are: -
 - Better services with less money
 - Sharing opportunities, sharing responsibilities
 - A successful London suburb

4. RISK MANAGEMENT ISSUES

4.1 None

5. EQUALITIES AND DIVERSITY ISSUES

- 5.1 In addition to the Terms of Reference of the Committee, and in so far as relating to matters within its remit, the role of the Committee is to perform the Overview and Scrutiny role in relation to:
 - The Council's leadership role in relation to diversity and inclusiveness; and
 - The fulfilment of the Council's duties as employer including recruitment and retention, personnel, pensions and payroll services, staff development, equalities and health and safety.
 - The Council is required to give due regard to its public sector equality duties as set out in the Equality Act 2010 and as public bodies, Health partners are also subject to equalities legislation; consideration of equalities issues should therefore form part of their reports.

6. USE OF RESOURCES IMPLICATIONS (Finance, Procurement, Performance & Value for Money, Staffing, IT, Property, Sustainability)

6.1 None in the context of this report.

7. LEGAL ISSUES

- 7.1 None save those contained within the body of the report.
- 8. CONSTITUTIONAL POWERS

- 8.1 The scope of the Overview and Scrutiny Committees is contained within Part 2, Article 6 of the Council's Constitution.
- 8.2 The Terms of Reference of the Scrutiny Committees are included in the Overview and Scrutiny Procedure Rules (Part 4 of the Council's Constitution).

9. BACKGROUND INFORMATION

- 9.1 The Safeguarding Overview & Scrutiny Committee's Work Programme 2012/13 indicates items of business previously considered by the Committee and forthcoming items.
- 9.2 The work programme of this Committee is intended to be a responsive tool, which will be updated on a rolling basis following each meeting, for the inclusion of areas which may arise through the course of the year.
- 9.3 The Committee is empowered to agree its priorities and determine its own schedule of work within the programme.

10. LIST OF BACKGROUND PAPERS

10.1 None



London Borough of Barnet

Safeguarding Overview and Scrutiny Committee

September 2012

Contact: Andrew Charlwood 020 8359 2014 andrew.charlwood@barnet.gov.uk

Subject	Decision / Decision requested	Cabinet Member	Author
10 September 2012			
Day Opportunities for Older People – Neighbourhood Model – Progress Update	The report sets out the process used for consultation with the existing Older Adults provider group on implementing the Older Adults Day Opportunities Neighbourhood Model as agreed by Cabinet Resources Committee on 17 July 2012	Cabinet Member for Adults	Director of Adult Social Care and Health and Interim Director of Children's Services
Ofsted Inspection of Safeguarding and Looked After Children – Action Plan	Barnet's Safeguarding and outcomes for Children in Care were inspected by Ofsted in January 2012. The outcome of the inspection found that safeguarding services were good overall and that the outcomes for Looked After Children were good overall. This paper outlines how the Council and partners have responded to the findings and recommendations of the inspection report.	Cabinet Member for Education, Children and Families	Director of Adult Social Care and Health and Interim Director of Children's Services
Barnet Multi-Agency Safeguarding Adults Board Annual Report 2011/12	This report documents the work of the Safeguarding Adults Board 2011/12 and seeks the Committee's comments	Cabinet Member for Adults	Director of Adult Social Care and Health and Interim Director of Children's Services
Safeguarding Children's Board Annual Report 2011-12	This report provides an overview of the effectiveness of safeguarding arrangements in Barnet including an assessment of the performance of the Local Authority and partners in delivering outcomes for children. It reviews progress during the last year and identifies challenges and priorities for the year ahead	Cabinet Member for Education, Children and Families	Director of Adult Social Care and Health and Interim Director of Children's Services

Subject	Decision / Decision requested	Cabinet Member	Author
Barnet's Local Involvement Network (LINK)	The Committee will be provided with a verbal update on the LINKs progress over the last year.	Cabinet Member for Adults	Director of Adult Social Care and Health and Interim Director of Children's Services
Member Visits – Options Paper	This report outlines how Member and officer visits to Children's Homes currently operate and statutory requirements in relation to this. The Committee are requested to provide their views on the continuation of Member visits to Children's Homes	N/A	Assistant Director Children's Social Care
Safeguarding Overview and Scrutiny Committee Work Programme	Standing item	N/A	Scrutiny Office
Special Meeting – 24 September 2012	er 2012		
Adult Social Care and Health Annual Complaints Report 2011-12	Adult Social Care and Health are required under statutory regulations to report annually to the relevant Council committee on adult social care complaints and to compile an annual report	Cabinet Member for Adults	Director of Adult Social Care and Health and Interim Director of Children's Services

Subject	Decision / Decision requested	Cabinet Member	Author
Adult Social Care White Paper, Caring for Our Future; the draft Care and Support Bill	This report describes the main points from the Adult Social Care White Paper, Caring for Our Future; the draft Care and Support Bill, scheduled to be introduced in parliament in 2013; and the Government's interim statement on funding reform for Adult Social Care. All three documents were published in July 2012. The report sets out the implications for Barnet and outlines a programme of work be undertaken to manage the implementation of the new requirements arising from the White Paper and legislation	Cabinet Member for Adults	Deputy Director Adult Social Care and Health
Ofsted Inspection of Schools	This report outlines recent and forthcoming changes to the Ofsted inspection of schools framework and the response of the Children's Service in terms of assisting schools in preparing for inspections and the outcomes of inspections for Barnet schools	Cabinet Member for Education, Children and Families	Assistant Director Children's Services
Member Visits – Options Paper	Item to be revisited following consideration at 10 September 2012 meeting	N/A	Assistant Director Children's Social Care
Statutory Regulation 33 - Officer visits to Barnet's Children's Homes	Standing item	N/A	Children's Service
Cabinet Forward Plan	Standing item	N/A	Scrutiny Office

Subject	Decision / Decision requested	Cabinet Member	Author
Safeguarding Overview and Scrutiny Committee Work Programme	Standing item	N/A	Scrutiny Office
12 December 2012			
Child and Adolescent Mental Health Services - Future Education Provision	Committee to receive a joint report from Child and Adolescent Mental Health Services (CAMHS) and Barnet Children's Services on the future education provision for young people in receipt of CAMHS	Cabinet Member for Adults, Cabinet Member for Education, Children and Families	TBC
Carers Support	Committee to receive a report on the provision of support for carers in the Borough	Cabinet Member for Adults	TBC
Telecare Strategy	Committee to receive a report on the Council's Telecare Strategy	Cabinet Member for Adults	TBC
Exam Results and Narrowing the Gap	Committee to receive a report on the exam results of Barnet's schools and how the Children's Service is supporting schools to narrow the gap in educational attainment levels	Cabinet Member for Education, Children and Families	TBC
Statutory Regulation 33 - Officer visits to Barnet's Children's Homes	Standing item	N/A	Children's Service
Cabinet Forward Plan	Standing item	N/A	Scrutiny Office

Subject	Decision / Decision requested	Cabinet Member	Author
Safeguarding Overview and Scrutiny Committee Work Programme	Standing item	N/A	Scrutiny Office
Items to be Allocated			
Community Advice Contract	Committee to receive a report on the provisions of the Community Advice Contract	TBC	TBC
Local Account of Adult Care Services 2011/12	Committee to receive the annual Local Account of Adult Care Services in Barnet for 2011/12	Cabinet Member for Adults	TBC

AGENDA ITEM 13

AGENDA ITEM 14