

MEETING

ADULTS AND SAFEGUARDING COMMITTEE

DATE AND TIME

MONDAY 6TH MARCH, 2017

AT 7.00 PM

VENUE

COMMITTEE ROOM 1, HENDON TOWN HALL, THE BURROUGHS, LONDON NW4 4BQ

TO: MEMBERS OF ADULTS AND SAFEGUARDING COMMITTEE (Quorum 3)

Chairman: Councillor Sachin Rajput

Vice Chairman: Councillor Tom Davey

Councillor Paul Edwards

Councillor Claire Farrier

Councillor Helena Hart

Councillor Dr Devra Kay

Councillor David Longstaff

Councillor Reuben Thompstone

Councillor Reema Patel

Substitute Members

Councillor Anthony Finn

Councillor Anne Hutton

Councillor Brian Gordon

Councillor Daniel Thomas

Councillor Jess Brayne

Councillor Jim Tierney

In line with the Constitution's Public Participation and Engagement Rules, requests to submit public questions or comments must be submitted by 10AM on the third working day before the date of the committee meeting. Therefore, the deadline for this meeting is Wednesday 1st March 2017 at 10AM. Requests must be submitted to Abigail Lewis 020 8359 4369 abigail.lewis@barnet.gov.uk

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

Andrew Charlwood – Head of Governance

Governance Service contact: Edward Gilbert 020 8359 3469 edward.gilbert@barnet.gov.uk

Media Relations contact: Sue Cocker 020 8359 7039

ASSURANCE GROUP

ORDER OF BUSINESS

Item No	Title of Report	Pages
1.	Minutes	5 - 8
2.	Absence of Members	
3.	Declarations of Members Disclosable Pecuniary Interests and Non-Pecuniary Interests	
4.	Report of the Monitoring Officer (if any)	
5.	Public Questions and Comments (if any)	
6.	Members' Items (if any)	
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13.	Any other items that the Chairman decides are urgent	

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Decisions of the Adults and Safeguarding Committee

23 January 2017

Members Present:-

AGENDA ITEM 1

Councillor Sachin Rajput (Chairman)
Councillor Tom Davey (Vice-Chairman)

Councillor Paul Edwards
Councillor Claire Farrier
Councillor Helena Hart
Councillor Reema Patel

Councillor David Longstaff
Councillor Reuben Thompstone
Councillor Jess Brayne (as substitute)

Apologies for Absence:-

Councillor Dr Devra Kay

1. MINUTES

RESOLVED – The minutes of the meeting held on 10th November 2016 were agreed as a correct record.

2. ABSENCE OF MEMBERS

Councillor Dr Devra Kay was absent, and was substituted by Councillor Jess Brayne.

Councillor Paul Edwards was absent for the beginning of the meeting, and was present for item 8 (Progress Report on the Adults and Safeguarding Committee Commissioning Plan and Outcome Measures) onwards.

3. DECLARATIONS OF MEMBERS DISCLOSABLE PECUNIARY INTERESTS AND NON-PECUNIARY INTERESTS

The following interest was declared:

Councillor	Items	Nature of Interest	Detail
Jess Brayne	9 & 10	Non-pecuniary	That the Councillor is a Volunteer at Age UK.

4. REPORT OF THE MONITORING OFFICER (IF ANY)

None.

5. PUBLIC QUESTIONS AND COMMENTS (IF ANY)

Answers to those public questions submitted for the meeting were included in a supplementary paper. Copies were circulated to members and made available for members of the public.

There were no supplementary questions.

6. MEMBERS' ITEMS (IF ANY)

None.

7. REVIEW OF PROCUREMENT AND MOBILISATION OF ADULT SOCIAL CARE ENABLEMENT SERVICE

The Chairman introduced the item, which related to a review of procurement and mobilisation of the adult social care enablement service.

The Chairman then invited James Mass, Assistant Director (Adults and Communities), and Jess Baines-Holmes, the Head of Care Quality, to the table to answer any questions from the committee.

Dawn Wakeling, Commissioning Director - Adults and Health, then provided an overview of the contents of the report

Following consideration of the item the Chairman moved to the recommendations. The committee indicated that they did not wish to move into private session later in the meeting to discuss the exempt part of the report. The committee then unanimously agreed the recommendation. The following was therefore **RESOLVED**:

- **That the Committee noted the report, which set out the review of the procurement and mobilisation of the previous enablement service in Barnet.**

8. PROGRESS REPORT ON THE ADULTS AND SAFEGUARDING COMMITTEE COMMISSIONING PLAN AND OUTCOMES MEASURES

Councillor Paul Edwards entered the meeting, and took part in the consideration and deliberation of all remaining items.

The Chairman and Dawn Wakeling, Commissioning Director - Adults and Health, introduced the item, which related to a progress report on the Adults & Safeguarding Committee Commissioning Plan and Outcome measures.

Following consideration of the item the Chairman moved to the recommendation, which the committee unanimously agreed. The following was therefore **RESOLVED**:

- **That the Committee noted the progress against the Adults and Safeguarding Committee Commissioning Plan to date in 2016/17.**

9. EXTENSION OF THE LATER LIFE PLANNING SERVICE CONTRACT

The Chairman introduced the item, which related to a recommended extension of the Later Life Planning Service Contract.

Following consideration of the item the Chairman moved to the recommendation, which the committee unanimously agreed. The following was therefore **RESOLVED**:

- That the Committee approved acceptance of an extension of the contract between the Council and Age UK Barnet for the provision of a Later Life Planning service for one year from 01 April 2017 to 31 March 2018.

10. PREVENTION AND EARLY SUPPORT REVIEW: CONSULTATION REPORT

The Chairman introduced the item, which related to a consultation report on the Prevention and Early Support Review. He noted that the report had been circulated to members as a supplementary paper, and that copies had been made available for members of the public at the meeting.

The Chairman then invited Zoë Garbett, Commissioning Lead (Health and Wellbeing), and Kirstie Haines, Strategic Lead (Adults Wellbeing), to provide an overview of the contents of the report, and to answer any questions from the committee.

Following consideration of the item the Chairman moved to the recommendations, with each recommendation taken in turn. Votes were recorded as follows:

Recommendation 1:

For	9
Against	0
Abstain	0

Recommendation 2:

For	9
Against	0
Abstain	0

Recommendation 3:

For	5
Against	4
Abstain	0

Recommendation 4:

For	9
Against	0
Abstain	0

The recommendations were therefore carried, and the following was therefore **RESOLVED:**

1. That the Committee considered the findings of the consultation on the proposals for the Prevention and Early Support Contracts.
2. That the Committee approved the mitigating actions as laid out in the report – at section 1 (tables 1 and 3 – 7) and 5.2.2.
3. That the Committee agreed that the proposed changes, which were agreed at its November meeting subject to consultation (also detailed in section 1 of this report), have now been implemented.
4. That the Committee noted that engagement with service users and their families, and other key stakeholders will be an on-going process to ensure that developments support individuals.

11. COMMITTEE FORWARD WORK PROGRAMME

The Chairman introduced the item, which related to the Forward Work Programme for the Committee.

The committee then noted the 2017 work programme.

12. ANY OTHER ITEMS THAT THE CHAIRMAN DECIDES ARE URGENT

None.

13. MOTION TO EXCLUDE THE PRESS AND PUBLIC

Not applicable.

14. [EXEMPT] REVIEW OF PROCUREMENT AND MOBILISATION OF ADULT SOCIAL CARE ENABLEMENT SERVICE

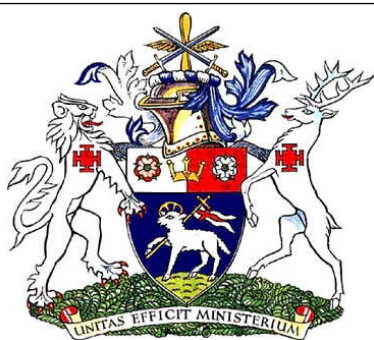
Not applicable.

15. ANY OTHER EXEMPT ITEMS THAT THE CHAIRMAN DECIDES ARE URGENT

Not applicable.

The meeting finished at 8.22 pm

AGENDA ITEM 7



Adults and Safeguarding Committee

6 March 2017

Title	Adults and Safeguarding Commissioning Plan - 2017/18 addendum
Report of	Commissioning Director, Adults and Health
Wards	All
Status	Public
Urgent	No
Key	Yes
Enclosures	Appendix A: Adults and Safeguarding Commissioning Plan - 2017/18 addendum
Officer Contact Details	<p>Kirstie Haines Tel. 07885 208808 Email: Kirstie.haines@barnet.gov.uk</p> <p>Alaine Clarke – Head of Performance & Risk Tel: 0208 359 2658. Email: alaine.clarke@barnet.gov.uk</p>

Summary

In March 2015, the Adults and Safeguarding Committee approved a five year Commissioning Plan for the period 2015-20, which sets out the Committee's priorities and outcome performance measures across its core areas of responsibility. All Theme Committees agreed five year Commissioning Plans.

This report presents updated targets for 2017/18 in an addendum to the Commissioning Plan (Appendix A).

Recommendations

1. That the Committee review and approve the addendum to the Adults and Safeguarding Commissioning Plan for 2017/18 (Appendix A).

1. WHY THIS REPORT IS NEEDED

- 1.1 The council's **Corporate Plan** 2015-20 was agreed by Full Council in April 2015. It sets the strategic priorities and direction for the council to 2020 and targets against which progress is measured. Each year, the priorities and targets are refreshed to ensure they remain focused on the things that matter most to the council. The 2017/18 addendum will be presented to Full Council on 7 March 2017 and will include the new priority on delivering quality services:

- **Delivering quality services** – we strive to deliver services to the highest possible standard and to continuously improve this standard. We are committed to high quality customer service and being as transparent as possible with the information we hold and our decision-making.
- **Responsible growth, regeneration and investment** – in an era of reduced Government funding, growth is necessary for councils to increase the local tax base and generate income to spend on public services. The council has an ambitious programme of regeneration, which aims to create new homes and jobs, and the proceeds of this growth will be reinvested in the borough's infrastructure and essential community facilities.
- **Building resilience in residents and managing demand** – we will focus on the strengths and opportunities in our communities and target resources at those most in need. The council will support residents to stay independent for as long as possible through equipping people to help themselves and intervening early to address issues as they arise rather than waiting until they reach a critical stage.
- **Transforming local services** – as a Commissioning Council our focus is on reaching the best outcomes for our residents whilst delivering value for money to the taxpayer. This means delivering differently and working with a range of public, private, and voluntary sector organisations to ensure we can meet our priorities.
- **Promoting community engagement, independence and capacity** – we want to support residents and the wider community to become more independent and self-sufficient. This means residents having more of a say in the future of their local area, and where appropriate, taking on more responsibility for local services.

- 1.2 In 2015/16, each thematic Committee agreed a 5 year Commissioning Plan. The Adults and Safeguarding Committee agreed in October 2014 that the critical outcomes for Barnet's adults are as set out in the following table:

Priority	Key Outcomes
Planning for life	<p>Working age adults and older people live a healthy, full and active life and their contribution to society is valued and respected.</p> <p>Working age adults and older people live in homes that meet their needs and are well connected socially.</p> <p>Older people have sufficient finances to meet the full range of their needs and are able to access advice to make sure they spend wisely.</p>
Early Intervention and Prevention	<p>Older people have timely access to diagnosis and are provided with the tools which enable them to manage their condition and continue to live a full life.</p> <p>Working age adults and older people know what is available to increase and maintain their well-being and independence and can obtain it when they need to.</p> <p>Working age adults and older people are well-connected to their communities and engage in activities that they are interested in, and which keep them well</p>
Person centred integrated support	<p>Working age adults and older people are able to access help when needed for as long as they need it.</p> <p>Working age adults and older people are supported to get back on their feet when they have a crisis and to identify ways of preventing further crises.</p> <p>Person centred support plans inform the delivery of support in the most appropriate place (usually someone's home or community) that best meets people's needs in the most cost-effective way possible.</p> <p>Working age adults and older people have timely access to health and social care support that maintains independence and avoids hospital admission or admission to residential care.</p> <p>Working age adults and older people who have health or social care needs can still expect to live an independent life and have relationships based on reciprocity.</p>
Safeguarding	<p>Working age adults and older people are supported to live safely through strategies which maximise independence and minimise risk.</p> <p>Where people acquire vulnerabilities as they age, every effort is made to enable older people to remain in familiar surroundings, being cared for safely by people who know and love them.</p>

Carers	<p>Carers are supported to continue caring for as long as they wish.</p> <p>Carers are valued as expert partners in supporting working age adults and older people to live independent lives.</p> <p>Families provide support to other families, sharing their experience of using certain services and what they have learnt from the process.</p> <p>Carers are supported to achieve their ambitions whilst continuing to care.</p>
Leisure services	Health and wellbeing outcomes are achieved in a manner that is sustainable.

- 1.3 Each Theme Committee is now being asked to agree a 2017/18 addendum to their plans, which sets out the Q3 position against 2016/17 targets and updated targets for 2017/18. This will give Committees the opportunity to review and consider their priorities for the year ahead and the associated targets against which progress will be measured. The addendum to the Adults and Safeguarding Commissioning Plan for 2017/18 is provided at Appendix A. [Note: The context section is subject to change, as this reflects the introduction in the Corporate Plan which is still being finalised].

Summary of Q3 position against 2016/17 commissioning plan targets

- 1.4 At the end of Q3 2016/17, of the 21 commissioning plan indicators, seven did not receive a RAG rating and 14 did receive a RAG rating. Of those receiving a RAG rating, 50% (7) were rated Green, 14% (2) were rated Green Amber, 7% (1) were rated Red Amber, and 29% (4) were rated Red.
- 1.5 Adult social care is performing positively against demand management indicators such as new admissions to residential care, which remain low and take up of preventative services such as telecare which remain high. Challenges have come from managing the impact of ongoing pressure from the NHS. These are being mitigated through close working with health partners and work to increase local provider capacity in care markets, particularly homecare and enablement services.

Summary of the 2017/18 priorities and targets

- 1.6 The Adults and Safeguarding Committee has a target to save £15.07m between 2017-2020. In delivering these savings, the council will focus on protecting vital services by managing demand and directing resource to those most in need. Successful demand management relies on understanding the different types of demand, and on the council working differently to deliver positive outcomes. The adult social care transformation programme has strengths based working and independence at its core to ensure that these objectives are met. There is also increased focus on building community resilience; helping residents to help themselves so that they are equipped to do more and become less dependent on statutory services.

- 1.7 The Adults & Safeguarding Commissioning Plan addendum (2017/18) is structured around six key areas, the table below summarises the key benefits expected for each of these areas. For a further information about the outcomes and targets see the full addendum to the Adults and Safeguarding Commissioning Plan at Appendix A:

Area	Key Benefit
Adults Transformation and ADM	<p>A significant programme of service transformation and improvement is currently underway in Adult Social Care, by introducing a strength based approach to social care. This approach focuses on identifying people's strengths, what they can do for themselves and what support they can draw upon from family, friends and local community resources.</p> <p>In parallel to the changes in practice, a new way of organising adult social care is being evaluated, based on maximising the potential to integrate social care and health provision and creating a seamless health and social care service user experience for Barnet residents.</p> <p>As well as improving outcomes for service users, the above initiatives are designed to mitigate the rising demand on adult social care and health services in Barnet, thereby supporting the Council's requirement to remain financially sustainable in the medium to longer-term.</p>
Older People and Adults with Physical Disabilities	<p>Joining up health and social care services so that residents have a better experience and services are delivered more effectively and efficiently. Continuing to improve support planning both for carers and service users including how housing, equipment and technology can increase independence.</p>
Housing and Support projects	<p>Work with Barnet Homes, developers and private landlords to ensure that accommodation supports people to live independently, through home adaptations and accessible housing; use of specialist home support services including personal assistance, integrated assistive technology; and access to networks of local services.</p>
Learning Disabilities	<p>Developing employment support opportunities for working aged adults with disabilities to ensure there are sufficient opportunities available in the borough. Continuing to improve support planning both for carers and service users including how housing, equipment and technology can increase independence.</p>
Mental Health	<p>Refocus mental health social care on enablement, recovery and maximising inclusion. Implement new social work delivery model, aligned with community development whole family approaches and wider wellbeing.</p>

Sports and Physical Activity (SPA)	Appoint a strategic leisure partner, via a new leisure management contract; with experience, commitment, innovation and ambition to work in partnership with the Council to maximise benefits from investment into leisure facilities through improved quality of service, increased participation whilst supporting improved health and wellbeing.
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Next steps

- 1.8 The proposed addendum to the Adults and Safeguarding Commissioning Plan, including updated targets for 2017/18, is set out in Appendix A. Members are asked to review and agree the document.
- 1.9 Following agreement, the Committee will receive a progress report during the year against this Plan and associated in-year targets. The Committee will be asked to agree updated targets for 2018/19 in March 2018 and this process will continue through to 2020.
- 1.10 The Performance and Contract Management Committee will continue to review progress against the council's Corporate Plan, and overview of the performance of both internal and external Delivery Units. This Commissioning Plan will enable Performance and Contract Management Committee to focus on the key areas of performance for different service areas.

2 REASONS FOR RECOMMENDATIONS

- 2.1 A key element of effective strategic and financial management is for the council to have comprehensive business plans in place that ensure there is a clear strategy for addressing future challenges, particularly in the context of continuing budget and demand pressures (resulting from demographic and legislative changes), delivering local priorities and allocating resources effectively.

3 ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

- 3.1 There is no statutory duty to publish Committee Commissioning Plans but it is considered to be good practice to have comprehensive business plans in place for each Committee – which set out priorities and how progress will be measured – to ensure that the council's vision for the future is clearly set out and transparent.

4 POST DECISION IMPLEMENTATION

- 4.1 Revisions to the Commissioning Plan will be communicated internally and with key stakeholders.

5 IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

- 5.1.1 This report invites Members to review and approve the addendum to the Commissioning Plan for 2017/18.

5.2 Resources (Finance and Value for Money, Procurement, Staffing, IT, Property, Sustainability)

- 5.2.1 In addition to continuing budget reductions, demographic change and the resulting pressure on services pose a significant challenge to the Council. The organisation is facing significant budget reductions at the same time as the population is increasing, particularly in the young and very old population groups.
- 5.2.2 The Commissioning Plan has been informed by the council's Medium Term Financial Strategy, which sets out the need to make savings of £61.5m by 2020.

5.3 Social Value

- 5.3.1 The Public Services (Social Value) Act 2013 requires people who commission public services to think about how they can also secure wider social, economic and environmental benefits. Before commencing a procurement process, commissioners should think about whether the services they are going to buy, or the way they are going to buy them, could secure these benefits for their area or stakeholders.

5.4 Legal and Constitutional References

- 5.4.1 All proposals emerging from the business planning process must be considered in terms of the council's legal powers and obligations, including its overarching statutory duties such as the Public Sector Equality Duty.
- 5.4.2 Annex A of the Responsibility of Functions, as outlined in the council's constitution, states that the Adults and Safeguarding Committee has the responsibility for those powers, duties and functions of the council in relation to Adults Services. The committee therefore has the responsibility for commissioning activity that falls under the remit of Adults Service, giving cause for the setting of a Commissioning Plan.

5.5 Risk Management

- 5.5.1 The council has an established approach to risk management. Key corporate risks are assessed regularly and reported to Performance and Contract Management Committee on a quarterly basis.

5.6 Equalities and Diversity

- 5.6.1 The general duty on public bodies is set out in section 149 of the Equality Act 2010.

- 5.6.2 A public authority must, in the exercise of its functions, have due regard to the need to:
- a) Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
 - b) Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; and
 - c) Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- 5.6.3 Having due regard to the need to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to:
- a) Remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic;
 - b) Take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it;
 - c) Encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.
- 5.6.4 The steps involved in meeting the needs of disabled persons that are different from the needs of persons who are not disabled include, in particular, steps to take account of disabled persons' disabilities.
- 5.6.5 Having due regard to the need to foster good relations between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, the need to tackle prejudice; and promote understanding.
- 5.6.6 Compliance with the duties in this section may involve treating some persons more favourably than others but that is not to be taken as permitting conduct that would otherwise be prohibited by or under this Act.
- 5.6.7 The relevant protected characteristics are age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, and sexual orientation.
- 5.6.8 It also covers marriage and civil partnership with regard to eliminating discrimination.
- 5.6.9 In agreeing the Corporate Plan, the council is setting an updated strategic equalities objective and reiterating our commitment to delivering this. The strategic equalities objective is as follows:
- Citizens will be treated equally, with understanding and respect, and will have equal access to quality services which provide value to the tax payer.

5.7 Consultation and Engagement

- 5.7.1 The original Corporate Plan and Commissioning Plans were informed by extensive consultation through the Budget and Business Planning report to Council (3 March 2015).
- 5.7.2 The consultation aimed to set a new approach to business planning and engagement by consulting on the combined package of the Corporate Plan, Commissioning Plans, and budget. In particular it aimed to:
- Create a stronger link between strategy, priorities and resources
 - Place a stronger emphasis on commissioning as a driver of the business planning process.
 - Focus on how the council will use its resources to achieve its Commissioning Plans.
- 5.7.3 To allow for an eight week budget consultation, consultation began after Full Council on 17 December 2014 and concluded on 11 February 2015. Further consultation on the budget for 2017/18 has been undertaken following Policy and Resources Committee on 1 December 2016.

6 BACKGROUND PAPERS

- 6.1 Progress report on the Adults and Safeguarding Committee Commissioning Plan and outcomes and measures, 23 January 2017, Adults and Safeguarding Committee (item 8):
<https://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=698&MId=8675&Ver=4>
- 6.2 Updated Commissioning Plan, 7 March 2016, Adults and Safeguarding Committee (item 6):
<https://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=698&MId=8364&Ver=4>
- 6.3 Adults and Safeguarding Commissioning Plan 2015 – 2020, 19 March 2015, Adults and Safeguarding Committee (item 8):
<https://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=698&MId=7933&Ver=4>
- 6.4 Business Planning, 20 November 2014, Adults and Safeguarding Committee (item 7):
<https://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=698&MId=8098&Ver=4>

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ADULTS & SAFEGUARDING COMMITTEE

Commissioning Plan 2015 – 2020

2017/18 addendum & targets

This document is an addendum to the **Adults & Safeguarding Committee Commissioning Plan 2015–2020**, which sets out an updated narrative and indicators/targets for 2017/18. The full Commissioning Plan can be found here: <https://www.barnet.gov.uk/citizen-home/council-and-democracy/policy-and-performance/corporate-plan-and-performance.html>

1. CONTEXT FOR COMMISSIONING PLAN (SUBJECT TO CHANGE)

Delivering quality services

Barnet is growing, with the highest population of any London borough. Our vision is for a council that works to ensure everyone can benefit from the opportunities that growth and investment will bring. This means helping people to help themselves whilst still protecting what people value in Barnet – its excellent schools, its parks and open spaces, and the character of the borough.

We will need to change the way we work over the next few years to ensure we remain in a stable financial position, while delivering the savings required. We will take this opportunity to do things differently so that we achieve better outcomes for residents and become more efficient.

Barnet is an ambitious council, and we strive to continuously improve the quality of our services. Delivering services that our residents value most to a high standard will ensure that Barnet continues to be a great, family friendly, place to live.

In practice, this means keeping our neighbourhoods and town centres clean and safe, maintaining our parks and open spaces, ensuring that our roads and pavements are well looked after and that we are reaching the highest possible standards of air quality – all whilst ensuring value for money for the Barnet taxpayer.

To support this, we are taking a strong enforcement approach against those who litter and fly-tip. We will ensure that developers pay for any damage that they cause to our roads and pavements through a deposit scheme. We will also outline an approach to vehicle fees and charges based on environmental impact to help us improve our air quality.

Responsible growth, regeneration and investment

As the funding we receive from the government reduces to zero, growth is necessary to increase the local tax base and generate income to spend on local services.

The council's regeneration programme will see £6bn of private sector investment over the next 25 years, which will create around 20,000 new homes and up to 30,000 new jobs. It will also generate £17m of additional income annually for the council by 2020, with one-off income of £55m.

Through our capital investment programme we will invest £772m in the borough between now and 2020. We will use the proceeds of growth to re-invest in infrastructure, not only delivering quality housing – including affordable homes – but also providing essential community facilities such as community hubs and transport.

We will work to ensure that our residents and businesses get the most out of the opportunities presented by growth. We will do this by improving our town centres, supporting small businesses to thrive, and bringing more jobs and easier access to skills development.

We have already put in place services to support our residents into work, for example, the Burnt Oak Opportunities Support Team (BOOST) which has helped nearly 200 people into work since its launch in June 2015.

Building resilience in residents and managing demand

Barnet council is facing a £61.5m savings gap to 2020, and this is not simply due to continued reductions in Government funding. Changing demographics, a growing population – particularly increased numbers of children and young people and older people – and a rising cost of living are putting pressure on the public services we offer.

We will always protect our vulnerable residents. Our aim is to target our resources at those most in need, and support residents to stay independent for as long as possible. In Children's and Adults' social care where there is significant pressure due to increasing numbers of vulnerable residents. In Adults and Communities, all staff have been trained in strengths-based practice an approach to care which focuses on building an individual's strengths and taking opportunities to improve outcomes.

This means equipping residents to help themselves and intervening early to address and respond to issues as they arise, rather than waiting until they reach a critical stage. We are working with other parts of the public sector to achieve this through more joined up services that will deliver better outcomes for residents, as well as costing less by working together more efficiently.

An example of this is the Barnet Integrated Locality Team (BILT), trialled in the west of the borough and now rolled out across the whole borough, coordinates care for older adults with complex medical and social care needs. This integrated health and social care approach helps vulnerable adults to stay well and living in their own home, easing demand for costly residential care and reducing pressure on the NHS.

Transforming local services

For all of our services, we are considering the case for delivering differently in order to meet our priority outcomes. As a Commissioning Council our focus is on reaching the best outcomes for our residents whilst delivering value for money to the taxpayer through working with a range of public, private, and voluntary sector organisations.

For some services, this has meant a partnership with the private sector, for example our contracts with Capita to provide our back office and customer services.

We have also recently entered into a partnership with Cambridge Education, a specialist education company, to deliver our Education and Skills services. By 2019/20 this partnership is guaranteed to save the council £1.88 million per year through marketing and selling services to more schools and other local authorities, which will create income.

Through our Customer Access Strategy we are aiming to move towards a 'digital by default' approach, with a target of 80% of contact with the council being online or through other digital means by 2020. This is more efficient and flexible for the customer, and saves the council money. The money saved through moving towards digital by default allows us to free up resource which we can target at our customers who are most in need.

This will be underpinned by a Digital Inclusion Strategy which aims to help all those in the borough who are willing and able to get online, and ensure that there are special access arrangements for those who cannot.

We are also transforming the way we work within the council to allow staff to do their jobs more effectively and to make the council more accessible to those who use its services. The office move to Colindale is a key part of this and will support the ongoing regeneration in the west of the

borough as well as bringing us closer to the community and reducing the amount we spend on accommodation.

In 2017/18, we will review our integrated learning disability offer. We will work with people with learning disabilities and their carers and use national best practice, to shape the specification for a new integrated learning disability service to start in 2018.

Our partnership with the Barnet, Enfield and Haringey Mental Health Trust (BEHMHT) will continue to support the council's priorities of more accessible services for people with mental health conditions. Services are being transformed; with a social model of recovery which has been established including changes to the workforce. The enablement focused model in Adults and Community's Mental Health will ensure we are engaging with people at the right time to have the best quality of life and working together to achieve their goals.

Promoting community engagement, facilitating independence and building community capacity

We want to support residents and the wider community to become more independent and self-sufficient. This means residents having more of a say in the future of their local area, and where appropriate, taking on more responsibility for local services.

Our Community Participation Strategy will play a key role in this. We will increase our support for those residents and groups who want to take on a more active role in their community, and will work with them to make the best possible use of their knowledge and skills to deliver what is needed.

2. OUR APPROACH TO MEETING THE 2020 CHALLENGE

The council's Corporate Plan sets the framework for each of the Theme Committees' five year commissioning plans. Whether the plans are covering services for vulnerable residents or about universal services such as the environment and waste, there are a number of core and shared principles, which underpin the commissioning outcomes.

The first is a focus on fairness: Fairness for the council is about striking the right balance between fairness towards the more frequent users of services and fairness to the wider taxpayer and making sure all residents from our diverse communities – young, old, disabled and unemployed benefit from the opportunities of growth.

The second is a focus on responsibility: Continuing to drive out efficiencies to deliver more with less. The council will drive out efficiencies through a continued focus on workforce productivity; bearing down on contract and procurement costs and using assets more effectively. All parts of the system need to play their part in helping to achieve better outcomes with reduced resources.

The third is a focus on opportunity: The council will prioritise regeneration, growth and maximising income. Regeneration revitalises communities and provides residents and businesses with places to live and work. Growing the local tax base and generating more income through growth and other sources makes the council less reliant on Government funding; helps offset the impact of budget reductions and allows the council to invest in the future infrastructure of the borough.

Planning ahead is crucial: The council dealt with the first wave of austerity by planning ahead and focusing in the longer-term, thus avoiding short-term cuts and is continuing this approach by extending its plans to 2020.

3. CORPORATE PLAN PRIORITIES

The **principles** of **Fairness**, **Responsibility** and **Opportunity** are at the heart of our approach. We apply these principles to our **Corporate Plan priorities** of: **delivering quality services; responsible growth, regeneration and investment; building resilience in residents and managing demand; transforming local services; and promoting community engagement, independence and capacity.**

These priorities are underpinned by a commitment to **continual improvement in our customer services** and to be **as transparent as possible with the information we hold and our decision-making.**

Fairness
<ul style="list-style-type: none"> • fairness for the council is about striking the right balance between fairness towards more frequent users of services and to the wider taxpayer • building resilience in residents and managing demand – between 2011 and 2016 we've successfully saved over £112m through effective forward planning. In order to meet the council £61.5m budget gap to 2020, we will target resources on those most in need and support residents to stay independent for as long as possible • this will require a step change in the council's approach to early intervention and prevention, working across the public sector and with residents to prevent problems rather than just treating the symptoms.
Responsibility
<ul style="list-style-type: none"> • the council will focus not only on getting the basics right, but also delivering quality services, and striving to continuously improve the standard of services • promoting community engagement, independence and capacity - as the council does less in some areas, residents will need to do more. We're working with residents to increase self-sufficiency, reduce reliance on statutory services, and tailor services to the needs of communities • in doing so, the council will facilitate and empower residents to take on greater responsibility for their local area.
Opportunity
<ul style="list-style-type: none"> • the council will capitalise on the opportunities of a growing local economy by prioritising regeneration, growth and maximising income • responsible growth, regeneration and investment is essential for the borough – by revitalising communities and providing new homes and jobs whilst protecting the things residents love about Barnet such as its open spaces. New homes and business locations also generate more money to spend on local services, which is increasingly important as the money received directly from government reduces to zero • we will use the proceeds of growth to invest in local infrastructure and maintain Barnet as a great place to live and work as we continue to deal with budget reductions to 2020 • we will explore the opportunity this presents to transform local services and redesign them, delivering differently and better • we will focus on making services more integrated and intuitive for the user, and more efficient to deliver for the council and the wider public sector.

The Equality Act 2010 and the Public Sector Equality Duty impose legal requirements on public organisations to pay due regard to equalities. The Corporate Plan is fundamental to the council's approach to deliver equalities. It enables the principles of equalities and valuing diversity to be reflected and mainstreamed into all council processes. It also outlines the council's Strategic Equalities Objective (SEO) that citizens will be treated equally, with understanding and respect, and will have equal access to quality services which provide value to the tax payer.

Through the SEO, Barnet aims to provide the best start for our children and access to equal life chances to all our residents and taxpayers who live, work and study in Barnet. Progress against the SEO is monitored annually in an Annual Equalities Report which is publicly reported to Council and the SEO is also reflected through our Commissioning Plans and priorities for each Theme Committee. Management Agreements with our Delivery Units have a number of commitments which reflect the importance of equalities and how the Commissioning Plans will be achieved in practice and performance indicators have been set and published for each Delivery Unit.

4. VISION FOR ADULTS & SAFEGUARDING

Summary

Social care services for adults have a key role to play in improving the lives of Barnet's most vulnerable residents. We work with housing, education and health services to enable people to stay independent, in control of their lives, and live for longer in their own homes through:

- **Developing best practice social care**, focused on what people can do and how they can help themselves.
- **Diversifying Barnet's accommodation offer** to help more people live independently and empower young people with complex disabilities to stay in Barnet, where they grew up.
- **Transforming day care provision** to ensure that people remain active and engaged through access to employment and volunteering.
- **Integrating health and social care services** to prevent crises, help individuals stay well and in their own homes, and reduce demand on hospital services.
- **Improving the borough's leisure facilities, parks and open spaces** to support and encourage active and healthy lifestyles, helping to manage demand for adult social services.
- **Expanding evidence-based prevention and early support**, including technology, to make sure people can use services closer to home to help them stay independent for as long as possible.

Background

The health and social care systems are both under pressure from an ageing population, increasing long term health conditions and complex health and care needs.

- Barnet has a large proportion of elderly residents. 53,976 people aged over 65 live in Barnet in 2017. 14% of Barnet's population are over 65, compared with 11.6% of the population of London as a whole. The number of people aged over 65 in Barnet is predicted to grow by 8.8% between 2017 and 2021.

- It is estimated that over 4,000 people in Barnet are living with dementia and even greater numbers of families and friends are adversely impacted by the condition. By 2021 the number of people with dementia in Barnet is expected to increase by 24% compared with a London-wide increase of 19%.
- In 2011, there were 32,230 residents who classified themselves as a carer in Barnet. On average carers are more likely to report having poor health (5.2%) than non-carers (4.2%). This is especially concentrated in carers who deliver in excess of 50 hours of care per week.
- Compared to other boroughs Barnet has a high number of care homes. There are 72 residential and 19 nursing homes in Barnet registered with the Care Quality Commission.
- Most referrals to adult social care come from hospitals. The number of hospital referrals we receive has risen by 38% between 2009/10 (2,801 referrals) and 2015/16 (3,875 referrals).
- The number of adults with learning disabilities receiving a long-term service has increased gradually over the last four years, from 824 people in receipt of care and support services in 2013/14 to 864 in 2015/16.
- 40.2% of the adult population aged 16+ participates in sport at least once a week but 53.5% of the population do not currently take part in any sport. Despite this, 61.5% of adults (16+) want to do more sport¹. The health costs of physical inactivity in Barnet are currently £6.7m, equating to approximately £1.9m per 100,000 of our population².

Pressure on the adult social care budget

The Adults and Safeguarding Committee has a target to save £15.07m between 2017-2020. In delivering these savings, the council will focus on protecting vital services by managing demand and directing resource to those most in need. Successful demand management relies on understanding the different types of demand, and on the council working differently to deliver positive outcomes. The adults transformation programme has strengths based practice and independence at its core to ensure that these objectives are met. There is also increased focus on building community resilience; helping residents to help themselves so that they are equipped to do more and become less dependent on statutory services.

Our commissioning outcomes

The Adults & Safeguarding Commissioning Plan is underpinned by six outcomes:

1. **Planning for life:** working age adults and older people live a healthy, full and active life, in homes that meet their needs, and their contribution to society is valued and respected.
2. **Early support:** working age adults and older people are provided with the tools to manage their own health and wellbeing and maintain independence.
3. **Person-centred integrated support:** working age adults and older people have timely access to health and social care support that maintains independence and avoids hospital admission or admission to residential care.

¹ Active People Survey 10 (December 2016)

² Source: Sport England commissioned data from British Heart Foundation Health Promotion Research Group for PCTs, reworked into estimates for LAs by TBR. Measure: Health costs of physical inactivity, split by disease type. Time period(s): 2009/10

4. **Safeguarding:** working age adults and older people are supported to live safely through strategies which maximise independence and minimise risk from abuse and neglect.
5. **Carers:** carers are valued as expert partners in supporting working age adults and older people to live independent lives.
6. **Sport and physical activity:** health and wellbeing outcomes are achieved in a manner that is sustainable.

These outcomes link to the council's overarching strategic priorities and are based on consultation undertaken as part of the Priorities and Spending Review, and review of best practice. The following section outlines how we intend to deliver each of these outcomes, through to 2020.

Planning for life

Working age adults and older people live a healthy, full and active life, in homes that meet their needs, and their contribution to society is valued and respected.

- Our Social Workers will work with older and working age adults to support them to remain independent, focusing on their strengths, what they can do for themselves and what support can be drawn upon from family, friends and the local community.
- We're working with Barnet Homes, developers and private landlords to improve our accommodation and support offer which includes redesigned and improved floating support and supported living; investment of £15.1m in 53 extra care homes at Moreton Close; and use of assistive technology. We will also allocate £1.97m of the Better Care Fund to home adaptations.
- We will build on the successful launch of the Barnet Dementia Action Alliance (DAA) in 2016 by working with our partners to support communities to take practical actions to enable people to live well with dementia. The DAA will develop its own action plan this year, including a definition of what will be in place by 2019 to make Barnet a Dementia Friendly Borough.

Early support

Working age adults and older people are provided with the tools to manage their own health and wellbeing and maintain independence.

- We will improve the information and guidance available at the first point of contact through the Social Care Direct service. We will also develop a new digital offer, redesigning our website and developing self-service and self-assessment tools enabling people to stay independent and manage their own care. We will increase our telecare offer.
- Our commissioned prevention services will focus on increasing wellbeing, reducing isolation and increasing ability to manage daily living and participate in the community. These outcomes will be delivered through community development projects; supporting Public Health initiatives such as Community Centred Practice; using health volunteers to encourage resilience and self-management; and a training programme to enable staff to maximise health promotion opportunities when speaking to residents.
- To help people with learning disabilities and mental health conditions play an active part in their communities, we're working with day services and employers to ensure access to employment, volunteering and training. We will also expand the Mental Health Network – an enablement and recovery service that helps people with mental health conditions to stay in their community, at work and in their own home.

- We will continue to provide and improve our integrated stroke pathway which prevents service users from needing high-cost health and social care, including taking part in a review of provision across North Central London.

Person-centred integrated support

Working age adults and older people have timely access to health and social care support that maintains independence and avoids hospital admission or admission to residential care.

- Our Better Care Fund plan will focus on helping more people get back on their feet through integrated teams, Rapid Response Care, Home From Hospital and Enablement services. In 2017/18, we will ensure that more service users benefit from this service.
- We will continue to monitor the effectiveness of different channels for information and advice trialled through face-to-face drop in sessions at the Adults' Hubs (known as Care Space).
- Our integrated learning disability team will work across social care, community health and mental health to support people with complex needs to remain safe, well and as independent as possible. We will implement new health action plans for people with learning disabilities, and support moves out of residential care into independent living.
- We will continue to embed and develop the 0-25 programme to improve the pathway for young adults with disabilities moving into adulthood.
- Improved and expanded telecare provision will help people to care for themselves in their own homes.
- We will continue to work closely with health and other stakeholders to develop better access for adults with autism spectrum conditions to diagnosis, treatment (as appropriate) and support.

Safeguarding

Working age adults and older people are supported to live safely through strategies which maximise independence and minimise risk from abuse and neglect.

- Safeguarding concerns will be responded to quickly through our enhanced Social Care Direct Service, resolving the issues as quickly as possible.
- With our partners in the Police, the NHS, the Fire Service and the voluntary sector, we will continue to embed and champion the principles of Making Safeguarding Personal. We will work with partners to implement an Adult Multi-Agency Safeguarding Hub to provide triage and multi-agency assessment of safeguarding concerns in respect of adults at risk.
- We have implemented the new Pan-London Multi-Agency Safeguarding procedures, ensuring a consistent approach to safeguarding across London.
- We will work with the Police and other partners to improve Access to Justice for vulnerable adults.
- We will work with the Community Safety Partnership Board to deliver a Domestic Violence and Abuse training, support and referral programme for General Practices in the borough.

Carers

Carers are valued as expert partners in supporting working age adults and older people to live independent lives.

- We will prioritise meeting the needs of carers, including young carers, through the support planning process, supporting carers' own physical and mental health needs to ensure carers feel able to continue to support an individual for as long as they can.
- Our new support service for carers and young carers will continue to provide assessments and advice; training to help support carers in their caring role; and carer support plans that are tailored to individual needs and utilise community resources.
- Our programme of support for carers of people with dementia will continue to support carers to continue to care for their loved one and maintain their family together.
- We will continue to support carers to balance work and caring commitments, working with employers to ensure they are aware of carers' employment rights and know how to support carers in their workforce to remain in employment.

Sport and Physical Activity

Health and wellbeing outcomes are achieved in a manner that is sustainable.

- We will promote a range of high quality, affordable and inclusive sport and physical activity opportunities focusing on groups we know need more support to participate.
- We will work in collaboration to achieve prevention and early intervention inhibiting the onset of/alleviating the onset of long-term health conditions via our commissioned activity
- We will integrate public health outcomes into a new leisure contract.
- We will develop local, regional and national partnerships that bring new investment into Barnet to encourage people to lead a more active and healthy lifestyle.
- We have created pathways for physical activity and sport where residents can be referred by health and social care professionals and by self-referral. Advice on physical activity will be incorporated into services for groups that are particularly likely to be inactive.

5. KEY SUCCESSES IN PAST YEAR

Planning for life

- In 2015/16, the **Later Life Planning team** helped 1,161 Barnet residents plan for their future through telephone calls, office based appointments and drop-ins and home visits. A team of eight volunteers gave in excess of 700 hours to the service.
- The **Barnet Neighbourhood Services Provider Group** supported over 7,600 of Barnet's older people in 2015/16 through a wide range of activities including gardening and lunch clubs, information and advice, digital inclusion and a Handyperson service across 50 locations across the borough.
- Volunteers make a significant contribution across the Neighbourhood Services. During 2015/16, **680 volunteers** were involved across the Barnet Provider Group, including 208 new volunteers. 70,000 hours of volunteer time were contributed over the year.
- We implemented a **Shared Lives** scheme, supporting disabled people to live in family homes, develop their independence and prevent the need for long-term residential care.
- Two people from our **Transforming Care** group (adults with learning disabilities who have been in long-term hospital settings and/or placed out-of-borough) successfully moved into their own

accommodation.

Early support

- **Dementia Cafes in New Barnet, Mill Hill and Finchley** provided an opportunity for people with dementia and their carers to meet regularly and talk about living with dementia in an informal social environment. They provided information about dementia, local services and practical tips about living well with dementia as well as a range of social activities.
- Our service to recruit and train **personal assistants (PAs)**, so that people with care and support needs can be more in control of their own support, became operational.
- A programme of social activities for the borough's '**Silver Sunday**' week was developed.
- We continued to develop the **employment support offer** in the borough, including supporting Your Choice Barnet to develop an employment support service and help service users move through its employment pathway.
- A best-practice supported **employment training course** was offered to local providers who identified that they were providing some level of employment support to their service users.

Person-centred integrated support

- A **new operating model** of strength-based social work was implemented, including the launch of Adults' Hubs (known as **Care Space**) in September 2016 at the Independent Living Centre at Dollis Valley and Ann Owens Centre at East Finchley. Also as part of the new operating model, 110 staff were trained in **strength based practice**. The success of this programme was recognised through shortlisting for the national Social Care Awards for 'Creative and Innovative Practice' and recognition from the national Social Care Institute of Excellence (SCIE).
- Final proposals for the **Barnet Mental Health enablement pathway** were approved by the General Functions Committee. More people with mental health issues will receive support focused on helping with their whole life, for example, getting a job and a home of their own.
- The **Barnet Integrated Locality Team (BILT)** started working across the borough, focusing on helping 1,900 patients who had the most frequent GP visits and highest incidence of long-term health conditions to get back on their feet sooner.
- In line with the NHS Five Year Forward View, every health and care system has been working to produce a **Sustainability and Transformation Plan (STP)** to show how local services will become sustainable over the next five years. Barnet has worked to develop the North Central London sub-regional area for STPs with local authority and health partners and has led on the development of devolution proposals for the STP.

Safeguarding

- From June 2016, the **Pressure Ulcer Protocol** was embedding in community nursing and bedded hospital units which ensured improved management of pressure ulcers and reduced safeguarding referrals by 56% in quarter 2.
- A multi-agency risk panel reviewing support and interventions and multi-agency support for those who **self-neglect and hoard** was established in December 2016.

Carers

- The **new carers' strategy** was launched in 2015-16 and initiated a programme of work to improve support for carers. Barnet provides direct support, information, advice and guidance to carers and commissions a much broader range of advice, advocacy and support services

from organisations including Barnet Carers' Centre (BCC), Barnet Citizens' Advice Bureau (BCAB) and Age UK, who provide specialist support for carers.

Sport and Physical Activity

- Over **£30m** was invested in new leisure facilities at Barnet Copthall and New Barnet Leisure Centre at Victoria Recreation Ground.
- The draft **Fit & Active Barnet Framework 2016-2021** was considered by Adults and Safeguarding Committee, and went out for wider public consultation.

6. STRATEGIC PARTNERSHIPS

Adults and Health will continue to work with the following organisations and stakeholders to deliver the commissioning priorities:

- The Clinical Commissioning Group (CCG) is a critical partner in improving the health and wellbeing of our residents and achieving a sustainable health and social care economy. We will build on the success of the previous year such as proving support for people with learning disabilities and for people with mental ill-health through our Better Care Fund. Council Officers have been involved in the development of the North Central London (NCL) STP, with Barnet leading the estates devolution pilot and we will continue to work with the CCG to deliver these plans locally.
- We will continue to develop our Safeguarding Board partnership which is essential to deliver the ambitions outlined in our Business Plan (2016 – 2018).
- Our relationships with other local authorities, including those within the North Central London STP (Sustainability and Transformation Plan) and the West London Alliance, continue to be important.
- We will work with current providers, across all sectors, to deliver quality services and develop the market to ensure we have the best services available to our residents.
- We will listen to our residents and ensure that the services available support their strengths.

7. TRANSFORMATION PROGRAMME

The council's *transformation programme* will help to deliver the £18.45 million savings required by the Medium Term Financial Strategy, as per the second table below. The key benefits of the Adults and Safeguarding Portfolio, along with the expected costs of delivery and financial benefits are outlined in the tables below.

Key benefits

Area	Key benefit
Adults Transformation and ADM	<p>A significant programme of service transformation and improvement is currently underway in Adult Social Care, by introducing a strength based approach to social care. This approach focuses on identifying people's strengths, what they can do for themselves and what support they can draw upon from family, friends and local community resources.</p> <p>In parallel to the changes in practice, a new way of organising adult social care is being evaluated, based on maximising the potential to integrate social care and health provision and creating a seamless health and social care service user experience for Barnet residents.</p> <p>As well as improving outcomes for service users, the above initiatives are designed to mitigate the rising demand on adult social care and health services in Barnet, thereby supporting the Council's requirement to remain financially sustainable in the medium to longer-term.</p>
Older People and Adults with Physical Disabilities	<p>Joining up health and social care services so that residents have a better experience and services are delivered more effectively and efficiently. Continuing to improve support planning both for carers and service users including how housing, equipment and technology can increase independence.</p>
Housing and Support projects	<p>Work with Barnet Homes, developers and private landlords to ensure that accommodation supports people to live independently, through home adaptations and accessible housing; use of specialist home support services including personal assistance, integrated assistive technology; and access to networks of local services.</p>
Learning Disabilities	<p>Developing employment support opportunities for working aged adults with disabilities to ensure there are sufficient opportunities available in the borough. Continuing to improve support planning both for carers and service users including how housing, equipment and technology can increase independence.</p>
Mental Health	<p>Refocus mental health social care on enablement, recovery and maximising inclusion. Implement new social work delivery model, aligned with community development whole family approaches and wider wellbeing.</p>
Sports and Physical Activity (SPA)	<p>Appoint a strategic leisure partner, via a new leisure management contract; with experience, commitment, innovation and ambition to work in partnership with the Council to maximise benefits from investment into leisure facilities through improved quality of service, increased participation whilst supporting improved health and wellbeing.</p>

Transformation Programme cost and Medium Term Financial Plan benefits

Project	Total cost	Total financial benefit
Adults Social Care ADM	£1,260,000	Savings of £18.45m
Housing & Support projects	Funded from existing service budgets	
Your Choice Barnet		
Assistive Technology for care support		
Home and Community Support & Enablement project	£240,200 & service funded	
Case Review Activity	£385,000	
Health & Social Care Integration	s256 funded	
Independence of Young People with LD	£400,000	
Employment Support	£275,000	
Specialist Dementia Support Service	£260,000	
Service development investments (Mental Health, Housing, Front Door & Invest in IT, Personal Assistants	£759,000	
Sports and Physical Activity (SPA)	£1,476,000	Saving of £0.97m and improved participation & health outcomes. Annual management fee (income) to Council through award of new leisure management contract, effective from 2018.
Total	£5.85m³	£19.42m

³ Total portfolio costs includes an apportionment of central programme costs, contingency and legal advice

8. INDICATORS FOR 2017/18

The tables below outline how the Committee contributes to achieving the priorities of the Corporate Plan: **Delivering quality services** (Responsibility); **Responsible growth, regeneration and investment** (Opportunity); **Building resilience in residents and managing demand** (Fairness); **Transforming local services** (Opportunity); and **Promoting community engagement, independence and capacity** (Responsibility).

Key:

CPI = Corporate Plan Indicator

SPI = Commissioning Plan Indicator

Delivering quality services (Responsibility)

Ref		Indicator	2016/17 Target	2016/17 Q3 Result	2017/18 Target	2019/20 Target	Service
CPI	AC/S1 (Annual)	Percentage of people who use adult social care services satisfied with their care and support (survey) ⁴	61% (within confidence interval)	Not reported – due Q2 17/18	61.3% (within confidence interval)	Top 25% in England (67.5% in 15/16)	Adults & Communities
CPI	AC/S25	Percentage of Social Care Direct customers who are satisfied or very satisfied with the service they have received post resolution	85%	100%	85%	85%	CSG

Building resilience in residents and managing demand (Fairness)

PLANNING FOR LIFE - Working age adults and older people live a healthy, full and active life, in homes that meet their needs, and their contribution to society is valued and respected.

Ref		Indicator	2016/17 Target	2016/17 Q3 Result	2017/18 Target	2019/20 Target	Service
CPI	AC/C17	Percentage of contacts that result in a care package	Monitor	20%	Monitor	Monitor	Adults & Communities
CPI	AC/S10 (ASCOF 1B) (Annual)	Percentage of people who feel in control of their own lives (survey) ⁵	69% (within confidence interval)	Not reported – due Q2 17/18	70% (within confidence interval)	Top 25% in England (79.5% in 15/16)	Adults & Communities

⁴ All indicators based on the Adult Social Care user survey are set using a 'confidence interval' that takes account of the margin of error which may result from surveying a small sample of the population.

⁵ All indicators based on the Adult Social Care user survey are set using a 'confidence interval' that takes account of the margin of error which may result from surveying a small sample of the population.

Ref		Indicator	2016/17 Target	2016/17 Q3 Result	2017/18 Target	2019/20 Target	Service
SPI	NEW - TBC	Proportion of referrals that result in an assessment	Monitor	NEW FOR 2017/18	TBC	TBC	Adults & Communities
SPI	AC/S2 (ASCOF 3D) (Annual)	Service users who find it easy to get information (survey) ⁴	71.3% (within confidence interval)	Not reported – due Q2 17/18	Maintain performance (within confidence interval)	Top 25% in England	Adults & Communities
SPI	AC/S27	Percentage of customer contacts into Social Care Direct resolved at first point of contact	Monitor	51%	Monitor	Monitor	CSG

EARLY SUPPORT - Working age adults and older people are provided with the tools to manage their own health and wellbeing and maintain independence.

Ref		Indicator	2016/17 Target	2016/17 Q3 Result	2017/18 Target	2019/20 Target	Service
CPI	AC/S3 (ASCOF 1G)	Percentage of adults with learning disabilities who live in their own home or with their family	63%	62.4%	65%	England average (75.96% in 15/16)	Commissioning Group/ Adults & Communities
CPI	AC/S4 (ASCOF 1E)	Percentage of adults with learning disabilities in paid employment	10.8%	9.4% (Q3 Target 10.4%)	10.8%	Top 10% in England (11.68% in 15/16)	Commissioning Group/ Adults & Communities
CPI	AC/S5 (ASCOF 1F)	Percentage of adults with mental health needs in paid employment	7.2%	6.1% (Q3 Target 6.8%)	7.5%	Top 25% of comparable boroughs (8.23% in 15/16)	Commissioning Group/ Adults & Communities
CPI	AC/S6 (ASCOF 1H)	Percentage of adults with mental health needs who live independently, with or without support	83%	84.7% (Q3 Target 82.5%)	83%	Top 25% of comparable boroughs (79.53% in 15/16)	Commissioning Group/ Adults & Communities
SPI	AC/S17	Number of new telecare packages installed	800	772 (Q3 Target 600)	1000	47% of all support packages	Adults & Communities

Ref		Indicator	2016/17 Target	2016/17 Q3 Result	2017/18 Target	2019/20 Target	Service
SPI	AC/S18	Percentage of service users receiving ongoing services with telecare	17%	15.7% (Q3 Target 15.9%)	17%	30%	Adults & Communities

PERSON-CENTRED INTEGRATED SUPPORT - Working age adults and older people have timely access to health and social care support that maintains independence and avoids hospital admission or admission to residential care.

Ref		Indicator	2016/17 Target	2016/17 Q3 Result	2017/18 Target	2019/20 Target	Service
CPI	AC/S9 ASCOF2A (2)	Permanent admissions to residential and nursing care homes, per 100,000 population age 65+	530	262.0 (Q3 Target 363.8)	500	Top 10% of comparable boroughs (265.9 in 15/16)	Adults & Communities
CPI	AC/C14	Permanent admissions to residential and nursing care homes, per 100,000 population age 18-64	16.6	8.50 (Q3 Target 10.10)	15.0	Top 10% in the country (4.98 in 15/16)	Adults & Communities In JHWBS
CPI	AC/C16	Number of referrals to hospital social work teams	Monitor	526	Monitor	Monitor	Adults & Communities
CPI	NEW - TBC	Working age adults who have moved out of residential care into stable accommodation ⁶	NEW FOR 2017/18	NEW FOR 2017/18	Monitor	TBC	Adults & Communities
SPI	AC/S8	Percentage of new clients, older people accessing enablement	63%	63.1%	65%	70%	Adults & Communities
SPI	AC/C12	Number of delayed transfers of care from hospital per 100,000 population (aged 18+) which are attributable to both NHS and Adult Social Care	7.35	9.1 (Q3 Target 7.39)	7.35	Monitor	Commissioning Group

⁶ New indicator – target set as Monitor for 2017/18 whilst baseline identified. ‘Stable accommodation’ mirrors the definition of ‘settled accommodation’ in the Adult Social Care Outcomes Framework accommodation –related indicators. The term describes arrangements where the individual has security of tenure in the place where they live, either in their own right or as part of a household – as opposed to being homeless, in temporary accommodation, or in residential or nursing care.

Ref		Indicator	2016/17 Target	2016/17 Q3 Result	2017/18 Target	2019/20 Target	Service
SPI	AC/C13	Number of delayed transfers of care from hospital, and those which are attributable to adult social care, per 100,000 population	2.5	4.1 (Q3 Target 2.7)	2.5	Top 10% in London	Adults & Communities

SAFEGUARDING - Working age adults and older people are supported to live safely through strategies which maximise independence and minimise risk.

Ref		Indicator	2016/17 Target	2016/17 Q3 Result	2017/18 Target	2019/20 Target	Service
CPI	AC/S15 (ASCOF 4A) (Annual)	Percentage of people who use services who say those services make them feel safe and secure (survey)	80.1% (within confidence interval)	Not reported – due Q2 17/18	79.6% (within confidence interval)	Maintain performance	Adults & Communities
SPI	NEW - AC/S22	Number of safeguarding concerns received ⁷	NEW FOR 2017/18	NEW FOR 2017/18	Monitor	Monitor	Adults & Communities

CARERS - Carers are valued as expert partners in supporting working age adults and older people to live independent lives.

Ref		Indicator	2016/17 Target	2016/17 Q3 Result	2017/18 Target	2019/20 Target	Service
CPI	AC/S29	Number of instances of information, advice and guidance provided to carers	3000	2584 (Q3 Target 2250)	3300	TBC	Adults & Communities
SPI	AC/S21	Number of carers assessments completed	1045	593 (Q3 Target 732)	Monitor	Top 25% of comparable boroughs	Adults & Communities

SPORT AND PHYSICAL ACTIVITY – Health and wellbeing outcomes are achieved in a manner that is sustainable.

⁷ New indicator – target set as Monitor for 2017/18 and 2019/20.

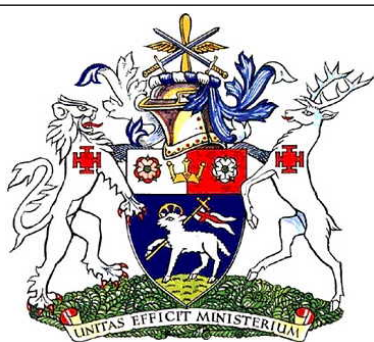
Ref		Indicator	2016/17 Target	2016/17 Q3 Result	2017/18 Target	2019/20 Target	Service
SPI	NEW - TBC	Total number of individuals aged 55 years + participating in leisure opportunities ⁸	NEW FOR 2017/18	NEW FOR 2017/18	Monitor	TBC	Commissioning Group – SPA
SPI	NEW - TBC	Increase in percentage of the population taking part in sport and physical activity at least twice in the last month (as defined by Active Lives ⁹	NEW FOR 2017/18	NEW FOR 2017/18	Monitor	TBC	Commissioning Group - SPA

⁸ New indicator – target set as Monitor for 2017/18 whilst baseline identified. Baseline will be set as part of 2017/18 Annual Review (due June 2017).

⁹ New indicator – target set as Monitor for 2017/18 whilst baseline identified. Baseline will be set in line with Sport England (dataset to be published in January 2017).

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AGENDA ITEM 8



Adults and Safeguarding Committee

6 March 2017

Title	Update on adult social care alternative delivery model
Report of	Commissioning Director, Adults and Health
Wards	All
Status	Public
Urgent	No
Key	No
Enclosures	Annex A: Section 75 agreements covering adult health and social care in Barnet.
Officer Contact Details	Joanne Humphreys, Project Lead, Commissioning Group joanne.humphreys@barnet.gov.uk ; 020 8359 3311

Summary

In September 2016 the Adults & Safeguarding Committee agreed to the continued development of two adult social care delivery vehicle options: a reformed in-house service and a shared service with the NHS. This paper provides an update on the development of those two options, including:

- Development of the reformed in-house service option through continued implementation of the new operating model.
- Development of the NHS shared service option.

Recommendations

1. That the Adults and Safeguarding Committee notes the progress report on the development of two adult social care delivery vehicle options.

1. WHY THIS REPORT IS NEEDED

- 1.1 On 26 January 2015, the Adults and Safeguarding Committee agreed that Barnet's model for delivering social care needed to be transformed and approved the initiation of a project to consider alternative delivery models for adult social care (ASC).
- 1.2 On 12 November 2015, the first output of this project, a proposed new operating model for ASC, was presented to the Committee. The new operating model is based on a vision of shared responsibility between the state, the community and the person. By helping people to stay healthy and well, supporting them to regain their independence after illness or injury, and encouraging them to make greater use of community resources, the new operating model aims to reduce demand for Council-funded care and support. Following public consultation, the new operating model was approved by the Committee for immediate implementation.
- 1.3 The new operating model was developed following extensive best practice and innovation research; and with the input of national advisors such as the Chief Social Worker (adults) for England. It was co-developed with input from Barnet ASC service users and carers and local voluntary sector organisations. The Barnet new operating model has been identified as a model of good practice nationally by the national forum for personalised care, TLAP ("Think Local Act Personal"), and the national association of directors of adult social services, ADASS. It was also recognised as a good practice model in the national social work awards.
- 1.4 On 7 March 2016, the second stage of this project provided the Committee with an initial evaluation of alternative delivery vehicles for ASC, following which three were shortlisted for further investigation: a reformed in-house service; a shared service with the NHS; and a public service mutual organisation.
- 1.5 Following further analysis and a period of public consultation, the Committee considered a revised business case appraising the three shortlisted options on 19 September 2016. Changes in the NHS landscape at this time, including the national policy requirement for NHS health commissioning and healthcare providers to develop five year Sustainability and Transformation Plans (STPs), prevented detailed appraisal of the NHS shared service option. Based upon feedback from the public consultation and the conclusions of the revised business case, the Committee agreed that the public service mutual option would not be considered further, and that the other two options (reformed in-house service and a shared service with the NHS) would be further developed.

- 1.6 Since the Committee decision on 19 September 2016, the two shortlisted options have been progressed through the following workstreams:
- The reformed in-house service option has been developed through implementation of the new operating model.
 - Options appraisal for a NHS shared service has been carried out.
- 1.7 The Committee paper of 19 September 2016 proposed that a progress report on the NHS shared service option and the reformed in-house option would be presented to the Committee in March 2017.
- 1.8 The changes in the NHS landscape, that prevented detailed appraisal of the NHS shared service option in September, are continuing. The Council's interactions with local NHS partners have focused upon development of the North Central London STP and development of local implementation plans for key STP initiatives such as the development of care closer to home. At the same time, significant changes have been taking place among North Central London Clinical Commissioning Groups (CCGs), with the establishment of a single accountable officer and executive team for the five CCGs of Barnet, Camden, Enfield, Haringey and Islington. While work to establish how the STP and the new CCG arrangements will be governed and delivered is in progress, it has not been possible to work with NHS partners to develop a final business case for a NHS shared service. This paper instead provides a progress update on each of the workstreams above as requested by the Committee.

2. REASONS FOR RECOMMENDATIONS

Development of the reformed in-house service option

- 2.1 The new operating model is at the heart of achieving the Council's commissioning plan for ASC. The Council's commissioning plan, which is the subject of a separate report to this Committee meeting, sets out a vision where people with ASC needs are supported to stay independent, in their own homes, and active in the community, through social and employment activities. At the same time, the vision seeks to create a sustainable, safe and high quality social care system in Barnet, through the development of new services and technology that enable independence and social inclusion. Over the last three years, the Council has created new services that enable people to stay more independent and active, such as: new information, advice and prevention services; community dementia services; employment support services; mental health enablement; new and increased telecare; increased direct payments; and a range of alternatives to residential care. On-line information and self-service tools are being implemented to make it easier for users and carers to identify ways to stay independent. This wide range of new services and the strength-based approach of the new operating model for

social work practitioners are the two essential components that deliver the commissioning plan vision, by working in tandem.

2.2 The new operating model is a way of supporting people that encourages individuals to recognise their strengths and identify the support that their family, friends and the local community can give them. It requires fundamental changes to what ASC practitioners do and, even more importantly, to how they do it. Practitioners are asked to take a different approach to their work and apply new ways of thinking, new skills and new behaviours. The Council is also working differently with community and voluntary organisations, involving them as partners in the new operating model.

2.3 The new operating model is being delivered through:

- Implementing Strengths-Based Practice (SBP) to replace other social work practice models. This is a key change to how ASC practitioners work. Applying SBP means having different conversations with people that focus upon uncovering an individual's strengths and resources, and then working with them to identify how they can apply those strengths and resources to addressing their problems and challenges. Success measures for the approach include the degree to which support goals can be achieved without statutory needs assessments or support plans.

The strengths-based approach means working in a way where ASC practitioners support people to put in place these alternative supports and develop their own approaches to meeting their goals. It involves much closer working with the voluntary and community sector (VCS) to implement support for people and also making connections for people into the wider community. Success measures for the approach are therefore the degree to which people with ASC needs can meet their goals without involving traditional care services.

- Creating ASC assessment hubs, called Care Spaces, which replace the practice of home visits, except for those who continue to need them. By welcoming people into venues not obviously identifiable as "Council buildings" we encourage staff and visitors to think more creatively about solutions other than traditional Council-funded care, and set a positive expectation that the person (and not the Council) is "in the driving seat" for their own wellbeing. Over the last year, a significant increase in work with ASC users has taken place in the hubs. In addition, the hubs act as information points for people with social care needs, where ASC practitioners can facilitate links to the VCS and wider community. VCS are part of the development of the hubs. Two hubs are now operational in Barnet, with a third due to come into operation by summer 2017.

- The Barnet Mental Health Enablement Pathway, which applies the new operating model to people with mental health problems. People are enabled to take control of their lives through building stronger social relationships; developing the skills they need for living and working, and finding a suitable and stable place to live. This model is being developed through the expansion of the Barnet Mental Health Network service, where case evidence shows that individuals are finding employment and reducing their reliance on mental health services.

Strengths-Based Practice (SBP) implementation

- 2.4 The SBP Learning & Development Programme was developed through numerous co-design sessions with frontline practitioners. It was initially piloted with a cohort of 13 practitioners in May-June 2016. The role of this group was to trial and test the approach as well as highlighting issues and concerns. Using the learning from this pilot phase, an improved approach was developed. The programme was then rolled out to a further five cohort groups in the period September 2016 – January 2017. The cohort groups brought together practitioners from different ASC teams to work creatively together to produce tools, share ideas and learn collectively. Each cohort followed an eight week programme, consisting of six core learning days, five small group coaching sessions and two reflective learning sessions. Learners were required to evidence at least three strengths-based case studies demonstrating how they had put their learning into practice. People with ASC needs have been part of the programme, training and guiding ASC practitioners.
- 2.5 In addition to developing the behavioural and technical skills required for effective SBP, practitioners have worked together to:
 - Produce a clear SBP narrative to establish a shared understanding of what SBP means.
 - Introduce “HeadSpace”, a creative thinking space and resource library.
 - Design and publish over 30 practice tools.
 - Launch a monthly SBP newsletter to share successes and further increase awareness of SBP.
- 2.6 By the end of January 2017, 94 staff members (equating to 86% of the populated establishment) had completed the programme. A measurable shift in understanding has been documented, with 83% of practitioners stating they ‘definitely’ understand SBP and how to use it, compared to an original baseline of 6%. The impact is also noted through 78% of practitioners now stating that ‘talking about an individual’s strengths’ is of high importance within the assessment, compared to the baseline of 33%. As expected, the converse

conversation topic is also of note with 82% of practitioners now stating 'talking about the services that the Council can provide' as low importance, versus the baseline of 46%. To ensure that SBP is embedded across ASC, support staff in the Adults and Communities Delivery Unit have also been trained; supervision models are being developed to incorporate SBP; and the ASC quality assurance programme, including case file audits, has been refreshed to ensure it is measuring and assuring SBP. The tools and templates in Mosaic, the new ASC case management system, have also been developed to facilitate SBP.

Care Spaces (ASC assessment hubs)

- 2.7 Two Care Space hubs are now operational: one at the Ann Owens Centre in East Finchley and the second at the Independent Living Centre in Colindale. Both locations are multi-purpose venues that are well-known to the local communities who use them. They are not Council buildings and do not look or feel like Council buildings. ASC assessments and reviews are carried out from these hubs and the hubs also offer information and advice on support services available in the local community, and a range of activities to support older people and people with physical disabilities to maintain their health, wellbeing and independence. The hubs offer a combination of appointments and drop-in sessions, run by Council staff and supported by staff and volunteers from VCS organisations including Barnet Carers Centre, Barnet Citizens Advice Bureau and Inclusion Barnet. A third hub is in development, to be launched in summer 2017.
- 2.8 Working in a joined-up way with Barnet's VCS organisations is a key principle of the new operating model. The VCS Community Directory, which is being delivered through the Council's Community Participation Strategy, is a searchable database of voluntary groups, organisations, social clubs, charities and social enterprises that are based, or operate in Barnet. This database, combined with practitioners' own knowledge of community activity across the borough, helps practitioners to connect people to community resources that can help them to achieve the outcomes they want in ways that strengthen their connections with their communities. Other connections are also being made through Ageing Well/Altogether Better neighbourhood activities; the Barnet Neighbourhood model; and the CCG's mental health wellbeing hub.

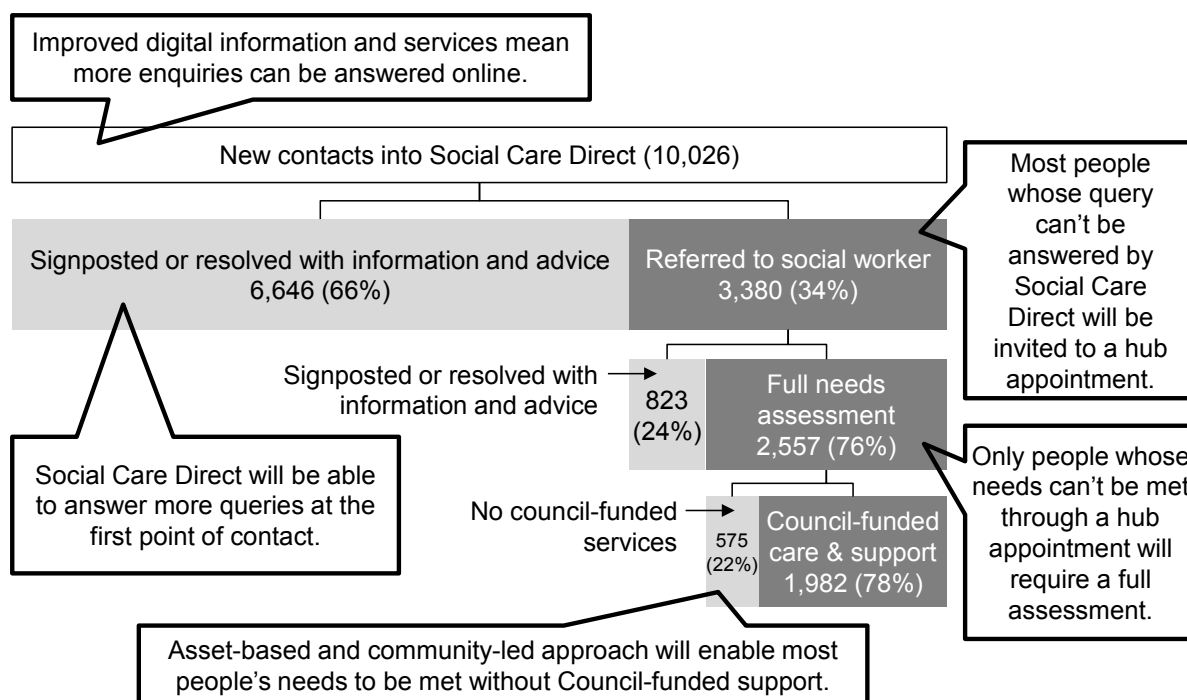
Barnet Enablement Pathway for Mental Health

- 2.9 The Barnet Enablement Pathway has been developed to meet the social care needs of people who develop mental health problems as well as providing an integrated service with key partners. Working in a strengths-based way, practitioners concentrate on supporting people with key social needs, which may be impacting on their mental wellbeing. Research shows that people with

a mental health issue are at a higher risk of unemployment, homelessness and breakdown of family relationships. Concentrating resources at the front end of people's mental health journey alleviates some of these risks. By delivering the right support at the right time and supporting the choices, goals and needs of the service user, practitioners can help to increase the resilience and self-management of people with mental health problems and their families. This reduces and prevents the need for more intensive social care services. Following a formal period of consultation with staff, on 6 December 2016 the Council's General Functions Committee approved changes to the workforce and structure of the Adults and Communities Mental Health service, in order to reflect this new enablement and social care model of mental health.

Strength based practice success criteria

2.10 The following diagram shows the "flow" of people contacting Social Care Direct with ASC enquiries in 2014/15, and indicates the main ways in which the new operating model is changing this flow:



2.11 A method for measuring this flow of demand through the ASC service has been developed and these measures are now reported to the Adults and Health Commissioning Director on a monthly basis. The key measures are:

- The proportion of new contacts that are referred by Social Care Direct to the ASC service.
- The proportion of referrals that are resolved through an appointment at one of the Care Space hubs.

- The proportion of ASC referrals that result in a full needs assessment.
 - The proportion of full needs assessments that result in a Council-funded ASC service.
- 2.12 This is the first year in which data has been collated and monitored in this format during the year in question. Therefore the data produced through this report is closely monitored and reviewed to identify any data quality issues and to allow the Council to set an accurate baseline for the future. The report will continue to evolve and develop as the new operating model and demand modelling work progresses.
- 2.13 Data collected to-date shows that the new operating model is having a positive impact. For example, 20% of referrals to the ASC team are now being met through an appointment at a Care Space hub (433 appointments) instead of a home visit, an increase from 8% in 2015/16 (66 appointments). A comparison of the proportion of assessments which resulted in a funded service based on a 12 month rolling average shows that the implementation of strengths-based practice has reduced the proportion resulting in a funded service by 4% to-date. At the same time, satisfaction with ASC has remained consistent, with no increase in complaints.
- 2.14 The Council will continue to collect and monitor data in order to monitor trends and improve the effectiveness of the dataset and the new operating model.

Development of the NHS shared service option

- 2.15 The Council already works closely with local NHS partners to deliver joined-up adult health and social care services, operating a number of integrated services and shared pathways. However, there is a lot more that can be done to deliver the benefits of integrated care at scale, and to develop new models of care that incentivise optimal behaviours, activity and resource allocation across adult health and social care.
- 2.16 There are many different structures through which ASC and health organisations can work together to integrate services, ranging from loose agreements that align services without integrating them, to full structural integration. The following shared service approaches have been identified as appropriate routes for further investigation, to deliver the new operating model:
- **Section 75 agreements**¹ allow local authorities and NHS organisations to create pooled (shared) budgets. This allows resources and management structures to be integrated and functions to be reallocated between partners. Section 75 agreements are well-established across local government. Annex A of this paper lists the existing Section 75 agreements covering adult health and social care in Barnet that are currently in operation between the Council and its NHS partners. Under a large scale Section 75 for the ASC function there would be management efficiencies, opportunities for better information sharing and there could also be increased investment in ASC as a more cost-effective alternative to NHS in-patient services.
 - **Accountable Care models (AC)** bring together a number of providers to take responsibility for the cost and quality of care for a defined population within an agreed budget. The key principles are a single pathway for the service user, supported by unified budgets, payment mechanisms, performance incentives and shared risk management. Accountable care can take different forms ranging from fully integrated models to looser alliances and networks of hospitals, medical groups and other providers. Emerging evidence suggests AC can be an effective way of responding to local needs, embedding and incentivising preventative interventions, and overcoming fragmented responsibilities for commissioning and providing health and social care.
- 2.17 The Council has held a number of meetings with a group of organisations including the Royal Free London NHS Foundation Trust, NHS Barnet Clinical Commissioning Group; Barnet, Enfield and Haringey Mental Health NHS Trust; Central London Community Healthcare NHS Trust and the Barnet GP

¹ Legally provided by the NHS Act 2006.

Federation (the constituent body for GPs as providers of health care, as opposed to their commissioning responsibilities as CCG members), to explore the NHS shared service option.

2.18 The group has developed principles for accountable care:

- Be built around the person with no boundaries and no gaps.
- Provide a simplified, joined-up customer journey and improved outcomes for people.
- Join up the funding, the workforce and the outcome measures across organisations.
- Align resources and behaviour through a contracting and budgeting approach that incentivises early intervention and prevention.
- Be a whole system approach that is built around community teams rather than specialist teams.

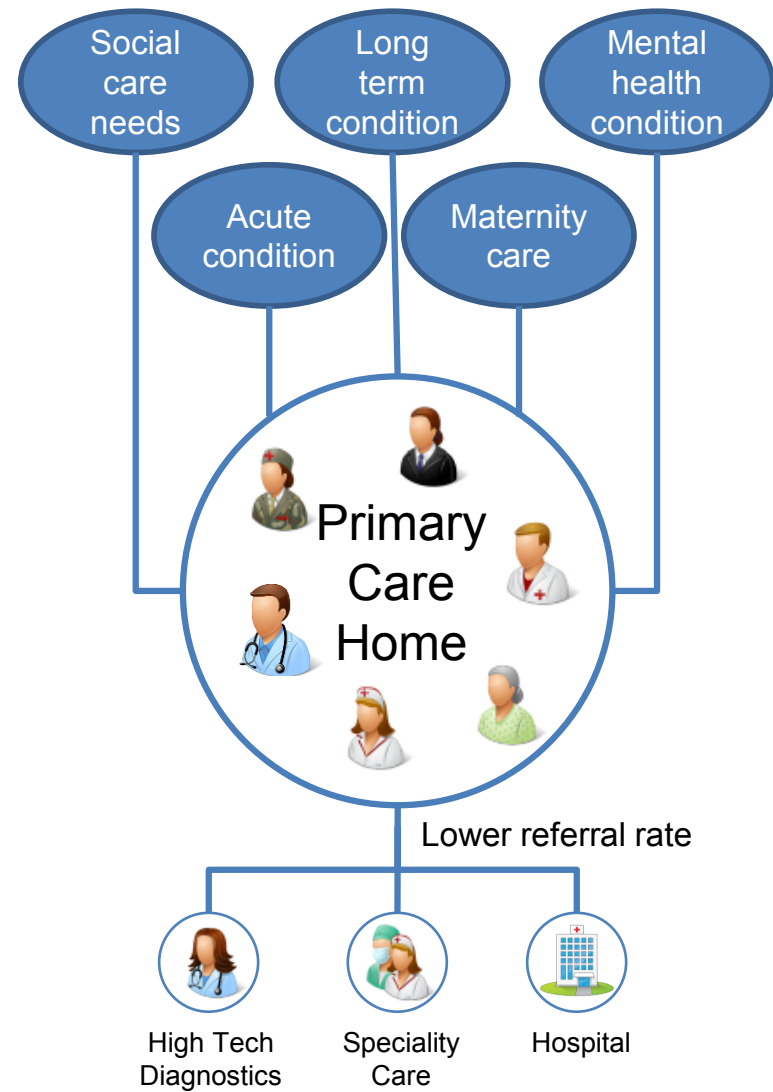
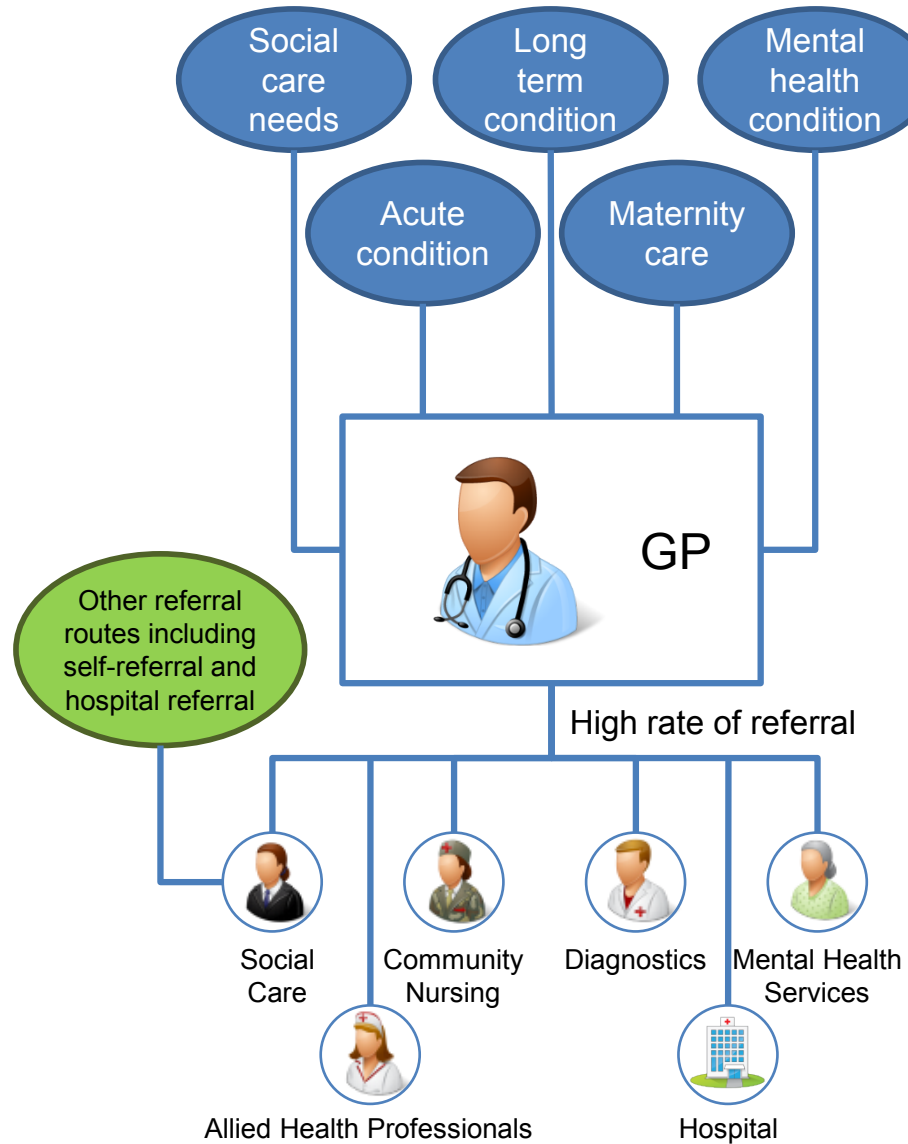
2.19 An approach known as “Primary Care Home”, which is a type of AC, has been identified as a model through which these priorities could be delivered. The key features of Primary Care Home (PCH) are:

- Each “home” provides care to a defined, registered population of between 30,000 and 50,000.
- A single pooled budget with appropriate shared risks and rewards.
- An integrated workforce, with a strong focus on partnerships spanning primary, secondary and social care.
- A combined focus on personalisation of care with improvements in population health outcomes.

2.20 In the model, each PCH has its own integrated multi-disciplinary team, including primary care, social care, community nursing and mental health practitioners. Optometry, dental, pharmacy and preventative services, and care and support provided by the community and voluntary sector could also become part of the PCH model. Working at this scale ensures everyone within the team knows everyone else. People using the service receive a more personalised and consistent experience of care.

2.21 Each PCH receives a population-based capitated budget, based upon population size (taken from the number of people registered with GP practices within the PCH), the needs of the population and the scope of responsibilities within the contract. Within this each PCH would have the autonomy and flexibility to respond to local needs.

Comparison of the current model of healthcare with the Primary Care Home model



- 2.22 PCH was one of the new models of care put forward in the NHS Five Year Forward View, published in October 2014². The NHS Federation and the National Association of Primary Care launched the PCH programme in October 2015 and 15 “rapid test sites” (including the London Borough of Richmond-Upon-Thames) are developing plans to implement PCH trials.
- 2.23 The PCH model is fully aligned with the principles of the key national and local policy commitments around health and social care integration, including:
- a) The Better Care Fund (BCF) programme, a national initiative that requires local areas to move towards a single pooled budget to support health and social care services to work together more closely in local areas.
 - b) Barnet’s local BCF programme, consisting of the Barnet Integrated Locality Team (BILT), rapid care, risk stratification, single point of access and 7 day services. The PCH model is a coherent further development to achieve improvements at scale.
 - c) The Council’s business case for health and social care integration (approved by Council in November 2014) which sets out a single shared approach to integrated health and social care for frail elderly people and those living with long term conditions in Barnet.
 - d) The announcement in the Government’s Comprehensive Spending Review of November 2015 that each part of the country will be required to develop plans for the integration of health and social care services in 2017, to be implemented by 2020.
 - e) Core principles and work programmes of the draft North Central London STP – bringing care closer to home; partner organisations will “work in a new way as a whole system; sharing risk, resources and reward” and “health and social care will be integrated as a critical enabler to the delivery of seamless, joined up care.”
- 2.24 The Council and the other organisations listed above will continue to explore how both Section 75 and AC approaches could be applied in Barnet, and a further report will be brought to the Adults & Safeguarding Committee at a future meeting to set out progress in these areas. The group of organisations are exploring how AC approaches could be tested in Barnet, subject to appropriate decision making and agreement by each organisation.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

- 3.1 The alternative delivery model project has considered the full range of alternative delivery vehicles:

² Described in that document as a “multi-speciality community provider model”.

- In November 2015 the Committee agreed that the option of continuing to provide ASC through an unreformed in-house service would lead to a situation of increasing risk, both financial and in terms of safety, as unit costs of care were driven lower and risk of considerable overspend increased. Therefore this option has not been considered further.
- In March 2016 the Committee approved a recommendation that the options of a partnership outside the public sector (including a joint venture or an outsourcing arrangement) and transferring the in-scope services to The Barnet Group (the Council's Local Authority Trading Company) should not be considered further.
- This was followed by a Committee decision in September 2016 that the public service mutual option would not be considered further.
- The two remaining options - a reformed in-house service and a shared service with the NHS – are still under consideration.

4. POST DECISION IMPLEMENTATION

4.1 Further progress reports will be presented to the Adults & Safeguarding Committee to provide:

- A further update on the implementation of the new operating model, including success measures, quantifying the impact that the new operating model is having upon demand for Council-funded services.
- Findings from further consideration of both Section 75 and AC models and proposals for their further development.
- At the appropriate time, a recommendation for a single delivery vehicle option.

5. IMPLICATIONS OF DECISION

Corporate Priorities and Performance

5.1 Successful implementation of the Commissioning Plan, of which this work is part, will help to support and deliver the following 2015 – 2020 Corporate Plan objectives for health and social care services:

- To make a step change in the Council's approach to early intervention and prevention as a means of managing demand for services.
- To remodel social care services for adults to focus on managing demand and promoting independence, with a greater emphasis on early intervention.
- To implement the Council's vision for ASC, which is focused on providing personalised, integrated care with more residents supported to live in their own home.

- To fully integrate social care commissioning with health services, helping the NHS manage the huge costs of A&E and hospital admissions through greater provision of primary and community care.
- 5.2 This approach is consistent with the Joint Health and Wellbeing Strategy 2016-2020 which sets out a vision that includes providing a shared vision and strategic direction across partners; continuing emphasis on prevention and early intervention; developing greater community capacity; increasing individual responsibility and building resilience; and joining up services so residents have a better experience.

Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)

- 5.3 The Council's net revenue budget for Adults and Communities (including staffing costs, supplies and services, payments to external suppliers and client contributions) is £86.8m in 2016/17. The current estimated budget for 2017/18 is £87.1m.
- 5.4 The alternative delivery model project has a savings target of £1.31m between 2018/19 – 2019/20 (£654,000 per annum in 2018/19 and 2019/20).
- 5.5 Through this work we have begun modelling the impact the implementation of the new operating model is likely to have on current and projected future demand on service spend. We continue refining this view to ascertain required measures to deliver the MTFS savings assigned to ASC for the financial years of 2017/18-2019/20. The new operating model is a critical component in the practice model reducing demand for funded social care.
- 5.6 A total budget of £1.26m for the alternative delivery model project was approved by the Council's Policy & Resources Committee on 16 February 2016, to be funded from the Transformation Reserve Fund. This budget includes the cost of implementing the new operating model and the resource required to consider Section 75 and AC models for a future recommendation on a single delivery vehicle option.

Legal and Constitutional References

- 5.7 The responsibilities of the Adults and Safeguarding Committee are contained within the Council's Constitution – Section 15 Responsibility for Functions (Annex A). Specific responsibilities for those powers, duties and functions of the Council in relation to Adults and Communities include the following specific functions:
- Promoting the best possible ASC services.

- Working with partners on the Health and Well-being Board to ensure that social care interventions are effectively and seamlessly joined up with public health and healthcare, and promote the Health and Wellbeing Strategy and its associated sub strategies.
 - Ensuring the Council's safeguarding responsibilities are taken into account.
- 5.8 The Care Act 2014 permits increased flexibility to Councils to delegate services and responsibilities to other parties, in comparison with previous legislation. This is contained in section 79 of the Act. Subsection 2, section 79 specifically excludes the following: promoting integration with Health; cooperation; charges; safeguarding adults at risk; and powers contained within section 79.
- 5.9 When making decisions around service delivery, the Council must consider its public law duties. This includes its public sector equality duties and consultation requirements as well as specific duties in relation to ASC.

Risk Management

- 5.10 The project has been and will continue to be managed within the Council's risk management framework.

Equalities and Diversity

- 5.11 The 2010 Equality Act outlines the provisions of the Public Sector Equalities Duty which requires Public Bodies to have due regard to the need to:
- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010.
 - Advance equality of opportunity between people from different groups.
 - Foster good relations between people from different groups.
- 5.12 The protected characteristics are:
- Age
 - Disability
 - Gender reassignment
 - Pregnancy and maternity
 - Race
 - Religion or belief
 - Sex
 - Sexual orientation.

- 5.13 The broad purpose of this duty is to integrate considerations of equality into day to day business and to keep them under review in decision making, the design of policies and the delivery of services.
- 5.14 An initial equalities impact assessment (EIA) of the proposed new operating model was completed in October 2015 and included as part of the strategic outline case presented to the Adults and Safeguarding Committee on 12 November 2015. The EIA showed “no impact anticipated” for residents and service users and “impact unknown” for staff. This EIA was reviewed in February 2016 and no requirement to update it was identified. The EIA was then reviewed and updated in August 2016, following completion of public consultation on the proposed new operating model and the delivery vehicle options. The EIA was reviewed again by the lead officer in February 2017 and no further requirement to update it was identified.
- 5.15 The equalities impact on service users and residents is still recorded as “no impact anticipated” at this stage, and the impact on staff is still recorded as “impact unknown”. This will be reviewed as set out below.
- 5.16 The remaining two shortlisted delivery vehicle options are unlikely to have an equalities impact upon ASC service users because both options are structures through which the new operating model would be delivered. However, not enough is yet known about how the NHS shared service option would be implemented to say for certain that choosing this option will not have an equalities impact upon service users. Therefore the potential impact on service users will be reviewed prior to submission of the updated business case.
- 5.17 The NHS shared service option would affect Adults and Communities Delivery Unit employees, with reference to which organisation employs them, and potentially their terms and conditions of employment and their job roles. However, not enough is yet known about how this option would be implemented to be able to say which staff would be affected and in what ways they would be affected. Therefore the potential impact on employees will also be reviewed prior to submission of the updated business case.

Consultation and Engagement

- 5.18 Both the Adults and Safeguarding Commissioning Plan and the Council’s plans for implementing the Care Act 2014 were subject to public consultation.
- 5.19 The new operating model and the alternative delivery vehicle options were shaped and refined through engagement with residents, service users, partner organisations and Council staff. They were then subject to public consultation in spring/summer 2016, and the consultation findings were presented to the Adults and Safeguarding Committee on 19 September 2016.

6. BACKGROUND PAPERS

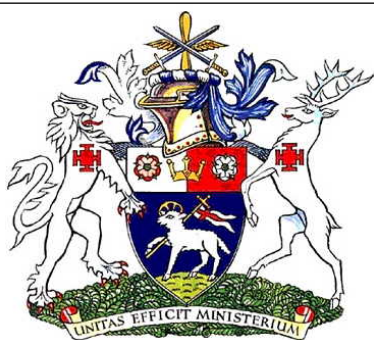
- 6.1 The Care Act (2014) came into force in April 2015.
<http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted>
- 6.2 The Full Business Case for Barnet Health and Social Care – Integration of Services was approved by Council on 4 November 2014.
<http://barnet.moderngov.co.uk/documents/s18827/Annexe%201%20-%20Business%20Case%20for%20Barnet%20Health%20and%20Social%20Care%20-%20Integration%20of%20Services.pdf>
- 6.3 The Adults and Safeguarding Committee approved initiation of a project to identify an alternative delivery model for ASC on 26 January 2015.
<http://barnet.moderngov.co.uk/documents/s20572/AS%20committee%20ADM%20report%20011v10.pdf>
- 6.4 The Adults and Safeguarding Committee approved the approach to a new operating model for ASC on 12 November 2015.
<http://barnet.moderngov.co.uk/documents/s27171/A%20new%20operating%20model%20for%20adult%20social%20care.pdf>
- 6.5 The Policy & Resources Committee approved a Medium Term Financial Strategy and detailed revenue budgets on 16 February 2016:
<https://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=692&MId=8351&Ver=4>
- 6.6 The Adults and Safeguarding Committee approved three shortlisted alternative delivery vehicle options on 7 March 2016.
<http://barnet.moderngov.co.uk/documents/s30109/Alternative%20delivery%20model%20for%20Adult%20Social%20Care.pdf>
- 6.7 The Adults and Safeguarding Committee approved further development of two of the three options (reformed in-house service and shared service with the NHS) on 19 September 2016.
<http://barnet.moderngov.co.uk/documents/s34553/Revised%20Business%20Case%20on%20Adult%20Social%20Care%20Alternative%20Delivery%20Vehicle%20and%20Implementation%20of%20the%20Ne.pdf>
- 6.8 The General Functions Committee approved the proposed restructure of the Adults and Communities Mental Health Service on 6 December 2016.
<http://barnet.moderngov.co.uk/documents/s36399/Restructure%20Proposals%20of%20the%20Adult%20Social%20Care%20Mental%20Health%20Service.pdf>
- 6.9 The Policy and Resources Committee received an update on the North Central London Sustainability and Transformation Plan on 1 December 2016.
<http://barnet.moderngov.co.uk/documents/s36323/North%20Central%20London%20Sustainability%20and%20Transformation%20Plan.pdf>

ANNEX A

Section 75 agreements covering adult health and social care in Barnet that are currently in operation between the Council and its NHS partners.

Agreement title	Agreement with	Agreement first put in place on	Current agreement expires on	Pooled budget 2016/17
Lead Commissioning for an Integrated Community Equipment Service	Barnet CCG	December 2013	March 2017	£2,566,598
Voluntary & Community Sector Commissioning (prevention & early support)	Barnet CCG	April 2014	March 2022	£2,474,449
Integrated Learning Disability Service	Barnet CCG	February 2012	January 2018	£3,151,708
Learning Disability Services for 10 service users	Barnet CCG	April 2010	No end date	£1,709,088
Health & Social Care Integration (Better Care Fund)	Barnet CCG	April 2015	March 2017	£24,324,521
Integrated provision of mental health services for adults of working age & older adults	Barnet, Enfield and Haringey Mental Health Trust.	August 2015	July 2017	£20,346,953 (2 year total value)

AGENDA ITEM 9



Adults and Safeguarding Committee

6 March 2017

Title	Development of online technology for adult social care
Report of	Commissioning Director, Adults and Health
Wards	All
Status	Public
Urgent	No
Key	No
Enclosures	N/A
Officer Contact Details	James Mass, Assistant Director 020 8358 4610, jamesmass@barnet.gov.uk

Summary

The Adults and Safeguarding Commissioning Plan has included a commitment to increase the use of new support and enabling technologies: to provide information, enable people to find and arrange support, and to help people to remain independent. The aim is that services should be accessible, intuitive and efficient and that innovative technologies should be utilised where appropriate.

To meet this commitment, the Council is: refreshing and improving its social care website information; developing a database of voluntary and community organisations and services; and mobilising new telecare services for Barnet residents. In addition, an opportunity immediately available to the Council in support of the Committee's commissioning plan is the implementation of ChooseCare as a tool to support the management of direct payments and for residents not eligible for support under the Care Act 2014's eligibility criteria to plan and arrange support. ChooseCare is a website where individuals can plan, book and keep track of their social care services and products. Following a trial that has seen positive service user feedback, it is proposed to adopt ChooseCare as the default direct payment management option for the Council's adult social service users, though a choice of alternative means to manage a personal budget will still be available.

Recommendations

1. That the Committee notes the report setting out the development of online technology for adult social care in Barnet.

1. WHY THIS REPORT IS NEEDED

- 1.1 The Adults and Safeguarding Commissioning Plan has included a commitment to increase the use of new support and enabling technologies: to provide information, enable people to find and arrange support, and to help people to remain independent. The aim is that services should be accessible, intuitive and efficient and that innovative technologies should be utilised where appropriate.
- 1.2 To meet this commitment, the Council has undertaken a range of projects and delivered service improvements across different elements of social care. This has included refreshing and improving the social care website information – developing the structure and content with local residents to ensure it meets their needs. A new database of voluntary and community organisations and services has been developed to improve awareness, understanding and uptake of services in the community. Following a successful procurement exercise a new telecare service for Barnet residents is being mobilised to launch in April 2017 and significantly increase the uptake of assistive technology in the community and in supported living and residential settings. Work has also been on-going to consider how an online care arrangement and direct payment management service could add value to direct payment recipients and individuals in the borough privately arranging their own care.
- 1.3 Around a third of individuals receiving a social care service in their own homes from the Council elect to manage this via a direct payment. The Council has been exploring alternative approaches to enable people to manage their direct payments as easily as possible; broaden the choice of services available and make the monitoring process more effective and efficient. Authorities across the country are looking at similar systems and the market for online care management systems is now growing. There are a number of systems in various stages of development with no single market leader having yet emerged.
- 1.4 As such the Council has been working with Capita through the CSG contract to co-develop and pilot a new way to manage Direct Payments through a new website called 'ChooseCare'. This fits with the Committee's own commissioning plans and approach, as well as with the wider direction of the local government sector.
- 1.5 ChooseCare is a website where individuals can plan, book and keep track of their social care services and products. The ChooseCare website allows direct payment recipients and people who organise their own care to:

- Search for, choose and pay for care using Council Direct Payments or their own funds.
 - View a calendar of planned care visits.
 - Connect to local support groups.
 - For Council direct payment users, automate the process of providing evidence of appropriate spend to the Council
- 1.6 A pilot commenced in late 2016 with fifteen new direct payment recipients who were supported to manage their direct payments via ChooseCare. To date the response from the pilot users has been positive and the pilot is being used to make service improvements in line with user feedback. These individuals are continuing to use ChooseCare.

2. REASONS FOR RECOMMENDATIONS

- 2.1 Barnet's vision for 2020, as set out in the Corporate Plan, is to provide local services that are integrated, intuitive and efficient, making life simpler for our residents and customers. New technologies are an important part of this.
- 2.2 The Council's vision for customer services in 2020, as set out in the Customer Access Strategy is:
- That the majority of access is via digital means – 'digital by default'.
 - Customer journeys enable efficient and effective resolution at the earliest opportunity.
 - Customers receive a high quality personalised service, including relevant services from partners.
 - Customers are connected to the community, not just Council services.
- 2.3 The Adults and Communities digital vision, as set out in the same strategy, included:
- Use digital means to drive residents away from using telephone as the first form of contact.
 - Review the end to end journey and see what parts of the journey would be enhanced by moving to digital solution.
 - Available to customers on their chosen media – smartphone, tablet, computer.
 - Features like smart webforms will allow for self-assessments.
- 2.4 The introduction of an online tool to support direct payment management supports this vision. Benefits to the council of ChooseCare include:
- Supports independence, choice, flexibility and control by enabling an increase in direct payment take up.

- Provides Barnet with greater transparency of direct payment spend to simplify the audit process and minimise the costs of processing receipts.
 - Improved reporting on any potential direct payment issues and problems.
 - Supportive of anti-fraud measures.
- 2.5 When introduced, ChooseCare will be flexible and can be used to manage part or all of an individual's direct payments. Users will have the option to continue to manage their Direct Payments as they normally do or take an element as cash via ChooseCare.
- 2.6 The Council will ensure that individuals are not excluded from choosing a direct payment because of a lack of digital access. For those who would like to use ChooseCare but do not currently have the means to do so a number of support options will be offered including making use of existing services (such as Age Concern's digital inclusion services), through allowing delegate access and through a trial of issuing thirty tablet devices to direct payment recipients. Those who would like to manage their direct payment offline can continue through the traditional modes of direct payment management. The introduction of ChooseCare is about offering those who receive direct payments more choice about how they access and manage this to suit their needs.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

- 3.1 Source a system through a competitive procurement exercise. The Council has worked as a co-production partner in the development of ChooseCare and so is confident that the system will meet the needs of Barnet residents. As such, a competitive procurement exercise is not recommended.

4. POST DECISION IMPLEMENTATION

- 4.1 As well as the implementation of ChooseCare, the current, standard method of managing direct payments for service users will continue to be available. This method involves the service user setting up a dedicated bank account and providing quarterly returns to evidence appropriate spend.
- 4.2 It is proposed that ChooseCare will conduct a brief survey on the Council's behalf with existing direct payment recipients to help inform the final website and implementation approach.
- 4.3 Before any new clients are referred to ChooseCare a number of activities will need to be completed to provide assurance to the Council. These include the development of detailed business process maps; agreeing data flows between the case management system, finance system and ChooseCare along with the development of any required interfaces; ensuring agreements for direct payment recipients are in plain English; ensuring safeguarding policies and procedures are aligned; and finalising information management

documentation including the privacy policy. Direct debit functionality will also be developed to make it easier for direct payment recipients to pay their assessed financial contributions into their ChooseCare account.

- 4.4 Once all necessary assurance and survey work is complete, ChooseCare will become the default direct payment management option for new direct payment recipients, though individuals will continue to be free to choose to manage their budget through other mechanisms. Existing direct payment recipients will be approached in cohorts and be supported to move over to ChooseCare over time but will be able to opt-out if they prefer to continue as they are. The approach will include regular review points to gain feedback from residents and mitigate the risks of change.

5. IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

- 5.1.1 Developing better online opportunities supports the Corporate Plan priorities of Transforming Services (Opportunity), specifically:
By 2020 social care services for adults will be remodelled to focus on promoting independence, with a greater emphasis on early intervention.

5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)

- 5.3 The implementation of ChooseCare will be resourced through existing capacity. Capita have agreed to contribute towards the cost of implementation to recognise the value of the Council's contribution to the co-development.
- 5.4 On an on-going basis there is no fee to the Council for the use of ChooseCare. There is also no fee to care providers for being listed on ChooseCare. A transaction fee is applied for all care services and products purchased through the site. For voluntary sector organisations, there is no transaction fee where they do not charge the service user.

5.5 Social Value

- 5.5.1 N/A

5.6 Legal and Constitutional References

- 5.6.1 Responsibility for Functions, Annex A (as outlined in the council's constitution), states that the Adults & Safeguarding Committee is responsible for those powers, duties and functions of the Council in relation to Adults and Communities, which includes the promotion of the best possible Adult Social Care services.

5.7 Risk Management

- 5.7.1 The co-development of ChooseCare has included a particular focus on information management to ensure that the personal data of direct payment recipients is securely held and appropriately managed. Robust information management documentation has been put in place to this effect.
- 5.7.2 The Council has negotiated break clauses every six months for the first two years of the agreement that provide the ability to revert to the current approach to direct payment management if there are adverse consequences from using the new system.

5.8 Equalities and Diversity

- 5.8.1 The 2010 Equality Act outlines the provisions of the Public Sector Equalities Duty which requires Public Bodies to have due regard to the need to:
- eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010
 - advance equality of opportunity between people from different groups
 - foster good relations between people from different groups

5.9 Consultation and Engagement

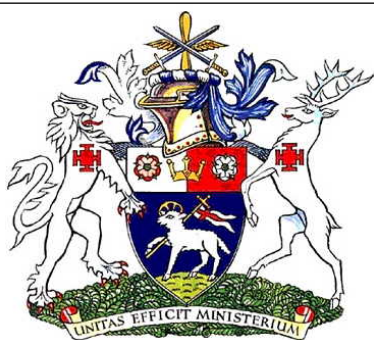
- 5.9.1 Fifteen service users have been piloting the system and their feedback has directly influenced the functionality and presentation of the site.

5.10 Insight

N/A

6. BACKGROUND PAPERS

- 6.1 Updated Commissioning Plan, Adults and Safeguarding Committee, agenda item 7, 7 March 2016
<http://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=698&MId=8364&Ver=4>
- 6.2 Customer Access Strategy, Policy and Resources Committee, agenda item 11, 28 June 2016
<http://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=692&MId=8728&Ver=4>



Adults & Safeguarding Committee

6 March 2017

Title	Fit & Active Barnet Framework 2016 – 2021
Report of	Commissioning Director, Adults and Health
Wards	All
Status	Public
Urgent	No
Key	Yes
Enclosures	Appendix 1- Fit & Active Barnet Framework 2016-2021 Appendix 2 - Fit & Active Barnet 2016 – 2021 Consultation Summary Report Appendix 3 - Fit & Active Barnet Framework (2016-2021) Equalities Impact Assessment
Officer Contact Details	Cassie Bridger, Strategic Lead – Sport & Physical Activity Cassie.Bridger@Barnet.gov.uk Courtney Warden, Commissioning Lead – Sport & Physical Activity Courtney.Warden@barnet.gov.uk

Summary

The Fit and Active Barnet Framework 2016-2021 outlines a local framework for the development of sport and physical activity in Barnet over the next five years. Through alignment with national strategy and council corporate and commissioning plan priorities, it aims to provide a co-ordinated approach to increasing participation in sport and physical activity to achieve a more active and healthy borough.

The Adults & Safeguarding Committee (19th September 2016) approved the draft Fit & Active Barnet Framework 2016-2021 for public consultation. This report provides a summary of the engagement and consultation process undertaken during October – November 2016, in which 60 responses were received (Appendix 2). This report also presents an Equalities Impact Assessment for consideration by the committee (Appendix 3).

This report presents a final version of the Fit & Active Barnet Framework 2016-2021, which includes enhancements and amendments following the consultation process and requests the Adults & Safeguarding Committee to adopt the final version.

Recommendations

- | |
|---|
| 1. The Adults & Safeguarding Committee approves the final version of the Fit & Active Barnet 2016 – 2021 (Appendix 1) |
| 2. The Adults & Safeguarding Committee considers the public consultation findings for the Fit & Active Barnet Framework 2016 – 2021 (Appendix 2). |
| 3. The Adults & Safeguarding Committee considers the Fit & Active Barnet Framework 2016 – 2021, Equalities Impact Assessment (Appendix 3) |

1. WHY THIS REPORT IS NEEDED

1.1 On the 19th September 2016 the Adults & Safeguarding Committee approved the following recommendations in relation to the development of a draft Fit & Active Barnet Framework 2016 2021;

- The Adults & Safeguarding Committee approves the draft Fit & Active Barnet Framework 2016 – 2021 for public consultation.
- The Adults & Safeguarding Committee notes a final Fit & Active Barnet Framework 2016-2021 will be reported back to Committee.
- The Adults & Safeguarding Committee notes a review of the Fit & Active Barnet Strategy 2016 -2021 will be reported to Committee in 2018.
- The Adults & Safeguarding Committee notes that a Fit & Active Barnet Partnership will be set up to deliver the outcomes within the framework.

1.2 Subsequent to Committee approval the draft Fit & Active Barnet Framework 2016 – 2021 was uploaded to the London Borough of Barnet (LBB) consultation portal Engage Barnet in October 2016 to commence the public consultation process.

1.3 In order to encourage feedback throughout the consultation period, the following communication methods were used to raise awareness and promote responses;

External

- Press release
- Social media updates i.e. Twitter and Facebook
- Emails to partners and stakeholders
- E-newsletter via the Barnet Sport Clubs and Community Database
- London Borough of Barnet website

Internal

- Barnet First Team e-news
- Email

2. REASONS FOR RECOMMENDATIONS

Draft Fit & Active Barnet Framework Consultation Summary

- 2.1 The consultation process ran from 6th October to the 13th November 2016. In addition to the draft Fit & Active Barnet Framework, a survey (hosted via Survey Monkey) accompanied the consultation. This survey comprised of 21 structured questions to seek feedback on the vision, outcomes and proposed commitments set out within the Framework.
- 2.2 The draft Fit and Active Barnet Framework 2016 -2021, including the supporting survey was made available in printed format, on request throughout the consultation period. There were no requests received during this period. All standard monitoring questions were also applied to capture and measure respondents' demographic characteristics.
- 2.3 The consultation enabled participation amongst partners, stakeholders, community groups, voluntary and community sector and residents. A total of 60 individuals participated in the consultation; 56 of whom completed the on-line survey and four who submitted comments via the sport@barnet.gov.uk mailbox.
- 2.4 All feedback received via Engage Barnet and submitted via email was reviewed and considered by the Sport and Physical Activity team. This information is reflected in the Consultation Summary Report (Appendix 2) which includes feedback and the accompanying response.
- 2.5 On average 75% of respondents who completed the survey strongly agreed / tended to agree with vision, outcomes and proposed commitments within the draft Fit & Active Barnet Framework 2016 -2021. An average of 8% of respondents strongly disagreed / tended to disagree.
- 2.6 Comments relating to the redevelopment of Barnet Copthall Leisure Centre and development of New Barnet Leisure Centre, appeared to have direct impact on the percentage scores cited above. Whilst Barnet leisure facilities play an important role within the Fit & Active Barnet Framework, it is important to note that the Framework considers all elements of sport and physical activity. This includes an approach to commissioning, programmes, the built environment, assets and open space to increase opportunities for physical activity and improve wellbeing.
- 2.7 Following the consultation period, all comments were reviewed and assessed by the sport and physical activity team, resulting in minor amendments to refine a final Fit & Active Barnet Framework. This includes;
 - Enhanced reference to the importance of sporting pathways for young people.
 - Improved reference to the involvement and importance of the voluntary and community sector in providing sport and physical activity opportunities, to assist in achieving the vision of *creating a more active and healthy borough*.

- Disability sport in relation to children and young people has been incorporated into the 'Children & Young People' section.
- The 'Working Together' section has been developed to include the importance of learning from others and utilising evidenced based interventions.
- Enhanced focus on supporting and influencing existing networks and plans to improve active travel (cycling and walking).
- Reference to the benefits of sport and physical activity has on our mental wellbeing has been enhanced.
- Reference to the Sport England funded SHAPE programme (project aimed at engaging young people aged 14 – 19 in Burnt Oak and Colindale) has been reviewed to encompass sustainability and exploration of expanding the project borough wide through shared learning.

2.8 A significant proportion of feedback comments (highlighted in Appendix 2) related to content already contained within the Framework or covered within another Council strategy to which the Fit & Active Barnet Framework has provided alignment. All results of the consultation exercise have been published and are available via Engage Barnet 'we asked, you said, we did'.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

3.1 No alternative options are considered for recommendation.

4. POST DECISION IMPLEMENTATION

4.1 Following approval of the recommendations contained within this report, the Fit & Active Barnet Framework 2016-2021 will be made a publically available on the Barnet website for all stakeholders, community groups, organisations and residents to access and utilise.

4.2 The sport and physical activity team will mobilise the establishment of a Fit & Active Barnet Partnership by March 2017, which will assume a strategic role to guide the delivery of the FAB Framework.

5. IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

5.1.1 The Fit and Active Barnet Framework 2016-2021 aligns with the Corporate Plan 2015-2020, which is based on the core principles of fairness, responsibility and opportunity to make sure Barnet is a place:

- Of opportunity, where people can further their quality of life

- Where people are helped to help themselves, recognising that prevention is better than cure
- Where responsibility is shared, fairly, and
- Where services are delivered efficiently to get value for money for the taxpayer

5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)

- 5.2.1 Through a partnership approach the Fit and Active Barnet Framework 2016-2021 seeks to ensure improved use of resources and partnership working. It is envisaged that adoption of the Fit & Active Barnet Framework and formation of a Fit & Active Barnet Partnership will assist with unlocking investment opportunities and funding for the borough. This will be explored through strategic networks and a range of bodies (e.g. National Governing Bodies of Sport, National Lottery Awards).

5.3 Social Value

- 5.3.1 The Fit & Active Barnet Framework emphasises the importance of the five outcomes identified below which are also defined within the Government Strategy- Sporting Future; A New Strategy for An Active Nation. These are;

- Physical wellbeing
- Mental wellbeing
- Individual development
- Social and community development
- Economic development

- 5.3.2 A partnership approach to co-ordination and delivery will also ensure that services accessible are of a high quality and value for money, maximising resources to support residents.

5.4 Legal and Constitutional References

- 5.4.1 Annex A of Responsibility for Functions (outlined in the Council's Constitution) states that the Adults and Safeguarding Committee is responsible for the following: working with partners on the Health and Wellbeing Board to ensure that social care interventions are effectively and seamlessly joined up with public health and healthcare, and promote the Health and Well-being Strategy and its associated sub strategies.

- 5.4.2 The Council has statutory duties to promote the wellbeing and health of its residents for example in the Care Act 2014, Children & Young People Act.

5.5 Risk Management

- 5.5.1 Following a two stage consultation process has enabled the Fit & Active Barnet Framework to be developed with an approach that reflects and responds to demonstrated need within the borough.

5.5.2 The establishment of a Fit & Active Partnership Board will help manage and mitigate any risk associated with delivery of the strategic objectives.

5.5.3 Measurements of success and Key Performance Indicators will be monitored via the Fit & Active Partnership Board as agreed.

5.6 Equalities and Diversity

5.7 An Equalities Impact Assessment (EIA) was undertaken in October – November 2016, which can be located in Appendix 3.

5.8 The EIA assessment identified that the overall intended impact of the Fit and Active Barnet Framework 2016-2021 is positive, as the objectives and commitments contained within the Framework are to increase participation across all population groups, ensuring a reflection of the diverse needs of Barnet residents.

5.9 The Fit and Active Barnet Framework was developed through the utilisation of available insight i.e. JSNA and Sport England's Active People Survey, and alignment with key strategies and plans has guided a focus on key priority groups and protected characteristics.

5.10 Consultation and Engagement

5.8.1 The Fit & Active Framework 2016-2021 has been established via a two stage engagement and consultation process:

Stage 1 – workshops with partners and stakeholders to shape the vision, outcomes and proposed commitments. This included but was not limited to partner and stakeholder representation from London Sport, Barnet and Harrow Public Health, National Governing Bodies of Sport, Sports Organisations and the Voluntary and Community sector.

Stage 2 – public consultation via Engage Barnet. This process sought feedback from residents and all groups on the proposed vision, outcomes and commitments contained within the Framework.

5.8.2 It is anticipated that the approach outlined within the Fit & Active Barnet Framework will provide a platform for partners to deliver their own respective strategies, action plans, projects and interventions that have a clear alignment to this framework.

5.11 Insight

5.11.1 The development of the Fit & Active Barnet Framework was characterised by utilising a range of insight available which included but was not limited to;

- Barnet Joint Strategic Needs Assessment
- Sport England Local Sport Profile Tool

- Sport England Market Segmentation
- London Sport Borough Insight Report

5.11.2 The Fit & Active Barnet Framework reflects information gathered on local, regional and national insight. (Listed in Appendix 1).

6. BACKGROUND PAPERS

6.1 Adults and Safeguarding Committee, 19th September 2016, item 10 (Barnet Sport and Physical Activity Strategy: Fit & Active Barnet Framework 2016-2021):

<https://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=698&MId=8673&Ver=4>

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FIT & ACTIVE BARNET FRAMEWORK

2016 – 2021



www.barnet.gov.uk

BARNET
LONDON BOROUGH

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Foreword

The benefits of keeping fit and active are well documented for both our physical and mental health and wellbeing.

Interestingly, our research shows that at least 50 per cent of our adult population (16+) do not take part in any sport or physical activity, with 38.6 per cent of 10–11 year olds experiencing problems with excess weight.

Here in Barnet we have a thriving sporting structure and plenty of green space to help our residents live an active lifestyle, and I am confident we can harness the power of sport and physical activity to create a positive change to our health and wellbeing.

While our ambition is clear our vision can only be achieved by working closely with our partners and local sporting groups, as well as residents who are at the heart of our services.

This five year Fit and Active Barnet framework goes beyond the realm of sport in its traditional sense and explores the need for physical activity to be incorporated into everything we do from the work being carried out by our Public Health teams through to designing our built environment. This approach, combined with a greater collaboration with our partners, will help to provide the foundation for innovation and ultimately contribute towards us succeeding in bringing about positive change.

This journey will not be without its challenges, and our response to providing solutions through a connected vision will help us maximise opportunities and deliver meaningful outcomes for our residents.

Effective partnership working has seen adult (16+) participation in sport increase by 3% between 2014 – 2016 (37.2% to 40.2% as measured by Sport England's Active People Survey).



I am confident that a joined up approach working via the Fit & Active Barnet Partnership will help to drive participation and opportunities further for the benefit of all residents in the borough.

A handwritten signature in black ink that reads "Sachin Rajput".

Councillor Sachin Rajput
Chairman, Adults and Safeguarding Committee

Why do we need a Fit & Active Barnet Framework?

This document sets out a local framework for the development of sport and physical activity in Barnet over the next five years, underpinned by a vision to ‘create a more active and healthy borough’.

As our population becomes increasingly sedentary, physical activity is importantly recognised as an essential component of our wellbeing; providing a positive contribution to our physical, mental and emotional health. In order to challenge and address inactivity, there is a clear requirement to establish an environment that supports:

- identification of opportunities to increase participation
- development of sporting pathways
- a shared vision and strategic direction, working in partnership to effect change and continuous improvement
- reducing inequalities and promote equality
- access to funding to deliver sustainable initiatives
- innovation by looking at less traditional forms of engagement and delivery, helping to make access to sport and physical activity an easy, practical and attractive choice
- developing greater community capacity; increasing community responsibility and opportunities for residents to design services with us.



There is an active network of organisations and providers within the borough, and it is anticipated that the approach outlined within this document will support in providing a platform for partners to deliver their own respective strategies, action plans, projects and interventions that have a clear alignment and synergy to this framework.

We want to encourage new partnerships and renew a commitment to develop and improve opportunities in sport and physical activity at all levels across the borough. The result of this will provide a joined up approach that responds directly to local need and priorities.

We anticipate that this will be achieved through improved use of resources, commissioning opportunities and unlocking investment.

A future role of the Council will focus on:

- the alignment of focus via Council Strategies and Commissioning Plans
- creating conditions for stakeholders, community groups and organisations

to effectively work in partnership to achieve a shared vision

- providing insight, intelligence and support to facilitate opportunities
- communicate and promote the value and benefit of sport & physical activity
- foster an accessible, inclusive and attractive approach to participate in activity.



This framework has been developed via a two stage engagement process:

- Stage 1 – workshops with partners and stakeholders, facilitated by London Sport, to shape the vision, outcomes and proposed commitments within the framework. This included but was not limited to partner and stakeholder representation from Barnet and Harrow Public Health, National Governing Bodies of Sport and the Voluntary and Community sector.
- Stage 2 – public consultation via London Borough of Barnet's consultation platform, Engage Barnet. This process sought feedback from partners, stakeholders, residents and community groups etc. on the proposed vision, outcomes and commitments.

Sport and physical activity has a wide reaching impact, enabling a range of opportunities to be delivered through a diverse offer. Our direction is guided through recognition of national, regional and local policy which reinforces a Barnet approach (see page 48 for a full reading list).

The launch of a new Government Strategy: A Sporting Nation (December 2015) and the Sport England Strategy; Towards an Active Nation (2016 – 2021), provide key principles that interact and correlate with the Barnet Corporate Plan (2015 – 2020) which strives to ensure that the borough is the place of opportunity, where people are helped to help themselves, where responsibility is shared and where high quality services are delivered effectively and at low cost to the taxpayer.

The relationship of the Barnet Corporate Plan outcomes is connected to a national vision to encourage 'more people from every background regularly and meaningfully engaging in sport and physical activity' in addition to supporting an approach to create 'a more productive, sustainable and responsible sport sector' – Sport England; Towards an Active Nation (2016 – 2021).



Fit & Active Barnet Framework outcomes

In order to achieve our vision of creating a more active and healthy borough, we want to maximise engagement and work collectively towards a shared ambition. The Barnet Health & Wellbeing Strategy 2015 – 2020 identified four outcomes for sport and physical activity, which form the basis of this framework.

Outcome 1



Improve and enhance Barnet leisure facilities, ensuring that opportunities are accessible for all residents.

Outcome 3



Facilitate partnerships and develop opportunities that demonstrate a commitment to embed an 'active habit'.

Outcome 2



Advocate investment and innovative policies to support the delivery of high quality, accessible facilities and delivery of services.

Outcome 4



Target those who do not traditionally engage, increasing participation amongst under-represented groups.

Understanding available insight and intelligence will enable us to shape an approach that engages and captivates residents in a targeted way. This will assist in reducing inequalities and responding to the diverse needs of the following under-represented groups:

- children and young people
- older adults
- women and girls
- disabled people
- black and minority ethnic groups (BME).



Insight: Barnet at a glance

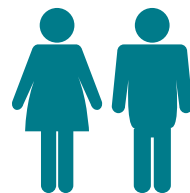
Barnet has an increasing and aging population; and is now the largest borough in London with 376,265 residents. The highest rates of population growth are forecast to occur around the planned regeneration works in the west of the borough, with over 113% growth in Golders Green and 56% in Colindale by 2030.

The west of the borough generally has the highest concentration of deprivation in the wards of Colindale, West Hendon and Burnt Oak.



There are pockets of deprivation across the borough such as the Strawberry Vale estate in East Finchley and the Dollis Valley estate in Underhill.

Joint Strategic Needs Assessment, 2015 – 2020



The percentage of adults with excess weight (overweight and obese) is

55.7%

Joint Strategic Needs Assessment, 2015 – 2020



For children aged 4 – 5 years, the percentage of excess weight (overweight and obese) is

21%

which is lower than the London average at 23.1%.

Excess weight for children aged 10 – 11 years is currently

34.4%

which is lower than the London average of 37.6%.

Joint Strategic Needs Assessment, 2015 – 2020





Barnet's population is becoming more diverse, driven predominantly by the natural change in the population.

The highest proportion of the population from white ethnic backgrounds are found in the 90 years and over age group:

93.3%,



whereas the highest proportion of people from BME groups are found in the 0 – 4 age group:

55.4%.



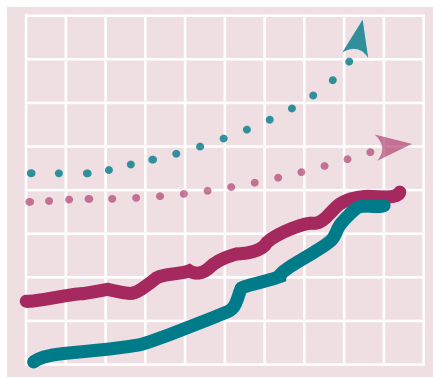
The wards of Colindale, Burnt Oak and West Hendon have populations of whom more than 50% are from BME backgrounds.

Joint Strategic Needs Assessment, 2015 – 2020



Coronary Heart Disease is the primary cause of death amongst men and women.

As male life expectancy continues to converge with that of women it is likely that the prevalence of some long term conditions will increase in men faster than women.



Joint Strategic Needs Assessment, 2015 – 2020

There is no definitive data on the amount of people with a disability living within the borough, although research undertaken by Oxford Brookes University provides the following estimates:

Moderate or severe learning disabilities



1,507



Moderate physical disability

16,795



Severe physical disability

4,749



Mental health problems

16,523

Joint Strategic Needs Assessment, 2015 – 2020



Recommended sport and physical activity guidelines

In July 2011 the four UK Chief Medical Officers (CMOs) published physical activity guidelines in a joint CMO report 'Start Active, Stay Active' covering early years, children and young people, adults and older adults.

Physical Activity does not refer in its entirety to sport; and is wholly inclusive of all forms of activity (play, dancing, walking, and gardening).

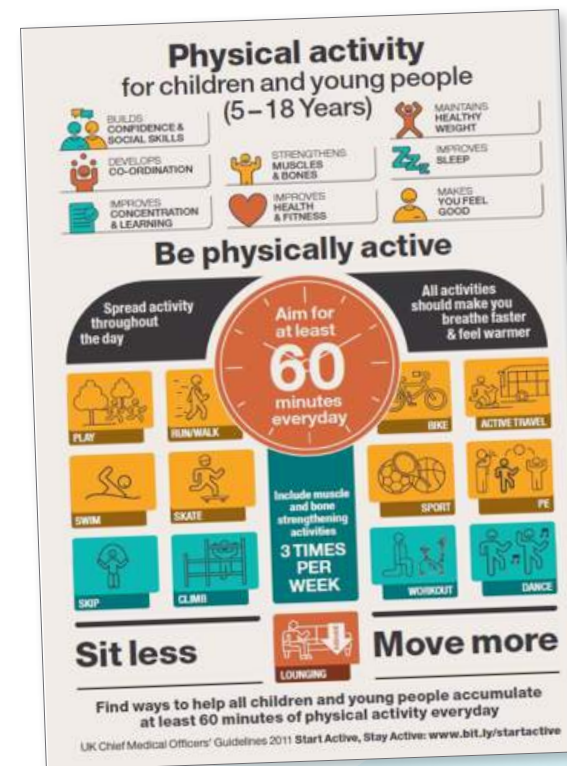
Early experiences often shape our feelings, which can discourage activity, resulting in little or no interest to participate (at any stage in life). The benefits of leading an active lifestyle can improve our mental wellbeing, confidence, interpersonal skills and sense of achievement. In Barnet it is important that we promote this message, creating the awareness of these benefits.

Insight tells us that over the past five years adult (16+) participation in sport has appeared to be fairly static in Barnet. The most recently available Sport England Active People Survey (APS10) presents an increase in participation since

APS9, however major underlying disparities still exist such as:

- the number of women participating in sport and physical activity is low, in addition to those who are included within low income groups and from BME Groups

- an insufficient sample size in respect of disability participation (local and London region) highlights an important requirement to promote accessibility and alignment of opportunities for disabled people.



Insight: Sport and physical activity in Barnet



37.2% (APS9)
to
40.2% (APS10)

of the adult population aged 16+ participate
in sport at least once a week



22.2% (APS9)
to
22.8% (APS10)

of the adult population aged 16+
participate in sport for 30 mins or more
three times a week.

Sport England Active People Survey 9 & 10

The percentage of the adult (16+) population achieving the recommended levels of
physical activity set out by the Chief Medical Officer:

active

>150 minutes a week

58.5%

insufficiently

active

30–149 minutes a week

14.3%

inactive

0–29 minutes a week

27.2%

Sport England Active People Survey



53.5%

of the adult (16+) population do
not currently participate in sport.

Sport England Active People Survey 10



Insight: Sport and physical activity in Barnet

Inequalities are apparent as current research demonstrates

23.2%

of men (16+) participate
in sport three times
or more per week
(for 30 mins or more)



12.6%

compared to only
of women (16+)



Sport England Active People Survey 10

Number of all adults (16+) wanting
to do more sport



61.5%

Sport England Active People Survey 10



37.3%

of adults (16+) from BME
communities participate in sport
once or more per week
(30mins or more) compared to



42.0%

from white communities

Sport England Active People Survey 10



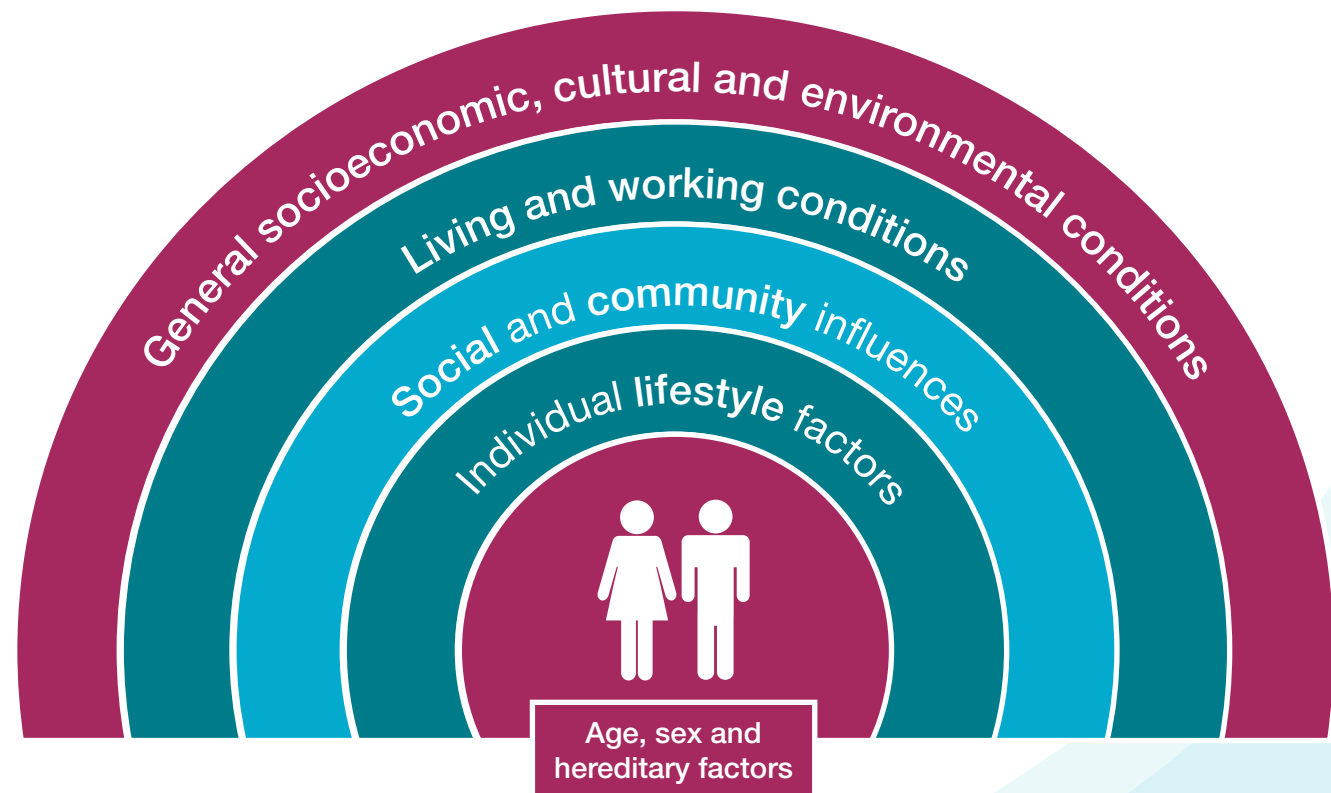
Barriers and motivators to participation

There are numerous barriers to individuals participating in sport and physical activity, which include but are not limited to:

- school pressures
- work
- transport
- cultural and language barriers
- access to local facilities
- health
- self esteem
- cost.

The approach we take to address barriers and tackle inequalities will rely on access to environments at an appropriate cost. This can support in achieving a variety of wider social outcomes, including:

- physical wellbeing
- mental wellbeing
- individual development
- social and community development
- economic development.



A Barnet approach to sport and physical activity

As public sector resource faces significant pressure, the importance of working more collaboratively to maximise opportunities and ensure sustainability is vital.

The Local Authority will focus on strategic facilitation to improve wellbeing, which will refocus practical aspects of service delivery. This will mean working with stakeholders and partners to create an insight orientated approach that guides and enables a sustainable sport and physical activity infrastructure.

Across Barnet there are varied and vibrant opportunities for all residents to lead an active and healthy lifestyle. Delivering improvement and achieving success will rely on creating a thriving network and offer delivered through relationships. Together we need to utilise resources in an efficient manner to ensure that capacity remains to support an offer.

Future success will rely on the implementation of a 'Fit & Active Barnet Partnership', which will govern and bring this framework to life; establishing a foundation to maximise opportunities that respond to demand, avoid duplication of services, identify and address gaps, demonstrate value for money and increase participation through a multi-agency approach.

Barnet has a volume of assets (education, community and private) that have the ability to support a diverse offering within the borough. Facilities create our local infrastructure, shape experiences and enhance a pathway from physical activity sport. We want to create a more accessible environments, working with a range of organisations to expand and enhance provision. We also want to explore the benefits and opportunities to co-locate services.

To achieve success, emphasis will be focused on relationships that can inspire residents to lead healthier lifestyles.



It is important that we aid behaviour change; encouraging residents to spend their 'leisure time' being active rather than opting for sedentary interests.

Physical activity can provide a response to a rising population to ensure that the long term impact on public services is less strained. Recognising that at different life stages interests change and drop out occurs; we need to challenge social and lifestyle habits. This emphasises a need to ensure that opportunities for participation are accessible, affordable, high quality and relevant to the residents which they serve.

The following sections of this framework provide an overview of how the vision and outcomes can be achieved through alignment against the Local Authority Commissioning areas of:

- Public Health
- Growth & Development
- Environment
- Children & Young People
- Adults & Health.



Public Health



Physical activity is one of the most basic human functions, yet inactivity has been identified as the fourth leading risk factor for

global mortality

causing an estimated

3.2million deaths.

In Barnet, health costs of physical inactivity currently costs £6.7 million, equating to approximately £1.9 million per 100,000 of our population.

Sport England Local Sport Profile

Our approach and the action we take locally requires focus on a varied pathway for all ages and abilities.

In 2014, Public Health England launched its national strategy for physical activity, Everybody Active Every Day, which outlined five key steps for local action:

- every child to enjoy & have skills to be active
- safe, attractive & inclusive active living environments
- make every contact count in public & voluntary sectors
- lead by example in public sector workspace
- evaluate and share 'what works'.

These steps are aligned with Barnet Public Health principles, which recognise the importance of early intervention and prevention to manage demand and deliver better outcomes. As our health and social care system faces the challenge of increasing demand and limited resources, it also requires a need to innovate and transform the way services are delivered.



For physical activity and sport highlighting the importance of preventative activities is important, whilst continuing to develop relationships with key partners including the Clinical Commissioning Group and health professionals to demonstrate investment in physical activity is an efficient and effective option to:

- give children the best start in life
- support healthy lifestyles and self-care
- reduce substance misuse and smoking
- promote the wellbeing, resilience and capacity of individuals and communities
- support employment
- create healthy places.

This approach demonstrates value of activity helping to build a case in Barnet to commission and invest in future opportunities.



In order for us to successfully increase participation levels and improve the health of Barnet residents we must better understand contributory factors and provide solutions to co-ordinate targeted interventions that prioritise:

- treatment of disease (such as heart disease, diabetes, cancer, obesity, depression and dementia)
- injuries from falls
- social care arising from loss of functional capacity and mobility in the community
- sickness absence from work and school
- loss of work skills through premature death or incapacity
- lower quality of life and mental wellbeing for individuals and carers.
- access to opportunities and facilities (inclusive of open spaces) that are fully inclusive and encompass a whole life course.

It is well documented that sport and physical activity has a positive impact on our health and wellbeing. In developing a Barnet approach, a diverse offer that explores non-traditional forms of activity is important to effectively support and address health disparities and sedentary behaviour.

It is also important to recognise the role that employers can make to support the health and wellbeing of their workforce. Investing in the health of employees provides business benefits such as reduced sickness absence, increased loyalty and better staff retention. Promoting workplace health solutions will support in reducing behaviours and trends associated with a sedentary lifestyle.



Case Study – Workforce Health

The London Healthy Workplace Charter is a self-assessment framework that recognises and rewards employers for investing in workplace health and wellbeing. It provides a series of standards for workplaces to meet in order to guide them to creating a health-enhancing workplace.

London Borough of Barnet achieved the Healthy Workplace Charter at 'Excellence' level in Oct 2015 and are the only organisation to achieve all three levels of the Charter in one year; commitment, achievement and excellence.

Led and coordinated through a collaborative approach between London Borough of Barnet and Barnet and Harrow Public Health, a range of weekly activities are available to staff including running and walking groups and yoga classes. Staff can also access advice and guidance throughout the year such as health MOT's and looking after your mental health etc.

An inaugural Healthy Living and Sports event was held for staff in June 2016 which see over 170 members of staff compete in an afternoon of fun sports day activities.

An analysis completed on sickness absence demonstrated that following the implementation of the Healthy Workplace Charter, absence occurrences related to stress, mental health and 'other musculoskeletal' illnesses have reduced.



Football and rounders staff sports event

Monday 26 September, 3–6pm
New Southgate Recreation Ground, Oakleigh Road South, N11

Sign up your team now for football and rounders tournaments

- five-a-side for football and nine-a-side for rounders
- check your emails from First Team for how to register your team.

Check out the intranet and First Team for more information.

BARNET
LONDON BOROUGH



To support Public Health priorities a Fit & Active Barnet Partnership will:

- integrate public health outcomes within a new Barnet leisure management contract, effective from 2018
- support and influence health intervention pathways, harnessing the relationship between health and activity (e.g. post health check, children & young people healthy weight pathway, weight management and cardio vascular disease)
- embed a commitment to ensure that delivery partners and stakeholders are aligned to and fulfilling key policy that directly impacts participants and the quality of services received i.e. Mental Health Charter for Sport and Recreation, Barnet Youth Charter, Barnet Dementia Manifesto and the emerging Governance Code for Sport in the UK
- support promotion and implementation of the Healthy Workplace Charter across Barnet through active signposting
- ensure brief advice on physical activity is incorporated into services for groups that are particularly likely to be inactive (utilising key guidance and available resources)
- align with and fully embrace key government and national targeted campaigns to get the nation moving more i.e. This Girl Can, One You and Change 4 Life
- encourage an innovative approach that seeks to increase participation via less traditional forms of delivery to reach a wider demographic and address barriers to participation i.e. parkrun.



Growth and Development

Our daily environments have changed significantly in recent years and maintaining sufficient levels of physical activity is becoming more and more challenging. The causes of physical inactivity and disengagement in sport can be largely attributed to a number of environmental factors, which have made daily living and working environments increasingly sedentary. The distance between homes, workplaces, shops and places for leisure activities has increased the use of cars which has led to a decline in walking and cycling. Inevitably this is a major factor in reducing levels of physical activity and increased obesity.

Investment in walking and cycling infrastructure or behaviour change programmes can be expected to deliver low cost, high-value dividends for health and the economy.



In January 2015, walking in Barnet had risen by

↑3%

(from 24.9% in January 2014), clearly representing an interest to participate in specific walking initiatives or completion of journeys by foot.

Joint Strategic Needs Assessment, 2015 – 2020



Evidence suggests switching to active travel from short motor vehicle trips alone could save

£17bn

NHS costs over a 20 year period, with the largest cost saving from the reduction in the expected number of cases of type 2 diabetes (£9bn).

Joint Strategic Needs Assessment, 2015 – 2020

The 2012 Local Plan (Core Strategy) for Barnet identified three objectives that can be addressed via sustainable travel solutions:

- to provide safe, effective and efficient travel
- to promote strong and cohesive communities
- to promote healthy living and well-being.

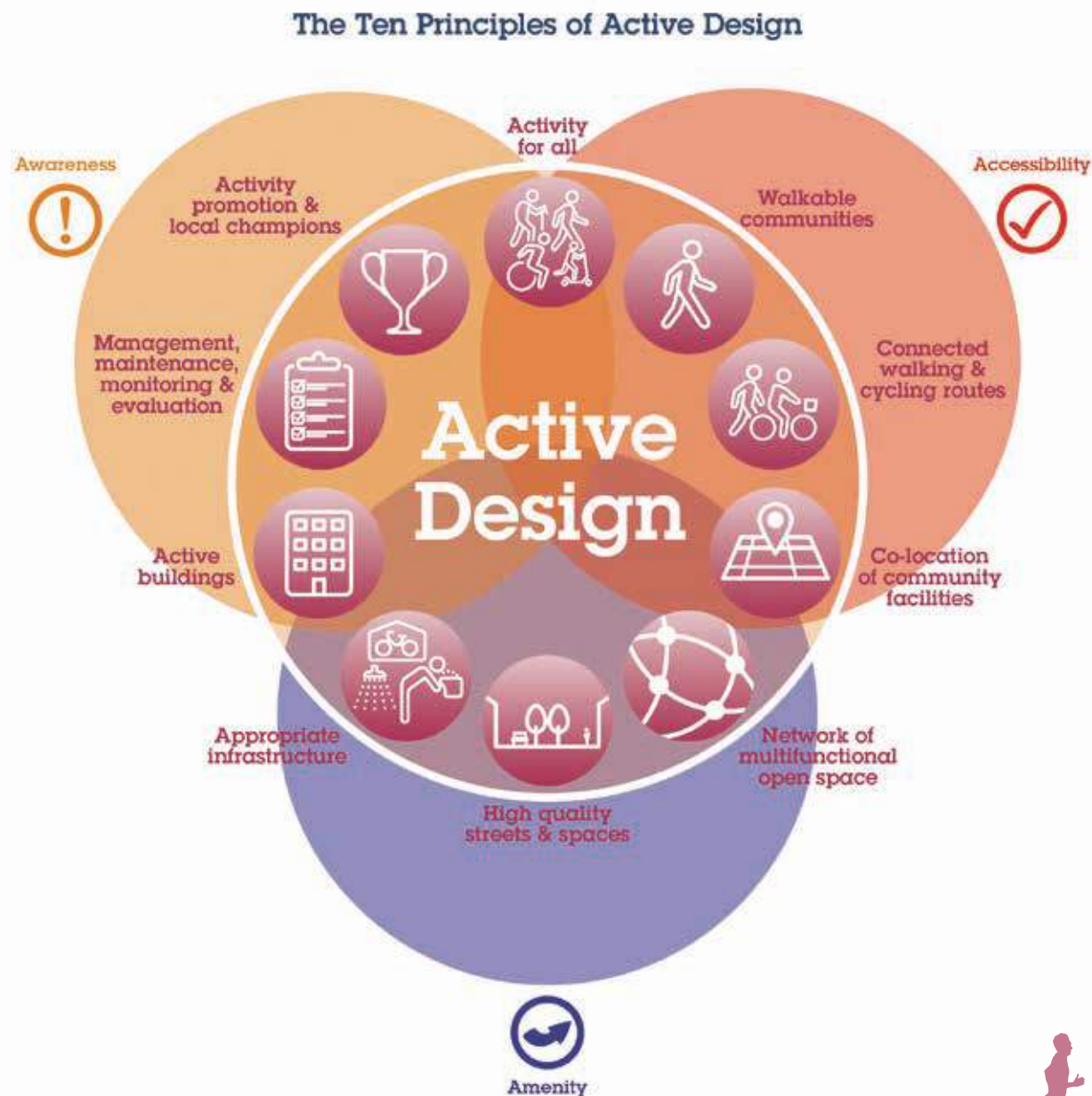
A future approach in Barnet must acknowledge the value of sustainable travel, and work with partners such as Transport for London and regeneration partners to improve connectivity and ensure local facilities and services are easily accessible on foot, by bicycle and by other modes of transport.

Barnet's Sustainable School Travel and Transport Strategy (2007) sets out a vision to keep the borough clean, green and safe through promoting more environmentally friendly travel. School Travel Plans have been implemented in schools across the borough, with 98 schools achieving the Sustainable Travel, Active, Responsible, Safe (STARS) mark in the 2015/2016 academic year.



Implementation of these plans has demonstrated a significant decrease in the number of car journeys (to and from school). These plans also strive to improve the health of children and young people (and their parents and guardians) by promoting alternative modes of transport such as walking and cycling.

Everybody Active, Everyday (2014) and Sport England's 'Active Design Principles' emphasise that by developing 'active environments', through thoughtful urban design, understanding land use patterns, and creating transportation systems, we can help to create active, healthier and more liveable communities. Crucially in order to improve accessibility, amenity and awareness; the local authority, partners and organisations must consider how to best optimise the ten principles to best effect opportunity. We know Barnet will become increasingly diverse, driven predominantly by natural change in the existing population and the increased ward population projections that directly correlate with the planned regeneration developments in the west of the Borough (Colindale, Burnt Oak, West Hendon & Brent Cross).



Active Design Principles – Sport England, Active Design; Planning for health and wellbeing through sport and physical activity (Oct 2015)



One of the key challenges will be meeting the diverse needs of growing communities, involving the local community and experts at various stages of development will enable greater maximisation of opportunity.

The London Plan (2015) identifies Barnet as an area for intensification where planning decisions should 'seek to optimise residential and non-residential output, provide necessary social and other infrastructure to sustain growth, and where appropriate, contain a mix of uses'. Sport and physical activity in Barnet must recognise the scale and demand that growth generates, and work strategically with planning agents to review opportunities to co-locate services and create community hubs. This will make it easier for families to be active in the same place, provide usage all year round and offer cost effective operating solutions. We must also ensure that future planning applications and regeneration opportunities prioritise the need for all residents to be physically active as part of their daily life.

In broad terms, this will mean where feasible, influencing and unlocking potential Community Investment Levy and Section 106 monies to support sport and physical activity in Barnet.

Creating a sustainable sports sector will endeavour to support and grow our local economy. The Entrepreneurial Barnet Strategy (2015-20) considers ways in which the success of the Barnet economy can be supported by concerted action by the Council and its partners.

In order for Barnet to build on creating a diverse and varied workforce, we must better utilise insight and networks to understand skills required, capability and capacity to develop and forge relationships with employers.

It is estimated

£133.4m

is directly attributed to the economy of Barnet through sport, with approximately with

3,580 jobs

(full time equivalent) within the local sports sector.

Sport England Local Sport Profile



Case Study – SHAPE'ing a New Workforce

Funded by Sport England and Barnet & Harrow Public Health, SHAPE is a three year programme (2014 – 2017) established to support young people aged 14 – 19 to access sport and physical activity opportunities in the wards of Burnt Oak and Colindale.

Over 1,500 young people have engaged in the programme to date (Nov 16), accessing weekly sports sessions on offer including; gym, basketball, street dance and football. In addition to increasing activity levels amongst young people, the programme has supported in excess of 50 young people to broaden their horizons by obtaining a variety of sports qualifications.

Jude* is a young person from the Grahame Park estate (Colindale) that has benefitted significantly from engagement in the SHAPE programme. At risk of becoming disengaged, Jude was offered the opportunity to complete a Junior Sports Leadership Award. Completion of this qualification enabled Jude to develop his passion for sport, skills and confidence, whilst providing a positive diversionary activity. Through a multi-agency approach between the SHAPE team, Youth and Family Service and Middlesex University, Jude is now being supported to complete his Level 2 Fitness qualification, helping to enhance his future career prospects and opportunities.

The success of the SHAPE programme in increasing participation and positively influencing wider community outcomes was recognised in 2016 with the project being longlisted from 600 national applications to the National Lottery Awards; best project of the year category.

For more information on the SHAPE programme please visit www.barnet.gov.uk/shape

*participant name not disclosed for confidentiality reasons.



The importance of volunteering in sport and physical activity is invaluable, and traditionally has been seen as an enabler for others to play sport whilst growing activity from grassroots level. Sport England; Towards an Active Nation (2016) outlines a commitment to look at volunteering through the eyes of the volunteer; better connecting benefits alongside the health and wellbeing of an individual. This is a refreshed approach which will also require recognition that modern day life can often make volunteering difficult.

A further

£233.7m

is attributed through the contribution that sport makes to volunteering, health service and visitors into the area.

Sport England Local Sport Profile

In Barnet, this will require a collaborative approach to:

- provide access to high quality and diverse volunteering opportunities that fulfil personal needs, enable utilisation of skills and the development of new skills and experiences
- adopt an innovative approach to volunteering, to ensure community benefit is at the very core
- establish new relationships with residents and the voluntary and community sector (VCS) that enable independence and resilience, encouraging greater responsibility for sport and physical activity in their local areas
- encourage and support the VCS with utilising available tools and training such as Club Matters and 'Join In' to increase their volunteering offer and develop capacity to engage and support volunteers.



Achievement of this approach will contribute to the creation of a robust sporting voluntary sector in Barnet that will:

- tackle social isolation and engage those most vulnerable
- support people affected by welfare reform and/or on-going poverty
- get more people proactively engaged in developing and maintaining their local areas
- create opportunities to work with faith groups, promoting stronger relationships and opportunities to mobilise higher levels of volunteering that will enhance the local workforce.

12.7%

of Barnet's adult population (16+) volunteer in sport.

Sport England Local Sport Profile



Case Study – parkrun Barnet

From beginners to seasoned athletes, parkrun at Oakhill Park offers Barnet's residents the opportunity to participate in a free timed 5km run every Saturday at 9am. Led entirely by volunteers and established in 2011 a staggering 3,102 individuals have participated in the weekly run, with an average of 82.6 runners per week. Clocking up a distance of 107,750km the runners have collectively run to Sidney, Australia and back again three times!*

For more information on Barnet parkrun visit www.parkrun.org.uk/oak-hill/

*Stats recorded Nov 2016



To support Growth and Development priorities a Fit & Active Barnet Partnership will:

- identify opportunities for co-location and community hubs to widen access and maximise use of local facilities and open spaces
- encourage and maximise the use of sports facilities during and outside of school hours through management arrangements, leases and robust business models
- through the planning process, identify opportunities to invest in sport and physical activity in Barnet e.g. S106 monies, Community Investment Levy and Sport England's Strategic Investment fund (or similar)
- influence planners and key policy makers to build and promote healthier and more active communities within new developments and regeneration schemes. This also includes maximising the use of way finding signage and challenging the presence of 'no ball games' signs
- enable, promote and support plans for active travel across Barnet, through a strategic network which aims to increase use and break down barriers associated with alternative travel methods e.g. walking and cycling
- encourage the development of volunteering across the borough through strategic alignment to the Community Participation Strategy
- encourage high quality employment and work experience through the sports and physical activity sector to benefit local residents.



Environment

Barnet offers a unique blend of parks and open spaces, inclusive of indoor and outdoor sports facilities which will be future characterised by population growth. Much of the new regeneration will not provide individual residents or families with children access to private green space. This presents a demand and adaptation to ensure that green space facilities deliver a range of opportunities and future benefits. Our environments must ensure that facilities are accessible for all, with a particular focus on those from under-represented groups; lower socioeconomic status, BME groups with specific cultural requirements and those who have a disability.



Parks and open spaces are widely recognised for their health benefits as they can be used as a setting for casual or organised exercise.

In Barnet, parks and green spaces
are the most popular location for
exercising, accounting for over



50%

of exercise in the borough.

SPA Review Consultation, 2013

It is therefore important to maintain and improve the environment to encourage physical activity, particularly as the provision of facilities and spaces play a critical role in sustained resident engagement.

In 2016, Barnet commissioned a Playing Pitch Strategy, a report that will provide an updated evidence base which assesses sporting need and demand. A key driver of this strategy will ensure that outdoor sports facilities and pitches contribute to the Fit & Active Barnet vision. The Playing Pitch Strategy will inform an approach to decisions that provide a clear strategic focus to ensure that facilities can become financially sustainable in the future. The adoption of the Playing Pitch Strategy will present a strategic opportunity to work with National Governing Bodies and other funders to address a response in securing appropriate investment in Barnet to transform provision.

The Parks and Opens Spaces Strategy 2016, includes an ambition to create 'sport hub' sites, aimed at providing a geographical spread of sports facilities across the borough. The current areas that have been identified are:

- Barnet Copthall
- Barnet Playing Fields
- West Hendon Playing Fields.



The Open Spaces Strategy investment programme focuses on Barnet's largest and most important sites which are distributed evenly across the borough, with the ability to deliver significant health outcomes.

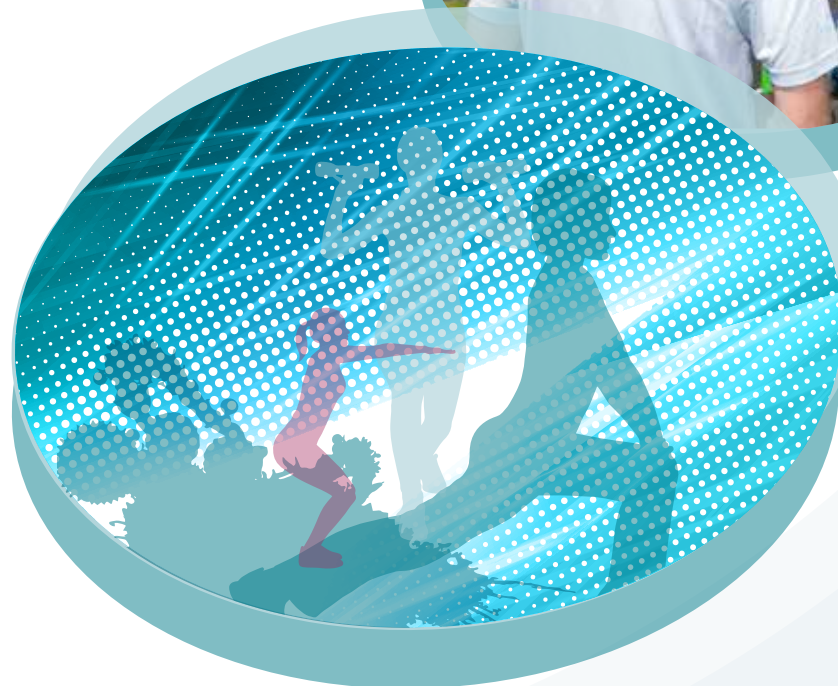
The conclusion of the Playing Pitch Strategy (early 2017) and the adoption of the Copthall Planning Brief (September 2016) will test this vision further and strategically align priorities.

Local spaces are equally significant in delivering positive outcomes across the borough and a place based approach, supported through resident and stakeholder input will support the development of future proposals such as:

- outdoor gyms
- marked and measured routes
- cycle routes
- green ways and green routes
- playground investment
- tennis courts.

The Local Authority will need to work with a range of stakeholders via the Fit & Active Barnet Partnership to guide a thematic approach.

As a collective we need to work towards facilitating improved utilisation of assets and venues (indoors and outdoors), which provide children, young people and adults with the ability to participate in safe activity in a variety of premises.



The importance of promoting social capital and supporting sport and physical activity through facilities is vital. Barnet has a strong community asset base on which to build and the Community Asset Strategy (2015) outlines an approach to make best use of these facilities to support community and voluntary organisations. The Community Asset Strategy has identified a need for the the Local Authority to implement the Community Benefit Asset Tool that demonstrates social impact. This process has emphasised the need for a co-operative approach, whilst encouraging the use of ClubMark and other available tools and resources to measure quality and community benefit.

Via a collaborative approach we need to ensure that the future development, management and access to facilities are the 'best fit' for the local communities that they serve, creating welcoming environments for all. This approach will help us to maximise opportunity and impact, in addition to creating investment opportunities.

Alignment with Sport England's 'Community Assets' guidance, provides an opportunity to support sports clubs and the VCS to take control of sports assets where there is a demonstrated strategic need and community benefit. This approach seeks to help clubs and the VCS to grow, develop new opportunities, secure their future and be more engaged.

There are five Local Authority owned leisure centres in Barnet, which have a crucial role to play to enhance access to provision. The Sport & Physical Activity (SPA) Project set up in 2012/13 provided an opportunity to evaluate how to deliver services differently, and address customers' needs through a more integrated approach, focusing on health and wellbeing outcomes in a manner that is sustainable. Proposed investment schemes at Barnet Copthall Leisure Centre and New Barnet Leisure Centre (a replacement of Church Farm Leisure Centre) will assist in creating and developing accessible destinations.



To support Environment priorities a Fit & Active Barnet Partnership will:

- explore opportunities to secure funding for improvements to infrastructure and participation
- ensure that findings of the sports and physical activity assessments i.e. Playing Pitch Strategy are taken into account in key plans and policies, including the Local Development Framework
- improve strategic alignment to ensure opportunities are concentrated and a range of facilities are utilised to sustain future activity; via the workplace, community, leisure, education, travel and open environment
- improve Barnet leisure facilities, including the redevelopment of Barnet Copthall Leisure Centre and a new leisure facility in Victoria Recreation Ground, New Barnet
- advocate for spaces and facilities used for physical activity to meet recommended safety standards for design, installation and maintenance e.g. DDA compliance
- promote the Inclusive Fitness Initiative Accreditation (or equivalent), supporting expansion beyond leisure facilities
- maximise and encourage use of strategic tools i.e. ClubMatters and Community Assets guidance to create a sustainable sport and physical activity offer
- facilitate appropriate community access arrangements.



Children and Young People

The Barnet Children and Young People Plan (2016 – 2020) has a clear aspiration to ‘create a family friendly borough’.

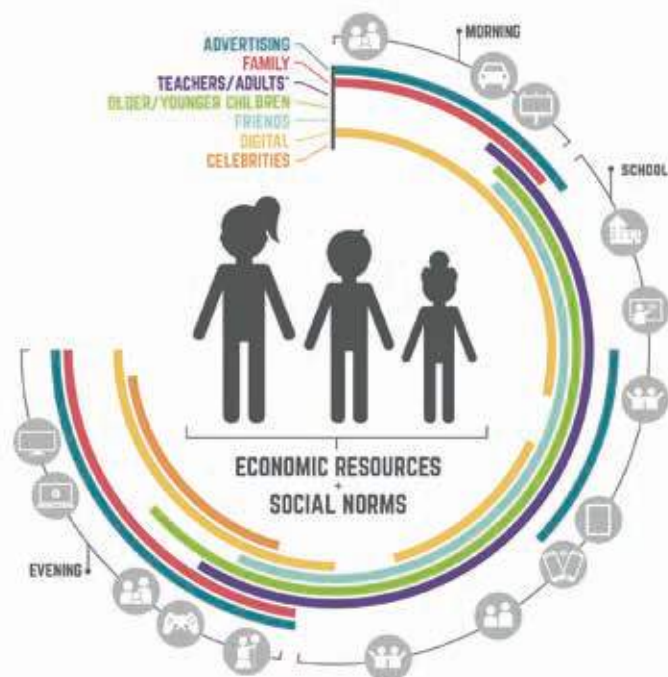
This means children and families can keep themselves safe, achieve their best, be active and healthy whilst having a say. As the recommendation for physical activity in children stresses upon promotion at an early age, and the extended remit of Sport England requires a focus on 5 years plus, the importance of local data will require a strategic and guided response through the Fit & Active Barnet Partnership to develop provision working with children’s centres, primary and secondary schools, further education and the community to meet need and improve outcomes for children and young people.

This also guides a requirement for a holistic approach giving equal consideration to influences within children and young people’s lives including; family, economic resources and social norms.

For example, the Healthy Children’s Centre programme is a universal preventative public health programme aimed at improving health outcomes of children and their families, from pregnancy through the first five years.

This programme provides an opportunity to strengthen the relationship between children’s centres and health partners in order to provide high-quality health services to improve children’s health outcomes. All professionals in early years settings and beyond are encouraged to embed Public Health England’s ‘All Our Health’ evidence-based principles in their practice, with particular focus on the childhood obesity and physical activity topics.

INFLUENCES ON CHILDREN ON A TYPICAL DAY



Sport England: Towards an active nation, Strategy 2016-2021 (page 20)

* Carers, group leaders, friends, parents, teachers
In addressing basic competences, we are particularly concerned with the confidence and motivation aspects of physical literacy rather than purely technical physical skills



The young Barnet population is estimated to grow by

6%

up to 2020 when it will reach

98,914

maintaining Barnet as the second highest population of children and young people in London.

Joint Strategic Needs Assessment, 2015 – 2020

By encouraging positive health behaviours and active play in early years, we are able to impact obesity levels and many other health outcomes before they are identified during the National Child Measurement Programme.

Healthy Schools London is a programme established in 2011 by the London Health Improvement Board; implemented to tackle child obesity levels within schools across the capital. Led by the Barnet & Harrow Public Health team, by Nov 2016 77 schools within the borough had achieved 'Healthy Schools' status at varying levels (7 Gold, 22 Silver, 48 Bronze) with 14 schools incorporating sport and physical activity at a targeted or universal level. With the programme due to come to an end in 2020 (subject to available funds) a collaborative approach is required if we want to maintain momentum and ensure schools are committed to improving the health and well-being of Barnet's young residents.

With 160 schools in the borough and in excess of 62,000 pupils, the education sector makes a significant contribution to sports development in Barnet by establishing early experiences that are essential in leading a healthy lifestyle. In order for us to sustain interest outside of education we must develop an effective connection between the education environment and the community landscape.

1 in 5

children in the UK are overweight or obese when they start primary school, this increases to

1 in 3

children by the time they leave primary school.

Joint Strategic Needs Assessment, 2015 – 2020

This relies on continuing to build relationships with the Barnet Partnership for School Sport, Further Education Colleges and Middlesex University to establish and sustain opportunities that facilitate and enable sporting potential.



The Barnet Children and Young People Plan stresses that “children are likely to find it easier to access support outside of the home, when they live in cohesive neighbourhoods with formal facilities that encourage participation and achievement.” It is vitally important to recognise the role of the VCS (to include sports clubs and organisations that provide a service to young people and their families) and the significant contribution they make to sports development in Barnet. Voluntary and community organisations often provide low cost, or free to the point of delivery services for young people.



An estimated

5,912 pupils

in Barnet have some form of Special Educational Need (SEN) with over

600 children and young people

registered as having a disability.

Almost

3,000 children and young people

are known to provide unpaid care for their parents or other family members, although this is likely to be an underestimate.

Barnet Children & Young People's Plan 2016 – 2020



Through enhanced partnerships and collaborative working we need support the sector to grow and diversify further to continue to achieve positive outcomes for young people in the borough. The growth of the number of children and young people in the borough, combined with financial pressures places a demand on specialist children's social care (notably health). Recognising that child poverty is entrenched in specific areas of Barnet (approx. 16% of children under 5 live in the 30% most deprived local super output areas), effective prevention and early intervention will assist to reduce impact on children and young people, their families and referrals to children's social care and other specialist services within health and the criminal justice system.



Documentation produced by Sport England validates the return on investment in sports programmes for 'at-risk' youths is estimated at £7.35 of social benefit for every £1 spent – delivering financial savings to police, the criminal justice system and the community.



1060

young people aged 11 – 25 supported to participate in sport since 2011 via Sportivate programmes (funded by Sport England).

Understanding the future role of sport in this environment and its potential to strengthen social networks and community identity is vital.

Over the past 5 years Barnet has seen investment via Sport England funding streams to support young people aged 11 – 25 to access sport and physical activity opportunities. Barnet has also continued

its commitment to support young residents to represent the borough at the annual London Youth Games competition.

Recognising the number of influences on children and young people's lives, in relation to lifestyle choices and variety of services accessed, there is a requirement to ensure that the model for delivery and pathways for progression (developmental and competitive) are clearly established.

This includes the requirement for a locality based approach to delivery that addresses a number of community and social needs, incorporates a range of VCS organisations and adopts a life course approach that considers family and intergenerational engagement. It is also fundamental that children and young people are engaged and involved in the commissioning process.

15 satellite clubs



established in Barnet engaging young people in sport and physical activity (funded by Sport England).

over 1500

young people aged 14 – 25 supported to participate in sport via the SHAPE programme* (2014 – 2017) and



over 50

young people supported with an accredited sports qualification.

*funded by Sport England and Barnet & Harrow Public Health

Delivery of

3

StreetGames Doorstep Sports Clubs.



over 300

young people represented Barnet at the 2016 London Youth Games, across 21 sports.

Case Study – Inspiring Barnet's Young Residents to Move More with the Mayors Golden KM

In the latter part of 2015 a multi-agency steering group consisting of representatives from London Borough of Barnet, Saracens Sports Foundation, Barnet & Harrow Public Health, Middlesex University and the Barnet Partnership for School Sport was established to implement the Mayors Golden Kilometre (MGKM) project.

The MGKM project is a behaviour change initiative that looks to address inactivity levels and rising levels of excess weight amongst young people by inspiring primary schools in the borough to incorporate more physical activity in to their school day (in addition to curriculum activity). The project encourages primary schools to facilitate pupils to walk, run, skip or jog a 1km route (approx. 15 minutes) around their school ground or a local park or open space every day.

The project was soft launched with two schools in October 2015 and then implemented as a multi-agency pilot project from Jan 2016. The pilot included 10 primary schools which resulted in approx. 5,000 children and young people participating.

The steering group are now working to engage all primary schools within the borough and continue to support the initial 10 schools with making the MGKM sustainable through continued activity and incorporating the initiative into their Healthy Schools London plans.

With no financial support to deliver the project, the outcomes demonstrated to date are a true testament to a multi-agency approach and partners working in collaboration to achieve a shared vision.

Christ Church School, High Barnet (Headteacher quote)

'The benefits of the daily MGKM have been huge. We have noticed that the stamina of the children and teachers has improved, along with their general fitness and desire to join in physical activities. The classes have loved doing it and have socially encouraged their peers to join in and cheered them on. The children have gone home and spoken to parents about their enjoyment of it and feedback from parents has been extremely positive.

Within class we have noticed an improvement in the concentration and attention of some of our children and they seem to focus better on tasks and for longer. Teachers have enjoyed it and their enthusiasm has encouraged the children too. We have linked the 1km to the Olympic Games and Maths. A group of children in Y6 worked out the maths involved – how far had they run, over how many days, distance etc. They worked out that the children would have walked/run the equivalent of school to Dubai and back! This was well received.'

To support Children and Young People priorities a Fit & Active Barnet Partnership will:

- support schools via the Barnet Partnership for School Sport to improve provision in implementing the Primary PE and Sports Premium and the School Games to create healthier habits, inclusiveness and a talent pathway
- promote the vibrant and varied offer available to children and young people to increase physical literacy in early years, school and home settings
- develop partnerships with services accessed by children and young people, and their families e.g. children's centres and schools to promote physical activity and supported interventions
- provide a sustainable pathway for the SHAPE programme and explore expansion across the borough through shared learning
- adopt a multi-agency and insight led approach, to ensure new and existing commissions are centred around the needs of young people that address wider social and community outcomes and enable links between schools, the VCS and facilities to aid sustainability and continued participation or development pathways.



Adults and Health

Barnet's Health and Wellbeing Strategy outlines the ambition to make Barnet 'a place in which all people can age well'.

The borough will experience
London's largest increase
in elderly residents

65+yrs

over the next five years, rising
currently from
52,000 to 59,800 by 2020.

Additional insight also presents an
estimated 23,500 residents of this
age living with a lifelong limiting
illness, a total also set to increase

by 20%.

Joint Strategic Needs Assessment, 2015 - 2020

At a time of key challenge, with rising demands, increased expectation and financial pressures facing both the Local Authority and the NHS, the role of physical activity in achieving prevention and early intervention is critical. Physical activity has the ability to support demand management and reduce pressure on our clinical services.

As more young people with complex needs survive into adulthood, there is a national and local drive to support individuals to live as independently as possible within the community. It is important that we work together to ensure that appropriate support services are available to support local priorities.

The effect on GP services and the Clinical Commissioning Group (whereby 8.2% expenditure is attributed to mental health) will continue to escalate. Sport and physical activity is a powerful mechanism with a range of case studies that demonstrate the ability to positively impact healthcare.

According to national projections,
the most common health
conditions within Barnet are
mental health disorders.

In 2015 it was predicted that

56,333

people aged 18 – 64 have a
mental health condition.

Joint Strategic Needs Assessment, 2015 - 2020

Adults with a severe and enduring mental illness face considerable social exclusion. This is evidenced through high rates of unemployment, social isolation and poorer physical health, all of which create a demand on other services. We know that one in four people will need treatment for mental illness at some point in their lifetime and the majority of these treatments will exist from primary care.



On average, active adults have a

30% lower

chance of feeling distressed or a 30% higher chance of enhanced wellbeing than inactive adults.

Physically active adults have a

30% lower

risk of depression, distress and dementia.

The British Heart Foundation National Centre for Physical Activity; Making the Case for Physical Activity (2013)

Feelings of social isolation and loneliness can be detrimental to a person's health and wellbeing. Anyone can experience social isolation and loneliness, however it is more commonly considered and prevalent in later life and those who are most vulnerable e.g. individuals with a physical and/or mental health condition.

It is well documented that there are a number of factors that can have a significant impact on whether or not a person becomes socially isolated. To address this growing issue, there is a need for effective, targeted and locally based provision. It is also important that we work with key agencies and residents themselves to understand barriers and how we can improve engagement, making activity an attractive choice for everyone to participate.

The Care Act 2014 represents the most significant reform of care and support in more than 60 years. It is expected to drive increased demand for adult social care and support over the intensified levels from demographic pressures. The Care Act called for care to be focused on the individual, their needs and their wellbeing, including increasing the importance of individuals choosing where and how they purchase their care from. With the introduction of Self Directed Support and Direct Payments individuals are given more control over the services that they receive, presenting an opportunity for sport and physical activity to position itself as an attractive choice.

Exploring a such opportunities and working alongside key agencies and community organizations will assist in improving wellbeing.

In 2011 approximately

32,000

carers were registered in Barnet, with approximately 12,746 aged 25 – 49 years.

On average

5.2% carers

reported having poor health.

Joint Strategic Needs Assessment, 2015 – 2020



Case Study – Supporting Carers and those in Care

Working in partnership with Barnet's leisure operator and Barnet Carers Centre, registered carers and children in care are able to access a free Barnet Leisure Pass. The Barnet Leisure Pass gives eligible individuals access to free swimming and concessionary discounts on a range of activities across Barnet's leisure centres.

"The Carers' Centre helped me to receive a pass for free swimming. It has been invaluable. The pass has felt like care for me and because of the gift of care, I have been determined to make good use of it. Going swimming has been positive for me mentally and emotionally as well as physically; I unwind, recharge and re-energise. A BIG THANK YOU!"
(Barnet Leisure Pass recipient)

Physical activity can have a significant impact on the health and wellbeing of people with dementia at all stages of the condition and it is vitally important that services and facilities meet the needs of service users and are 'Dementia Friendly'.

Through a streamlined approach, it is important that we position a Borough wide offer as an attractive choice to engage and signpost both individuals and professionals e.g. GP's and other care professionals. We do however need a level of confidence that new and existing opportunities are of a high quality and meet the needs of the service users by providing positive experiences and subsequently creating a sustained active habit. This approach also applies to ensuring that 'inclusive' opportunities and services encompass the true meaning of this.

An example of this is the establishment of a Barnet Disability Sports Network in 2016, which is a multi-agency approach to improve the disability and inclusive sporting landscape across the borough (inclusive of mental health).



Barnet has a higher population of people with dementia (estimated over 4,000) than many London boroughs. By 2021 the number of people living with dementia in the borough is expected to increase by

24%

compared to the London wide figure of 19%.

Joint Strategic Needs Assessment, 2015 – 2020



Case Study – Into Sport

Into Sport is a Sport England funded, multi-faceted inclusive sports project that spans North and South London and involves a consortium of seven organisations; Inclusion London, London Sport (formerly Interactive) and five Deaf & Disabled People's Organisations, with Inclusion Barnet as the sole North London representative. One of the strands of the project is to explore barriers to the accessibility of mainstream sports venues, facilities and attitudes, and indeed raises pertinent questions about whether disability sport can in fact be mainstreamed, as illustrated by the acute delineation between the Olympics and ParaOlympics.

Barnet joined in year two of the project, and have succeeded in recruiting 51 participants (target 50) and achieved 182% of target outputs to date (Nov 16) in terms of participants engaging either sporadically or regularly in sport and physical activity.

A previously inactive participant has described the improvement in his wellbeing as being 'physical and mental, as well as social, spiritual and emotional' as he feels that he is doing something that is good for him. The participant now pays more attention to how much he exercises and what his physical strength and fitness allows.

The Barnet Disability Sport Network will provide a partnership approach in supporting the sustainability and diversification of the Into Sport programme in Barnet.



To support Adults and Health priorities a Fit & Active Barnet Partnership will:

- work in collaboration to influence sustainable programming that achieves prevention and early intervention, prohibiting/alleviating the onset of long term health conditions and social isolation
- create an approach to ensure pathways for physical activity and sport are optimised through formal referral by health and social care professionals and self-referrals (e.g. GP surgeries and Healthy Living Pharmacies)
- work in partnership with Health Champions, care professionals and organisations to promote borough wide opportunities so they become an 'attractive choice' for service users
- consolidate Health Walk provision across the borough to achieve a coherent and effective offer
- encourage alignment with best practice tools, programmes and guidance e.g. Dementia Friends and London Sport's Club ID to ensure opportunities and facilities are high quality, inclusive and truly meet the needs and expectations of service users
- develop and fully integrate the Barnet Disability Sport Network to collaboratively enhance the disability and inclusive provision within the borough and promote equality.



Working Together

The development of this framework has characterised a future which will strategically enhance sport and physical activity in Barnet, through a focused set of priorities that require an emphasis on working holistically. Areas highlighted within this framework have been identified through optimum use of local insight and intelligence to inform and guide interventions and resources. A key element of driving future success is the implementation of a 'Fit & Active Barnet Partnership Board'. The purpose of this Board will be to assume a strategic role to assist in supporting mutually beneficial outcomes specified within this framework, supported through respective sub network groups e.g. the Barnet Disability Sports Network.

Some of the challenges inherent in this document and our vision to address them will require a long term approach. Tackling inactivity and our ability to create a more active and healthy borough will require a coalition of partners and stakeholders, some of whom may

not have worked together before. There is also a requirement for a level of flexibility recognising the ever diversifying landscape in which we operate.

It is intended that the Fit & Active Barnet Partnership Board will comprise partners and stakeholders involved in strategy, policy and development matters related to Barnet:

- sports sector including; London Sport, National Governing Bodies of Sport, clubs and other delivery partners
- education Sector including HE & FE
- VCS.

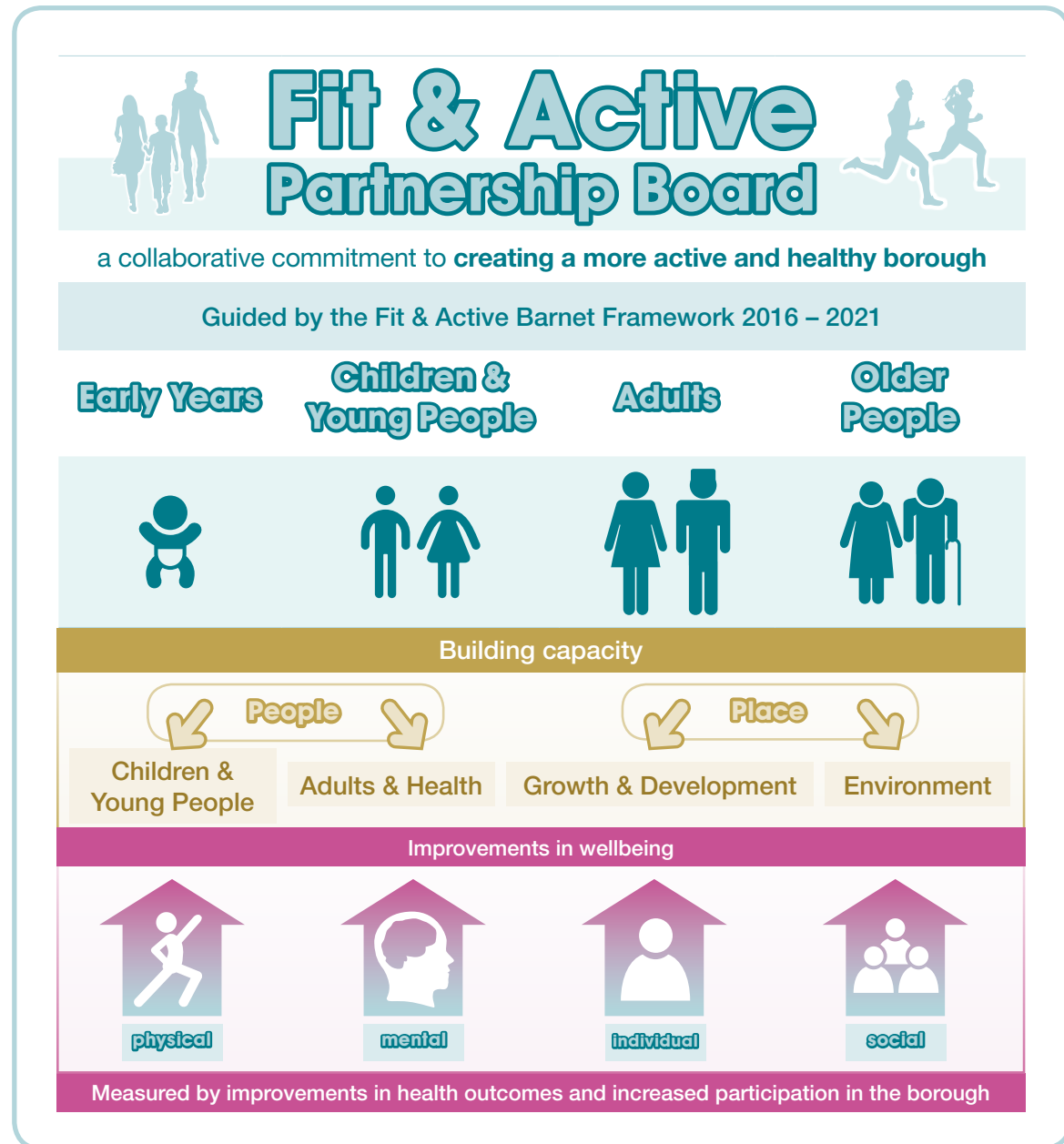
Members of the Fit & Active Barnet Partnership Board will support the facilitation and delivery of sport and physical activity in Barnet. This will include a robust process, working in collaboration to evaluate the use of available funds (external or other as determined) to deliver a comprehensive and integrated offer to maximise participation.

creating a more healthy and active borough



Our engagement and future relationships with National Governing Bodies of Sport will be defined through clear alignment to our strategic outcomes focused on:

- sport that provides a measurable growth in participation
- opportunities to enhance facilities
- supporting the club sector
- sport that is accessible to all Barnet residents.



To support Working Together priorities a Fit & Active Barnet Partnership will:

- cultivate mutually beneficial partnerships that connect and align services to deliver a more cost effective and accessible physical activity pathway, which addresses wider society outcomes
- encourage the use of open data across the Partnership to better understand participation and inform meeting current and future demand
- refine understanding of the needs and barriers to participation amongst priority groups, ensuring that service users and supporting organisations are at the heart of service design and delivery
- implement a model to effectively evaluate targeted activities, in particular, levels of take-up and retention through the use of new technologies
- encourage the use of tools that assist with development and quality assurance i.e. Club Matters and the Sport England Return on Investment toolkit
- to explore the initiation of a shared Fit & Active Barnet funding pot to commission and support activity through aligned priorities (where feasible).



Measuring success

Nationally, Sport England will continue to measure participation in sport and physical activity. Previously this was measured via the Active People Survey, an annual survey that measured the percentage of the adult population participating in 30 minutes of moderate intensity activity per week.

To align with their new strategy 'Towards an Active Nation', Sport England has adopted the 'Active Lives Survey', providing a renewed methodology to measure annual participation in sport and physical activity. The exact measures of this refreshed methodology are currently being agreed, however at a headline level it is thought the key performance indicators will be:

- decrease in percentage of people physically inactive
- increase in the number of people volunteering in sport at least twice in the last year

- the demographics of volunteers in sport to become more representative of society as a whole
- number of people who have attended a live sporting event more than once in the past year.

Measurement of these indicators is in response to Government's 'Sporting Future; A New Strategy for an Active Nation' (2015). There is also an opportunity to understand performance against other KPI's identified within this strategy including (collected via alternative means):

- increase in percentage of the population taking part in sport and physical activity at least twice in the last month
- increase in the percentage of adults utilising outdoor space for exercise/ health reasons
- increase in the percentage of children achieving physical literacy standards
- increase in the percentage of children achieving swimming proficiency and Bikeability Levels 1– 3

- increase in the percentage of young people (11 – 18) with a positive attitude towards sport and wellbeing
- employment in the sport sector
- percentage of publically owned facilities with under-utilised capacity
- increase in the number of publically funded bodies that meet the new UK Sports Governance Code.

Recognising the importance of partnership working and to foster a collaborative approach, whilst we await the announcement of the national indicator set, an early role of the Fit & Active Barnet Partnership Board is to determine what success looks like and how the vision, outcomes and commitments outlined within this framework are measured at a local level to demonstrate greatest impact.



References / Further reading list

Department for Culture Media and Sport, Sporting Future; A New Strategy for an Active Nation (2015)

Department of Health. Start Active, Stay Active; a report on physical activity from the four Home Counties (2011)

London Borough of Barnet Children and Young People's Plan (2016 – 2020)

London Borough of Barnet Community Assets Strategy (2015)

London Borough of Barnet Community Participation Strategy (2015)

London Borough of Barnet Community Safety Strategy (2015)

London Borough of Barnet Corporate Plan (2015-2020)

London Borough of Barnet Entrepreneurial Strategy (2015-20)

London Borough of Barnet Joint Health & Wellbeing Strategy (2015 – 2020)

London Borough of Barnet Joint Strategic Needs Assessment (2015 – 2020)

London Borough of Barnet Local Implementation Plan (2011)

London Borough of Barnet Local Plan – Core Strategy DPD (2012)

London Borough of Barnet Parks and Open Spaces Strategy (2016 – 2026)

London Borough of Barnet Playing Pitch Strategy – in draft available early 2017

London Plan – <https://www.london.gov.uk/what-we-do/planning/london-plan>

London Sport, Blue Print for a Physically Active Sporting City

Public Health England, Everybody Active, Every Day – An evidence based approach to physical activity (2014)

Sport England; Active Design Principles – <https://www.sportengland.org/facilities-planning/planning-for-sport/planning-tools-and-guidance/active-design/>

Sport England Strategy; Towards an Active Nation (2016 – 2021)

The British Heart Foundation National Centre for Physical Activity; Making the Case for Physical Activity (2013).

Officer contact:

Cassie Bridger, Strategic Lead:
Sport and Physical Activity

Courtney Warden, Commissioning
Lead: Sport and Physical Activity

Email: sport@barnet.gov.uk







DRAFT FIT & ACTIVE BARNET FRAMEWORK 2016 – 2021 CONSULTATION SUMMARY REPORT

Background

On the 19th September 2016 Adults & Safeguarding Committee approved the recommendation ([item 10](#)) to consult on the draft Fit & Active Barnet (FAB) Framework 2016 – 2021. Conducting a consultation exercise was required to assist and develop the vision, outcomes and proposed commitments detailed within the FAB Framework.

Consultation Methodology

Prior to consultation the following documents were completed to help guide the consultation process;

- Consultation and Engagement Plan
- Engage Barnet Submission Form
- Draft Questionnaire Survey

All documents were developed in conjunction with, and approved by London Borough of Barnet's (LBB) Consultation and Research Manager.

In alignment with consultation guidelines the Framework was consulted from 6th October to 13 November 2016, available via the Council consultation platform, Engage Barnet. The draft FAB Framework 2016-2021 was accompanied by a Survey Monkey Questionnaire which guided participants through a series of 21 structured questions (mix of single answer options and open ended), in addition to standard monitoring questions to measure participant representation.

The draft FAB Framework 2016-2021 and questionnaire were also available in printed format on request. No requests were received throughout the consultation period.

The following steps were taken to communicate and raise awareness of the consultation (all approaches encouraged sharing to increase reach and participation);

- Press release
- Social media updates i.e. Twitter and Facebook
- LBB First Team e-news
- LBB website
- E-newsletter and email reminders to our Club & Community database
- Emails to partners and stakeholders

Consultation Summary

A total of 60 responses were received during the consultation period;

- 56 online survey's completed via Survey Monkey (quantitative and qualitative)
- Although not a formal engagement option, four written submissions were received and accepted via the sport@barnet.gov.uk mailbox (qualitative).

The questionnaire captured a range of demographic information, providing statistics based on gender, age, ethnic origin, disability etc. This information was not obtained for those participants whom submitted their responses via email.

- The highest number of respondents was males at 50%.
- The highest number of respondents to complete the survey was aged between 45-54 years at 37.5%
- 41.67% of participants were of a 'White British' ethnic origin, 20.83% of respondents selected 'prefer' not to say and 37.5% were of BME origin
- 4.7% of the respondents considered themselves to have a disability, 70.83% selected 'no' to this question and 25% 'prefer not to say'.

Information was also gathered in respect of participant representation;

- 44.4% of participants were residents with an interest in sport and physical activity in Barnet
- 22.2% of participants were representative of a provider, charity, organisation or group that has an interest in sport & physical activity in Barnet
- 18.52% of participants were representative of a provider, charity, organisation or group that delivers sport & physical activity in Barnet
- 14.81% selected 'Other' (no information was provided to further define representation of these participants).

Feedback sought via the consultation process has been reviewed and considered by the Sport & Physical Activity team, subsequent to which appropriate amendments have been made in order to establish a final FAB Framework 2016 - 2021. A summary includes;

- Enhanced reference to the importance of sporting pathways for young people.
- Improved reference to the involvement and importance of the voluntary and community sector in providing sport and physical activity opportunities.
- Disability sport has been incorporated into the 'Children & Young People' section.
- The 'Working Together' section has been developed to include the importance of learning from others and utilising evidenced based interventions.
- Enhanced focus on supporting and influencing existing networks and plans to improve active travel (cycling and walking).
- Enhanced reference on the benefits of sport and physical activity to mental wellbeing.
- Reference to the Sport England funded SHAPE programme has been reviewed to encompass sustainability and scalability.

Consultation Feedback – Structured Questions (Survey Monkey)

Following analysis of the Survey Monkey, on average;

- 75% of participants strongly agreed / tended to agree with the content of the Framework.
- 8% of participants strongly disagreed / tended to disagree with the content of the Framework

Comments relating to the Sport & Physical Activity (SPA) Project, specifically the redevelopment of Barnet Copthall Leisure Centre and development of New Barnet Leisure Centre presented a direct impact on the average percentage scores above. Whilst leisure facilities play fundamental role within the FAB Framework, it is crucial to note that the Framework considers all elements of sport and physical activity from programming to assets (inclusive of open spaces and the built environment), with a view to enhance physical activity and sport opportunities across a broad spectrum.

Table 1 below outlines a summary of responses to questions in Survey Monkey that provided a 'please tick one answer' option.

Table 1

Question		Strongly Agree / Tend to Agree	Neither agree nor disagree	Don't know	Strongly Disagree / Tend to Disagree
1	To what extent do you agree or disagree with our vision for sport & physical activity in Barnet?	85%	2%	0%	13%
3	To what extent do you agree or disagree with the outcomes?	85%	5%	0%	10%
5	Overall to what extent do you agree or disagree with the proposed commitments detailed within the 'Public Health' section of the draft Framework?	75%	12.5%	2.5%	10%
7	Overall to what extent do you agree or disagree with the proposed commitments detailed within the 'Growth & Development' section of the draft Framework?	78%	12.5%	3.13%	6.25%
9	Overall to what extent do you agree or disagree with the proposed commitments detailed within the 'Environment' section of the draft Framework?	70.96%	16.13%	6.45%	6.45%
11	Overall to what extent do you agree or disagree with the	70%	16.67%	3.33%	10%

	proposed commitments detailed within the 'Children & Young People' section of the draft Framework?				
13	Overall to what extent do you agree or disagree with the proposed commitments detailed within the 'Adults & Health' section of the draft Framework?	68.96%	17.24%	10.34%	3.45%
15	Overall to what extent do you agree or disagree with the proposed commitments detailed within the 'Working Together' section of the draft Framework?	66.66%	20%	6.67%	6.67%

Tables 2a and 2b below outline a summary of responses to questions that provided a 'Yes/No' option.

Table 2a

Question		YES	NO
17	Are there any commitments that you or your organisations could support the Fit & Active Barnet Partnership to achieve?	53%	47%
18	Please tell us which commitments your organisation could support and how?	<p>Summary responses to this question outlined generic support in the forms of promotion and marketing, information, advice and guidance and volunteering. No specific commitments within the Framework were identified.</p> <p>Comments relating to 'No' related to the SPA project.</p>	

Table 2b

Question		YES	NO
19	Overall do you think that there are any commitments that have been missed and should be considered as part of the Framework?	61%	39%
20	Please tell us which other commitments we should be considering and clearly indicate the section that your response refers to	Summary responses to this question have been outlined in table 3i below.	

Consultation Feedback – Comments Recieved

Feedback received via the consultation process was in the main positive and supported the vision, outcomes and proposed commitments within the draft Framework. Tables 3a – 3j (Survey Monkey) and 3k (email responses) below provide a summary of qualitative feedback received and a response / action from the Sport & Physical Activity team.

Table 3a (Survey Monkey)		
Q2: If you disagree with any part of our intended vision please say why		
Number of responses: 4		
#	Response	SPA Team response / action
1	Build more smaller gyms, maybe turn old libraries into gyms. Decrease the fee for memberships at gyms, especially for those on benefits	<ul style="list-style-type: none"> - SPA project documentation available on-line (including feasibility study of leisure centre provision). - A new leisure management contract will take effect from 1st January 2018; a range of public health outcomes will be included within a new contract. An operator will be required to offer programming and membership options that engage with all residents and socio economic groups.
2	Removal of diving facilities in new Copthall plans	<ul style="list-style-type: none"> - SPA project documentation available on-line
3	You indicate a priority for sporting opportunities for women and girls in the Borough yet the strategy closes down 2 Olympic Sports of Diving with Synchronised Swimming. Barnet Syncho swam at Rio and the European Championships this year. It is one of the few successful team sports in for females in the Borough and the facilities should not be lost. The Vision suggest the strategy is supported by the NGBs. More patent nonsense from Councillors who have their own priorities for spending the proceeds of the land sales from losing Church Farm.	<ul style="list-style-type: none"> - SPA project documentation available on-line
4	It is not clear overly clear from the document what the vision is from the first sections. Page 4 states that to 'achieve the vision' which would indicate the vision has been given. It then provides an ambition of 'create a more active and healthy borough' From the table on page 8 this appears to be the vision? The wording in this section may need to be reviewed to make this clear? It may also be beneficial to include a scope of what is covered under the framework. For example does this link with Active Travel. The	<ul style="list-style-type: none"> - Feedback has been incorporated, the vision is highlighted and introduced within the Councillor foreword and in addition to the section that relates to 'Why do we need a Fit & Active Barnet Framework'. - To enhance clarity the table on page 8 has been removed - Language around the wide reaching impact of sport and physical activity and is versatility to integrate across a diverse spectrum has been enhanced. - Measures on page 22 are still in working progress at a national level

	measures of page 22 would indicate that it doesn't? However, the Growth and Development Section on page 11 would indicate this.	by Sport England. The Framework demonstrates that an early role of the FAB Partnership will be to determine what success looks like at a local level and how this is measured.
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Table 3b (Survey Monkey)

Q4: If you disagree with the listed outcomes please say why

Number of responses: 4

#	Response	SPA Team response / action
1	Barnet Borough wide consultations not considered or acted upon	- All comments and feedback received via LBB consultations are considered. Results are published via Engage Barnet - https://engage.barnet.gov.uk/we_asked_you_said
2	The closure of facilities for two Olympic sports in the Borough contradicts these outcomes. We need diving and synchronised swimming. Donald Trump says he's not a racist and Barnet Councilors say they support sport and fitness opportunities for women. Actions speak louder than words.	- SPA project documentation available on-line
3	The outcomes are enabling in nature and do not clearly outline what the outcomes of the framework are in terms of sport and physical activity. It is also not clear how these link with the measures on page 22. The framework reads like it links to a range of wider outcomes eg health, growth and development etc. However this is not overly clear if the achievement of these wider outcomes is the intention of the framework, or if linking to these areas is more of an opportunity for support through commissioning as would be indicated at the bottom of page 7.	- The outcomes are consistent with those outlined in the Health & Wellbeing Strategy (2015 – 2020). - To align with our vision to ' <i>create a more active and healthy borough</i> ' the outcomes and associated 'commitments; encompass a variety of areas where SPA can influence or have a positive contribution i.e. active travel. Alignment with the Commissioning Areas provides a structure to deliver these commitments through a strategic network. - Measures on page 22 are to be defined nationally by Sport England. An early role of the FAB Partnership will be to determine what success looks like at a local level and how this is measured.
4	Barnet Council is selling land and using the proceeds to subsidise other services, while reducing the extent and quality of our leisure resources. Barnet Copthall is losing aquatic resources in Diving, Synchronised Swimming, Learn to Swim & Scuba Diving. Come clean and show the public the value of the land sales you anticipate. Copthall had one Syncho simmer at Rio and two at the European Championships. It is one of few sports and leisure activities that retain teenagers in sport. Barnet Council is	- SPA project documentation available on-line

	specifically closing this down in the Borough. I am Business Rates and Council Tax payer who is ashamed.	
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Table 3c (Survey Monkey)

Q6: If you disagree with any of the proposed commitments within the 'Public Health' section of the draft Framework please state why.

Number of responses: 4

#	Response	SPA Team response / action
1	Can't go back!	- The online survey provided a function for participants to go back and review / edit responses. A technical fault may have prevented this action at the time of completion. Paper copies of the survey and draft Framework were available on request.
2	You should not close down facilities for diving and synchronised swimming	- SPA project documentation available on-line
3	Whilst the commitments	- Incomplete response
4	Reducing sports facilities in the borough cannot improve public health	- SPA project documentation available on-line - The purpose of the FAB Framework is to look at all sports and physical activity opportunities and assets to maximise use and potential.

Table 3d (Survey Monkey)		
Q8: If you disagree with any of the proposed commitments within the 'Growth & Development' section of the draft Framework please state why.		
Number of responses: 3		
#	Response	SPA Team response / action
1	Can't go back on the survey	- The online survey provided a function for participants to go back and review / edit responses. A technical fault may have prevented this action at the time of completion. Paper copies of the survey and draft Framework were available on request.
2	You should not close down facilities for diving and synchronised swimming. How can the loss of a dive pit at Copthall be development? Disgraceful nonsense from the Council.	- SPA project documentation available on-line
3	Reducing sports facilities in the Borough cannot improve Growth & Development. You are closing down one of the few team sports for teenage girls in the Borough.	- SPA project documentation available on-line - The purpose of the FAB Framework is to look at all sports and physical activity opportunities and assets to maximise use and potential.

Table 3e (Survey Monkey)		
Q10: If you disagree with any of the proposed commitments within the 'Environment' section of the draft Framework please state why.		
Number of responses: 2		
#	Response	SPA Team response / action
1	As before (Can't go back on the survey)	- The online survey provided a function for participants to go back and review / edit responses. A technical fault may have prevented this action at the time of completion. Paper copies of the survey and draft Framework were available on request.
2	You're selling local leisure facilities for residential development. This means more travel to leisure facilities.	- SPA project documentation available on-line

Table 3f (Survey Monkey)		
Q12: If you disagree with any of the proposed commitments within the 'Children & Young People' section of the draft Framework please state why.		
Number of responses: 3		
#	Response	SPA Team response / action
1	Unable to scroll back	- The online survey provided a function for participants to go back and review / edit responses. A technical fault may have prevented this action at the time of completion. Paper copies of the survey and draft Framework were available on request.
2	You should not close down facilities for diving and synchronised swimming	- SPA project documentation available on-line
3	Reducing sports facilities in the borough cannot improve opportunities for young people. Synchronised swimming is one of very few successful team sports in the borough with swimmers in the Olympics and other international representation. Why are you closing this down?	- SPA project documentation available on-line

Table 3g (Survey Monkey)		
Q14: If you disagree with any of the proposed commitments within the 'Adults & Health' section of the draft Framework please state why.		
Number of responses: 2		
#	Response	SPA Team response / action
1	As before (unable to scroll back)	- The online survey provided a function for participants to go back and review / edit responses. A technical fault may have prevented this action at the time of completion. Paper copies of the survey and draft Framework were available on request.
2	TH	- Incomplete response

Table 3h (Survey Monkey)		
Q16: If you disagree with any of the proposed commitments within the 'Working Together' section of the draft Framework please state why.		
Number of responses: 2		
#	Response	SPA Team response / action
1	See previous (unable to scroll back)	<ul style="list-style-type: none"> - The online survey provided a function for participants to go back and review / edit responses. A technical fault may have prevented this action at the time of completion. Paper copies of the survey and draft Framework were available on request.
2	Working together means outsourcing public services to price out poorer members of the community and losing unprofitable resources including the dicing and synchro facilities in the borough. DISGRACE	<ul style="list-style-type: none"> - SPA project documentation available on-line - The purpose of the FAB Framework encourages a collaborative approach with partners and stakeholders working together to '<i>create a more active and healthy borough</i>'. This approach will help maximise opportunity and outcomes for residents and communities, whilst streamlining resource and delivery, facilitating the achievement of greater impact and efficiencies.

Table 3i (Survey Monkey)		
Q20: Please tell us which other commitments we should be considering and clearly indicate the section that your response refers to		
Number of responses: 16		
#	Response	SPA Team response / action
1	Children and young people - more actively engaged in competitive sport, this then becomes a lifestyle for the rest of their lives	<ul style="list-style-type: none"> - There is reference to pathways for young people in the draft Framework which is inclusive of competition; however this has been refined further. London Youth Games has also been referenced.
2	With regard to CYP, we need to emphasise the need to grow VCS involvement, this includes more than just the community sports clubs but also community groups who have direct access to CYP not involved in organised sports activities.	<ul style="list-style-type: none"> - VCS in its entirety has been referenced, however this has been defined further for clarity.
3	Reduce membership fees for local gyms, especially for those on low incomes/benefits	<ul style="list-style-type: none"> - LBB are currently re-procuring a new leisure operator (effective from Jan 2018). A focus of the new contract is to achieve a number of broad Public Health outcomes. Within this the operator will be required to offer programming and membership options

		<p>that reach all residents and groups.</p> <ul style="list-style-type: none"> - The following commitment within the 'Working Together' section of the Framework supports the drive for cost effective and accessible opportunities 'Cultivate mutually beneficial partnerships that connect and align services to deliver a more cost effective and accessible physical activity pathway, which address wider society outcomes'
4	Promote cycling and provide the infrastructure to enable anyone to cycle safely from children to elderly and including people with limited mobility.	<ul style="list-style-type: none"> - This can be supported by the following commitment within the Growth and Development section, which has been enhanced further <i>'Enable, promote and support plans for active travel across Barnet, through a strategic network which aims to increase use and break down barriers associated with alternative travel methods e.g. walking and cycling'</i>
5	Healthy Living options other than sports based - e.g. dietary, reducing sedentary activities e.g. excessive computer use by young adults	<ul style="list-style-type: none"> - The Framework does consider wider aspects where SPA has a contribution / influence however this has been further defined, particularly with the PH section.
6	People are working longer however the opportunities for the over 60s to engage in health and fitness are limited as most of the programmes run during the day as opposed to the evening	<ul style="list-style-type: none"> - Commitments identified within the Adults and Health section i.e. <i>'work collaboratively to partners and service users to ensure priority groups are at the heart of delivery and design'</i> seek to understand and address the needs of residents when designing and delivering services.
7	as people are working longer health and fitness opportunities in the evening most opportunities for the over 60s are during the day.	
8	The Framework is very good. But two additional points would help. For adults with learning disabilities, health checks and Health Action Plans should link with sport and activity pathways. Also, in the Children's section, there should be specific reference to disabled children and young people, who often find additional barriers to active lives, especially once they have left school.	<ul style="list-style-type: none"> - Commitments identified within the Adults and Health section i.e. work with health champions and brokers etc. and create an approach to ensure pathways for physical activity and sport are optimised by health and social care professionals are not exclusive and therefore applicable and inclusive to adults with a learning disability. - Reference to disabled children has been incorporated into the Children and Young People section.
9	The framework is very good but two points could be added For adults with learning disabilities, sport and activity pathways should be linked with health checks and health Action Plans. The section on Children should include specific reference to disabled children and young people, who often find additional barriers to participating in sport and sustaining active lives, especially once they leave school.	Repeated

10	In looking at redevelopment of areas such a brent cross, Barnet should be looking to implement a network of cycle paths across the borough and area to encourage cycling. Also, the redevelopment of sports facilities as an integral part of the areas redevelopment.. sport should be treated as another leisure time activity and as easy to choose as such things as shopping or going to the cinema. Sports facilities integrated into the new shopping area/ redevelopment, could really encourage participation.	<ul style="list-style-type: none"> - The SPA team continue to consult with developers and partners to inform and influence SPA provision within the new development. Once implemented the FAB Partnership will assume a strategic role in influencing and supporting this and other developments within the borough.
11	Bowls in the borough	<ul style="list-style-type: none"> - Parks and Open Spaces are undertaking a strategic review of Bowls in the borough. Insight and guidance available from the SPA team and governing body (Bowls England) to maximise alignment.
12	Replacing the existing diving facility therefore improving children and young people , public health and adults and health	<ul style="list-style-type: none"> - SPA project documentation available on-line
13	Barnet Copthall was built as a centre of excellence. It is now outmoded, but produces amazing results. The Council consulted with stakeholders, stating pre-conditions that stifled innovative responses. As a result you are going to create a third rate facility and lose two Olympic sports for the Borough. This is not an improvement and the legacy of Copthall's Olympians will waste away with mediocre facilities. DISGRACE	<ul style="list-style-type: none"> - SPA project documentation available on-line
14	Strong partnership with the private sector where they are already providing sustainable & high quality opportunities for sport	<ul style="list-style-type: none"> - It is intended that the FAB Framework is a document that offers strategic alignment across a continuum. Recognising the current SPA landscape in the borough, in addition to a desire to diversify delivery and the achievement of wider outcomes, the FAB Partnership will invite partners and stakeholders from all sectors who can have an active contribution.
15	It is very important that Barnet builds more indoor active areas in particular sport halls where adults can play more Basketball, Volleyball, Netball and other group sports. All the current indoor spaces are fully booked and they don't serve the whole community.	<ul style="list-style-type: none"> - SPA project documentation available on-line (including feasibility study of sports hall provision). - A commitment within the 'Growth & Development' section identifies the need to encourage and maximise the use of sports facilities within the education / private sector. Commitments that identify the need to influence planners to promote healthier and more active communities and identifying opportunities to invest in sport via S106 monies etc. also support this.

16	Barnet Copthall was constructed as a centre of excellence for aquatic sports. The Council Strategy closes down two of three aquatic sports and loses one of three pools. This cannot be considered a positive step forward.	- SPA project documentation available on-line
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Table 3j (Survey Monkey)

Q21: Please tell us any further comments you would like to make on the draft Fit & Active Barnet Framework

Number of responses: 11

#	Response	SPA Team response / action
1	Great as long as it doesn't take money from other areas already under pressure such as libraries.	- There is no intention to take money from any areas experiencing funding pressures.
2	We need to include /get buy-in from all the VCS (not just sports clubs) as these groups will help with pathways into organised sporting activities /clubs, so we need to include them in the narrative.	- VCS in its entirety has been referenced, however this has been defined further for clarity.
3	The framework needs to include specific links to mental wellbeing for children, families and adults. This is currently weak and could be made clearer about the benefits of physical activity. The Framework could also include activities such as food growing programmes and using private streets and roads to allow children to play. This would be useful for building up community cohesion. There is no mention of using evidenced based interventions, learning from other boroughs and innovation - this should be one of the key over-arching objectives. Considering the development/maintenance of an adventure playground in Barnet to support higher risk and spontaneous play for children and young people. Committing to take down signs where it states "No ball games" should not be a key objective. This should be considered on a case by case level and be part of a wider action plan for creating supportive environments. Another commitment should be to develop age appropriate 'play' and research what types of physical activity and sport BME children are likely to engage in. This should not just rely on the SHAPE project. It is important that that the overall tone of the framework embraces	<ul style="list-style-type: none"> - Benefits of SPA on mental wellbeing have been incorporated within the Framework as infographics. - Links with food growing projects etc. has been defined with through identifying that SPA can often be the by-product of wider initiatives and vice versa, leading to greater community and health outcomes. - The Working Together section has now emphasised the importance of learning from others and considering evidence based interventions. - The commitment relating to the removal of 'No Ball Games' signs has been consolidated under the following commitment and used as an example; <i>Influence planners and key policy makers to build and promote healthier and more active communities within new developments and regenerations schemes</i> (Growth and Development) - Commitments including 'develop partnerships with services accessed by C&YP' and 'ensuring new and existing commissions are centred around the needs of young people' will help the FAB Partnership to identify the most appropriate delivery models, methods of engagement and partners to work with. - There is an intention to make the SHAPE project sustainable and expand delivery to other areas of the borough through shared

	physical activity as well as organised sports and feature more focus on large sporting events such as the Olympics, rugby, cricket and football	learning. This commitment has been refined within the Framework.
4	I welcome your plans to improve cycling infrastructure but this must be done to a high standard, such as Royal College Street in Camden, to make it attractive to all users. Most people are unwilling to cycle amongst cars, and will not make bike trips unless routes are direct and properly designed, especially junctions.	- This can be supported by the following commitment within the Growth and Development section, which has been enhanced further <i>'Enable, promote and support plans for active travel across Barnet, through a strategic network which aims to increase use and break down barriers associated with alternative travel methods e.g. walking and cycling'</i>
5	Easy access for young people with special needs.	- Disability sport and inclusive access has been given a focus within the C&YP section of the Framework.
6	Modern work related stress prevents people from participating in physical activity and maintaining healthy lifestyles especially when using on line systems on the work place and sitting behind screens	<ul style="list-style-type: none"> - The commitment 'Support promotion and implementation of the Healthy Workplace Charter across Barnet' (Public Health) supports this with LBB as an operational example. - The draft Framework has been developed through 1) the use of available insight and datasets, 2) alignment with national and local strategies / policy and 3) consultation with key partners and stakeholders via workshops.
7	Use the information available to you.	
8	Barnet Council should not be profiteering by selling off our assets and building rubbish sporting facilities that fail to accommodate excellent sporting opportunities. These will be lost forever. Synchronised swimming is a developing team sport for women. This should be encouraged, not closed down! DISGRACE	- SPA project documentation available on-line
9	Commitment to office staff who find it increasing more difficult to balance health and fitness within their working day.	- The commitment 'Support promotion and implementation of the Healthy Workplace Charter across Barnet' (Public Health) supports this with LBB as an operational example (case study in final version).
10	Contact groups actively involved in making Barnet fit and active	- The FAB Partnership and its associated sub/thematic groups will be open to partners, groups and organisations that make an active contribution and can help influence SPA in the borough.
11	Make money at the cost of swimmers. Thanks.	- SPA project documentation available on-line

Table 3k (email responses)		
Number of responses: 4		
#	Response	SPA Team response / action
1	<p>We support proposals to create a more healthy and active borough. Active travel, such as, walking and cycling and a healthy streets approach are vital to increasing physical activity and promoting health in Barnet. Most journeys in Barnet are less than 5 miles and there is considerable unrealised potential to get children and adults walking and cycling. Walking and cycling embed physical activity into daily life, are sustainable forms of transport with positive impacts on pollution levels in Barnet.</p> <p>As mentioned in this Framework, investment in walking and cycling infrastructure can deliver low cost, high value dividends for health. It is important that Barnet's streets are made more attractive for walking and cycling and that strong links are made between this framework and Barnet's Transport Strategy.</p> <p>By way of background, Barnet Cyclists is the local branch of the London Cycling Campaign and has approaching 300 members in Barnet. Our membership is varied including commuter, leisure and sports cyclists and people of all ages (from young adults through to those in their 70s and 80s). We have monthly meetings to discuss local cycling issues and bike-related matters including cycle maintenance and safety issues, and run a programme of cycle rides. We encourage, and provide advice, to people who are new to, or thinking about cycling.</p>	<ul style="list-style-type: none"> - Supported by the following commitment within the Growth and Development section, which has been enhanced further <i>'Enable, promote and support plans for active travel across Barnet, through a strategic network which aims to increase use and break down barriers associated with alternative travel methods e.g. walking and cycling'</i> - Links are made to the Local Implementation Plan, which provides context to transport within the borough. - The commitments listed within the 'Growth and Development' section of the Framework identify links to promote and enhance walking and cycling in the borough i.e.; <p><i>Through the planning process identify opportunities to invest in sport and physical activity in Barnet i.e. S106 monies.</i></p> <p><i>Influence planners and key policy makers to build and promote healthier and more active communities within new developments and regeneration schemes.</i></p> <p><i>Enable and promote active travel across the borough through a strategic network which aims to increase use and break down barriers associated with alternative travel methods e.g. walking and cycling.</i></p>
2	While I strongly agree with the vision, it is obvious the reality is far from it. This document lists the constraints that different residents	<ul style="list-style-type: none"> - SPA project documentation available on-line - The Framework encompasses all aspects of sport and physical

<p>have that prevents them from being more fit and active. At present there are plans for a new Barnet Copthall Leisure Centre and this document you say that the Council will focus on "Foster an accessible, inclusive and attractive approach to participate in activity" (page 2) and "Outcome 1 - Improve and enhance Barnet leisure facilities, ensuring that opportunities are accessible for all residents " (page 4). Yet if built this leisure centre will only be available predominately to those who can travel there by private vehicle, as it has a PTAL of zero. Additionally, the pedestrian access is a distance some residents cannot manage to walk, and over a path most would not be prepared to risk in the dark, when the centre will be open some days until 10pm. What is the point in having a "Fit and Active Barnet Framework" if it will be so obviously ignored! By removing diving and not allowing for the increasing demand for pool space or a competitive 50m pool you are not improving and enhancing Barnet Leisure facilities, but the opposite.</p> <p>On page 3 and 4 of the draft there is a list of objectives and on page 5 the 'useful facts' that paint an unhealthy picture of some residents. And on page 7 is listed some barriers to participation. While there is a need to have a variety of exercise and sporting opportunities, the most available to residents of all ages and socio-economic groups are pedestrian activities. There will be some residents who will not be able to be pedestrians but a large majority will be and if the pedestrian environment was improved, resulting in a more active person, this would lead to healthier individuals who could then focus on other physical activities as well.</p> <p>But the pedestrian infrastructure in this borough needs improvement. The latest walking and cycling statistics demonstrate that a large percentage of people walk, but some do not walk as frequently as recommended. The pedestrian environment needs to consider those that jog and run as well.</p>	<p>activity facilities (it is not restrictive to leisure centres), encouraging greater opportunity and accessibility.</p> <ul style="list-style-type: none"> - The commitments listed within the 'Growth and Development' section of the Framework identify links to promote pedestrian access in the borough i.e. enhanced walking and cycling opportunities (as above) - There is strategic alignment with the Parks and Open Spaces Strategy to enhance and improve parks and open spaces and seeks to address items raised.
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	<p>Much investment is being made in cycling, but cycling while important is not as common a form of exercise as pedestrian activities so pedestrian infrastructure should not be downgraded to 'shared paths' for cycling.</p> <p>The latest designs for footways have them slanting up and down at every driveway, thereby prioritising vehicles over pedestrians. Additionally, the footways are not pedestrian-friendly and should be designed for maximum benefit to pedestrians. The composition needs to be of softer materials, especially because people are living longer so their joints need to last longer and obese people are more likely to injury themselves by trying to exercise on hard surfaces.</p> <p>Two major identifiers restricting people being fit and healthy is that they do not have time for exercise and they cannot afford it. So the exercise environment needs to be brought to them. If someone wants to go to the gym or a leisure centre, there is the time travelling there and back, plus the cost of travel and admission. By improving the pedestrian environment outside resident's homes, this time and cost is eliminated. If they only have 20 minutes to spare they can exercise for 20 minutes for free, so more likely to than having to set aside probably 1 1/2 hours to justify a trip to the pool or gym.</p> <p>If all footways cannot be improved this way, a selection of the highest footfall footways should be upgraded to be more pedestrian-friendly. As a minimum, and with virtually no cross-overs, the footways around parks should be upgraded so that when parks are shut, there is an alternative space to exercise outside in good surroundings and better under-foot conditions than now. Rather than using asphalt on pedestrian paths in parks, more pedestrian-friendly materials need to be used and cycling and pedestrian paths need to be kept separate. On shared paths there is not the opportunity to wander for all ages with cyclists</p>	
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	<p>travelling faster. Paths in parks need to be considered as destinations, rather than transport corridors.</p> <p>A vision for Dollis Valley Greenwalk.</p> <p>This area needs to be pedestrian only as there is adequate and safer cycle route on quiet streets as the street crossing points along Dollis Valley Greenwalk have limited visibility when compared with vehicular intersections. If Transport for London want an off-road cycleway in Barnet they should consider cycle ways along the tube lines.</p> <p>Dollis Valley Greenwalk also is green belt or metropolitan open land and so a great area for the mind to get away from it all. This was not appreciated when the new path was put through from Fursby Ave to Dollis Road that now goes through a previous natural quiet space.</p> <p>With the many tube and bus stops along the walk, it is possible for many residents to access the walk by public transport. But facilities need to be provided so many can walk, run or jog along there when they live further away. There needs to be safe public toilets (individual cubicles with doors opening outward directly to the open space (no passageways)) and lockers available so they can leave their belongings while they exercise. This would open up the opportunity for residents to spend time exercising in pleasant surroundings while on their way to or from other activities. This would also be able to be achieved when time is short.</p>	
3	<p>We think the draft consultation is really good. We would especially like to highlight the desire for our facility (Tudor Park Footgolf/Golf Course) to assist the Fit and Active Partnership Board in reaching their objectives. Tudor Park Footgolf is currently achieving success in attracting many local people to</p>	<ul style="list-style-type: none"> - The club have been invited to discuss development plans/aspirations. - There is strategic alignment with the Parks and Open Spaces Strategy and Playing Pitch Strategy will be encouraged.

	<p>participate in sport however we believe this potential can be improved by an enhanced facility on our site. The old golf clubhouse at our venue has been vacant for over a year and we are interest in helping to create a new building which will also have a community room, cafe and changing rooms. This facility would allow the course to operate properly throughout the wet winter months thereby increasing participation in sports for the area.</p> <p>We are very keen to work together with the Board to support all of the various initiatives and make this a success.</p>	
4	<p>I have read the documents and wish to email my comments.</p> <p>1. Why does Barnet always use “survey monkey” for its consultations? It forces residents to choose an option before moving onto the next page, even if they do not agree with any of them. I prefer to read the whole document first, but it does not allow that.</p> <p>2. As for improving fitness in the borough. If you are so keen on this, why are you allowing development on our playing fields? Stanley Playing Field in East Finchley is now a school. Someone is trying to build a huge horrendous block of flats in Victoria Park N3, (well done for throwing out that proposal, for the moment, but they will be back no doubt) and development is being allowed in Victoria Park East Barnet. Although it is for sport, it should not be taking up someone else’s green space and is a net loss of recreation space as prior to this there was Church Farm Pool and Victoria Park. Now a huge part of Victoria Park will be concreted over.</p> <p>There is an appeal pending for building on the Dollis Valley Walk. If Barnet own this land, then why do they not simply say it is not for sale to any developer? We use this walk regularly and it should be sacrosanct. It is the lungs of the borough.</p> <p>As Strawberry Vale N2 is one of the most deprived areas in the country, why are there no proposals for that area?</p>	<ul style="list-style-type: none"> - A response was provided in relation to why LBB utilise Survey Monkey and the options and documents available to enable participants to have their say. The respondent was also offered to be posted a paper copy of the survey and draft Framework. - A response was provided regarding the planning and redevelopment in line with national and local guidance. - The Adults & Health section of the draft Framework encompasses all disabilities and the newly established Barnet Disability Sports Network has been set up to enhance opportunities and access for disabled people within the borough and promote equality. - The Carers Pass scheme continues to be offered within the borough with no break in service. As a key partner that provide an invaluable service to carers within the borough, Barnet Carers Centre are responsible for the coordination of the pass with Barnet’s leisure operator (Better). Barnet Carers Centre staff continue to liaise with the Prevention and Wellbeing team at the Council to ensure that those eligible and are not registered with the Carers Centre continue to have access to the scheme. - The Parks investment plan will look at play facilities and set out a schedule for when each play area will be expected to receive investment. Barnet has its own play area maintenance and inspection team who inspect all of the boroughs play areas at least once per week and undertake general maintenance in order to ensure even the oldest play equipment is safe and in good working order.

<p>Similarly the Grange Estate N2. Cherry Tree Woods N2 playground has not had any investment for years. My son is 24 and some of the playground equipment was there when he was a toddler. I do not see any proposals for making facilities welcoming to those with learning disabilities. They need to keep healthy too, for their physical and mental wellbeing. As for Carers, I understand the Carer's Passes were recently cancelled, with no notice. And carers were obliged to apply through The Carer's Centre even if they did not want to go through them for whatever reason.</p>	
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Summary

An updated draft of the FAB Framework (2016-2021) will be presented at the Adults & Safeguarding Committee on 6th March 2017 with a recommendation to adopt the document as a final version. Upon adoption the Sport & Physical Activity team will mobilise the establishment of FAB Partnership to implement the Framework, deliver commitments and determine local measures of success.

Results of the consultation exercise will be published and available via Engage Barnet https://engage.barnet.gov.uk/we_asked_you_said

Equality Impact Analysis (EIA) Resident/Service User

Please refer to the guidance and initial Equality Impact Analysis before completing this form.

1. Details of function, policy, procedure or service:	
Title of what is being assessed: Fit & Active Barnet Framework (2016 – 2021)	
Is it a new or revised function, policy, procedure or service? New framework (strategic document)	
Department and Section: Commissioning Group – Adults & Health; Sport & Physical Activity	
Date assessment completed: 31/10/2016	
2. Names and roles of people completing this assessment:	
Lead officers	Cassie Bridger – Strategic Lead – SPA Courtney Warden – Commissioning Lead - SPA
3. Full description of function, policy, procedure or service:	
<p>In 2015 a Sport and Physical Activity (SPA) Team was formed within London Borough of Barnet (LBB) with the responsibility to deliver an effective approach to sport and physical activity across the borough.</p> <p>Whilst it is recognised that Barnet has a healthy mix of SPA opportunities and assets, with only 37.7% of Barnet's adult population (16+) participating in sport at least once a week¹ combined with a number of health inequalities², there is need for a collaborative approach to address this multi-faceted challenge. This guided the development of a Fit and Active Barnet (FAB) Framework 2016-2021, which seeks to facilitate a revised strategic direction to achieve a shared vision of <i>'creating a more active and healthy borough'</i>.</p> <p>The Framework encourages greater collaboration to drive improvements and unlock new opportunities between partners, whilst demonstrating alignment to corporate priorities. The FAB Framework 2016-2021 is reflective of the evolving physical activity, sporting and social landscape of Barnet, which through alignment with new national strategy³ for sport and physical activity, seeks to provide a co-ordinated approach to identify how increasing participation should fully embrace a diversity of services to provide an integrated solution.</p> <p>The Framework identifies four outcomes underpinned by 'commitments', which will facilitate the <i>'creation of a more active and healthy borough'</i>⁴:</p> <ol style="list-style-type: none"> 1. Improve and enhance Barnet leisure facilities, ensuring that opportunities are accessible for all residents 2. Advocate investment and innovative policies to support the delivery of high quality accessible facilities 3. Facilitate partnerships and develop opportunities that demonstrate a commitment to embed an active 	

¹ Measured by [Sport England's Active People Survey 9](#)

² As evidenced within the [Barnet Joint Strategic Needs Assessment](#)

³ [Sport England; Towards an Active Nation \(2016 – 2021\)](#)

⁴ Aligned with the SPA related s demonstrated within the [Joint Health & Well-being Strategy](#) (2015 – 2020)

habit

4. Target those who do not traditionally engage

The vision to '*create a more active and healthy borough*' encompasses all Barnet residents as we strive to enhance access to opportunities and promote equality. Nevertheless, to facilitate an approach that engages and captivates residents in a more focused and concentrated manner the Framework will be a vehicle to respond to the diverse needs of the following under-represented groups⁵;

- Children & Young People
- Older Adults
- Women and Girls
- Disabled People
- Black and Minority Ethnic Groups

Recognising the breadth of opportunity and diverse network of current and potential stakeholders, the Framework outlines the contribution sport and physical activity can make locally, recommending the establishment of a Fit & Active Barnet Partnership to support the delivery of the outcomes identified. It is intended that the Fit & Active Barnet Partnership will be underpinned by thematic sub groups i.e. Disability Sports Network to support the implementation of this Framework.

At the core of this aspiration it will mean that by 2021 there will be measurable improvements that determine;

- An increase in the percentage of active adults (as defined by Sport England Active Lives Survey, formally Active People Survey).
- Improved health outcomes and general wellbeing
- Improved opportunities to access sport & physical activity for all ages and abilities
- An enhanced approach to partnerships
- Better intelligence to identify needs, supply and demand for sport and physical activity provision
- Innovative approaches to make participation an attractive choice
- Increase sustainability, creating more resilient communities and sport and physical activity providers, including; clubs and the voluntary and community sector.

To ensure the Framework is fully reflective and seeks to address the needs of the individuals and communities in which it was served, the document was developed using a two stage consultation process;

Stage 1 – workshops with partners and stakeholders to shape the vision, outcomes and proposed commitments within the framework. This included but was not limited to partner and stakeholder representation from Barnet and Harrow Public Health, National Governing Bodies of Sport and the Voluntary and Community sector.

Stage 2 – public consultation via London Borough of Barnet's consultation platform, Engage Barnet. This process sought feedback from partners, stakeholders, residents and community groups etc. on the proposed vision, outcomes and commitments.

⁵ As identified via available insight - Barnet Joint Strategic Needs Assessment

How are the equality strands affected? Please detail the effects on each equality strand, and any mitigating action you have taken so far. Please include any relevant data. If you do not have relevant data please explain why.			
Equality Strand	Affected?	Please explain how affected	What action has been taken already to mitigate this? What further action is planned to mitigate this?
1. Age	Yes <input type="checkbox"/> POSITIVE	<p>Sport England Active People Survey;</p> <ul style="list-style-type: none"> - 37.7% of adults (16+) participate in sport once a week - 50.1% of the adult population (16+) do not currently take part in any sport - 68% of adults (16+) want to do more sport - Data on youth participation (under 16) is not currently available due to Sport England's data collection methodology <p>Joint Strategic Needs Assessment;</p> <ul style="list-style-type: none"> - 57.8% of adults (16+), 20.8% of 4 – 5 year olds and 38.6% of 10 – 11 year olds experience problems with excess weight (overweigh & obese), - Barnet is now the most populous London borough with an estimated 376,265 residents and is growing. The highest rates of population growth are forecast to occur around the planned development works in the west of the borough with over 113% growth in Golders Green and 56% in Colindale by 2030. <p>When focusing on under-represented groups;</p> <ul style="list-style-type: none"> - The over-65 population is forecast to grow three times faster than the overall population between 2015 and 2030, and the rate increases in successive age bands⁶. 	<p>The FAB Framework seeks to have a positive affect by widening access to and enhancing the SPA experience for all residents within the borough, through the adoption of a full life course approach that is directed by available insight.</p> <p>Whilst the Framework is holistic in its approach, alignment with insight and the five commissioning areas facilitates a direction that supports improved participation amongst the under-represented age groups of children and young people and older people via a number of commitments. These will be guided by the implementation of a FAB partnership. Examples include;</p> <ul style="list-style-type: none"> - Contributing to the creation of a 'family friendly' borough - Increasing physical literacy in early years, schools and home settings - Ensuring new and existing commissions are centred around the needs of residents and address wider social and community outcomes, facilitating links between the most appropriate services/partners - Influence sustainable programming that achieves prevention and early intervention, prohibiting/alleviating the onset of long term health conditions and social isolation. - Work in partnership with health champions, brokers and organisations to promote borough wide opportunities so they become an 'attractive choice' for service users. - Encourage an innovative approach that seeks to increase participation via less traditional

⁶ Barnet Joint Strategic Needs Assessment

		<ul style="list-style-type: none"> - The young Barnet population is estimated to grow by 6% up to 2020 when it will reach 98,914 maintaining Barnet as the second highest population of children and young people in London⁷. 	<p><i>forms of delivery to reach a wider demographic and address barriers to participation i.e. parkrun.</i></p> <ul style="list-style-type: none"> - <i>Ensure brief advice on physical activity is incorporated into services for groups that are particularly likely to be inactive</i> <p>Mitigation = Framework developed via two stage consultation process.</p>
2. Disability	Yes <input type="checkbox"/> POSITIVE	<p>There is no definitive data on the number of people living with a disability within the borough, although research undertaken by Oxford Brookes University provided the following estimates;</p> <ul style="list-style-type: none"> - Moderate or severe learning disabilities = 1,507 - Moderate physical disabilities = 16,795 - Severe physical disability = 4,759 - Mental health problems = 16,23 <p>An estimated 5,912 pupils in Barnet have some form of Special Educational Need (SEN) with over 600 children and young people registered as having a disability</p> <p>Due to a low sample size there is no data available on the number of adults with a disability participating in sport.</p> <p>Data on youth participation in sport (including disabled young people) is not currently available.</p>	<p>The FAB Framework seeks to have a positive affect by widening access to and enhancing disabled and inclusive opportunities within the borough.</p> <p>This will be facilitated through the following commitments, driven by the implementation of a FAB partnership;</p> <ul style="list-style-type: none"> - <i>Widen access to ensure that facilities and open spaces are better used by the communities they serve.</i> - <i>Embed a commitment to align to and fulfil key policy that directly impacts participants and the quality of services received i.e. Mental Health Charter for Sport and Recreation, Barnet Dementia Manifesto and the emerging Governance Code for Sport in the UK.</i> - <i>Advocate for spaces and facilities to meet recommended standards i.e. DDA compliant.</i> - <i>Promote the Inclusive Fitness Initiative.</i> - <i>Develop and fully integrate the Barnet Disability Sports Network</i> - <i>Encourage alignment with best practice tools and guidance i.e. Dementia Friends and Club ID</i> - <i>Encourage the use of open data to better understand participation and inform future programming</i> - <i>Work in partnership with health champions, brokers and organisations to promote borough wide opportunities so they become an 'attractive choice' for service users.</i>

⁷ [Barnet Children & Young People Plan \(2016 – 2020\)](#)

			<ul style="list-style-type: none"> - Ensuring new and existing commissions are centred around the needs of residents and address wider social and community outcomes, facilitating links between the most appropriate services/partners - Refine understanding of the needs and barriers to participation amongst priority groups by working with key agencies and service users - Encourage an innovative approach that seeks to increase participation via less traditional forms of delivery to reach a wider demographic and address barriers to participation i.e. parkrun. - Ensure brief advice on physical activity is incorporated into services for groups that are particularly likely to be inactive <p>Mitigation = Framework developed via two stage consultation process.</p>
3. Gender reassignment	No <input type="checkbox"/>	There is very limited data available on this protected characteristic. It is not anticipated that there will be a negative impact on gender reassignment or a positive intervention required.	<p>The FAB Framework seeks to have a positive affect by widening access to and enhancing the SPA experience for all residents within the borough.</p> <p>Whilst the Framework does not focus specifically on this protected characteristic the FAB partnership has a commitment to;</p> <ul style="list-style-type: none"> - Ensuring new and existing commissions are centred around the needs of residents and address wider social and community outcomes, facilitating links between the most appropriate services/partners. - Widen access to ensure that facilities and open spaces are better used by the communities they serve. - Encourage an innovative approach that seeks to increase participation via less traditional forms of delivery to reach a wider demographic and address barriers to participation i.e. parkrun.

			Mitigation = Framework developed via two stage consultation process.
4. Pregnancy and maternity	Yes <input type="checkbox"/> POSITIVE	<p>There is very limited data available on this protected characteristic, however recognising the importance of being physically active during pregnancy, maternity and early years the Framework seeks to address through a life course approach.</p>	<p>The FAB Framework seeks to have a positive affect by widening access to and enhancing the SPA experience for <u>all</u> residents within the borough.</p> <p>Whilst the Framework does not focus specifically on this protected characteristic it recognises the importance of supporting initiatives that encourage increased participation within these life stages i.e. Healthy Children's Centres.</p> <p>The 'commitments' outlined in the 'age' strand above identify how this protected characteristic is considered within the FAB Framework.</p> <p>Mitigation = Framework developed via two stage consultation process.</p>
5. Race / Ethnicity	Yes <input type="checkbox"/> POSITIVE	<p>Barnet's population is becoming more diverse, driven predominately by the natural change in population.</p> <p>The highest proportion of the population from white ethnic backgrounds are 90 years and over age group (93.3%), whereas the highest proportion of people from BME groups are found in the 0-4 age group (55.4%).</p> <p>The wards if Burnt Oak, Colindale and West Hendon have populations whom are than 50% are from BME backgrounds.</p> <p>Sport England Active People Survey 9 demonstrates that 35.6% of adults (16+) from BME communities and 40.4% from White communities participate in sport once or more times per week (30 mins)</p>	<p>The FAB Framework seeks to have a positive affect by widening access to and enhancing the SPA experience for <u>all</u> residents within the borough.</p> <p>The Framework has identified BME communities as an under-represented group in respect of participation and an area of focus to address inequalities and respond to diverse needs. The FAB partnership sets out to achieve this by;</p> <ul style="list-style-type: none"> - Ensuring new and existing commissions are centred around the needs of residents and address wider social and community outcomes, facilitating links between the most appropriate services/partners. - Widen access to ensure that facilities and open spaces are better used by the communities they serve. - Refine understanding of the needs and barriers to participation amongst priority groups by working with key agencies and service users. - Encourage an innovative approach that seeks to increase

			<p><i>participation via less traditional forms of delivery to reach a wider demographic and address barriers to participation i.e. parkrun.</i></p> <p>- <i>Ensure brief advice on physical activity is incorporated into services for groups that are particularly likely to be inactive</i></p> <p>Mitigation = Framework developed via two stage consultation process.</p>
6. Religion or belief	No <input type="checkbox"/>	<p>The only reliable data set for religion within the Borough comes from the 2011 Census results.</p> <p>Over the ten years between the 2001 and 2011 Census the religious makeup of Barnet has become increasingly diverse, with proportionate growth in most religions except Christianity and Hinduism. The largest increase was in the number of Muslims within the Borough, which increased by 4.2%, although people with no religion had the second highest rate of growth and now accounts for 16.1% of the population.</p> <p>After Christianity, Judaism was the second most common religion, with Barnet continuing to have the largest Jewish population in the country. The Jewish and Muslim population makes up over a quarter of the total population of Barnet.</p>	<p>The FAB Framework seeks to have a positive affect by widening access to and enhancing the SPA experience for <u>all</u> residents within the borough.</p> <p>Whilst the Framework does not focus specifically on this protected characteristic the FAB partnership has a commitment to;</p> <p>- <i>Ensuring new and existing commissions are centred around the needs of residents and address wider social and community outcomes, facilitating links between the most appropriate services/partners.</i></p> <p>- <i>Widen access to ensure that facilities and open spaces are better used by the communities they serve.</i></p> <p>- <i>Encourage an innovative approach that seeks to increase participation via less traditional forms of delivery to reach a wider demographic and address barriers to participation i.e. parkrun.</i></p> <p>Mitigation = Framework developed via two stage consultation process.</p>
7. Gender / sex	Yes <input type="checkbox"/> POSITIVE	<p>Women account for a larger proportion of the Barnet population than men. 51.1% (187,685) of the population are women and 48.9% (179,580) of the population are men. The proportion of men to women is roughly equal below 65, whereas above 64, women account for 56.5% of the population (29,152) compared to men</p>	<p>The FAB Framework seeks to have a positive affect by widening access to and enhancing the SPA experience for <u>all</u> residents within the borough, through the adoption of a full life course approach that is directed by available insight.</p> <p>Whilst the Framework is holistic in its approach there are clear disparities in the levels of SPA participation amongst males and females in the borough (which is also concurrent with the national</p>

		<p>who account for 43.5% (22,423). This reflects the longer lifespans of women.</p> <p>Sport England Active People Survey 9 demonstrates that 37.2% of men and 32.6% of women (aged 26+) currently participate in sport once or more per week (30min)</p>	<p>picture). As such women and girls have been identified as an under-represented group and an area of focus for the FAB partnership. The following 'commitments' will assist driving up participation amongst this group;</p> <ul style="list-style-type: none"> - Ensuring new and existing commissions are centred around the needs of residents and address wider social and community outcomes, facilitating links between the most appropriate services/partners. - Widen access to ensure that facilities and open spaces are better used by the communities they serve. - Encourage an innovative approach that seeks to increase participation via less traditional forms of delivery to reach a wider demographic and address barriers to participation i.e. parkrun. - Align with and fully embrace key government and national targeted campaigns to get the nation moving more i.e. This Girl Can. - Ensure brief advice on physical activity is incorporated into services for groups that are particularly likely to be inactive <p>Mitigation = Framework developed via two stage consultation process.</p>
8. Sexual orientation	No <input type="checkbox"/>	<p>There is very limited data available on this protected characteristic. It is not anticipated that there will be a negative impact on gender reassignment or a positive intervention required.</p>	<p>The FAB Framework seeks to have a positive affect by widening access to and enhancing the SPA experience for <u>all</u> residents within the borough.</p> <p>Whilst the Framework does not focus specifically on this protected characteristic the FAB partnership has a commitment to;</p> <ul style="list-style-type: none"> - Ensuring new and existing commissions are centred around the needs of residents and address wider social and community outcomes, facilitating links between the most appropriate services/partners. - Widen access to ensure that

			<p><i>facilities and open spaces are better used by the communities they serve.</i></p> <p>- <i>Encourage an innovative approach that seeks to increase participation via less traditional forms of delivery to reach a wider demographic and address barriers to participation i.e. parkrun.</i></p> <p>Mitigation = Framework developed via two stage consultation process.</p>
<p>9. Marital Status</p>	<p>No <input type="checkbox"/></p>	<p>There is very limited data available on this protected characteristic. It is not anticipated that there will be a negative impact on gender reassignment or a positive intervention required.</p>	<p>The FAB Framework seeks to have a positive affect by widening access to and enhancing the SPA experience for all residents within the borough.</p> <p>Whilst the Framework does not focus specifically on this protected characteristic the FAB partnership has a commitment to;</p> <p>- <i>Ensuring new and existing commissions are centred around the needs of residents and address wider social and community outcomes, facilitating links between the most appropriate services/partners.</i></p> <p>- <i>Widen access to ensure that facilities and open spaces are better used by the communities they serve.</i></p> <p>- <i>Encourage an innovative approach that seeks to increase participation via less traditional forms of delivery to reach a wider demographic and address barriers to participation i.e. parkrun.</i></p> <p>Mitigation = Framework developed via two stage consultation process.</p>
<p>10. Other key groups?</p> <p>Carers</p> <p>People with mental health issues</p> <p>Some families and lone parents</p>	<p>Yes <input type="checkbox"/> POSITIVE</p> <p>Yes <input type="checkbox"/> POSITIVE</p> <p>Yes <input type="checkbox"/> POSITIVE</p>	<p><u>Carers</u> In 2011 approx. 32,000 carers were registered in Barnet, with approx. 12,746 aged 25 – 49 years. On averaged 5.2% of carers reported having poor health.</p> <p><u>Mental Health</u> In 2015 it was predicted that 56,333 people aged 18 – 64 have a mental health condition in Barnet.</p>	<p>There is a commitment within the current leisure management contract to support carers (adult and young people) with access to Barnet leisure centres through the Carers Pass scheme. It is anticipated the same or a similar scheme will continue within the new leisure management contract (commencing 2018).</p> <p>The FAB Framework seeks to have a positive affect by widening access to and enhancing the SPA</p>

People with a low income	Yes <input type="checkbox"/> POSITIVE	<u>People with a low income</u> In 2015, 13.5% of households had a household income of below £15,000; this is above the London rate of 18.0% and the Great Britain rate of 24.0%. In comparison to other London Boroughs, Barnet has the sixth lowest rate of households with a total income of less than £15,000 per year. More than one in four households in Burnt Oak earn below £15,000 per year and around one in five households in Colindale and Underhill earn below £15,000 per year; this compares to Garden Suburb where fewer than one in ten households earns below £15,000 per year.	experience for all residents within the borough.
Unemployed people	Yes <input type="checkbox"/> POSITIVE		Whilst the Framework does not focus specifically on these other key groups the FAB partnership has a commitment to;
Young people not in employment education or training	Yes <input type="checkbox"/> POSITIVE	<p><u>Unemployed people</u> In line with national trends, the highest rate of unemployment (11.9%) is within the 16-24 age group, although this is below the Outer London rate of 20.4% and the UK rate of 17.5%. The Wards with the highest rates of unemployment were once again located towards the West of the Borough in Colindale (8.4%) and Burnt Oak (8.1%).</p> <p><u>NEET young people</u> Overall in Barnet 2.3% of 16-18 year olds are NEET. Males are over-represented as NEET 61%, compared to 51% in general population. Barnet is ranked 4th nationally in terms of the proportion of 16 to 18 year olds not in education, employment or training (NEET). This success is continued for those pupils with learning difficulties or disabilities, where participation rates are ranked 9th nationally.</p>	<ul style="list-style-type: none"> - Embed a commitment to ensuring that delivery partners and stakeholders are aligned to and fulfilling key policy that directly impacts participants and the quality of services received i.e. Mental Health Charter for Sport and Recreation. - Ensure brief advice on physical activity is incorporated into services for groups that are particularly likely to be inactive - Ensuring new and existing commissions are centred around the needs of residents and address wider social and community outcomes, facilitating links between the most appropriate services/partners. - Widen access to ensure that facilities and open spaces are better used by the communities they serve. - Encourage an innovative approach that seeks to increase participation via less traditional forms of delivery to reach a wider demographic and address barriers to participation i.e. parkrun. - Encourage the development of volunteering across the Borough through strategic alignment to the Community Participation Strategy adopting a 'Do it with us, not to us' approach. - Encourage high quality employment and work experience through the sports and physical activity sector to benefit local residents - Encourage alignment with best practice tools and guidance i.e. Dementia Friends and Club ID - Encourage the use of open data to better understand participation and inform future

			<p><i>programming</i></p> <ul style="list-style-type: none"> - <i>Influence sustainable programming that achieves prevention and early intervention, prohibiting/alleviating the onset of long term health conditions and social isolation.</i> - <i>Develop and fully integrate the Barnet Disability Sports Network</i> - <i>Work in partnership with health champions, brokers and organisations to promote borough wide opportunities so they become an 'attractive choice' for service users.</i> <p>In addition to these commitments there is a consistent theme throughout the Framework to ensure that delivery models / programmes are 1) accessible 2) cost effective for both the operator and end user and 3) are able to demonstrate a positive effect on wider society outcomes such as access to employment and increased community cohesion. There is a commitment that the FAB Partnership will utilise technologies help evaluate impact i.e. Sport England's Return on Investment toolkit.</p> <p>Mitigation = Framework developed via two stage consultation process.</p>
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5. What will be the impact of delivery of any proposals on satisfaction ratings amongst different groups of residents?

The FAB Framework and its associated outcomes / priorities will have a positive impact on satisfaction amongst different groups of residents as it seeks to work collaboratively to *'create a more active and healthy borough'*.

Considering it's holistic approach to SPA and supporting wider strategy and commissioning plans i.e. Parks & Open Spaces Strategy and the Children & Young People Plan, the FAB Framework is anticipated have a positive effect on the following areas measured by the Resident Perception Survey (twice annually);

Area	Autumn 2015 Excellent / Good %
Parks, playgrounds and open spaces	67%
Council owned leisure centres	20%
Activities for teenagers and young people	38%

In addition to the above, satisfaction will continue to be measured via the leisure management contract via monthly customer correspondence and an annual user survey.

It is intended that the following 'commitments' outlined for the FAB partnership will further facilitate the measurement of satisfaction amongst different groups of residents;

- *Encourage the use of open data across the partnership to better understand participation and inform meeting current and future demand.*
- *Work across the partnership to implement a model to effectively evaluate targeted activities.*

6. How does the proposal enhance Barnet's reputation as a good place to work and live?

Development of a strategic framework that facilitates a collaborative approach to *'creating a more active and healthy borough'*, supports the Council's corporate objective to make sure Barnet is a place;

- *of opportunity, where people can further their quality of life*
- *where people are helped to help themselves, recognising that prevention is better than cure*
- *where responsibility is shared, fairly*
- *where services are delivered efficiently to get value for money for the taxpayer*

To ensure that the Framework truly represents and meets the needs of Barnet, the outcomes and priorities identified were developed via a two stage consultation process (as identified above).

7. How will members of Barnet's diverse communities feel more confident about the council and the manner in which it conducts its business?

The FAB Framework strives to '*create a more active and healthy borough*' which encompasses all residents, with a particular focus on under-represented groups. Through a collaborative approach and identifying the right partners/stakeholders to work with the, FAB Partnership will be positioned to influence and deliver the commitments identified within the framework at a local level, demonstrating greatest impact amongst the boroughs diverse communities.

The two stage consultation process used to develop the Framework provided the opportunity for partners, stakeholders, community groups and residents etc. to shape the content, ensuring it is fit for purpose and truly reflective and responsive to the need within Barnet. Through our diverse partner and stakeholder network, there is a commitment for residents to continue to be engaged in service design and delivery to facilitate success and demonstrate greatest impact.

8. Please outline what measures and methods have been designed to monitor the application of the policy or service, the achievement of intended outcomes and the identification of any unintended or adverse impact? *Include information about the groups of people affected by this proposal. Include how frequently the monitoring will be conducted and who will be made aware of the analysis and outcomes? This should include key decision makers. Include these measures in the Equality Improvement Plan (section 16)*

The FAB Framework will be governed by a FAB Partnership, a strategic body that will support the facilitation of sport and physical activity in the borough. It is intended that the FAB Partnership will comprise of partners involved in strategy, policy and development matters relating to Barnet (including but not limited to);

- Sports sector including National Governing Bodies of Sport, London Sport, Sports Clubs and other delivery partners
- Education sector including HE and FE
- VCS and organisations

An early and crucial role of the FAB Partnership is to agree what success looks like and how outcomes are measured at a local level to demonstrate greatest impact. There will be a desktop review of progress made against the outcomes in the FAB Framework in 2018 following a year of implementation.

Barnet's performance in relation to resident participation in sport and physical activity will continue to be measured by Sport England. Previously this was measured via the Active People Survey (adults aged 16+ participating in 30min or more of moderate intensity exercise one or more times per week). To align with Sport England's new strategy 'Towards an Active Nation', the data collection methodology has been revised and will see the introduction of the Active Lives Survey (replacing the Active People Survey). This survey will encompass Sport England's broadened age range from 5+ (previously 16+) and whilst the exact measures are being agreed, it is anticipated key performance indicators will focus on;

- *Decrease in percentage of people physically inactive*
- *Increase in the number of people volunteering in sport at least twice in the last year*
- *The demographics of volunteers in sport to become more representative of society as a whole*
- *Number of people who have attended a live sporting event more than once in the past year*

9. How will the new proposals enable the council to promote good relations between different communities? *Include whether proposals bring different groups of people together, does the proposal have the potential to lead to resentment between different groups of people and how might you be able to compensate for perceptions of differential treatment or whether implications are explained.*

The FAB Framework seeks to have a positive effect by widening access to and enhancing the SPA experience for **all** residents within the borough, however recognising and responding to apparent inequalities requires a focus on targeting under-represented groups (as identified above).

It is recognised that impactful delivery of the FAB Framework is only achievable through a collaborative approach which includes a variety of partners and stakeholders who have a shared vision to '*create a more active and healthy borough*'.

To effectively achieve a shared vision and direction the draft FAB Framework was developed in consultation with a number of key partners and stakeholders (as identified above). An open consultation process allowed for further consultation with partners and stakeholders in addition to residents and wider community groups to ensure that the Framework is fit for purpose and deliverable at a local level.

Through collaboration with the right partners/stakeholders we will be better positioned to understand needs and barriers. This will inevitably facilitate improved service design and delivery resulting in great engagement and impact in relation to implementation of the Framework.

10. How have employees and residents with different needs been consulted on the anticipated impact of this proposal? How have any comments influenced the final proposal? *Please include information about any prior consultation on the proposal been undertaken, and any dissatisfaction with it from a particular section of the community. Please refer to Table 2*

As noted above, the draft framework (outcomes and commitments) were developed in consultation with key partners and stakeholders (including but not limited to); National Governing Bodies of Sport, Barnet & Harrow Public Health and the Voluntary and Community Sector. Following sign off at Adults and Safeguarding committee on 19th Sep 2016 the draft Framework followed a six week open consultation process which invited partners, stakeholders, community groups and residents etc. to have their say on the draft Framework and test the vision for Barnet.

The consultation was made available via Engage Barnet and a paper copy of the questionnaire was available on request.

Feedback from the consultation was reviewed and amends were made to the Framework where applicable / response provided in a consultation summary report (available via Engage Barnet).

Overall Assessment

11. Overall impact			
Positive Impact	Negative Impact or Impact Not Known ⁸	No Impact	
✓	x	x	

12. Scale of Impact		
Positive impact:	Negative Impact or Impact Not Known	
Minimal ✓	Minimal x	
Significant x	Significant x	

13. Outcome			
No change to decision	Adjustment needed to decision	Continue with decision (despite adverse impact / missed opportunity)	If significant negative impact - Stop / rethink
✓	x	x	x

⁸ 'Impact Not Known' – tick this box if there is no up-to-date data or information to show the effects or outcomes of the function, policy, procedure or service on all of the equality strands.

14. Please give full explanation for how the overall assessment and outcome was decided.

This EIA has identified that the overall intended impact of the FAB Framework is positive as we seek to enhance the SPA offer and landscape in the borough, '*creating a more active and healthy borough*'.


Developing the FAB Framework through utilisation of available insight i.e. JSNA and Sport England's Active People Survey, and alignment with key strategies and plans has facilitated a direction that encourages a collaborative approach across a diversity of services and organisations to achieve a shared vision.

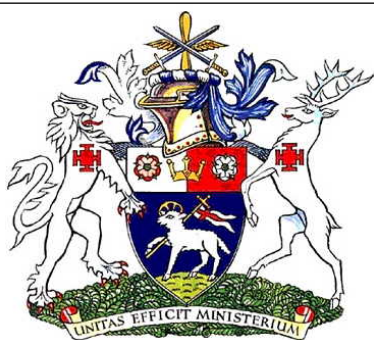
A two stage consultation process 1) development stage with partners and stakeholders and 2) open consultation on the draft Framework encompassing all partners, stakeholders, communities and residents etc. further supports the Framework being equitable in its approach; reflective and responsive to the needs of Barnet.

15. Equality Improvement Plan

Please list all the equality objectives, actions and targets that result from the Equality Analysis (continue on separate sheets as necessary). These now need to be included in the relevant service plan for mainstreaming and performance management purposes.

Equality Objective	Action	Target	Officer responsible	By when
Implementation of a FAB partnership to govern the execution and monitoring of the FAB Framework.	Identify appropriate partners and stakeholders and initiate FAB partnership.	Partnership established inclusive of draft Terms of Reference.	Cassie Bridger – Strategic Lead – SPA Courtney Warden – Commissioning Lead SPA	April 2017

1st Authorised signature (Lead Officer/Project Sponsor) 	2nd Authorised Signature (Service lead/Project Manager)
Date: 31/02/2017	Date:



Adults and Safeguarding Committee

6 March 2017

Title	Extension of and variation of IMCA and IMHA contract
Report of	Commissioning Director, Adults and Health
Wards	All
Status	Public
Urgent	No
Key	Yes
Enclosures	None
Officer Contact Details	Paula Arnell, Joint Commissioning Manager, Barnet Council and NHS Barnet Clinical Commissioning Group Paula.arnell@barnetccg.nhs.uk

Summary

This report seeks approval to extend an existing contract with the Barnet, Enfield & Haringey Consortium for Independent Mental Capacity Advisors (IMCA) & Independent Mental Health Advisors (IMHA) for one year (from 1st April 2017 – 31st March 2018), and to vary the value by an additional £28,980. The report presents the reasons for extending the contract and requesting a variation in contract value.

The contract is in place to deliver statutory Independent Mental Health Advocacy (IMHA) and Independent Mental Capacity Advocate (IMCA) services. The current tripartite contract for the service (delivered by Voiceability) is led by the London Borough of (LB) Enfield on behalf of LB Enfield, LB Barnet and LB Haringey.

The demand for the service has increased year on year following the contract award in February 2014, with additional funding being authorised for the financial years 2015/16 and 2016/17 on 24th March 2015 by the Policy and Resources Committee.

The recommendation to extend the contract and authorise a contract variation for additional funding is being made ahead of the original end date of the contract of 31st March 2017, and is being made in order to meet the Council's statutory obligation to provide Independent Mental Capacity advocacy services to Barnet residents and ensure sufficient funding to meet the continued additional demand.

Recommendations

- 1. That the Committee approves the extension of the contract with Barnet, Enfield & Haringey Consortium for Independent Mental Capacity Advocacy (IMCA) & Independent Mental Health Advocacy (IMHA), provided by Voiceability, from 1st April 2017 – 31st March 2018.**
- 2. That the Committee authorises a variation to the contract with Barnet, Enfield & Haringey Consortium for Independent Mental Capacity Advocacy (IMCA) & Independent Mental Health Advocacy (IMHA) for an additional £28,980, therefore making the total contract value £96,243.03 for the extended contract year of 1st April 2017 – 31st March 2018.**

1. WHY THIS REPORT IS NEEDED

- 1.1 The recommendation to extend the contract is to ensure that there is adequate provision of the statutory service. Under the Mental Capacity Act 2005 Deprivation of Liberty Safeguards (DoLS), the Council has a statutory obligation to provide Independent Mental Capacity advocacy services to Barnet residents.
- 1.2 In March 2014, the Supreme Court delivered a judgement which effectively widened the definition of DoLS. The number of people who are now subject to the Deprivation of Liberty Safeguards has increased substantially.
- 1.3 If an individual is deprived of their liberty under the Mental Capacity Act 2005 (MCA) then they must have a Relevant Persons Representative (RPR), an independent advocate who is appointed to protect the individual's interests. This is usually a family member or friend, but when an individual does not have a suitable family member or friend, they are entitled to an independent advocate.
- 1.4 When the IMHA/IMCA contract was commissioned, the baseline given to providers was 9 RPRs per annum, based on activity prior to the Supreme Court judgement. This has increased significantly following the 2014 judgement, with a projected number of RPRs for 2016/17 of 79. The table below provides figures over the lifetime of the contract.

Service	Baseline	2014/15	2015/16	2016/17 (projection based on Q1-3)
RPR*	9	67	64	79

2. REASONS FOR RECOMMENDATIONS

- 2.1 At its meeting on 25th February 2014, the Cabinet Resources Committee (CRC) awarded a contract to Voiceability for a period of three years, with the option to extend for one year, plus another further year. The proposed extension of this contract is therefore permitted under the original terms of the contract, and is compliant with the Council's Contract Procedure Rules (see 5.4.2).
- 2.2 The Barnet contribution to the contract was stated as £201,791, with the overall value being £548,653. At its meeting on 24th March 2015, the Policy and Resources Committee authorised a variation to the contract up to the value of £40,000 per annum from 1st April 2015 – 31st March 2017.
- 2.3 The extension and variation agreement for 2017/18 in the contract will be £246,500 across the three boroughs. The proposed amount paid by Barnet will be £96,243.03. This is an additional amount of £28,980 per annum above the original contract agreement.
- 2.4 In order to commit this funding, a contract variation is needed in addition to a contract extension. Contract variations are permitted if they are compliant with the Council's Contract Procedure Rules (see 5.4.2).
- 2.5 The Barnet contribution to the initial contract value was £67,263. This increased to £85,565.71 in 2015/16 and £92,568.24 in 2016/17. The report that the Policy and Resources Committee considered granted additional funding was for 2015/16 and 2016/17. Additional funding is now required for 2017/18.
- 2.6 On December 1st 2016, the Policy and Resources Committee approved the Procurement Forward Plan. The request to undertake a procurement activity in relation to this contract was stated in the procurement forward plan. This report is requesting an extension of the contract as well as a contract variation. The Procurement Forward Plan will be updated following the decision.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

- 3.1 The three boroughs explored options to re-commission the service following the end of the initial 3 year term of the contract with Voiceability. The outcome of this research was that there was no evidence that re-commissioning the service at this stage was likely to deliver either improved quality or reduced costs.
- 3.2 The three boroughs also explored the option to extend the contract based on the original terms. This option is not recommended due to the significant increase in demand for the service and the statutory responsibilities local authorities have as part of the Mental Capacity Act 2005 Deprivation of Liberty Safeguards (DoLS).

4. POST DECISION IMPLEMENTATION

- 4.1 A copy of this report will be provided to CSG Procurement and stored in the Council's Contract Repository.
- 4.2 The Adults and Communities Delivery Unit will continue to monitor the contract alongside the LB Enfield, who is the lead commissioner. This will involve working in partnership with Voiceability to ensure an effective and efficient process of prioritisation is in place.
- 4.3 The Commissioning Director, Adults and Health, will progress plans to extend and vary the contract if the Committee approves the recommendations.

5. IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

- 5.1.1. The contract supports the Corporate Plan 2015-2020, which is based on the core principles of fairness, responsibility and opportunity to make sure Barnet is a place:

- Of opportunity, where people can further their quality of life
- Where people are helped to help themselves, recognising that prevention is better than cure
- Where responsibility is shared, fairly, and
- Where services are delivered efficiently to get value for money for the taxpayer

5.2. Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)

- 5.2.1. The contract is funded through both NHS Barnet Clinical Commissioning Group (CCG) and Adults and Communities revenue budgets. All the variation funding is from the Adults and Communities revenue budget. The total value of the contract is £67,263.03, made up of the Council contribution of £13,237.03 and the CCG contribution of £54,026. The table below summarises the proposed spend for 2017/18;

CCG Contribution (contractual value)	LBB Contribution (contractual value)	LBB contribution (variation)	Total annual contract value
£54,026.00	£13,237.03	£28,980	£96,243.03

- 5.2.2. The Council agreed to fund the cost of varying the contract with Barnet, Enfield and Haringey Consortium for Independent Mental Capacity Advocacy (IMCA) and Independent Mental Health Advocacy (IMHA) at approx.

£40,000pa for the 2 years from 1 April 2015- 31 March 2017. The cost of this variation was met from existing Adults and Communities revenue budgets. The actual variation agreed with the provider (Voiceability) was £18,302 in 2015/16 and £25,305 in 2016/17.

Contractual Period	Contract value (original)	Variation	Total annual contract value
14/15	£67,263.03	-	£67,263.03
15/16	£67,263.03	£18,302	£85,565.03
16/17	£67,263.03	£25,305	£92,568.03
17/18 (proposed)	£67,263.03	£28,980	£96,243.03

5.2.3. The value of the 1 year extension is £28,980. The extension would commence on 1st April 2017 and end on 31st March 2018. The cost of the extension with the variation is £96,243.03.

5.2.4. The value of the extension is based on 126 hours per week for IMCA/RPR services (with a 10% stretch target allowing delivery up to 139 hours per week). The cost of the extension will be met from the existing Adults and Communities budget.

5.3. Social Value

5.3.1. Not applicable.

5.4. Legal and Constitutional References

5.4.1. Barnet Council has legal duties as part of Mental Capacity Act 2005 Deprivation of Liberty Safeguards (DoLS). These safeguards exist to protect people in residential and nursing homes, hospitals and other settings such as supported living schemes. Where a deprivation is identified, the care or health provider must apply to the Local Authority for authorisation. Adult Social Care administers these duties which include tasks undertaken by professionally qualified staff as well as administrative tasks.

5.4.2. Annex A of the Council's Contract Procedure Rules (outlined in the Council's Constitution) states that any extension and/or variation of a contract (which is the total value of the original contract value plus any additional value through means of an extension or variation) over £164,176 must be approved by the relevant thematic committee.

5.4.3. Contracts can be extended and/or varied if they meet the requirements of the Contract Procedure Rules laid out at 15.5. This contract meets those requirements, which are as follows:

- the initial Contract was based on a Contract Procedure Rules compliant competitive tender or quotation process;
- the value of the extension or variation added to the value of the original Contract does not exceed the original Authorisation threshold as defined in Appendix 1, Table A;
- the extension or variation has an approved Budget allocation;
- the extension or variation is in accordance with the terms and conditions of the existing Contract;
- if the initial Contract was subject to an EU regulated tender procedure, that the extension option was declared within the OJEU contract notice and the original Acceptance report (Delegated Powers Report/relevant Committee Report); and
- the Contract has not been extended before.

5.4.4. Annex A of the Responsibility for Functions, as outlined in the Council's Committee, states that the Adults & Safeguarding Committee has responsibility to accept variations and extensions within budget in accordance with the responsibilities and thresholds set out in Contract Procedure Rules.

5.5. Risk Management

5.5.1. Barnet Council must undertake this work, as the risks of not doing so could result in legal costs and penalties for an individual case should this work not be delivered in accordance with the law.

5.5.2. The value of the extension is based on 126 hours per week for IMCA/RPR services (with a 10% stretch target allowing delivery up to 139 hours per week). If demand for the service is higher than that which can be met within these hours, the Adults and Communities Delivery Unit will first try to manage this through effective prioritisation. If this is not achievable, then the contract permits the funding of additional services at a spot rate of £33.50 per hour. This would be managed through quarterly monitoring meetings.

5.6. Equalities and Diversity

5.7.1 The 2010 Equality Act outlines the provisions of the Public Sector Equalities Duty which requires Public Bodies to have due regard to the need to:

- eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010;
- advance equality of opportunity between people from different groups;
- foster good relations between people from different groups.

5.8 Consultation and Engagement

5.8.1 Not applicable.

6 BACKGROUND PAPERS

6.1 Cabinet Resources Committee, 25th February 2014: Contract Award for Independent Mental Capacity Advocacy, the Deprivation of Liberties Safeguards Relevant Person's Paid Representative and Independent Mental Health Advocacy Services:

<http://barnet.moderngov.co.uk/documents/s13282/CRC%20Report%20IMCA%20DOLS%20IM>

6.2. Policy and Resources Committee, 24th March 2015: Variation to the Contract to award additional funding up to £40,000 per annum for the financial years 2015/16 and 2016/17:

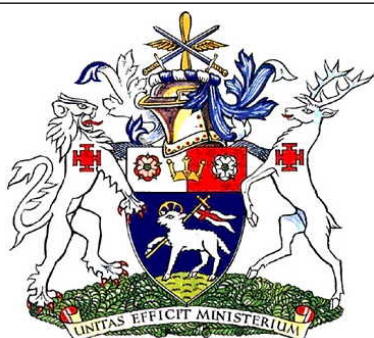
<https://barnet.moderngov.co.uk/documents/s22211/Authorisation%20for%20Waiver%20of%20Best%20Interest%20Assessor%20and%20Mental%20Health%20Assessor%20Service.pdf>

6.3. Policy and Resources Committee, 1st December 2016: Procurement Forward Plan 2017-18:

<https://barnet.moderngov.co.uk/documents/s36302/Appendix%201%20-%20Annual%20Procurement%20Forward%20Plan%202017-18.pdf>

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AGENDA ITEM 12



Adults and Safeguarding Committee

6 March 2017

Title	Adults and Safeguarding Committee Work Programme
Report of	Chairman of the Adults and Safeguarding Committee
Wards	All
Status	Public
Urgent	No
Key	No
Enclosures	Appendix A – Committee Forward Work Programme
Officer Contact Details	Edward Gilbert, Governance Team Leader Email: edward.gilbert@barnet.gov.uk Tel: 020 8359 3469

Summary

The Committee is requested to consider and comment on the items included in the 2017-18 work programme

Recommendations

1. That the Committee note the items included in the 2017-18 work programme.

1. WHY THIS REPORT IS NEEDED

- 1.1 The Adults and Safeguarding Committee Work Programme 2017-18 indicates forthcoming items of business.
- 1.2 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.
- 1.3 The Committee is empowered to agree its priorities and determine its own schedule of work within the programme.

2. REASONS FOR RECOMMENDATIONS

- 2.1 This approach allows the Committee to respond to Adults and Safeguarding related matters of interest in the Borough.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

- 3.1 There are no specific recommendations in the report. The Committee is empowered to agree its priorities and determine its own schedule of work within the programme.

4. POST DECISION IMPLEMENTATION

- 4.1 Any alterations made by the Committee to its Work Programme will be published on the Council's website.

5. IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

- 5.1.1 The Committee Work Programme is in accordance with the Council's strategic objectives and priorities as stated in the Corporate Plan 2015-20.

5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)

- 5.2.1 None in the context of this report.

5.3 Social Value

- 5.3.1 N/A

5.4 Legal and Constitutional References

- 5.4.1 The Terms of Reference of the Committee is included in the Constitution, Responsibility for Functions, Annex A.

5.5 Risk Management

5.5.1 None in the context of this report.

5.6 Equalities and Diversity

5.6.1 None in the context of this report.

5.7 Consultation and Engagement

5.7.1 None in the context of this report.

5.8 Insight

5.8.1 None in the context of this report.

6. BACKGROUND PAPERS

6.1 None.

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**Adults and Safeguarding
Committee Forward Work
Programme**

February 2017 – May 2018

Contact: Edward Gilbert, Governance Team Leader, 020 8359 3469

Title of Report	Overview of decision	Report Of (<i>officer</i>)	Issue Type (Non key/Key/Urgent)
12 June 2017			
To be allocated.			
10 July 2017			
Adults and Safeguarding Performance Report including the Adult Social Care Local Account	<ol style="list-style-type: none"> 1. That the Committee note the progress made during 2015/16 and agree to use the information provided to help in future decision making 2. That the Committee notes the information contained within the Adult Social Care Local Account 2016-17 and approves the version of the report attached at Appendix A for publishing as final on the Council website 	Commissioning Director (Adults and Health), Adults and Communities Director	Non-key
Statutory Adult Social Care Annual Complaints Report 2016/17	<ol style="list-style-type: none"> 1. To note the information contained within the statutory Annual Complaints Report 2016/17; 2. Approve the draft report for final publishing. 	Assistant Director Adults and Communities	Key

Title of Report	Overview of decision	Report Of (<i>officer</i>)	Issue Type (Non key/Key/Urgent)
Business Planning	Committee to agree and consider proposals for adult social care and leisure in line with the Council's MTFS process	Commissioning Director (Adults and Health)	Key
19 September 2017			
Barnet Multi-Agency Safeguarding Adults Board Annual Report 2016/17	<p>That the Committee note the information contained within the Draft Barnet Multi-Agency Safeguarding Adults Board Annual Report 2016-17 which is due to be approved by the Multi- Agency Safeguarding Adults Board on 21st July 2016 and will be published after this date.</p> <p>Committee to consider and comment on the safeguarding data</p>	Chris Miller, Independent Chair, Safeguarding Adults Board	Non Key
6 November 2017			
To be allocated.			
22 January 2018			
To be allocated.			
5 March 2018			

Title of Report	Overview of decision	Report Of <i>(officer)</i>	Issue Type (Non key/Key/Urgent)
To be allocated.			