

<u>MEETING</u> ADULTS AND SAFEGUARDING COMMITTEE
<u>DATE AND TIME</u> MONDAY 23RD JANUARY, 2017 AT 7.00 PM
<u>VENUE</u> COMMITTEE ROOM 1, HENDON TOWN HALL, THE BURROUGHS, LONDON NW4 4BQ

Dear Councillors,

Please find enclosed additional papers relating to the following items for the above mentioned meeting which were not available at the time of collation of the agenda.

Item No	Title of Report	Pages
10.	PREVENTION AND EARLY SUPPORT REVIEW: CONSULTATION REPORT	3 - 154

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	<p align="center">Adults and Safeguarding Committee 23rd January 2017</p>
<p align="center">Title</p>	<p>Prevention and Early Support Services: Consultation report</p>
<p align="center">Report of</p>	<p>Commissioning Director Adults and Health</p>
<p align="center">Wards</p>	<p>All</p>
<p align="center">Status</p>	<p>Public</p>
<p align="center">Urgent</p>	<p>No</p>
<p align="center">Key</p>	<p>Yes</p>
<p align="center">Enclosures</p>	<p>Appendix A: Prevention and Early Support Services Consultation report Appendix A 1: Consultation document Appendix A 2: Consultation document (easy read) Appendix B: Equalities Impact Assessment (EIA) Inclusion Barnet Appendix C: EIA CMHA Appendix D: EIA BAWA Appendix E: EIA Community Focus Appendix F: EIA Outreach Barnet</p>
<p align="center">Officer Contact Details</p>	<p>Kirstie Haines, Strategic Lead Adults Wellbeing Email: Kirstie.haines@barnet.gov.uk Tel: 07885208808</p> <p>Zoë Garbett, Commissioning Lead Health and Wellbeing Email: zoe.garbett@barnet.gov.uk Tel: 0208 359 3478</p>

Summary

The council, through its adult social care and public health services commissioning plans, has recognised the importance of prevention services that are effective in keeping people independent and healthy. Over recent years the council has developed innovative community based services and initiatives that help people remain independent and reduce demand for adult social care services. The Care Act 2014 placed a duty on Local

Authorities to provide or arrange for the provision of services, facilities or resources, or take other steps, which it considers will contribute towards preventing or delaying the development by adults in its area of needs for care and support.

The council has reviewed the prevention services it currently provides to ensure that they are evidence based and provide maximum value for money. The Adults and Safeguarding Committee considered the findings of this review at its November meeting and agreed proposals in relation to commissioned and grant funded services, subject to consultation. This report presents the consultation findings and asks the Committee to confirm their implementation.

Recommendations

- 1. That the Committee considers the findings of the consultation on the proposals for the Prevention and Early Support Contracts.**
- 2. That the Committee approves 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 agrees that the proposed changes, which were agreed at its November meeting subject to consultation (also detailed in section 1 of this report), are now implemented.**
- 4. That the Committee notes that engagement with service users and their families, and other key stakeholders will be an on-going process to ensure that developments support individuals.**

1. WHY THIS REPORT IS NEEDED

Background

1.1 On 10 November 2016, Adults and Safeguarding Committee received a report presenting how the council is meeting its Care Act 2014 prevention duties and delivering activities in line with national policy, with a service offer that has expanded since the introduction of the Act. At this meeting the Committee resolved:

- 1) That the Committee noted:
 - A) The expansion of prevention and early support activities targeting current and potential adult social care users in the borough;
 - B) The work being progressed to ensure that these activities provide good value for money and reduce future demand for Adult Social Care services.
- 2) That the Committee agreed the proposed changes to commissioned services as detailed in the report (section 2) subject to the outcome of consultation with current service users.
- 3) That the Committee agreed to receive a consultation report at its meeting on 23rd January 2017.

1.2 The proposals agreed, subject to consultation, at Adults and Safeguarding Committee on 10 November 2016 are detailed in table 1:

Table1: Proposals agreed, subject to consultation, at Adults and Safeguarding Committee on 10 November 2016

Contractor Name / Parent Company	Service Name	Contract End Date	Annual value	Recommendation
Review found that the following services are delivering services which are addressing key triggers and therefore contributing effectively as prevention and early support services				
Alzheimer's Society	Dementia community services	31/03/2019	£143,748	No change
Age UK Barnet	Home From Hospital	31/03/2019	£37,800	No change
Middlesex Association for the Blind	Sensory Impairment	31/03/2018	£26,834	No change
The Stroke Association	Stroke Support	31/03/2017	£104,970	No change
Review found that the following services provide a specific service but it is appropriate for the services to be provided by alternative funding				
Barnet Bereavement Service	Community Counselling	31/03/2017	£3,001	Alternative funding identified.
Barnet Depression Alliance	Depression Support Group	31/03/2017	£454	Alternative funding identified.
Review showed that the following service had a lower than anticipated level of use and alternative delivery has been identified				
Inclusion Barnet	Peer support planning and brokerage	30/09/2017	£146,523	Lower than anticipated level of use. Service can be provided by Social Workers. Do not renew once current contract ends in September 2017 efficiency of £73,261.5
Review found that the following services are not evidenced to be the most efficient or effective way of delivering early support				
Barnet Asian Women's Association	Mental Health Project	31/03/2017	£29,656	Do not recommit provision. Transition funding has been made available to support clients to access alternative provision (such as Wellbeing Hub, Neighbourhood services).
Chinese Mental Health Association	Floating Support	31/03/2017	£46,894	Do not recommit provision. Transition

				funding has been made available to support clients to access alternative provision (Wellbeing Hub, Neighbourhood services)
Community Focus	Community arts project (adults)	31/03/2017	£47,300	Do not re-commission provision. Currently funded through a corporate grant to subsidise courses – prices for courses will increase for clients and if they cannot afford this clients will be supported to access alternative provision (such as Barnet Mencap).
Outreach Barnet (Genesis)	Generic Floating Support Mental Health Floating Support	31/06/2017	£743,661	Do not extend. Re-commission (specialist mental health and generic floating support) with efficiency of £143,000 as part of accommodation and support framework.
The review found that the following services are addressing key triggers and where contracts can be refined and efficiencies taken with no impact on delivery (agreed by providers)				
Age UK Barnet	Neighbourhood Services (inc Handy person, Strength and Balance)	31/03/2018	£602,000	Efficiency of £30,000 from 01.04.2017 No impact on service users.
Barnet Mencap	Bright Futures	30/09/2017	£363,000	Efficiency of £15k from 01.04.2017

1.3 The Care Act 2014 (the Act)¹ placed a duty on Local Authorities to provide or arrange for the provision of services, facilities or resources, or to take other steps, which it considers will:

- 4) contribute towards preventing or delaying the development by adults in its area of needs for care and support;
- 5) contribute towards preventing or delaying the development by carers in its area of needs for support;

¹ The Care Act 2014 – www.legislation.gov.uk/ukpga/2014/23/contents

- 6) reduce the needs for care and support of adults in its area;
- 7) reduce the needs for support of carers in its area.

- 1.4 The Better Care Fund requires local areas to work across health and social care boundaries to reduce the numbers of elderly and frail people who have unplanned admissions to hospital and residential care.
- 1.5 The Five Year Forward View², published in October 2014, outlined the requirement for a radical upgrade in prevention and public health. In December 2015, the NHS planning guidance 16/17 – 20/21 outlined a new approach to NHS planning to 2020; to support the delivery of the Five Year Forward View. Every health and care system has been working to produce a Sustainability and Transformation Plan (STP), showing how local services will become sustainable over the next five years. Local systems are brought together in STP ‘footprints’ with Barnet included in the North Central London sub-regional area.
- 1.6 The council has worked through its commissioning plans to expand the range of effective prevention and early support services available in Barnet, in line with its duties under the Care Act 2014 as set out in the Prevention Services paper which came to the Committee in November 2016.
- 1.7 Within the resources available the council is improving its offer to become more targeted and evidence based. To meet Corporate Plan objectives of Fairness, Responsibility and Opportunity and achieve the council commissioning requirements, prevention and early support should:
- Address the known triggers for increased dependence on adult social care provision (i.e. have a strong evidence base)
 - Allow residents and their carers to be proactive in the care and support
 - Provide good value for money both by investing in what works and making sure that services are used
 - Be easy to access and able to provide to all those who may need the service
 - Be responsive to changing population needs.
- 1.8 The current prevention and early support offer includes:
- Transformational programmes including Care Space, strengths based practice and an enablement model of mental health support
 - Improved support for carers (including young carers)
 - A focus on employment for adults with disabilities
 - A focus on the right home, accommodation support and hospital discharge services to avoid admission to residential care
 - Appropriate, accessible and effective information and advice
 - An active ageing programme consisting of a neighbourhood model of day services and locality development programmes harnessing community and volunteer capacity (Altogether Better/Ageing Well)

² Five Year Forward View - <https://www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf>

- Joined up health and social care pathways for stroke and dementia.

Consultation on changes to the prevention and early support offer for 2017/18

- 1.9 Knowledge and understanding of what works in terms of preventing, reducing and delaying the need for adult social care has increased. The prevention offer needs to prioritise evidence-based services in light of the financial challenges facing all local authorities. The council has reviewed all prevention services it currently provides to ensure that they are evidence based and provide maximum value for investment.
- 1.10 Following a review of the prevention and early support offer, Adults and Safeguarding Committee, on the 10 November 2016, agreed to the proposed changes to commissioned services (table 1) subject to the outcome of a consultation with current services users, their families and other stakeholders (see appendix 1 for more information).
- 1.11 Consultation was carried out for the services where the proposal would have an impact on service users. Consultation was also undertaken with providers to assess the sustainability of the organisation to assess the full impact on residents. Therefore, consultation activity was carried out for the services detailed in table 2.

Table 2: Services subject to consultation

Contractor Name / Parent Company	Service Name	Contract End Date	Annual value	Recommendation
Barnet Asian Women's Association*	Mental Health Project	31/03/2017	£29,656	Do not re-commission provision.
Chinese Mental Health Association*	Floating Support	31/03/2017	£46,894	Do not re-commission provision.
Community Focus*	Community arts project (adults)	31/03/2017	£47,300	Do not re-commission provision. Currently funded through a corporate grant.
Inclusion Barnet	Peer support planning and brokerage	30/09/2017	£146,523	Lower than anticipated level of use. Do not renew once current contract ends in September 2017 efficiency of £73,261.5

* The committee should note that the council is unable to extend these contracts/grant agreements beyond the stated end date due to procurement

rules and would need to carry out a new procurement process for the service provision if they were to be continued.

Consultation report

- 1.12 The consultation ran from the 28 November 2016 – 10 January 2017 with an online questionnaire being available during this period on the council’s Engage Barnet website available to all stakeholders. The full consultation document (as well as an easy read version) was available. Appendix A contains a full consultation report.
- 1.13 204 people were engaged in the consultation. 129 people responded to the consultation via the online questionnaire (including seven easy read questionnaires returned by post), individual face-to-face meetings, one-to-one telephone consultations and focus groups.
- 1.14 Consultation responses were predominantly negative. The tables (tables 3 – 7) below outline the consultation comments and responses from the council with regards to how the council proposes to address the concerns raised.

Table 3: Responses to consultation comments for Inclusion Barnet

Comment	Response
<p>Ability of adult social care to respond to the needs of this client group given that social workers have large workloads, that it is difficult to speak with social workers and they do not have appropriate knowledge of disabilities.</p>	<p>Social Work is a regulated provision with a requirement for all Social Workers to maintain knowledge and keep professional standards, this includes knowledge of disabilities. Social workers have appropriate knowledge of disabilities with different Social Workers and Assessment and Enablement Officers having a range of knowledge within the teams. Knowledge of disabilities is a core part of social work training. LBB has recently undertaken a large scale piece of work to change social care practice to a strengths based model for assessments and reviews. This change will help LBB to make sure that we work with clients to help them achieve their aspirations. LBB recognises that, like most London boroughs, recruiting and retaining social workers can be challenging and this can lead to pressure on social work time. Going forward, the recent change in social work practice will help address this challenge.</p>

<p>Social Workers are only concerned with money and are under pressure not to spend it.</p>	<p>The council has statutory duties and a duty of care to residents and must ensure under the Care Act 2014 that those eligible for social care provision have their eligible care and support needs met and Social Workers make decisions for care in line with this duty.</p>
<p>The service is not duplication of social work, people with lived experiences are good role models.</p>	<p>The Peer Support and Brokerage Service carries out support planning and brokerage, following a social care assessment. Support planning and brokerage is also carried out by the Adults and Communities Delivery Unit.</p> <p>Adult Social Care has a number of Assessment and Enablement Officer roles and proactively encourages people with lived experience of disability to apply for these roles when available, as well as other roles in Adults and Communities.</p> <p>The council has recently achieved Disability Confident³ level 1 status. Achieving level 1, and is intending to achieve level 3 status. This status shows the council's commitment to actively seeking and hiring skilled disabled people within the organisation and the organisation's supply chains.</p>
<p>The value of a service independent from the council</p>	<p>The Care Act 2014 imposes no specific obligation to provide an independent support planning and brokerage service.</p> <p>Practitioners working for Adults and Communities work with adults with care and support needs to design their care and support plan based on Care Act 2014 eligibility criteria and agree the outcomes that they wish to achieve and how best to meet these outcomes. The Brokerage Team then works with providers to source the services at the right quality.</p>
<p>The lack of referrals by Social Workers was deliberate.</p>	<p>There is no evidence to suggest that social workers are deliberately not</p>

³ Information about Disability Confident Employer Status - <https://www.gov.uk/government/collections/disability-confident-campaign>

	making referrals to the service or not making users aware of the service. It is the service user's choice to be referred to Inclusion Barnet and Social Workers cannot refer them without their agreement.
Under performance against the contract has been a longstanding issue. A review was undertaken in 2015 to develop an action plan to increase referrals. Why was no action taken by ASC to increase the number of referrals or to reduce the contract value to reflect the numbers using the service (comment from organisation).	Following the review in 2015, an action plan was agreed and this included various actions including communications with staff, clear direction to managers and regular monitoring of referral numbers. These actions were undertaken with social workers and other staff and despite a large push for referrals, numbers had not increased. Following the review in 2016, despite actions being completed, referrals have not increased to the expected levels, noting that it is the service users choice to be referred.
An option to tender for a reduced peer support service has not been considered and there are no alternative plans in place to ensure that social care clients have appropriate support to exercise choice in their care plans(comment from organisation).	The option of a reduced peer support service was considered. However, based on the number of service users choosing peer support planning, the service would be very small (approximately equivalent to one small part-time role). This would create issues in terms of maintaining skills and knowledge; and ensuring quality and safety of support planning practice, given the low levels of activity.

Table 4: Responses to consultation comments for Chinese Mental Health Association

Comment	Response
Chinese Elders cannot attend alternative provision – for example Age UK Barnet or Ageing Well activities – because it is not culturally appropriate.	The Barnet Wellbeing Hub, of which the Chinese Mental Health Association is a lead provider, offers alternative social prescribing provision and service leads are working closely with commissioners to support Chinese residents, including elders, with mental health needs to access culturally appropriate support services such as: <ul style="list-style-type: none"> • Talking Therapies (including IAPT – Improving Access to Psychological Therapy) and employment support (MAPS and IPS – Individual work

	<p>Placement Support)</p> <ul style="list-style-type: none"> • Digital Mental Wellbeing Service will also be available in early 2017. • Barnet Wellbeing Service – Chinese Mental Health Association – emotional health checks • Citizens Advice Bureau (for information and advice). • Age UK Barnet Neighbourhood Model for older people services <p>The Age UK Barnet Neighbourhood Model for older people services has worked with a range of local groups and individuals, over the last two years to put in place a range of activities that people from different cultural backgrounds can attend and located across the borough. The model can be further developed, using £20,000 transition funding from the council, to ensure that it is appropriate for older people from the Chinese community, if this is perceived to not be the case currently.</p> <p>Chinese Elders and CMHA have already participated in the ABBO (Altogether Better Burnt Oak) Multicultural Festival and Parade, which is part of the Ageing Well Programme.</p> <p>The Ageing Well programme recruits local volunteers from different communities to lead activities for their peers and there are opportunities for volunteers, working with CMHA to be supported by the Ageing Well programme.</p>
<p>Members have been provided opportunities to get involved more in the community, including the hosting of the Barnet WMHD event in 2016, and performances and participation at the ABBO Multicultural Festival and Parade.</p> <p>Our concerns with the ability of elderly members and those with mobility issues in particular accessing the clubs was allayed with the integration of the Community Transport Service, allowing</p>	<p>As part of the council’s approach to supporting people to age and live well, the borough’s Ageing Well programme recognises and supports the benefits of older people being involved in the community and participating in events which allow individuals to meet new people and form new friendships.</p>

those without the means themselves to attend events and activities.	
Concerns about the quality of translation means that appropriate translators may not be used, excluding some service users.	The new Wellbeing Hub, which includes CMHA, will include access to translation services. In its role in building the new Wellbeing Hub, CMHA will be able to advise on appropriate translators and matching individuals who have the same cultural backgrounds for peer support.
A concern that the decision regarding the provision is solely financial driven.	The report to Adults and Safeguarding Committee (10 November 2016), included details of the new mental health provision being established by the CCG and council, in partnership with Community Barnet. These new evidenced based services, replace the existing historical mental wellbeing services in the borough. CMHA is a core partner in the provision of the Wellbeing Hub.

Table 5: Responses to consultation comments for Barnet Asian Women's Association

Comment	Response
Other provision targeted at the Asian community is perceived as 'unfriendly' for specific religious groups. The proposal to move service users to alternative provision fails to recognise that alternative provision will not be appropriate for some religious sects or groups – e.g. Muslim women.	<p>In terms of onward referral for support with mental health needs, there is a new Wellbeing Hub.</p> <p>The Barnet Wellbeing hub acts as the conduit linking individuals with services and activities in the statutory sector as well as by the voluntary sector, and in the community. The CCG are working with a range of partners to ensure that the service is appropriate for those groups that historically only access services in crisis such as some groups of Asian women.</p> <p>The Barnet Wellbeing Hub aims to:</p> <ul style="list-style-type: none"> • Create a safe and welcoming facility for people to access community based services • Support people to become more involved in community activities • Support people into services via a social prescribing process • Enable people to better manage their health and long term conditions

- Reduce reliance on medical interventions by offering service with social benefits
- Provide an alternative service for people experiencing difficulties with their Wellbeing before they turn into a crisis.

The service offers an Emotional Health Check (EHC) from trained Wellbeing Navigators. The EHC belongs to the individual and includes the formulation of a tailored wellbeing plan to help individuals identify their priorities and goals, and suitable services to meet their needs. Wellbeing Navigators assist with the signposting and introduction to the relevant services, working with a wide range of organisations and providers to provide support services or Wellbeing activities.

People can call or drop in to the centre across a range of opening times.

The Hub can meet requests for translation/interpreting services to support people to be informed about services to help to meet their specific needs.

£9,500 transition funding, from the council, is being made available to support current BAWA service users to alternative provision.

Community Barnet is the lead organisation for Wellbeing Hub development and is supporting the development. There are other organisations working together as part of the Wellbeing Collaborative as part of Barnet's Reimagining Mental Health Programme that has been running for the last 18 months to improve mental health and wellbeing services in Barnet.

Other alternative provision includes:

- Talking Therapies (including IAPT – Improving Access to Psychological Therapy) and employment support

	<p>(MAPS and IPS – Individual work Placement Support)</p> <ul style="list-style-type: none"> • Multilingual Wellbeing Service (wellbeing services tailored to language and cultural needs) • Digital Mental Wellbeing Service will also be available in early 2017 • Ageing Well Provision • Neighbourhood Services (led by Age UK Barnet) • Later Life Planners (Age UK Barnet) • Sangam Asian Women’s Association • Citizens Advice Bureau (for information and advice). • Age UK Barnet Neighbourhood Model for older people services <p>The Age UK Barnet Neighbourhood Model for older people services has worked with a range of local groups and individuals, over the last two years to put in place a range of activities that people from different cultural backgrounds can attend and located across the borough.</p>
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Table 6: Responses to consultation comments for Community Focus

Comment	Response
<p>The Council has not adhered to its own disinvestment policy in its communication with providers or the timescales for decommissioning (comment from organisation).</p>	<p>The council has followed the “Charter for Barnet with the Voluntary and Community Sector”.</p> <p>In 2010, the council agreed to discontinue annual core grants to voluntary and community groups in favour of commissioning services from the sector. Corporate Grants are now awarded to voluntary and community sector organisations who bid to provide activities that meet the council’s corporate objectives and awarded at a maximum of £10k and are restricted to helping voluntary groups initiate a new sustainable project /activity (one-year grant) or used for a one-off purchase. Therefore, this proposal brings the Community Focus grant in line with the Corporate Grants process.</p>

	<p>Corporate Grants are agreed at and overseen by the Community Leadership Committee. On the 9 March 2016, Community Leadership Committee agreed to extend Community Focus' grant for another 12 months and Community Focus were informed of this 12 month extension on the 5 April 2016, where Community Focus were informed of the extension allowing for a review of the work of the organisation in the context of the council's procurement options for services for older people and people with disabilities.</p> <p>Community Focus is in regular contact with LBB's grant manager and a number of meetings have been held between Community Focus and the council (the Leader, Commissioning Director for Adults and Health, Strategic Lead for Adults Health, Commissioning Lead Health and Wellbeing, Prevention and Wellbeing Manager) between August – January to discuss the review, the council's commissioning plans and supporting the organisation to be able to provide individually commissioned services i.e. as part of support plans for adults social care clients. In August, the organisation was notified about the review and the explicit terms of the grant only being for one year from March 2016.</p> <p>Community Focus has also been receiving support from Community Barnet. Community Barnet have been commissioned by the council to provide support to the organisations affected by the proposals through individual meetings and group workshops. Community Focus have benefited from support from Community Barnet regarding potential partnerships, business models, exploring alternative funding and communication / promotion of their services.</p>
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<p>Social Care clients attend Community Focus although this is not part of their formal care plan. If Community Focus' provision ends how will the council ensure that these needs are met?</p>	<p>Community Focus, with support from LBB and Community Barnet, are looking to develop their service model to include a couple of days a week of full day support and are looking at increasing prices for the courses.</p> <p>The council has a statutory duty to meet eligible social care needs and will continue to provide appropriate support plans for all clients with eligible social care needs.</p> <p>If this specific service was to meet a person's specific need then funding would be provided via the individuals support plan.</p> <p>The council has been working with Community Focus to support the organisation to be able to provide individually commissioned services i.e. as part of support plans for adults social care clients.</p> <p>Community Focus are looking to develop a service package for residential care homes.</p>
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Table 7: Comments about the way we consulted

Comment	Response
<p>Some service users are not computer literate or do not have access to computers including the online questionnaire timing out/closing.</p>	<p>The consultation ran from the 28 November 2016 – 10 January 2017 and included:</p> <ul style="list-style-type: none"> • Press release and promotion through internal social care teams and voluntary sector • Online questionnaire (indicating that this can be provided in alternative formats) • Easy read consultation document • Paper copies of the questionnaire were available and could be posted back or delivered • All service users were offered the opportunity to take part in a focus group and/or 1-2-1 (face-to-face and telephone) discussions • LBB uses Survey Monkey for
<p>The consultation process did not run for an adequate amount of time.</p>	
<p>A comment that the documents were not accessible for people who are not literate</p>	
<p>Some carers do not have the time to engage in the questionnaires</p>	

	<p>online questionnaires which does not time out.</p> <p>LBB's Equalities Lead considers that the actions undertaken to promote inclusion in the consultation exercise for the relevant organisations, their service users and carers and others are likely to reflect that, in accordance with the council's public sector equality duty, due regard has been paid to equalities requirements in the Equality Act 2010 in the consultation exercise.</p>
<p>Rationale for decisions are not clear</p> <p>The question is phrased ambiguously and is not clearly defined</p> <p>The outcome of the responses whether individuals agree or disagree with the proposal has not been made clear.</p> <p>There is no clear outcome for our members what will happen if the proposal is implemented or what will happen if we disagree with the proposal.</p>	<p>Rationale for decisions, implications and details of alternative provision were provided in the consultation document.</p>
<p>Some individuals felt unable to share personal experiences and opinions in a group setting</p>	<p>All service users were offered an opportunity to speak to council officers in a 1-2-1 (either face-to-face or over the phone) discussions.</p> <p>Service users were encouraged to complete the online questionnaire which was anonymous.</p>
<p>Some individuals asked how the consultation feedback would be used and whether the comments would be responded to</p>	<p>Focus group participants will be provided with a copy of the consultation report (sent via the organisation) which outlines how the consultation has shaped service delivery.</p> <p>The consultation report will be presented to Adults and Safeguarding Committee on the 23 January 2017 to allow for the Committee to make a decision regarding the services (following the Committee meeting on 10 November 2016 where proposals were agreed subject to the consultation).</p>

2. REASONS FOR RECOMMENDATIONS

- 2.1 The council needs to ensure that public resources are used as effectively as possible, which means commissioning services which are of the highest quality and provide good value for money in terms of levels of participation.
- 2.2 The recent review, outlined in the report of 10 November 2016, has shown that some of the service provision is duplicated, or not as effective as it could be. A number of issues were raised as part of the consultation and these are outlined in section 1 with the action that the council has identified, within the statutory framework of social care, to address the issue.
- 2.3 The council has also considered the equalities impacts and has identified mitigating measures to minimise any possible adverse effects, which will be implemented subject to the Committee's agreement. Full equalities impact assessments are appended to this report.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

- 3.1 In order for the Committee to meet statutory duties and the MTFS requirements, the proposed recommendations are judged to be the optimum balance between preserving services and meeting the required savings.

4. POST DECISION IMPLEMENTATION

- 4.1 The mitigating actions set out in this report will be implemented and service users will be supported using transitional funding, to access suitable support, working with Barnet CCG. The council will continue to review and monitor the impact of the changes and incorporate findings into commissioning plans.
- 4.2 The council will continue to work with providers regarding future commissioning opportunities. Providers will also be referred to Community Barnet for specific, tailored support.
- 4.3 Officers will continue to review and manage existing services to ensure that they are effective and delivering maximum value.

5. IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

- 5.1.1 As detailed in the Adults and Safeguarding Commissioning Plan, 2016 – 2020:

- Fairness in adult social care means that services respond to the needs of diverse communities. It means ensuring that older and disabled people, including adult social care service users and their carers, are able to participate in community life just as other residents can and that services provided by the council are accessible and welcoming to older

and disabled people, adult social carer service users and carers irrespective of their particular cultural needs.

- Responsibility in adult social care means that services will work with older and disabled people to remain as independent and self-reliant as possible, it means that social workers will always focus on what people can do, not on dependency, and will work with service users, and carers, to find ways to help them support themselves, using community resources and the support of their family and friends and that social workers will work to ensure that people are able to move back to living independent lives as quickly as possible, ensuring a timely response to changing needs.
- Opportunity in adult social care means that disabled people have the right to work as much as any other Barnet resident. The council's services will actively support adult social care service users to access employment and volunteering opportunities, it means ensuring people can stay living in their own homes for as long as possible and avoid residential care as much as possible and that council services will actively support carers to play a full part in their communities, accessing services and opportunities for employment and training.

5.1.2 This approach echoes the themes of the Joint Health and Wellbeing Strategy (2015 – 2016) which has two overarching aims of “keeping well” and “promoting independence”. In particular, the approach supports the Strategy’s focus on early intervention. This approach clearly supports some of the key priorities in the strategy such as supporting carers and supporting people to gain and retain employment.

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

5.2.1 The Council’s Policy and Resources Committee on 28 June 2016 tasked the Adults and Safeguarding Committee with developing proposals for savings of £15.070m between 2017 and 2020. The priority focus will be reducing demand for Adult Social Care Services through the development of a range of services as an alternative to high cost provision and commissioning the most effective prevention and early intervention services. The potential cost savings following the review are twofold: mitigating demand and providing alternative, lower cost community based provision.

5.2.2 Responding to the needs identified in the Equalities Impact Assessments and the consultation, the paper highlights the actions being taken by Commissioners to minimise the impact of the recommendations and support transition to new services which will be funded (in 2017/18) by:

- Public Health funding:
 - £20,000 to ensure that provision meets the needs of people from Chinese Mental Health Association
- Council’s Service Development Fund:
 - £9,500 for the transition of clients from BAWA to mental health provision

5.3 Social Value

5.3.1 The Public Services (Social Value) Act 2012 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.

5.3.2 The developments within the approach ensure that services providing wellbeing, health and social care for adults deliver benefits to individuals in a much more coordinated fashion, supporting people when they need it and providing the right amount of support to ensure individuals develop the skills they need to make choices for their own wellbeing in the future. Services working together derive social capital from each other and this in turn supports a collaborative approach towards sustainability within an ever-changing economy.

5.4 Legal and Constitutional Reference

5.4.1 The Care Act 2014 (the Act)⁴ placed a duty on Local Authorities to provide or arrange for the provision of services, facilities or resources, or take other steps, which it considers will:

- contribute towards preventing or delaying the development by adults in its area of needs for care and support;
- contribute towards preventing or delaying the development by carers in its area of needs for support;
- reduce the needs for care and support of adults in its area;
- reduce the needs for support of carers in its area.

5.4.2 The Care Act 2014 also stipulates that a Local Authority establish and maintain a service for providing people in its area with information and advice relating to care and support for adults and support for carers.

5.4.3 The responsibilities of the Adults and Safeguarding Committee are contained within the Council's Constitution – Section 15 Responsibility for Functions (Annex A). Specific responsibilities of those powers, duties and functions of the Council in relation to adult social care include the following specific function:

- Promoting the best possible Adult Social Care services.
- 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 Wellbeing Strategy and its associated sub strategies.
- Ensuring that the local authority's safeguarding responsibilities are taken into account.

⁴ The Care Act 2014 – www.legislation.gov.uk/ukpga/2014/23/contents

5.5 Risk Management

5.5.1 The Council has taken steps to improve its risk management processes by integrating the management of financial and other risks facing the organisation. Risk management information is reported quarterly to the Council's internal officer Delivery Board and to the relevant Committees and is reflected, as appropriate, throughout the annual business planning process.

5.5.2 A failure to provide appropriate prevention services could result in adults being without the appropriate services which in turn may increase the demand on more intense, longer and more expensive care and support later on. The recommendations in this report have been fully considered to minimise the risk of the changes to services.

5.5.3 The Council will ensure a safe transition for service users from current provision to alternative services. The Council will provide access to reviews, Social Care Direct and information and advice. The transition funding is in place to minimise risk during transition and ensure that alternative, effective provision is in place.

5.6 Equalities and Diversity

5.6.1 Equality and diversity issues are a mandatory consideration in decision making in the Council pursuant to the Equality Act 2010. This means the Council and all other organisations acting on its behalf must take into account the public sector equalities duty when exercising a public function. The broad purpose of this duty is to integrate considerations of equality and good relations into day to day business requiring equality considerations to be reflected into the design of policies and the delivery of services and for these to be kept under review.

5.6.2 Section 149 of the Act imposes a duty on 'public authorities' and other bodies when exercising public functions to have due regard to the need to:

- a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act
- b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it
- c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it (the nine protected characteristics are: age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation)

5.6.3 The Care Act 2014 Guidance identifies discriminatory abuse as a specific form of abuse which includes harassment because of race, gender, gender identity, age, disability, sexual orientation or religion.

5.6.4 Equalities Impact Assessments have been completed for all proposed changes and alternative provision considered. These are indicating a potential minimal negative impact as outlined in the table below. The principal mitigations for these minimal negative impacts are the proposals for current and new service delivery outlined in this paper. EIAs will be kept under review and will consider the impact on the sustainability of organisation.

5.6.5 The table (table 8) below provides an overview on the potential impacts and the actions we will be taking to reduce these. The table was included in the previous report as has been updated to reflect the developments in mitigating actions including the alternative provision available.

Table 8: Equalities impact assessment

Contractor Name / Parent Company – service name	Potential equalities risk (prior to mitigation)	Mitigation	Potential equalities risk (following mitigation)
Age UK Barnet – Neighbourhood Services	No impact on service delivery. Efficiencies will be made, by Age UK Barnet (with optimal distribution across the Provider Group), with no impact on service users of Age UK Barnet or the provider group.	N/A	No impact.
Barnet Asian Women’s Association – Mental Health project	Likely impact on: <ul style="list-style-type: none"> • Asian women • People with common mental health problems • Carers 	Transitional funding identified to work with the CCG (Wellbeing Hub) and the Network to ensure that sufficient capacity is in place to replace provision. Service Users who require support when the contract ends will be signposted or transitioned to alternative support for people with mental health conditions available in the borough, as set out in this report. The council will work with the provider to ensure that this process is managed through an agreed exit and transition plan. The council commissions Barnet Carers Centre to provide support to carers. The provider will continue to be offered support by Community Barnet to support sustainability.	Unlikely
Barnet Mencap – Bright Futures	No impact on service delivery.	N/A	No impact.
Chinese Mental Health Association – Floating Support	Likely impact on: <ul style="list-style-type: none"> • Chinese residents • People with common mental health conditions • Older people 	Service Users who require support when the contract ends will be signposted or transitioned to alternative support available in the borough. The Council will work with the provider to ensure that this process is managed through an agreed exit and transition plan. Transitional funding identified to ensure that appropriate alternative provision is available for the people currently using the service specifically focusing on ensuring that cultural and language barriers are addressed. The provider will be offered support by Community Barnet to support sustainability and is likely to continue to provide services in	Unlikely.

		the borough (including leading the voluntary sector collaborative delivering the Wellbeing Hub social prescribing support). Alternative provision is available via talking therapies (IAPT), MAPS and IPS as well as the Digital Mental Wellbeing Service, & the Neighbourhood model.	
Community Focus – Community arts project	Likely impact on: In house <ul style="list-style-type: none"> • People with learning disabilities • People who identify as white • Older people 	Community Focus has stated that it is likely that the cost of courses will increase. If the service stops or residents are unable to pay the higher fee, individuals will be supported to access alternative provision such as Barnet Mencap. Service Users who require support when the grant ends will be signposted or transitioned to alternative support available in the borough. The Council will work with the provider to ensure that this process is managed through an agreed exit and transition plan. Community Focus will be working with the residential care homes currently benefiting from the subsidised courses to negotiate a new offer or the care homes will be looking to provide arts activities in alternative ways. The provider will continue to be supported by Community Barnet to support sustainability. Community Focus is exploring a service package for residential care homes (outreach).	Unlikely.
Inclusion Barnet - Peer support brokerage	Minimal negative impact for people with disabilities.	Support planning function can be provided by Adults and Communities; the roll out of Barnet's strength based approach will support the delivery of this function. The provider will be offered support by Community Barnet to support sustainability.	Unlikely.
Outreach Barnet (Genesis) - Generic Floating Support and Mental health Floating Support	Likely impact on: <ul style="list-style-type: none"> • Adults under 55 • People with mobility issues and mental health issues • The diversity of ethnicities supported by the service generally matches the population as a whole but there is a risk of reducing the reach to certain communities as the service employs 	Mental health component of contract: The mental health component, previously delivered by Genesis, has been included Accommodation and Support Tender. Equalities impact was specifically considered in the design and implementation of the new Accommodation and Support Approved Provider List commissioning in 2016 to start in April 2017, as this element of the service has been commissioned as part of the wider accommodation and support services. The approved list of providers is currently in	Unlikely.

	<p>people from a range of backgrounds who speak numerous languages</p> <ul style="list-style-type: none"> • People who identify as Christian and Muslim 	<p>award stage of the procurement process. The Support at Home lot is designed to offer flexible and short term housing related support for people with mental health conditions. The support is to help people live independently in their own accommodation (private renters and home owners) in the community.</p> <p>Generic Floating Support: The EIA focuses on the 20% reduction of funding for this provision. The generic floating support component of this contract will be extended for 12 months, with a deed of extension and variation, of which is within the scope of the current contract term for potential extension of up to two years. This is to ensure continuity of service to meet current demand needs for the generic service.</p> <p>This extension will permit time to do thorough needs analysis and service review of this component to meet future needs of borough by determining the reach of the current service and that of similar services in the borough. This will identify what, if any, the unmet need is in the borough and the client groups most affected. We will work with the current provider to continue to develop outcome based performance framework with generic clients and do market development/testing work for consideration of re commissioning this service.</p> <p>Specific workshops will be held for current and potential users, carers of the service, providers and the provider market in 2017/18. The outcome of the consultation will inform decision making and help shape the new support offer for generic floating support in the future.</p>	
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5.6.6 From the proposals, looking at the overall, cumulative impact, it appears that, of the protected characteristics, people with mental health conditions, people from specific BAME communities and older people might be disproportionately impacted by the proposals. Therefore, we have paid particular attention to the mitigation of the possible disproportionate impact through:

- Working closely with Barnet Clinical Commissioning Group to link with the Wellbeing Hub developments to ensure there is appropriate capacity and skills within the Hub to meet the needs. Transitional funding has been identified.
- Working with providers to ensure that all services are accessible to people from different BME communities and that people with different faiths are able to access alternative provision without any barriers. Currently, the Neighbourhood Services are accessed by a higher proportion of BME communities compared to the wider population. This will be closely monitored through contract management and service user feedback.
- Working to incorporate the needs of older people, particularly from BAME groups, in the council's services for older people such as Ageing Well and Neighbourhood services.

5.7 Consultation and Engagement

5.7.1 As a matter of public law the duty to consult with regards to proposals to vary, reduce or withdraw services will arise in 4 circumstances:

- where there is a statutory requirement in the relevant legislative framework;
- where the practice has been to consult or where a policy document states the Council will consult then the Council must comply with its own practice or policy;
- exceptionally, where the matter is so important that there is a legitimate expectation of consultation and
- where consultation is required to complete an equalities impact assessment.

5.7.2 Regardless of whether the Council has a duty to consult, if it chooses to consult, such consultation must be carried out fairly. In general, a consultation can only be considered as proper consultation if:

- comments are genuinely invited at the formative stage;
- the consultation documents include sufficient reasons for the proposal to allow those being consulted to be properly informed and to give an informed response;
- there is adequate time given to the consultees to consider the proposals;
- there is a mechanism for feeding back the comments and those comments are conscientiously taken into account by the decision maker / decision making body when making a final decision;
- the degree of specificity with which, in fairness, the public authority should conduct its consultation exercise may be influenced by the identity of those whom it is consulting and;
- the consultation is clear on the reasons why extent to which alternatives

and discarded options have been discarded and are required to be consulted on.

5.7.3 This report, including the full consultation report at Appendix A, identifies that feedback from the consultation with service users, residents and key stakeholders was predominantly negative.

5.7.4 The council must consider the consultation outcome in making its final decision on the proposals.

5.8 Insight

5.8.1 The recommendations have been developed using data from the Joint Strategic Needs Assessment as well as information and guidance from national resources such as National Institute of Clinical Excellence (NICE), The Kings Fund, Local Government Association, National Institute for Health Research and the Institute for Public Policy Research.

6. BACKGROUND PAPERS

6.1 Prevention Services (item 9), Adults and Safeguarding Committee, 10 November 2016

<https://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=698&MId=8674&Ver=4>

6.2 Revised Business Case on Adult Social Care Alternative Delivery Vehicle and Implementation of the New Operating Model (item 8), Adults and Safeguarding Committee, 19 September 2016

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

6.3 Business Planning 2017 – 20 (item 8), Policy and Resources Committee, 28 June 2016

<http://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=692&MId=8728&Ver=4>

6.4 Community Focus – extension of funding agreement, 2016/17 (item 14), Community Leadership Committee, 9 March 2016:

<https://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=694&MId=8370&Ver=4>

6.5 Updated Commissioning Plan (item 7), Adults and Safeguarding Committee, 7 March 2016

<https://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=698&MId=8364&Ver=4>

6.6 Extension of Mental Health Prevention and Supported Living Services (item 11), Policy and Resources, 16 February 2016

<https://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=692&MId=8351&Ver=4>

- 6.7 Barnet Carers and Young Carers Strategy 2015 – 2020: “Carers are supported and valued by our communities” (item 12), Policy and Resources, 16 February 2016
<https://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=692&MId=8351&Ver=4>
- 6.8 Covenant with faith communities and Charter with the voluntary sector (item 12, appendix B), Community Leadership Committee, 24 June 2015
<http://barnet.moderngov.co.uk/documents/g8367/Public%20reports%20pack%2024th-Jun-2015%2019.00%20Community%20Leadership%20Committee.pdf?T=10>
- 6.9 Implementing the Care Act 2014: Carers; Prevention; Information, Advice and Advocacy (item 11), Adults and Safeguarding Committee, 19 March 2015
<https://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=698&MId=7933&Ver=4>

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APPENDIX A: Prevention and Early Support Consultation Report

Responses to a consultation on the outcomes of a review of prevention and early support services for adults

Author:	Zoë Garbett
Date:	10 January 2017
Service / Dept:	Commissioning Group / Adults and Communities

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Appendices

Appendix A 1: Consultation Document

Appendix A 2: Consultation Document (easy read)

1. Context

- 1.1 On 10 November 2016, Adults and Safeguarding Committee received a report presenting how the council is meeting its Care Act 2014 (the Act) duties and delivering activities in line with national policy with an offer that has expanded since in the introduction of the Act.
- 1.2 The Council has worked through its commissioning plans to expand the range of effective prevention and early support services available in Barnet, in line with its duties under the Care Act 2014.
- 1.3 Within the resources available the Council is improving its offer to become more targeted and evidence based. To meet the Corporate Plan objectives of Fairness, Responsibility and Opportunity and achieve the Council commissioning requirements prevention and early support should:
- Address the known triggers for increased dependence on adult social care provision (i.e. have a strong evidence base)
 - Allow residents and their carers to be proactive in the care and support
 - Provide good value for money both by investing in what works and making sure that services are used
 - Be easy to access and able to provide to all those who may need the service
 - Be responsive to changing population needs.
- 1.4 The current prevention and early support offer includes:
- Transformational programmes including Care Space, strengths based practice and an enablement model of mental health support
 - Improved support for carers (including young carers)
 - A focus on employment for adults with disabilities
 - A focus on the right home, accommodation support and hospital discharge services to avoid admission to residential care
 - Appropriate, accessible and effective information and advice
 - An active ageing programme consisting of a neighbourhood model of day services and locality development programmes harnessing community and volunteer capacity
 - Joined up health and social care pathways for stroke and dementia.
- 1.5 Following a review of the prevention and early support offer, Adults and Safeguarding Committee, on the 10 November 2016, agreed to the proposed changes to commissioned services subject to the outcome of a consultation with current services users, their families and other stakeholders.

Table 1: The table below presents the proposals agreed by Adults and Safeguarding Committee:

Contractor Name / Parent Company	Service Name	Contract End Date	Annual value	Recommendation
Review found that the following services are delivering services which are addressing key triggers and therefore contributing effectively as prevention and early support services				
Alzheimer's Society	Dementia community services	31/03/2019	£143,748	No change
Age UK Barnet	Home From Hospital	31/03/2019	£37,800	No change
Middlesex Association for the Blind	Sensory Impairment	31/03/2018	£26,834	No change
The Stroke Association	Stroke Support	31/03/2017	£104,970	No change
Review found that the following services provide a specific service but it is appropriate for the services to be provided by alternative funding				
Barnet Bereavement Service	Community Counselling	31/03/2017	£3,001	Alternative funding identified.
Barnet Depression Alliance	Depression Support Group	31/03/2017	£454	Alternative funding identified.
Review showed that the following service had a lower than anticipated level of use and alternative delivery has been identified				
Inclusion Barnet	Peer support planning and brokerage	30/09/2017	£146,523	Lower than anticipated level of use. Service can be provided by Social Workers. Do not renew once current contract ends in September 2017 efficiency of £73,261.5
Review found that the following services are not evidenced to be the most efficient or effective way of delivering early support				
Barnet Asian Women's Association	Mental Health Project	31/03/2017	£29,656	Do not recommit provision. Transition funding has been made available to support clients to access alternative provision (such as Wellbeing Hub).
Chinese Mental Health Association	Floating Support	31/03/2017	£46,894	Do not recommit provision. Transition funding has been made available to support clients to access alternative provision.

Community Focus	Community arts project (adults)	31/03/2017	£47,300	Do not re-commission provision. Currently funded through a corporate grant to subsidise courses – prices for courses will increase for clients and if they cannot afford this clients will be supported to access alternative provision (such as Barnet Mencap).
Outreach Barnet (Genesis)	Generic Floating Support Mental Health Floating Support	31/06/2017	£743,661	Do not extend. Re-commission (specialist mental health and generic floating support) with efficiency of £143,000
The review found that the following services are addressing key triggers and where contracts can be refined and efficiencies taken with no impact on delivery (agreed by providers)				
Age UK Barnet	Neighbourhood Services (inc Handy person, Strength and Balance)	31/03/2018	£602,000	Efficiency of £30,000 from 01.04.2017 No impact on service users.
Barnet Mencap	Bright Futures	30/09/2017	£363,000	Efficiency of £15k from 01.04.2017

Table 2: The following services are still in review:

Contractor Name / Parent Company	Service Name	Contract End Date	Annual value	Comments
Barnet Citizens Advice Bureau	Specialist Information and Advice and Advocacy services	30/06/2020	£273,794	Scheduled review as per contract. CCG contribution.
Barnet Citizens Advice Bureau	Community Advice	31/03/2020	£338,820	Scheduled review as per contract.
Richmond Fellowship Trust (Eclipse)	Mental Health Day Opportunities	12/01/2018	£183,461	Currently jointly commissioned with the CCG.

1.6 Consultation was carried out for the services where the proposal would have an impact on service users. Consultation was also undertaken with providers to assess the sustainability of the organisation to assess the full impact on residents. Therefore, consultation activity was carried out for the following services:

- Peer Support Planning and Brokerage (delivered by Inclusion Barnet)
- Wellbeing Services (delivered by Chinese Mental Health Association)
- Mental Health Project (delivered by Barnet Asian Women's Association)
- Community Arts Project (delivered by Community Focus)

3. Purpose

- 3.1. This report describes the responses to the consultation undertaken by Barnet Council with service users, families, carers and residents.
- 3.2. The report demonstrates Barnet Council's approach to consultation, engagement and the responses received.
- 3.3. The report aims to provide Adults and Safeguarding Committee with further information to be allow the Committee to make an informed decision with regards to adults social care prevention and early support services.

4. Consultation Activities

- 4.1 The consultation ran from the 28 November 2016 – 10 January 2017 with an online questionnaire (anonymous responses) being available during this period on the council's Engage Barnet website available to all stakeholders. A consultation document (appendix A 1) was available as well as an easy read version (appendix A 2). Alternative formats were available on request.
- 4.2 Service users and their carers and families were offered the opportunity to attend a face-to-face group discussion or 1-2-1 face-to-face or telephone conversations to provide feedback. Language interpretation was available where this was required or requested.
- 4.3 Focus group events and discussions for three of the organisations were undertaken prior to the 10 January 2017. However, due to difficulties in arranging the focus group for BAWA service users this focus group was undertaken on 11 January 2017, one day after the formal consultation had closed to allow for the service users to engage in the consultation. The responses from this focus group have been included.
- 4.4 The consultation asked the following questions about each proposal:
 - to what extent do you agree or disagree with the proposal (including the proposed alternative provision)
 - reasons why you agree or disagree with this proposal
 - what impact the proposal would have on you, your family or organisation
 - reasons for your answer.
- 4.5 The consultation and engagement activities are detailed in the tables below. Table 3 gives an overview of the consultation and engagement approach for each of the target audiences. Table 4 provides more information and details of the specific consultation activity.

Table 3: Consultation approach

Key target audiences	Methods of Communication to targeted audiences
Peer Support Planning and Brokerage (delivered by Inclusion Barnet) service users and their families	<ul style="list-style-type: none"> • Group meetings / focus groups • 1:1 phone calls • Email • Online questionnaire with the easy read/printed document available at the focus group and on request
Wellbeing Services (delivered by Chinese Mental Health Association) service users and their families	<ul style="list-style-type: none"> • Group meeting / focus group • Email • Online questionnaire with the easy read/printed document available at the focus group and on request
Mental health project (delivered by Barnet Asian Women's Association) service users and their families	<ul style="list-style-type: none"> • Focus group • Email • Online questionnaire • Printed questionnaires and posters at the organisations premises
Community Arts Project (delivered by Community Focus) service users and their families	<ul style="list-style-type: none"> • Group meetings / focus group • 1:1 meetings • Posted consultation document (including easy read) and letter • Online questionnaire
Residents (potential service users) and wider stakeholders	<ul style="list-style-type: none"> • Online questionnaire, promoted on the Engage Barnet page • Press release

Table 4: Consultation activity with service users and their families and carers

Stakeholders	Method	Number	Date
Service users, carers, organisations and wider stakeholders	Online questionnaire	129*	28.11.2016-10.01.2017
Peer Support Planning and Brokerage (delivered by Inclusion Barnet)			
Service users	Email: to promote online questionnaire and invite to focus group	80	29.11.2016
Service users and carers	Focus group	10	06.12.2016
Service users and carers	Focus group	6	16.12.2016
Service users	Telephone 1-2-1	17 called, 12 spoken to and responses recorded*	30.11.2016–06.01.2017
Wellbeing Services (delivered by Chinese Mental Health Association)			
Service users	Invite sent via email / letter where email was not available to all service users by CMHA	300	December 2016
Service users	Focus group	34	12.12.2016
Mental health project (delivered by Barnet Asian Women's Association)			
Service users	Focus group	14	10.01.2017

Service users	Focus group	8	11.01.2017
Community Arts Project (delivered by Community Focus)			
Service users	1-2-1 face-to-face discussions	5*	06.12.2016
Service users	Letter: including easy read consultation document, questionnaire and invite to focus group	90	09.12.2016
Carers and employees	Focus group	3 carers	09.01.2017
Service users	1-2-1 face-to-face discussions	2*	09.01.2017

*Please note that individual discussion (face-to-face and telephone) responses were recorded through the online questionnaire.

4.6 The council, through its commissioning and delivery teams, were in regular contact with the organisations throughout the consultation period.

5. Respondents

5.1 In total 204 responses were received throughout the duration of the consultation.

5.2 Questionnaire respondents

5.2.1 A total of 129 individuals (residents or people representing organisations) took part in the questionnaire (including seven easy read questionnaires returned by post). This achieved sample size is based on the total number of respondents to the questionnaire as a whole, and not the number of respondents to individual questions. The results presented are based on "valid responses" only, i.e. all those providing an answer (this may or may not be the same as the total sample) unless otherwise specified. The base size may therefore vary from question to question depending on the extent of non-response¹.

5.2.2 Overall, out of the 39 people who provided the information the responses came from:

- 46% were current service users
- 8% were potential service users
- 8% were carers of current service users
- 3% were carers of potential service users
- 26% were other local residents
- 3% out of borough residents
- 8% represented a voluntary/community organisation
- 0% represented a public sector body.

¹ Please note that all numbers have been rounded to the nearest whole number

5.2.3 From the 66 people who provided the information:

- 11% were full time employed
- 26% were part time employed
- 5% were self-employed
- 0% were on a Government supported training programme
- 0% were in full-time education
- 5% were unemployed and available for work
- 8% sick or disabled people
- 38% retired
- 9% were looking after the home.

5.2.4 From the 64 who provided the information about residency:

- 36% owned with a mortgage or loan
- 30% owned outright
- 2% other ownership
- 16% rented from the council
- 9% rented from a housing association or another registered social landlord
- 3% rented from a private landlord
- 0% other rented or living rent free
- 0% part rent / part mortgage (shared ownership_
- 5% did not know.

5.2.5 From the 69 people who provided age information:

- 0% were 16 – 24
- 3% were 25 – 34
- 10% were 35 – 44
- 14% were 45 – 54
- 36% were 55 – 64
- 22% were 65 – 74
- 4% were 75+
- 10% preferred not to respond.

5.2.6 From the 78 people who provided gender information:

- 64% were female
- 28% were male
- 8% preferred not to respond.

5.2.7 Of the 41 females who responded to the question regarding pregnancy and maternity leave, 98% stated they were not pregnant with 2% preferred not to say and 100% stated that they were not on maternity leave.

5.2.8 Sixty-three people gave information about gender identity, 89% said this was the same as the gender they were assigned at birth, 3% stated that their gender was not the same as the gender assigned at birth and 8% preferred not to say.

5.2.9 From the 69 people who provided information about their ethnicity:

- 52% Asian / Asian British – Chinese
- 6% were Asian/Asian British – Indian
- 1% were Black – Caribbean
- 3% were Mixed – White and Asian
- 23% were White British
- 1% were White Irish
- 6% were White Other
- 3% identified with another ethnic group
 - Black British African
 - Anglo – Persian
- 4% preferred not to say.

5.2.10 Eighty-one respondents gave information about disabilities, 36% stated that they had a disability and 54% stated that they did not with 10% preferring not to say. Of the 30 people providing information about their disability:

- 3% stated that they had a hearing impairment
- 7% stated that they had a visual impairment
- 50% stated mobility issues
- 10% stated physical co-ordination issues
- 20% stated reduced physical capacity
- 20% stated that they had a learning disability
- 17% stated that they had a mental illness
- 7% stated they had other disabilities (not listed): epilepsy and various chronic conditions
- 7% preferred not to say.

5.2.11 Sixty-four people provided information about their religion / belief:

- 11% were Buddhist
- 20% were Christian
- 1% were Hindu
- 2% were Jain
- 2% were Muslim
- 44% stated that they had not religion / belief
- 3% stated that they had another religion / belief
- 17% preferred not to say.

5.2.12 Forty-seven people gave information about their sexual orientation, 70% identified as heterosexual and 30% preferred not to say.

5.2.13 Demographic information for responses to specific service questions is included, where available, in the relevant sections below (in section 6).

5.3 Focus groups

5.3.1 Sixty-one service users engaged in focus groups. Focus groups were held for each organisation, the following number attended each focus group:

- Inclusion Barnet: 16 service users and carers across two sessions, a mixture of participants including:
 - males and females
 - people from different ethnic groups including Asian, African, Polish and Greek
 - people with learning disabilities, physical disabilities and long term conditions.
- Chinese Mental Health Association (CMHA): 34 service users who were:
 - Chinese
 - majority female
 - 45 – 50+ years old
- Barnet Asian Women’s Association (BAWA):
 - Eight Asian women
 - 14 people from the Asian community all over 55.
- Community Focus:
 - Three carers; one male and two females.

5.3.2 The consultation took an open approach which takes into account the views of service users, carers, volunteers as well as trustees and employees of the organisations.

6. What you said

Overall comments

6.1 Fifty-one people responded to the question regarding the overall approach to prevention and early support with 6% agreeing with the approach and 63% disagreeing. A further 4% neither agreed nor disagreed and 27% did not know.

6.2 The following individual comments were made:

- Disagreeing with stopping funding to small organisations
- Stating that solutions should have been developed with providers
- Disagreeing agreeing with stopping funding services for vulnerable people
- Ensuring that individual needs are met in times where resources are reducing

- Ending funding to independent organisations will create higher levels of need.

Service specific responses and comments

6.3 The tables below include the comments made and issues raised during the consultation. The comments received via the questionnaire have been brought together with the comments given via focus group discussion. The demographic data provided in this section is solely from the questionnaire, demographic data from the focus groups is at 5.3. The responses are grouped into themes.

Inclusion Barnet

6.4 Out of the 75 respondents, 83% disagreed with the proposal and 11% agreed. 5% did not agree or disagree and 7% did not know.

6.5 Out of 64 respondents, 84% felt that the proposal would have a negative impact on the respondent as a service user or their family or their organisation with 5% saying there would be no change and 11% saying they did not know. Four people who do not use the service stated that they would not be affected and that people could use other services.

Table 5: Consultation feedback (focus groups, 1-2-1 discussions, online questionnaires) relating to Inclusion Barnet

Theme	Comments
Access to Council Services and Social Workers	<p>The feedback has been that access to Social Worker is a big concern – difficult to get through by telephone to the Social Worker and lack of response to e-mails.</p> <p>The perception that there is a high turnover of Social Workers so there is not the consistency of the same worker – particularly difficult for people with autism.</p> <p>Perception that Social Workers are overloaded with work.</p> <p>Perception that there is less and less staff available to undertake good support planning.</p> <p>Participants felt that the alternative of social care staff will not be effective.</p>
Quality of Social Workers	<p>There is an impression that Social Workers are only concerned with money and are under pressure to not spend.</p> <p>People stated that Social Workers do not always have the knowledge and experience of disability and do not spend the time with the person.</p> <p>The Social Workers speak too fast - particularly difficult for</p>

	<p>people with learning disabilities and people with learning disabilities feel that they are being ignored.</p> <p>There was concern that Social Workers were not able to be asset based.</p> <p>A perception that they do not understand the person.</p> <p>Perception that the support plans from Social Workers are not very good.</p> <p>The perception is that the Peer Support Planners are very enabling and offering real choice and control to the person regards their support plan and meeting needs. This was felt not to be the case with Social Workers.</p>
<p>The importance of peer support planning and brokerage</p>	<p>The service is not a duplication of the Social Work role it is a highly valued service with very good service user feedback such as the high quality, empathetic service and comments about improving quality of life and keeping people independent.</p> <p>The peer support brokers have lived experience of disability, they are good role models and have such as a positive can do attitude.</p> <p>The Peer Support Planners are inspirational to the service user and family /carer. It is perceived that this cannot be replicated by Social Workers.</p> <p>The peer support planners also provide training and support to Social Workers.</p> <p>There is a trust between the Planners and the service user as they are independent of the Council and provide impartial information.</p> <p>There would be a loss of expertise with the planner's skills, local knowledge and experience.</p> <p>They are able to build relationships with people.</p> <p>Independent peer led planning and brokerage support is highly valued by service users, highly effective at enabling people to maintain their wellbeing and independence.</p> <p>People who tend to be distrusting of the council might accept an independent broker.</p>

	<p>Without this service, respondents felt that they would be worse off stating that they would not know where to go for information and support and one respondent stated that they would be depressed.</p>
<p>General</p>	<p>Question asked as to whether the lack of referrals by Social Workers was deliberate so that the service would fail.</p> <p>Question asked about the contract between Council and the provider. The Council has not fulfilled its part of the contract by not making the referrals –by not making good use of the service. (<i>organisation comment</i>)</p> <p>Question asked as to whether there has been a proper analysis of why there has been a lack of referrals when the feedback on the service is so positive.</p> <p>Under performance against the contract has been a longstanding issue. A review was undertaken in 2015 to develop an action plan to increase referrals. Why was no action taken by ASC to increase the number of referrals or to reduce the contract value to reflect the numbers using the service. (<i>organisation comment</i>)</p> <p>An option to tender for a reduced peer support service has not been considered and there are no alternative plans in place to ensure that social care clients have appropriate support to exercise choice in their care plans. (<i>organisation comment</i>)</p> <p>One respondent felt that other organisations could provide a better service.</p>

6.6 Of the 59 people who provided information²:

- 29% were current service users of Inclusion Barnet
- 5% were potential service users
- 42% were carers of current service users
- 5% were carers of potential service users
- 10% were other local residents
- 3% out of borough residents
- 5% represented a voluntary/community organisation
- 0% represented a public sector body.

² Information from the online questionnaire

Chinese Mental Health Association (CMHA)

- 6.7 Out of the 79 respondents, 4% agreed and 13% tended to disagree with the proposal, 58% strongly disagreed with the proposal, 3% neither agreed nor disagreed and 23% did not know.
- 6.8 Out of 69 respondents, 4% felt that the proposal would have a quite negative impact on the respondent as a service user or their family or their organisation, 64% felt there would be a very negative impact, 4% said there would be no change and 28% did not know.

Table 6: Consultation feedback (focus groups, 1-2-1 discussions, online questionnaires) relating to CMHA

Theme	Comments
Impact	There will be extra work and increased pressure on social workers.
Alternative provision	<p>Service Users would not find the alternative provision (Ageing Well Provision and Age UK) culturally acceptable claiming that members would prefer to stay at home. Service users felt it was important to participate in shared cultural activities and have a place to meet with other Chinese people and people with a common background. Respondents felt that cultural activities were good for mental health and wellbeing.</p> <p>One respondent stated that the non-threatening environment provided by CMHA was good for lonely, isolated individuals.</p> <p>Respondents felt that the service provided a range of activities, helped people to get out of the house, provided an opportunity to meet people and make new friends and provided a sense of belonging. Service users felt that the service was helpful.</p> <p>Comments were made about the problems with providing time-limited interpreting services through transition. Twelve respondents stated that they speak Chinese and that language barriers make accessing services very difficult.</p> <p>One respondent said that they use another service already.</p>
General	<p>CMHA's social and wellbeing activities are well received by the Chinese community in Barnet which happens to be one of the largest Chinese communities in London.</p> <p>One respondent, who agreed with the proposal, stated that it was important to provide inclusive and holistic services.</p> <p>One respondent felt that there were other organisations that could do provide a better service.</p>

6.9 Of the 53 people who provided information³:

- 64% were current service users of CMHA
- 8% were potential service users
- 0% were carers of current service users
- 4% were carers of potential service users
- 19% were other local residents
- 2% out of borough residents
- 2% health and social care professional
- 2% represented a voluntary/community organisation
- 0% represented a public sector body.

6.10 In addition, a consultation response was received from four core members of CMHA who raised the following points about the proposal:

- The question is phrased ambiguously and is not clearly defined. The outcome of the responses whether individuals agree or disagree with the proposal has not been made clear. There is no clear outcome for our members what will happen if the proposal is implemented or what will happen if we disagree with the proposal
- There is no clear outline as to the reasoning to not re-tender the service beyond the financial difficulties
- It is stated that the service is not delivering on the targets and is not providing good value for money. As representatives of the beneficiaries of the service, the core members felt that this is quite inaccurate and understood that the service has over achieved its targets and represents good value for money. Over the last couple of years, the service has grown from having a user base of around 100 to over 300 members; it has gone from biweekly to activities every week, new activities have been added in including interest groups that have listened to our desire to practice and preserve our cultural identities and diversity in the community
- Members have been provided opportunities to get involved more in the community, including the hosting of the Barnet WMHD event in 2016, and performances and participation at the ABBO Multicultural Festival and Parade
- The core members are concerned with the ability of elderly members and those with mobility issues in particular accessing the clubs was allayed with the integration of the Community Transport Service, allowing those without the means themselves to attend events and activities

6.11 Alternative provision:

- The Language Barrier is a problem for members and service users. Only the Wellbeing Service (CMHA) tailors for their specific Chinese language and cultural needs

³ Information from the online questionnaire

- The proposal for interpretation and translation was not received favourably. Most users are not comfortable with or have had a negative experience of translation and interpretation services received. Inaccuracies and misunderstanding of nuance is an issue, and in some cases the interpreter who does not speak the same dialect continued to try to provide translation
- The proposal for interpretation and translation is not a cost-effective solution
- The proposal for interpretation and translation will not maintain the same standard of service
- There are cultural issues that have been neglected. Translation and interpretation is not solely about translating verbatim, but to understand the cultural nuances and how people think in order to truly understand and convey the accurate message
- People have accessed the Wellbeing Service over a long period of time, some since the inception of the services over 10 years ago. Besides purely financial reasons, there seems to be no credible reason for the termination of the service to provide much needed support for the Chinese community. A sense of belonging and trust has been generated and the proposal to cut the service completely seems reckless and without due care
- The Wellbeing Service provides a platform for people to meet with friends and family, becoming lifelong friends in the process and access social care services. It is a place for people to meet up and exercise, particularly the elderly and the vulnerable, and be provided with support and assistance. Many of the members accessed the support for their housing needs, benefits advice, counselling and befriending services etc. at CMHA, all made possible by these connections. Without the Wellbeing Services, much of the support would have been far more difficult to access.
- Without the Wellbeing Service, there is a high risk of isolation being experienced in the community, especially in the elderly. Often, the Wellbeing Service is the only activity that members attend throughout the week and encourages them to get out of the door and experience activities in their own language and culture. Without the service, there is not a suitable place for them to go
- Family is an important part of CMHA member's lives, but family members are often too busy to be able to provide the support needed to access clubs such as at CMHA. The Wellbeing Service has been an invaluable service to help alleviate this with volunteers and staff providing service that not only helps the individual but family members, many of whom are unpaid carers
- The alternate provisions for current services do not seem credible or realistic and the proposal does not provide any detail. They do not meet the needs of the members with no in depth consideration of language, culture or comparable activities
- The consultation process does not seem to be conducted with adequate timescales

- To only allow approximately 3 months to find alternate provision whether it be from the organisation or the individual members does not seem appropriate.

Barnet Asian Women’s Association (BAWA)

6.12 Out of the 35 respondents, 17% agreed and 9% tended to disagree with the proposal, 17% strongly disagreed with the proposal, 6% neither agreed nor disagreed and 50% did not know.

6.13 Out of 30 respondents, 20% felt that the proposal would have a very negative impact and 3% said it would have a positive impact on the respondent as a service user or their family or their organisation, 7% said there would be no change and 70% did not know.

Table 7: Consultation feedback (focus groups, 1-2-1 discussions, online questionnaires) relating to BAWA

Theme	Comments
Service design	<p>Three respondents felt that services should not be segregated around cultural / race issues and that services should be inclusive.</p> <p>Service users felt that the alternatives would not meet cultural and language needs therefore Asian women would become isolated. Service users were concerned that there would be no other services for them if the service ended.</p>
Impact	<p>One respondent was concerned that other organisations are not familiar with people’s needs.</p> <p>Service users stated that the service was highly valuable, safe, provides emotional and wellbeing support. Service users feel listened to and understood which they do not feel at other services.</p> <p>One service user said they would be depressed without the support.</p> <p>One service user valued the opportunities to volunteer and learn new skills.</p> <p>There will be extra work and increase pressure on social workers.</p>
Alternative provision	<p>One focus group were positive about the alternative provision and agreed with the proposal as they felt:</p> <ul style="list-style-type: none"> • the support offered by BAWA was limited and not adequate • that the service was difficult to communication and work with • that the service was not inclusive • that the service was not managed well.

- 6.14 Of the 17 people who provided information⁴:
- 0% were current service users of BAWA
 - 6% were potential service users
 - 6% were carers of current service users
 - 12% were carers of potential service users
 - 59% were other local residents
 - 6% out of borough residents
 - 12% represented a voluntary/community organisation
 - 0% represented a public sector body.

⁴ Information from the online questionnaire

Community Focus

- 6.15 Out of the 47 respondents, 6% strongly agreed with the proposal, 19% tended to disagree, 30% strongly disagreed, 2% neither agreed nor disagreed and 43% did not know.
- 6.16 Out of 32 respondents, 9% felt that the proposal would have a quite negative impact, 27% felt that the proposal would have a very negative impact and 3% said it would have a positive impact on the respondent as a service user or their family or their organisation, 3% said there would be no change and 58% did not know.

Table 8: Consultation feedback (focus groups, 1-2-1 discussions, online questionnaires) relating to Community Focus

Theme	Comments
Outcomes	<p>Clients have developed strong relationships and peer groups over their time at Community Focus.</p> <p>People look forward to the classes. The classes are welcoming.</p> <p>Service users and clients spoke about how the courses support the increase of confidence and skills.</p> <p>Community Focus is unique and an excellent organisation providing meaningful activities.</p>
Service design and transition	<p>Important to manage service change for clients. (<i>carer comment</i>)</p> <p>Three respondents said that they or others would be unable to afford the increase in price.</p> <p>Friary House is a good venue, a community asset with good transport connections. Great to have access to the park which is used for physical exercise and enjoyed by the clients.</p> <p>It is important to have regular, consistent classes.</p> <p>Organisations need to work in partnership to deliver services.</p> <p>One respondent felt that the alternatives were not clear, especially for residential care.</p>
Meeting the needs of disabled people	<p>Social Care clients attend Community Focus although this is not part of their formal care plan. If Community Focus' provision ends how will the council ensure that these needs are met? (<i>carer comment</i>)</p>

	<p>The importance of recognising clients as individuals, each case is different. Community Focus is very person-centred.</p> <p>It is important to keep to small class sizes so that individuals are appropriately supported.</p>
Communication from the council about the ending of the grant and the review	The Council has not adhered to its own disinvestment policy in its communication with providers or the timescales for decommissioning (<i>comment from the organisation</i>).
Other	One respondent felt that the organisation did a good job and a change would be unlikely to improve the service and a tendering process would divert energy and resources.

6.17 Of the 31 people who provided information⁵:

- 42% were current service users of Community Focus
- 3% were potential service users
- 19% were carers of current service users
- 10% were carers of potential service users
- 16% were other local residents
- 3% out of borough residents
- 6% represented a voluntary/community organisation
- 0% represented a public sector body.

General comments about the consultation process

The following comments were raised by service users and organisation representatives about the way the consultation was carried out:

- Some service users are not computer literate or do not have access to computers
- A comment that the documents were not accessible for people who are not literate including the online questionnaire timing out/closing
- Some carers do not have the time to engage in the questionnaires
- Some individuals felt unable to share personal experiences and opinions in a group setting
- Some individuals asked how the consultation feedback would be used and whether the comments would be responded to.

7. Response and Next Steps

7.1 The outcomes of the consultation will be reported to Adults and Safeguarding Committee on the 23 January 2017.

⁵ Information from the online questionnaire

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Appendix A 1

Have your say

**Consultation on the outcomes
of a review of prevention and
early support services for
adults.**

Consultation document

About this document

This consultation document:

- provides background information on the review and the proposals
- gives information about how we have consulted so far in developing our plans
- outlines what we would like your views on.

How to give your views

The consultation is open to all Barnet residents, service users, their carers and families, community groups and voluntary organisations.

The findings from the consultation will contribute to the final recommendations that are put forward to the Adults and Safeguarding Committee in the new year. The Committee will then make a decision on the way forward.

There are three ways you can take part in the consultation:

- you can complete a questionnaire online at engage.barnet.gov.uk, or
- complete a paper questionnaire. If you would like a paper questionnaire please contact us by:
 - email: healthandwellbeing@barnet.gov.uk
 - telephone: 020 8359 3478
- face to face discussions (focus groups and one-to-ones) with service users (by invitation only).

If you need any additional help or support, or wish to have a copy of this document in a different format, you can contact us by:

email: healthandwellbeing@barnet.gov.uk

telephone: 020 8359 3478

A questionnaire is available to print on Engage Barnet until the 10 January 2017. All paper questionnaires need to be returned by this date.

The findings from the consultation will contribute to the final recommendations that are put forward to the Adults and Safeguarding Committee in the new year. The committee will then make a decision on the way forward.

Background

Across the country, adult social care is under growing pressure. The amount of money available for councils to spend has reduced and will continue to reduce over the coming years. There is also growing demand for adult social care services.

To address these challenges, Barnet Council has changed its adult social care services to make sure they provide better quality, are more effective and deliver the best possible value for money. For example:

- we have developed a new way of working for adult social care; supporting professionals to work with people around prevention and early intervention for both carers and users
- we are finding new ways to remain at home for as long as possible such as telecare (services that use technology to help people live more independently at home) and the Shared Lives scheme, which matches people who can provide support in their own homes to people who need support and assistance
- we have put in place a new carers support service (including young carers) in Barnet
- we are improving our work with people with mental health conditions to ensure that the support they receive is tailored to their individual needs. We are supporting people to gain work, the right home and to be part of their community
- we are working with health services to make sure our work is joined up and is of good quality. This is particularly important for people who have both health and social care needs such as people who have had a stroke and for people with dementia.

However, the council is approaching the limit of savings that can be achieved through providing services more efficiently. As a part of the General Budget Consultation the council will also be consulting on whether or not to apply the Social Care Precept on the level of Council Tax as part of the budget setting process which concludes in March 2017.

Barnet Council, like many other councils, is moving away from funding universal services to focussing on those organisations which can show clear evidence of providing targeted support for those at risk of their care and support needs escalating.

We now have more information about what works in terms of preventing, reducing and delaying the need for adult social care so we need to make sure that the services we are providing are as good as they can be for the money available.

A number of our services, such as Later Life Planning, Stroke Community Support, the Barnet Dementia Pathway and our Home from Hospital Service are being successfully provided by the voluntary sector and helping residents access specialist

services when they need them as well as helping them remain independent in their homes.

In light of these changes the council has looked at all prevention services it currently provides for adults to ensure that they:

- are performing as well as they can
- are aimed at people who need them most
- are based on evidence of the best types of prevention services.
- provide maximum value for money
- do not duplicate other services available
- focus on preventing the things that we know increase people's need for services, such as being isolated.

On 10 November 2016, Adults and Safeguarding Committee considered a paper which provided an overview of the current prevention offer in place for adults. You can read the full paper [here](#)¹ for further information about the review.

Adults and Safeguarding Committee, agreed to a number of proposals to make changes to a number of services currently being delivered.

This document sets out background information regarding each proposal and suggested alternative provision. The consultation asks for your comments and opinions on the proposals for four services:

- Support Planning and Brokerage (delivered by Inclusion Barnet)
- Wellbeing Services (delivered by Chinese Mental Health Association)
- Mental health project (delivered by Barnet Asian Women's Association)
- Community Arts Project (delivered by Community Focus)

Our aims of these proposals are to:

- provide maximum value for money
- make sure that we are not duplicating services
- provide services that make the most difference to people
- target our services at those who need them most
- support the Adults and Safeguarding Committee to realise its total savings of £15.070m between 2017 and 2020.

Who has been involved in developing these proposals?

The proposals have been developed with input from Adults and Community Delivery Unit Staff, Commissioning Group staff (including Commissioning Leads for Adults and Health).

¹

<https://barnet.moderngov.co.uk/documents/s35907/Prevention%20and%20Early%20Support%20Services.pdf>

We have worked, and continue to, work with the organisations affected by the proposals.

Section 1: Support Planning and Brokerage – Inclusion Barnet

Service: Support Planning and Brokerage

Organisation: Inclusion Barnet

Inclusion Barnet is a charity that promotes accessibility for disabled people by breaking down barriers to employment and social inclusion. They are a peer led organisation that provides the Peer Support Planning and Brokerage (sourcing and organising activities) service.

Since 2011, the team have been helping people who are eligible for support from the council. Through their lived experience of disability, they support the person to develop a plan that supports them to live the independent life they choose.

The service currently provides support planning and brokerage to service users that are eligible to receive Social Care providing choice to the service user.

The proposal

The contract started in September 2014 for three years and the contract allows for a two year extension.

The proposal is to not extend the External Support Planning and Brokerage contract and to allow this to end on 30 September 2017; at the end of the initial contract period (after 3 years).

This means that all support planning and brokerage will be undertaken by Barnet Council's Adults and Communities Staff. The majority of the support planning and brokerage is already provided by Barnet Council's Adults and Communities Staff.

This means there will not be an alternative, independent Support Planning and Brokerage Service offered to people who are eligible for Social Care services.

The review has shown to have had a lower than anticipated level of use and alternative delivery has been identified. It is expected that by not continuing this contract there will be an annual saving of £146,523

Alternative provision

All Adult Social Care clients will continue to receive a support planning service. The support planning function will be provided by Barnet social care staff; the roll out of Barnet's strength based approach will support the delivery of this function.

The council will monitor the service to ensure that it meets the needs of adult social care service users and is being delivered to the highest quality. Independent advice and a variety of social care opportunities will continue to be offered as part of the support planning process and peers and family members will be included where appropriate

Inclusion Barnet will be offered support by Community Barnet to ensure sustainability.

We are seeking your views on -

To what extent do you agree or disagree with the proposal (including the proposed alternative provision)?.

Reasons why you agree or disagree with this proposal.

What impact the proposal would have on you, your family or organisation?

Reasons for your answer.

Section 2: Wellbeing Service – Chinese Mental Health Association

Service: Wellbeing Services

Organisation: Chinese Mental Health Association

Chinese Mental Health Association (CMHA) provide a diverse range of services with the aim of serving Chinese people who suffer from mental health related issues and problems.

Chinese Mental Health Association is currently commissioned to provide:

- information related to health and wellbeing through a variety of channels including;
 - promotional materials;
 - on-line;
 - telephone;
 - face-to-face
 - groups and targeted support
- wellbeing events throughout the year to promote health and wellbeing, raising awareness and tackling stigma. Wellbeing Events will primarily be for Chinese community
- facilitated wellbeing activities (for example, yoga or art sessions) and support groups
- targeted advice and support

The proposal

Due to procurement rules the council is unable to extend the contract with the Chinese Mental Health Association beyond 31 March 2017 as all of the contract extensions have been used.

To continue the Wellbeing Services, the council would need to go out to tender for this provision. Going out to tender means that a service specification is developed and organisations bid to provide the service. The best bid wins and that organisation provides the service.

We are proposing not to go out to tender for this provision because this would duplicate other services, not provide good value for money and is not in line with the evidence of the best types of prevention services.

It is expected that by not going out to tender on this contract that there will be an annual saving of £46,894

Alternative provision

In 2015-2016, the council and Barnet Clinical Commissioning Group (CCG) commenced the redesign of mental health services.

The aim of this piece of work was to ensure that:

- individuals are supported to manage their mental health condition
- where primary care engages the user in decisions about their care and treatment
- those with experience of managing their mental health conditions support their peers.

Part of this redesign includes a Wellbeing Hub. Chinese Mental Health Association play a leading role in the voluntary sector collaboratively delivering the Wellbeing Hub.

In addition, the council has established a mental health enablement model working with the Mental Health Network to ensure that service users receive early support to retain employment, return to work and retain their homes. As this provision has now been developed it is thought that the current wellbeing contract with the Chinese Mental Health Association duplicates this provision.

Within the development of the Mental Health Network and the Wellbeing Hub there is an explicit recognition that some groups of people only access services in a crisis and that additional steps need to be taken to make sure that these groups access services before crisis.

To ensure that services are appropriate to the needs of the Chinese community and to allow for clients to be transitioned appropriately, the council will invest some additional resources into the Wellbeing Hub and the Mental Health Network for the development of specific support to the Chinese community which may include interpreters, specific outreach and staff training.

Alternative provision is also available via talking therapies (IAPT) and employment support (MAPS and IPS). The Digital Mental Wellbeing Service will also be available in early 2017.

Alongside this, there is the borough's offer specifically for older people which includes Ageing Well Provision (through the Altogether Better locality coordinators), the Neighbourhood Services (led by Age UK Barnet) and the Age UK Barnet's Later Life Planning service.

As a large proportion of the people accessing the services are older people, the council has identified transitional funding to work with the Ageing Well Programme to ensure that appropriate alternative provision is available to the people currently using the service.

Chinese Mental Health Association will be offered support by Community Barnet to ensure sustainability.

We are seeking your views on -

To what extent do you agree or disagree with the proposal (including the proposed alternative provision)?.

Reasons why you agree or disagree with this proposal.

What impact the proposal would have on you, your family or organisation?

Reasons for your answer.

Section 3: Mental Health Project – Barnet Asian Women’s Association

Service: Mental Health Project

Organisation: Barnet Asian Women’s Association

Barnet Asian Women’s Association (BAWA) provides a service to Asian women in the London Borough of Barnet. The organisation welcomes Asian women from all faiths and practices and provides community support, including supporting women in crisis.

Barnet Asian Women’s Association is currently commissioned to provide:

- information related to health and wellbeing through a variety of channels including:
 - promotional materials;
 - on-line;
 - telephone;
 - face-to-face
 - groups and targeted support
- Wellbeing Events throughout the year to promote health and wellbeing, raising awareness and tackling stigma. Wellbeing Events will primarily be for Asian Women from Barnet
- facilitated wellbeing activities (for example, yoga or art sessions) and support groups
- targeted advice and support.

The proposal

Due to procurement rules the council is unable to extend the contract with the Barnet Asian Women’s Association beyond 31 March 2017 as all of the contract extensions have been used.

To continue the Mental Health project the council would have to go out to tender for this provision. Going out to tender means that a service specification is developed and organisations bid to provide the service. The best bid wins and that organisation provides the service.

We are proposing not to go out to tender for this provision because this would duplicate other services, not provide good value for money and is not in line with the evidence of the best types of prevention services.

It is expected that by not going out to tender on this contract that there will be an annual saving of £29,656

Alternative provision

In 2015-2016, the Council and Barnet Clinical Commissioning Group (CCG) commenced the redesign of mental health services.

The aim of this piece of work was to ensure that:

- individuals are supported to manage their mental health condition
- where primary care engages the user in decisions about their care and treatment
- those with experience of managing their mental health conditions support their peers.

In addition, the council has established a mental health enablement model working with the Mental Health Network to ensure that service users receive early support to retain employment, return to work and retain their homes.

Within the development of the Mental Health Network and the Wellbeing Hub there is an explicit recognition that some groups of people only access services in a crisis and that additional steps need to be taken to make sure that these groups access services before crisis.

To ensure that services are appropriate to the needs of Asian women and to allow for clients to be transitioned appropriately, the council will invest some additional resources into the Wellbeing Hub and the Mental Health Network for the development of specific support to the Asian women which may include interpreters, specific outreach and staff training.

In addition, the council has also recently awarded a grant of £10,000 to the Sangam Association of Asian Women (a BAME group with a focus on wellbeing services) to provide additional services to the borough's Asian population.

Alternative provision is also available via talking therapies (IAPT) and employment support (MAPS and IPS). The Digital Mental Wellbeing Service will also be available in early 2017.

Alongside this, there is the borough's offer specifically for older people which includes Ageing Well Provision (through the Altogether Better locality coordinators), the Neighbourhood Services (led by Age UK Barnet) and the Age UK Barnet's Later Life Planning service.

Barnet Asian Women's Association will be offered support by Community Barnet to support sustainability.

We are seeking your views on -

To what extent do you agree or disagree with the proposal (including the proposed alternative provision)?.

Reasons why you agree or disagree with this proposal.

What impact the proposal would have on you, your family or organisation?

Reasons for your answer.

Section 4: Community Arts Project – Community Focus

Service: Adults Community Arts Project

Organisation: Community Focus

Community Focus is an inclusive multi-arts centre based in Barnet. Community Focus work to encourage members of our community of all ages, backgrounds and abilities to participate in the arts, to gain confidence and to challenge barriers through integration and innovation.

Community Focus receives a grant to provide subsidised personalised service to adults who do not have adult and social care eligible care needs. Courses cater for small numbers of people and include drumming, painting, ceramics, dance, drama, computer classes and photography.

The proposal

The council's grants programme supports new sustainable projects and activities. The grants programme does not fund existing activities.

The council has provided a grant to Community Focus for the Community Arts Project since 2011. Therefore council is unable to provide a further grant beyond 31 March 2017.

To continue the Community Arts Project (subsidised places) the council would have to go out to tender for this provision. Going out to tender means that a service specification is developed and organisations bid to provide the service. The best bid wins and that organisation provides the service.

We are proposing not to go out to tender for this provision because this would duplicate other services, not provide good value for money and is not in line with the evidence of the best types of prevention services.

It is expected that by not going out to tender on this contract that there will be an annual saving of £47,300

Alternative provision

An initial assessment by Community Focus has shown that it is likely that the courses will continue with residents accessing the courses being asked to make a slightly higher contribution.

However, in the event that Community Focus is no longer able to operate or people currently accessing the subsidised courses are unable to financially contribute without the council's subsidy, the council will aim to support the adult to access a range of alternative local services.

These could be services such as Barnet Mencap, which provides social inclusion and employment support for people with learning disabilities and activities included in our Ageing Well offer. People may also be supported to access the many other community art and social inclusion activities which occur throughout the borough including courses offered through U3A, Age UK Barnet, Arts Depot, Dementia Cafes, knitting groups, art classes and drama classes.

Barnet Council will work with individuals to explore the use of support planning (through top up and individual contribution) to purchase community arts provision.

Community Focus will be offered support by Community Barnet to support sustainability.

We are seeking your views on -

To what extent do you agree or disagree with the proposal (including the proposed alternative provision)?

Reasons why you agree or disagree with this proposal.

What impact the proposal would have on you, your family or organisation?

Reasons for your answer.

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Making changes to some of our adult social care services

Tell us what you think





Who we are and what we do

We are **Barnet Council**.

We run **adult social care** services in Barnet.

Adult social care is care you get if you need extra support.



Our consultation

We are having a **consultation**.

A **consultation** is when we ask you questions about our plans.

This booklet tells you

- ✓ Why we are having the consultation.
- ✓ Work we have done on asking questions so far.
- ✓ Questions we want to ask you now.



Anyone who lives in Barnet can answer the questions. For example, your family, carers and anyone who works in care services and other groups can take part.



We will take the information you tell us to a meeting in January 2017.

Why we are having a consultation

Adult social care is under a lot of pressure. More people need this care and there is not enough money to pay for everyone. This is going to get worse in the future.

We are changing our services so that people

✓ **Get better quality care.**

✓ **Get better value for money.**

We are doing this so we can

- Care for adults earlier on
- Help adults to be cared for at home for as long as possible.



We want to

- Keep going with our carers support service in Barnet
- Make our work in mental health better so that people get the support that is right for them
- Join up care services so that physical and mental health services work together more closely.



We know we have to spend our money in the best way on adult social care. We are looking at all the ways we can do this.



We know we have to change some of our services.



We will make sure adult social care services

- ✓ Do as well as they can
- ✓ Are there for the people who need care the most
- ✓ **Prevent** the need for adult social care for as long as possible
- ✓ Give the best value for money
- ✓ **Do not** do the same job as another service
- ✓ Stop people feeling alone and isolated.



Things for you to think about

The **Adult and Safeguarding Committee** at Barnet Council looked at adult social care services.



We made a list of changes to some services. This will save money but still give you good care.



We want you to look at our plan to change **4 services**

- **Support Planning and Brokerage** (delivered by Inclusion Barnet)
- **Wellbeing Services** (delivered by Chinese Mental Health Association)
- **Mental health project** (delivered by Barnet Asian Women's Association)
- **Community Arts Project** (delivered by Community Focus)



Inclusion Barnet

Inclusion Barnet is a charity. They have run support planning services for disabled people for 3 years. They help disabled people to get support so they can work and live on their own with support.



What we want to do

We want **support planning and brokerage** services to be run by the Council instead of the charity. This will save the Council **£146,523**.

All adults who get social care will still get support. This will come from Barnet social care staff. The Council will check the service to make sure it meets people's needs.



Telling us what you think

Do you agree with our changes?

YES

NO



Tell us more about this here





Do you think our plan to change these services will affect you and your family?

YES

NO



Tell us more about this here





Wellbeing Services – helping people to feel good

The **Chinese Mental Health Association** give Chinese people support with their mental health and help them to feel OK.

They give advice and information. They hold events too.



What we want to do

We cannot pay to run these services after **31 March 2017**. We would have to find a new service with a new contract. If we do not have this service it will save the Council **£46,894**.

There is a centre called a **Wellbeing Hub**. We will give the hub money to make sure Chinese people get the right support for their mental health.

We will offer different therapies. And we will take care of older Chinese people.





Telling us what you think

Do you agree with our changes?

YES

NO

Tell us more about this here



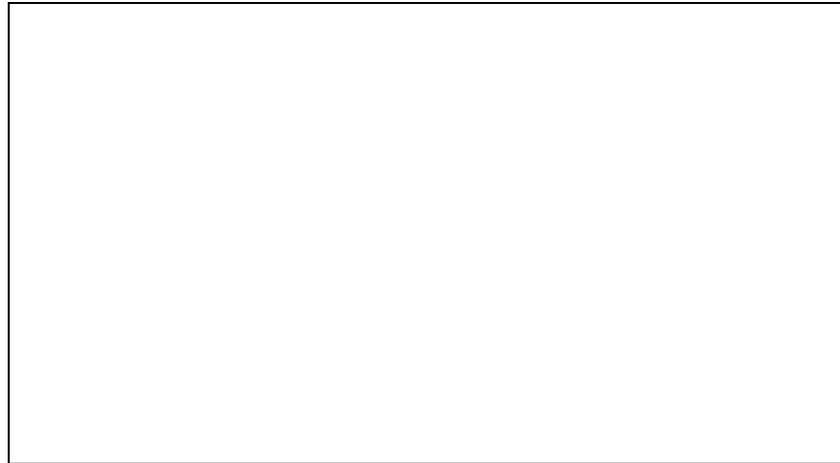
Do you think our plan to change this service will affect you and your family?



YES

NO

Tell us more about this here



Mental Health Project – Barnet Asian Women’s Association

Barnet Asian Women’s Association give support to Asian women in Barnet. They give advice and information and they run events.



What we want to do

We cannot pay to run this service after **31 March 2017**. We would have to find a new service with a new contract. If we do not have this service it will save the Council **£29,656**.



We know that some people only get in touch when they are having a crisis. We want them to contact us before this happens.

We will spend money to make sure that Asian women get the services they need. We have had an extra **£10,000** to help us do this.



We will offer different therapies. And we will take care of older Asian women.

Telling us what you think

Do you agree with our changes?



YES

NO

Tell us more about this here



Do you think our plan to change this service will affect you and your family?

YES

NO

Tell us more about this here





Community Arts Project – Community Focus

Community Focus is an arts centre in Barnet. Community Focus helps adults in the community to take part in the arts – for example photography, drama and painting.

Doing this helps people to feel confident and feel part of things.



What we want to do

We cannot pay to run this service after **31 March 2017**. We would have to find a new service with a new contract. If we do not have this service it will save the Council **£47,300**.

We can keep running the arts courses if people can pay a bit more to do them.

If this cannot happen then we will find other services to help out like Barnet Mencap.

We will give people support to use other arts services in the community.



We will give each person support to plan and buy arts in the community.



Community Focus will get help from **Community Barnet**.

Telling us what you think

Do you agree with our changes?



YES

NO

Tell us more about this here





Do you think our plan to change this service will affect you and your family?

YES

NO

Tell us more about this here



Taking part in the consultation

You can

Fill out our questionnaire online at

engage.barnet.gov.uk



Or fill out this paper questionnaire and email it to **healthandwellbeing@barnet.gov.uk**



Or you can post it to

Zoë Garbett

Commissioning Group Health and Wellbeing

North London Business Park

Oakleigh Road South

London

N11 1NP



This needs to be sent back to us by 9 January 2017.

Or you can call this number

0208 359 3478

You can tell us your answers at

- A group meeting or



- A meeting on your own with one other person



You can ask for the questionnaire in a different format.

Please use the same telephone number and email that is on page 17.



All your answers will go to **Adults and Safeguarding Committee.**

Appendix B

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: Adults Prevention Third Party Spend review	
Inclusion Barnet - Support Planning and Brokerage Service	
Is it a new or revised function, policy, procedure or service? Revised function	
Department and Section: Commissioning Group , Adults and Health	
Date assessment completed: October 2016	
2. Names and roles of people completing this assessment:	
Lead officer	John Mason, Commissioning lead
Stakeholder groups	Council departments: Adults DU, Commissioning Group, Family Services, Housing Councillors Residents Service Users
Representative from internal stakeholders	Commissioning Lead
Representative from external stakeholders	n/a
Delivery Unit Equalities Network rep	
Performance Management rep	n/a
HR rep (for employment related issues)	n/a
3. Full description of function, policy, procedure or service:	
Context	
<p>This service was commissioned at an annual cost of £146,000 as an alternative to the traditional model of Social Workers undertaking the support planning and brokerage to people who are eligible for Social Care services.</p> <p>The contract for this service has been in place from October 1st 2014 for a period of three years. However Adult Social Care in Barnet is changing in line with the Care Act 2014 and the Social Care delivery model is moving towards an asset based approach with Social Workers focusing on people's strengths and family support; ensuring people use their local community facilities. This delivery model has been developing over the lifetime of the contract and it is planned to integrate the services offered by this contract into the in house model of social care from 1st October 2017 obviating the need for services provided by this contract.</p>	

Proposal

The proposal is for the Council to end the contract 30 September 2017 and to not extend or reprocure. This will contribute £146,000 per annum to the Council's saving target.

Adults and Health is required to make £2,178,000 in savings over 3 years from third party expenditure. To meet this requirement, externally commissioned third sector organisations providing adults prevention provision have been reviewed and recommendations made with regards to securing savings from these contracts. This has included the support planning and brokerage service that is provided by a third sector organisation, Inclusion Barnet. Information provided through contract monitoring and discussions with commissioners was used to assess effectiveness for example quantitative and qualitative information regarding use of the service (numbers, targeting), service quality and impact as well as employing evidence of best practice to assess our offer. The review looked at the known triggers for entry and escalation into the social care system and how the services contribute to these.

The review has also considered monitoring information provided by organisations to assess how effectively organisations are delivering. The review focuses on retaining services that we know to have the highest impact and to be most effective at managing demand.

Overview of Support Planning and Brokerage Services

The service was established in 2011 through the 'Right to Control' project and continued through core funding from Adult Social Care. Following competitive tender, the contract with Inclusion Barnet to provide the Support Planning and Brokerage service has been in place from October 1st 2014. The contract is for three years.

The service was commissioned to provide an alternative service model for the planning and brokerage of support to meet people's needs. The provider is a user led organisation and a charitable institution which is representative of people with lived experience of disability enabling people with disabilities to support and plan, exercising choice and control to meet their own needs.

The **objectives** of the service are to support more people, provide better outcomes for people and increase value for money for the Council and enable people to have more choice and control.

The service has supported people to exercise choice and control in innovative and creative ways to access local community activities. However the evidence shows that the service has not provided value for money outcomes because it has not been possible to generate a sufficient number of referrals and over the lifetime of the contract to date there has not been a significant increase in the number of referrals. This is because the anticipated number of referrals have not been received

Inclusion Barnet

This is the organisation that delivers the service and they were launched in November 2015 following changes in their organisational structure from a Community Interest Company to an organisation with charitable status. They were formerly known as Barnet Centre for Independent Living (BCIL). BCIL are now a trading arm of Inclusion Barnet

Anticipated consequence of the ending of the service for residents eligible for services

It is anticipated that the people who are eligible to receive social care services will continue to be supported through Social Workers as part of their usual duties to deliver these services. The social work staff will continue to undertake an asset based approach that focusses on ensuring the support plan meets the individual needs, offering choice and control and a creative and innovative approach to meeting support needs.

How is the equality strands affected? <i>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.</i>			
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 checked="" type="checkbox"/> / No <input type="checkbox"/>	The service is to support all age groups. It has largely supported people under the age of 65	The proposed change to the service model for Social Workers will include support planning. Social Workers will be enabling the person through an asset based approach to offer choice and control thus obviating the need for the provision of a separate service. Social workers work with clients to design their care plan and agree, with service users, the types of services they will receive. The Brokerage Team then works with providers to source the services at the right quality and price.
2. Disability	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>	The service supports people with a range of disabilities	Please see Q.1 answer above
3. Gender reassignment	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>	n/a	Please see Q.1 answer above
4. Pregnancy and maternity	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>	n/a	Please see Q.1 answer above
5. Race / Ethnicity	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>	n/a	Please see Q.1 answer above
6. Religion or belief	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>	n/a	Please see Q.1 answer above
7. Gender / sex	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>	n/a	Please see Q.1 answer above
8. Sexual orientation	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>	n/a	Please see Q.1 answer above
9. Marital Status	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>		Please see Q.1 answer above

10. Other key groups?	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>		Please see Q.1 answer above
Carers	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>	Young, Parent and Adult carer.	
People with mental health issues	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>		
Some families and lone parents	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>		
People with a low income	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>		
Unemployed people	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>		
Young people not in employment education or training	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>		

4. What will be the impact of delivery of any proposals on satisfaction ratings amongst different groups of residents?

The service will continue to be available for people who have eligible care needs and delivered through social workers and the brokerage team .

The service model for support planning will focus on an asset based approach delivered directly by the Council and the focus on the person having choice and control (Care Act 2014). This means there will be no significant change to the residents of the borough and it is not anticipated that there will be an Impact on satisfaction ratings amongst different groups of residents. This will be monitored.

From the recent residents perception survey (Spring 2016): 74% of the residents are satisfied with how the Council runs things

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

Although it is not anticipated that there will be an impact on service users because they will continue to receive a service to meet their support needs, the proposal may not enhance Barnet's reputation as a good place to work and live if the change in service delivery is perceived as a further funding reduction to a third sector organisation.

From the recent residents perception survey (Spring 2016): 89% of residents are satisfied with their local area as a place to live

The contract is a significant source of funding for the provider organisation and this may affect

the organisation's ability to continue operating. To support the future sustainability of the organisation the Council will work with the organisation throughout the remaining life of the contract and beyond to:

- Provide support to find alternative funding
- Provide support to find accommodation

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

Barnet has consistently communicated the need for Value For Money services and bringing the contract to an end and delivering the service in house may impact on the perception of Barnet's diverse communities about how the Council does business.

7. 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?

If this proposal is approved notice will be given to the service provider in line with the contract terms.

There will also need to be a transition /exit strategy for the organisation in regards to the people it is supporting. The Council will work with the provider to ensure this is in place to support people who have received support from the provider. This can be planned to take place in the last quarter of the contract. Communication will be required to inform people of the rationale for the change and who to contact. It will be made clear that the responsibility for the review of the support plans has remained with the Council and will continue to be available to all eligible service users.

8. How will the new proposals enable the council to promote good relations between different communities?

No impact anticipated

From the recent residents survey: 85% of residents agree that people from different backgrounds get on well together

9. 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?

Consultation ran from November 2016 – January 2017 via an online questionnaire (including an easy read version) and the opportunity to engage via focus groups or 1-2-1 telephone consultations with commissioners.

Consultation has already been undertaken with residents on proposals for alternative delivery models which make clear that Adult Social Care in Barnet is changing in line with the Care Act 2014 and the Social Care delivery model is moving towards an asset based approach with Social Workers focusing on people's strengths and family support; ensuring people use their local community facilities. This new delivery model has been developing over the lifetime of the contract and it is planned to integrate the services offered by this contract into the in house model of social care from the 1st of October 2017 obviating the need for services provided by this contract.

The proposal has included a number of Council officers across the Commissioning Group and Delivery Unit including senior management.

Overall Assessment

10. Overall impact		
Positive Impact <input type="checkbox"/>	Negative Impact or Impact Not Known ¹ <input checked="" type="checkbox"/>	No Impact <input type="checkbox"/>

11. Scale of Impact		
Positive impact: Minimal <input type="checkbox"/> Significant <input type="checkbox"/>	Negative Impact or Impact Not Known Minimal <input checked="" type="checkbox"/> Significant <input type="checkbox"/>	

12. Outcome			
No change to decision <input checked="" type="checkbox"/>	Adjustment needed to decision <input type="checkbox"/>	Continue with decision <i>(despite adverse impact / missed opportunity)</i> <input type="checkbox"/>	If significant negative impact - Stop / rethink <input type="checkbox"/>

¹ '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.

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

The Support Planning and Brokerage service was traditionally part of the statutory duty of Adult Social Care and until 2011 was undertaken by Social Workers. The alternative offer with Inclusion Barnet (formerly Barnet Centre for Independent Living, BCIL) has been funded since 2011 with a dependency on social workers to generate referrals to the organisation. Because the number of referrals have been low, only a small proportion of the total number of people who require a support plan have been supported through this contract. The overriding need to make savings in the Adults and Social Care budget, wherever possible without a negative impact on the service user group, linked with the Care Act implementation, (to provide the person with choice and control) has meant change in the Social workers function who are well placed to deliver this service. Therefore we anticipate that there will be little or no impact on the service user except that they will no longer have a choice of provider for support planning and brokerage.

The contract is a significant source of funding for the provider organisation and this may affect the organisation's ability to continue operating. To support the future sustainability of the organisation the Council will work with the organisation throughout the remaining life of the contract and beyond to:

- Provide support to find alternative funding
- Provide support to find accommodation

14. 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
Communication with Inclusion Barnet	<ul style="list-style-type: none"> Meeting with Chief Executive of Inclusion Barnet to inform of proposal to Council 	To ensure that Inclusion Barnet are aware of the council's position regarding the contract and the strategic context in which decisions have been made.	JM	September 2016 and on going to September 2017
	<ul style="list-style-type: none"> Meeting with Peer Support Planning and brokerage Team Lead 	Inclusion Barnet will be provided with enough time to prepare for the end of the contract and seek support from Community Barnet.	JM	September 2016 through to January 2017 - complete
	<ul style="list-style-type: none"> Support from Community Barnet 	To support the consultation process	JM	On going
Communication with Service Users	<ul style="list-style-type: none"> Consultation process 	To consult with as many service users as possible in time frame	JM	November 2016 to January 2017 - complete
	<ul style="list-style-type: none"> Support to access Adult Social Care 	Inclusion Barnet will be provided with enough time to prepare for the end of the contract.		On going to September 2017
Communication with Family /Carers	<ul style="list-style-type: none"> Consultation Process 	To consult with as many family /carers as possible in time	JM	November 2016 to January 2017

Equality Objective	Action	Target	Officer responsible	By when
	<ul style="list-style-type: none"> Support to access Adult Social Care 	frame Inclusion Barnet will be provided with enough time to prepare for the end of the contract	JM	On going to September 2017

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Appendix C

**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: Adults Prevention Third Party Spend review Chinese Mental Health Association - Mental Health and Wellbeing Support for Chinese Residents	
Is it a new or revised function, policy, procedure or service? Revised function	
Department and Section: Commissioning Group, Adults and Health	
Date assessment completed: July 2016	
2. Names and roles of people completing this assessment:	
Lead officer	Paula Arnell, Joint Commissioning Manager Mental Health
Stakeholder groups	Council departments: Adults DU, Commissioning Group, Family Services, Housing Barnet CCG Councillors Residents
Representative from internal stakeholders	
Representative from external stakeholders	
Delivery Unit Equalities Network rep	
Performance Management rep	
HR rep (for employment related issues)	
3. Full description of function, policy, procedure or service:	
Please describe the aims and objectives of the function, policy, procedure or service	
<p>Barnet’s Corporate plan points to the need to build strong, healthy and successful communities and to fundamentally and transparently rethink future service delivery options by build greater community resilience. These changed relationships with Borough partners and residents means services will be delivered differently and the Community participation and volunteering strategies will enable residents to become more involved in local priorities and make the most of our community assets for the benefit of all our communities.</p> <p>This proposal, to reduce spending with culturally specific organisations, is linked to the enablement of service users to self- manage their mental health and wellbeing through partnership working with CCG and the Ageing well strategy. The Council is delivering an integrated, community based locality team model, which is planned to offer mental health and wellbeing services through the Barnet Wellbeing Hub and collaborative service organisations based in the community. This wellbeing hub activity is currently being piloted by Barnet CCG, the council is reviewing support to culturally specific organisations.</p>	

The Council and partners recognise the need to maintain strong relationships with the voluntary sector and The Chinese Mental Health Association are a lead organisation in the Voluntary and Community Sector Collaborative at the new Community Wellbeing Centre.

Adults and Health is required to make £2,178,000 in savings over 3 years from third party expenditure. To meet this requirement, externally commissioned third sector organisations providing adults prevention provision have been reviewed and recommendations made with regards to securing better value from these contracts.

Early support and prevention is fundamental to future sustainability of Adult Social Care Services. Our offer to adults needs to be proportionate, of high quality and good value for money. This review explored the social care investment in early intervention and prevention.

Information provided through contract monitoring and discussions with commissioners was used to assess effectiveness for example quantitative and qualitative information regarding use of the service (numbers, targeting), service quality and impact as well as employing evidence of best practice to assess our offer. The review looked at the known triggers for entry and escalation into the social care system and how the services contribute to these.

The review has also considered monitoring information provided by organisations to assess how effectively organisations are delivering. The review focuses on retaining services that we know to have the highest impact and to be most effective at managing demand.

Chinese Mental Health Association was originally commissioned through the Supporting People programme to provide a Floating Support service for Chinese residents.

The service has evolved over recent years to provide:

- Information related to health and wellbeing through a variety of channels including; promotional materials; on-line; telephone; as well as face-to-face through events, groups and targeted support
- Wellbeing Events throughout the year to promote health and wellbeing, raising awareness and tackling stigma. Wellbeing Events will primarily be for Chinese community
- Facilitated wellbeing activities (for example, yoga or art sessions) and support groups
- Targeted Advice and Support

Annual numbers:

- 40 Wellbeing activities p/a 30 attendees per activity
- 20 Support Groups p/a 30 attendees per group
- 10 people receiving targeted One To One p/a

The proposal is to end the contract 31 March 2017 and not to extend or reprocure.

How are the equality strands affected?			
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 checked="" type="checkbox"/> / No <input type="checkbox"/>	<p>The Council proposes to no longer commission non-statutory mental health and wellbeing support for adult Chinese residents.</p> <p>As a result there may be a negative impact for Chinese residents with common mental health conditions aged 18 and above, in particular 18 – 65, if appropriate and alternative support is not available.</p>	<p>Service Users who require support when the contract ends will be signposted or transitioned to alternative support for people with mental health conditions available in the borough, or if appropriate out of borough. The Council will work with the provider to ensure that this process is managed through an agreed exit and transition plan. The council is providing transition funding to support service users to access Ageing Well support and ensure that the support provided by Ageing Well is accessible (no language and cultural barriers) and/or other mental health provision such as Talking Therapies (through referral for social prescribing to the CCG's Barnet Wellbeing Hub and the Barnet Enablement Team [The Network]) in the borough. The funding will ensure that the Wellbeing Hub is able to support signposting to relevant services.</p> <p>See 10. Other Key Groups (in this table) for further detail.</p>
2. Disability	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>	<p>Information is not available to identify the number of people accessing support from the Chinese Mental Health Association who have physical disabilities / sensory impairments /</p>	<p>Service Users who require support when the contract ends will be signposted or transitioned to alternative support for people with mental health conditions available in the borough, or if appropriate out of</p>

		<p>long term conditions and mental health conditions. Therefore it is not possible to determine the number of people who have additional needs alongside their self-identified or diagnosed mental health condition.</p> <p>There could be a negative impact for people with common mental health conditions and additional disabilities if appropriate and alternative and appropriate support is not available that meets their mental and physical health needs.</p>	<p>borough. The Council will work with the provider to ensure that this process is managed through an agreed exit and transition plan and/or other mental health provision (through referral for social prescribing to the CCG's Barnet Wellbeing Hub and the Barnet Enablement Team [The Network]) in the borough. The funding will ensure that the Wellbeing Hub is able to support signposting to relevant services.</p>
<p>3. Gender reassignment</p>	<p>Yes <input type="checkbox"/> / No <input type="checkbox"/></p>	<p>Information not available</p>	<p>Though information is not currently available the provider will ensure that Service Users who require support when the contract ends will be signposted or transitioned to alternative support for people with mental health conditions available in the borough, or if appropriate out of borough. The Council will work with the provider to ensure that this process is managed through an agreed exit and transition plan.</p>
<p>4. Pregnancy and maternity</p>	<p>Yes <input type="checkbox"/> / No <input type="checkbox"/></p>	<p>Information not available</p>	<p>Though information is not currently available the provider will ensure that Service Users who require support when the contract ends will be signposted or transitioned to alternative support for people with mental health conditions available in the borough, or if appropriate out of borough. The Council will work with the provider to ensure that this process is</p>

			<p>managed through an agreed exit and transition plan.</p>
<p>5. Race / Ethnicity</p>	<p>Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/></p>	<p>The JSNA (2015 – 2020) details that Barnet’s Chinese community represents 2.4% of the total population compared to outer London where the Chinese community make up 1.2% of the population. This highlights that the importance of considering the needs of this community in service design and delivery.</p> <p>When the Council no longer commissions specific mental health and wellbeing support for Chinese residents this could potentially have a negative impact with regard to race / ethnicity.</p> <p>Though Chinese residents who access support from the Chinese Mental Health Association will be offered alternative support if needed, before the contract ends 31 March 2017 it is possible that service users may dislike change and may treat alternative providers with distrust and suspicion.</p> <p>Service users will have engaged with staff from their own community backgrounds with whom they can speak in their native language that may not be readily available from alternative providers. There may also be concerns that alternative services may not be compatible with, or have respect for, cultural and</p>	<p>The Council and BCCG will continue to work with all commissioned services, both prevention and early intervention and statutory services that provide mental health and wellbeing support, to ensure they meet the needs of residents from all community groups; proportionate to need.</p> <p>All services need to address the stigma within communities and barriers to accessing support to ensure they are representative of their local communities.</p> <p>Mental Health and Wellbeing support provided by statutory services are also changing to provide earlier support to residents to avoid escalation to crisis and understand the needs of Barnet’s diverse population.</p> <p>All commissioned services need to engage representatives from different community groups to ensure their services are able to respond to Barnet’s diverse population, including Chinese residents.</p> <p>The council is providing transition funding to support service users to access Ageing Well support and ensure that the support provided by Ageing Well is accessible (no language and cultural barriers) and/or other mental health provision (through referral for social prescribing to the</p>

		<p>religious preferences or have the right skills/knowledge to meet the needs of people from specific community groups or understand the cultural stigma associated with mental health.</p> <p>There is likely to be a negative impact if alternative providers lack staff that are representative of Service User's communities or have little understanding of their faith and culture.</p> <p>There is a risk that Service Users will not access alternative support and as a result their needs will escalate and they will require more intensive and expensive support from statutory services.</p>	<p>CCG's Barnet Wellbeing Hub and the Barnet Enablement Team [The Network]) in the borough. The funding will ensure that the Wellbeing Hub is able to support signposting to relevant services.</p>
<p>6. Religion or belief</p>	<p>Yes <input type="checkbox"/> / No <input type="checkbox"/></p>	<p>Information not available</p>	<p>Though information is not currently available the provider will ensure that Service Users who require support when the contract ends will be signposted or transitioned to alternative support for people with mental health conditions available in the borough, or if appropriate out of borough. The Council will work with the provider to ensure that this process is managed through an agreed exit and transition plan.</p>
<p>7. Gender / sex</p>	<p>Yes <input type="checkbox"/> / No <input type="checkbox"/></p>	<p>Information not available</p>	<p>Though information is not currently available the provider will ensure that Service Users who require support when the contract ends will be signposted or transitioned to alternative support for people with</p>

			mental health conditions available in the borough, or if appropriate out of borough. The Council will work with the provider to ensure that this process is managed through an agreed exit and transition plan.
8. Sexual orientation	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Information not available	Though information is not currently available the provider will ensure that Service Users who require support when the contract ends will be signposted or transitioned to alternative support for people with mental health conditions available in the borough, or if appropriate out of borough. The Council will work with the provider to ensure that this process is managed through an agreed exit and transition plan.
9. Marital Status	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Information not available	Though information is not currently available the provider will ensure that Service Users who require support when the contract ends will be signposted or transitioned to alternative support for people with mental health conditions available in the borough, or if appropriate out of borough. The Council will work with the provider to ensure that this process is managed through an agreed exit and transition plan.
10. Other key groups? Carers People with mental health conditions Some families and lone parents	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/> Yes <input type="checkbox"/> / No <input type="checkbox"/>	It is anticipated that when the Council no longer funds specific mental health and wellbeing support there will be a negative impact with regards to people with mental health conditions and their carers.	Service Users will be offered alternative support that has been commissioned to improve the wellbeing of Barnet Residents from all communities. This will include generic information and advice, including welfare advice, housing

<p>People with a low income Unemployed people Young people not in employment education or training</p>	<p>Yes <input type="checkbox"/> / No <input type="checkbox"/> Yes <input type="checkbox"/> / No <input type="checkbox"/> Yes <input type="checkbox"/> / No <input type="checkbox"/></p>	<p>There is a risk that Service Users will not access alternative support and as a result their needs will escalate and they will require more intensive and expensive support from statutory services.</p>	<p>related support, employment support and Talking Therapies and Community Wellbeing support.</p> <p>BCCG and partners (including the Voluntary and Community Sector, Primary Care, Secondary Mental Services and Adult Social Care) are developing a Wellbeing Hub social prescribing and Emotional Health Checks service offer. This will include a single point of contact / access for all Barnet residents to access Early Intervention and Prevention support from the Voluntary and Community sector as well as building stronger links to Primary Care and statutory services provided by both the Council and Mental Health Trust. This will provide an alternative route to access mental health and wellbeing support for those residents currently accessing mental health and wellbeing services commissioned by the Council.</p> <p>BCCG are also developing plans to broaden the range of talking therapies available in the borough. These developments will aim to improve access to talking therapies, introduce choice and improve quality.</p>
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4. What will be the impact of delivery of any proposals on satisfaction ratings amongst different groups of residents?

As a result of the Council no longer commissioning specific mental health and wellbeing support for Chinese residents there is the potential for a negative impact on the satisfaction ratings of different groups of residents. Specifically Chinese residents, and more broadly from residents with mental health conditions and family carers of people with mental health conditions, who are familiar with the service and changes across the sector.

Though when the contract with the Council ends the organisation will continue to operate in Barnet through its subcontract with Surrey and Borders Partnership Trust for the provision of Improving Access to Psychological Therapies and through leading the Voluntary and Community Sector Collaborative at the new Community Wellbeing Centre.

The organisation also has a good track record of securing other funding / income so it is possible the organisation will continue to provide wellbeing activities to existing service users when the contract with the Council ends 31 March 2016.

Transitional funding has been identified to develop Ageing Well provision to ensure that it meets the language and cultural requirements of the current service users of this provision.

The Council has identified specific transition funding to support people currently accessing this service to access other mental health provision (through referral for social prescribing and an offer of an emotional health check to the CCG's Barnet Wellbeing Hub and the Barnet Enablement Team [The Network]) in the borough. The funding will ensure that the Wellbeing Hub is able to support signposting to relevant services. The Chinese Mental Health Association is a lead organisation in the voluntary sector collaborative delivering the Hub activity.

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

The proposal to no longer commission specific mental health and wellbeing support for Chinese residents is unlikely to enhance Barnet's reputation as a good place to work or live. The transition funding and alternative provision provided will minimise the negative impact of the recommendation.

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

The proposal to no longer commission specific mental health and wellbeing support for Chinese residents has the potential to be received negatively by residents, particularly those with mental health conditions and family carers of people with mental health conditions, who are familiar with the service and changes across the sector.

To minimise the negative impact, transitional funding has been identified to ensure that residents are able to access support.

7. 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?

The Council will work with the provider to ensure an exit and transition plan is in place that takes account of any ongoing support needs for existing service users. The process will be closely managed by the council from the point of serving notice to the provider and the date the contract ends (six months).

Service users will also be provided with information about where to seek information, advice or support in future if needed. Service users will be supported to access other provision with support from the transition funding.

8. How will the new proposals enable the council to promote good relations between different communities?

Though this service will no longer be commissioned after the contract ends it is essential the Council and partners communicate the developments happening across mental health and wellbeing services in the borough and how these provide an alternative to all residents to enable them to self- manage their mental health and wellbeing.

9. 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?

Consultation ran from November 2016 – January 2017 via an online questionnaire (including an easy read version) and the opportunity to engage via focus groups. Service users, carers and organisations affected by the proposal were consulted during this period.

Overall Assessment

10. Overall impact		
Positive Impact <input type="checkbox"/>	Negative Impact or Impact Not Known ¹ <input checked="" type="checkbox"/>	No Impact <input type="checkbox"/>

11. Scale of Impact		
Positive impact: Minimal <input type="checkbox"/> Significant <input type="checkbox"/>	Negative Impact or Impact Not Known Minimal <input checked="" type="checkbox"/> Significant <input type="checkbox"/>	

12. Outcome			
No change to decision <input checked="" type="checkbox"/>	Adjustment needed to decision <input type="checkbox"/>	Continue with decision <i>(despite adverse impact / missed opportunity)</i> <input type="checkbox"/>	If significant negative impact - Stop / rethink <input type="checkbox"/>

¹ '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.

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

The proposed move to community wellbeing hubs and locality teams means that service users will no longer receive generic support services from a culturally specific organisation. Barnet will continue to ensure that the diversity of needs of all service users are fully taken into account in service provision. Barnet's equality policy requires that all service users and residents are treated fairly with understanding and respect and that recruitment aims to reflect the broad diversity of service users and staff. Staff in locality teams will be aware of and responsive to cultural differences; their ability to know about, value and respond to the rich cultural diversity of Barnet residents will be key to the success of wellbeing hubs and locality teams.

Chinese residents who access support from the Chinese Mental Health Association will be offered alternative support if needed, before the contract ends 31 March 2017

Because CMHA have taken action to diversify their funding support it is likely that CMHA will continue to have a presence in the borough. As highlighted earlier CMHA will continue to be involved as a key stakeholder because they are a lead organisation in the voluntary sector collaborative delivering the **Wellbeing Hub** (through referral for social prescribing and an offer of an emotional health check).

Due to legal restrictions, the council is unable to extend the contract any further as this has been extended in the past and the council is required to go out to tender for this provision. Following a review of early support and prevention services funded by Adults and Communities it is thought that the provision does not strategically fit with the borough's approach to early support and therefore the council will not be going out to tender for this provision.

In line with the Council's Corporate Plan which outlines a key principle of fairness, the review aimed to ensure that we are using our resources as fairly as possible; targeting services at those who need them most, where there is an evidence base of effective impact and where reach can be maximised.

Knowledge and understanding of what works in terms of preventing, reducing and delaying the need for adult social care has changed and improved and our offer needs to reflect this as well as far reaching changes in national policy and the local health and social care economy. The council has reviewed the contracts held within the current prevention team in Adults and Communities to ensure maximum value for our investment. The outcome of the review has resulted in increased efficiency in contracts, a move away from historical funding relationships, improved pathways and a focus on services with the strongest evidence for reducing or managing need.

Transitional funding has been identified to develop Ageing Well provision to ensure that it meets the language and cultural requirements of the current service users of this provision.

The Council has identified specific transition funding to support people currently accessing this service to access other mental health provision (through referral for social prescribing and an offer of an emotional health check to the CCG's Barnet Wellbeing Hub and the Barnet Enablement Team [The Network]) in the borough. The funding will ensure that the Wellbeing Hub is able to support signposting to relevant services. The Chinese Mental Health Association are a lead organisation in the voluntary sector collaborative delivering the Hub activity.

The Chinese Mental Health Association are a lead organisation in the voluntary sector collaborative delivering the Hub activity.

The council funding represents 30% of the organisations turnover; the organisation will be offered support by Community Barnet to support sustainability.

14. 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
Supporting people currently using the service	Work with Ageing Well to make sure that their services are accessible to people from the Chinese community		PA / KH / ZG	March 2017
	Work with Barnet CCG and the Wellbeing Hub to make sure that the service is accessible to people from the Chinese community		PA / RB	March 2017
Communication with Service Users	Consultation process	To consult with as many service users as possible in time frame	PA	November 2016 to January 2017 - complete

Appendix D

**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: Adults Prevention Third Party Spend review Barnet Asian Women’s Association – Mental Health and Wellbeing Support for Asian Women	
Is it a new or revised function, policy, procedure or service? Revised function	
Department and Section: Commissioning Group, Adults and Health	
Date assessment completed: July 2016	
2. Names and roles of people completing this assessment:	
Lead officer	Paula Arnell, Joint Commissioning Manager Mental Health
Stakeholder groups	Council departments: Adults DU, Commissioning Group, Family Services, Housing Barnet CCG Councillors Residents
Representative from internal stakeholders	
Representative from external stakeholders	
Delivery Unit Equalities Network rep	
Performance Management rep	
HR rep (for employment related issues)	
3. Full description of function, policy, procedure or service:	
Please describe the aims and objectives of the function, policy, procedure or service	
<p>Barnet’s Corporate plan points to the need to build strong, healthy and successful communities and to fundamentally and transparently rethink future service delivery options by build greater community resilience. These changed relationships with Borough partners and residents means services will be delivered differently and the Community participation and volunteering strategies will enable residents to become more involved in local priorities and make the most of our community assets for the benefit of all our communities.</p> <p>This proposal, to reduce spending with culturally specific organisations, is linked to the enablement of service users to self-manage their mental health and wellbeing through partnership working with Barnet CCG and the Ageing well strategy. The Council is delivering an integrated, community based locality team model, which is planned to offer mental health and wellbeing services through the Barnet Wellbeing Hub and collaborative service organisations based in the community. This wellbeing hub activity is currently being piloted by CCG and the council is reviewing support to culturally specific organisations.</p> <p>Adults and Health is required to make £2,178,000 in savings over 3 years from third party</p>	

expenditure. To meet this requirement, externally commissioned third sector organisations providing adults prevention provision have been reviewed and recommendations made with regards to securing better value from these contracts.

Early Intervention and Prevention is fundamental to future sustainability of Adult Social Care Services. Our offer to adults needs to be proportionate, of high quality and good value for money. This review explored the social care investment in early intervention and prevention.

Information provided through contract monitoring and discussions with commissioners was used to assess effectiveness for example quantitative and qualitative information regarding use of the service (numbers, targeting), service quality and impact as well as employing evidence of best practice to assess our offer. The review looked at the known triggers for entry and escalation into the social care system and how the services contribute to these.

The review has also considered monitoring information provided by organisations to assess how effectively organisations are delivering. The review focuses on retaining services that we know to have the highest impact and to be most effective at managing demand.

The Barnet Asian Women's Association's Mental Health Project provides:

- Information related to health and wellbeing through a variety of channels including; promotional materials; on-line; telephone; as well as face-to-face through events, groups and targeted support
- Wellbeing Events throughout the year to promote health and wellbeing, raising awareness and tackling stigma. Wellbeing Events will primarily be for Asian Women from Barnet.
- Facilitated wellbeing activities (for example, yoga or art sessions) and support groups
- Targeted Advice and Support

Annual numbers and activity: (potential for 210 service users maximum)

- 10 Wellbeing activities p/a 10 attendees per activity
- 5 Support Groups p/a 15 attendees per group
- 35 people receiving targeted One To One p/a

Proposal is to end the contract 31 March 2017 and not to extend or reprocure.

<p>How are the equality strands affected? <i>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.</i></p>			
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 checked="" type="checkbox"/> / No <input type="checkbox"/>	<p>The Council proposes to no longer commission non-statutory mental health and wellbeing support for adult Asian women residents.</p> <p>As a result there may be a negative impact for Asian women residents with common mental health conditions aged 18 and above, in particular 18 – 65, if appropriate and alternative support is not available.</p>	<p>Service Users who require support when the contract ends will be signposted or transitioned to alternative support for people with mental health conditions available in the borough, or if appropriate out of borough. The Council will work with the provider to ensure that this process is managed through an agreed exit and transition plan.</p> <p>See 10 (in this section) for further detail.</p> <p>The Council has identified specific transition funding to support people currently accessing this service to move to other mental health provision (through referral for social prescribing to the CCG's Barnet Wellbeing Hub and the Barnet Enablement Team [The Network]) in the borough. The funding will ensure that the Wellbeing Hub is able to support signposting to relevant services (such as Sangam Asian Women's Association) to meet the needs of Asian women; ensuring that there are no cultural or language barriers.</p>
2. Disability	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>	<p>Information is not available to identify the number of people accessing support from Barnet Women's</p>	<p>Service Users who require support when the contract ends will be signposted or transitioned to alternative support for people with</p>

		<p>Association who have physical disabilities / sensory impairments / long term conditions and mental health conditions. Therefore it is not possible to determine the number of people who have additional needs alongside their self-identified or diagnosed mental health condition.</p> <p>There could be a negative impact for people with common mental health conditions and additional disabilities if appropriate and alternative and appropriate support is not available that meets their mental and physical health needs.</p>	<p>mental health conditions available in the borough, or if appropriate out of borough. The Council will work with the provider to ensure that this process is managed through an agreed exit and transition plan. The Council has identified specific transition funding to support people currently accessing this service to move to other mental health provision (through referral for social prescribing to the CCG’s Barnet Wellbeing Hub and the Barnet Enablement Team [The Network]) in the borough. The funding will ensure that the Wellbeing Hub is able to support signposting to relevant services (such as Sangam Asian Women’s Association) to meet the needs of Asian women; ensuring that there are no cultural or language barriers.</p>
<p>3. Gender reassignment</p>	<p>Yes <input type="checkbox"/> / No <input type="checkbox"/></p>	<p>Information not available</p>	<p>Though information is not currently available the provider will ensure that Service Users who require support when the contract ends will be signposted or transitioned to alternative support for people with mental health conditions available in the borough, or if appropriate out of borough. The Council will work with the provider to ensure that this process is managed through an agreed exit and transition plan.</p>
<p>4. Pregnancy and maternity</p>	<p>Yes <input type="checkbox"/> / No <input type="checkbox"/></p>	<p>Information not available</p>	<p>Though information is not currently available the provider will ensure that Service Users who require support when the contract ends will be signposted or</p>

			<p>transitioned to alternative support for people with mental health conditions available in the borough, or if appropriate out of borough. The Council will work with the provider to ensure that this process is managed through an agreed exit and transition plan.</p>
<p>5. Race / Ethnicity</p>	<p>Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/></p>	<p>When the Council no longer commissions specific mental health and wellbeing support for Asian women residents this could potentially have a negative impact with regard to race / ethnicity.</p> <p>Though Asian women residents who access support from Barnet Asian Women’s Association will be offered alternative support if needed, before the contract ends 31 March 2017, it is possible that service users may dislike change and may treat alternative providers with distrust and suspicion.</p> <p>Service users will have engaged with staff from their own community backgrounds with whom they can speak in their native language that may not be readily available from alternative providers. There may also be concerns that alternative services may not be compatible with, or have respect for, cultural and religious preferences or have the right skills/knowledge to meet the needs of people from specific community groups</p>	<p>The Council and BCCG will continue to work with all commissioned services, both prevention and early intervention and statutory services that provide mental health and wellbeing support, to ensure they meet the needs of residents from all community groups; proportionate to need.</p> <p>All services need to address the stigma within communities and barriers to accessing support to ensure they are representative of their local communities.</p> <p>Mental Health and Wellbeing support provided by statutory services are also changing to provide earlier support to residents to avoid escalation to crisis and understand the needs of Barnet’s diverse population.</p> <p>All commissioned services need to engage representatives from different community groups to ensure their services are able to respond to Barnet’s diverse population, including Asian women residents.</p> <p>The Council has identified specific transition funding to support people currently</p>

		<p>or understand the cultural stigma associated with mental health.</p> <p>There is likely to be a negative impact if alternative providers lack staff that are representative of Service User's communities or have little understanding of their faith and culture.</p> <p>There is a risk that Service Users will not access alternative support and as a result their needs will escalate and they will require more intensive and expensive support from statutory services.</p>	<p>accessing this service to access other mental health provision (through referral for social prescribing to the CCG's Barnet Wellbeing Hub and the Barnet Enablement Team [The Network]) in the borough. The funding will ensure that the Wellbeing Hub is able to support signposting to relevant services (such as Sangam Asian Women's Association) to meet the needs of Asian women; ensuring that there are no cultural or language barriers. The Council will work with BAWA to support referral on to other organisations and ensure Asian Women are informed about available support.</p>
<p>6. Religion or belief</p>	<p>Yes <input type="checkbox"/> / No <input type="checkbox"/></p>	<p>Information not available</p>	<p>Though information is not currently available the provider will ensure that Service Users who require support when the contract ends will be signposted or transitioned to alternative support for people with mental health conditions available in the borough, or if appropriate out of borough. The Council will work with the provider to ensure that this process is managed through an agreed exit and transition plan.</p> <p>The Council has identified specific transition funding to support people currently accessing this service to access other mental health provision (through referral for social prescribing to the CCG's Barnet Wellbeing Hub and the Barnet Enablement Team [The Network]) in the borough.</p>

			The funding will ensure that the Wellbeing Hub is able to support signposting to relevant services (such as Sangam Asian Women's Association) to meet the needs of Asian women; ensuring that there are no cultural or language barriers.
7. Gender / sex	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>	The majority of the people supported by the organisation are women therefore there may be a negative impact for Asian women residents with common mental health conditions.	<p>The provider will ensure that Service Users who require support when the contract ends will be signposted or transitioned to alternative support for people with mental health conditions available in the borough, or if appropriate out of borough. The Council will work with the provider to ensure that this process is managed through an agreed exit and transition plan.</p> <p>The Council has identified specific transition funding to support people currently accessing this service to access other mental health provision (through referral for social prescribing to the CCG's Barnet Wellbeing Hub and the Barnet Enablement Team [The Network]) in the borough. The funding will ensure that the Wellbeing Hub is able to support signposting to relevant services (such as Sangam Asian Women's Association) to meet the needs of Asian women; ensuring that there are no cultural or language barriers.</p>
8. Sexual orientation	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Information not available	Though information is not currently available the provider will ensure that Service Users who require

			support when the contract ends will be signposted or transitioned to alternative support for people with mental health conditions available in the borough, or if appropriate out of borough. The Council will work with the provider to ensure that this process is managed through an agreed exit and transition plan.
9. Marital Status	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Information not available	Though information is not currently available the provider will ensure that Service Users who require support when the contract ends will be signposted or transitioned to alternative support for people with mental health conditions available in the borough, or if appropriate out of borough. The Council will work with the provider to ensure that this process is managed through an agreed exit and transition plan.
10. Other key groups? Carers People with mental health conditions Some families and lone parents People with a low income Unemployed people Young people not in employment education or training	Yes <input type="checkbox"/> / No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/> Yes <input type="checkbox"/> / No <input type="checkbox"/>	It is anticipated that when the Council no longer funds specific mental health and wellbeing support for Asian women residents there will be a negative impact with regards to Asian women with mental health conditions. There is a risk that Service Users will not access alternative support and as a result their needs will escalate and they will require more intensive and expensive support from statutory services.	Though the Council will no longer directly commission this type of provision, there will still be wide range of commissioned mental health and wellbeing services available in the borough. These services are targeted at specific issues, though all can contribute to enabling people with mental health conditions to become more socially connected and therefore have a positive impact on their mental health, for example through gaining paid employment or addressing accommodation issues. Alternative support

			<p>commissioned and provided by the Council and Barnet CCG include:</p> <ul style="list-style-type: none"> - Employment support - Housing Related Support, that includes an element of Community Mental Health provision - Generic information and advice, including welfare advice and specialist mental health advocacy - The Mental Health Enablement offer provided by Adults and Communities - Talking therapies and community wellbeing activities provided by the Improving Access to Psychological Therapies service - Drugs and Alcohol Services - Domestic Violence Support - Carers Support Services. <p>Services users will also be signposted to alternative services in Barnet and in neighbouring boroughs that are specifically for the Asian community and Asian women, for example the Multilingual Wellbeing Service, the Sangham Centre and Asian Women’s Resource Centre.</p> <p>The Council will work with the provider to ensure that this process is managed through an agreed exit and transition plan.</p>
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<p>4. What will be the impact of delivery of any proposals on satisfaction ratings amongst different groups of residents?</p>
<p>As a result of the Council no longer commissioning specific mental health and wellbeing support for Asian women residents there is the potential for a negative impact on the satisfaction ratings of different groups of residents. Specifically Asian residents, and more broadly from residents with mental health conditions and family carers of people with mental health conditions, who are familiar with the service and changes across the sector.</p> <p>Though when the contract with the Council ends, the organisation will continue to operate in Barnet through its subcontracts with Solace Women’s Aid for the Domestic Violence project and with AgeUK Barnet for Neighbourhood Services for Older People.</p> <p>Community Barnet, commissioned by Barnet Council, has provided support to BAWA to develop its operating model to become more sustainable and is supporting the development of the Barnet Wellbeing Hub.</p>
<p>5. How does the proposal enhance Barnet’s reputation as a good place to work and live?</p>
<p>The proposal to no longer commission specific mental health and wellbeing support for Asian residents is unlikely to enhance Barnet’s reputation as a good place to work or live.</p>
<p>6. How will members of Barnet’s diverse communities feel more confident about the council and the manner in which it conducts its business?</p>
<p>The proposal to no longer commission specific mental health and wellbeing support for Asian women residents has the potential to be received negatively by residents, particularly those with mental health conditions and family carers of people with mental health conditions, who are familiar with the service and changes across the sector.</p> <p>This may reinforce the negative view held by some residents, particularly those with mental health conditions and family carers of people with mental health conditions, of how the council treats people with mental health conditions, family carers and the voluntary and community sector.</p>
<p>7. 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?</p>

The Council will work with the provider to ensure an exit and transition plan is in place that takes account of any ongoing support needs for existing service users. The process will be closely managed by the council from the point of serving notice to the provider and the date the contract ends (six months).

Service users will also be provided with information about where to seek information, advice or support in future if needed.

8. How will the new proposals enable the council to promote good relations between different communities?

Though this service will no longer be commissioned after the contract ends it is essential the Council and partners communicate the developments happening across mental health and wellbeing services in the borough and how these provide an alternative to all residents to enable them to self-manage their mental health and wellbeing.

9. 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?

Consultation ran from November 2016 – January 2017 via an online questionnaire (including an easy read version) and the opportunity to engage via focus groups. Service users, carers and organisations affected by the proposal were consulted during this period.

Overall Assessment

10. Overall impact		
Positive Impact <input type="checkbox"/>	Negative Impact or Impact Not Known ¹ <input checked="" type="checkbox"/>	No Impact <input type="checkbox"/>

11. Scale of Impact		
Positive impact: Minimal <input type="checkbox"/> Significant <input type="checkbox"/>	Negative Impact or Impact Not Known Minimal <input checked="" type="checkbox"/> Significant <input type="checkbox"/>	

12. Outcome			
No change to decision <input checked="" type="checkbox"/>	Adjustment needed to decision <input type="checkbox"/>	Continue with decision <i>(despite adverse impact / missed opportunity)</i> <input type="checkbox"/>	If significant negative impact - Stop / rethink <input type="checkbox"/>

¹ '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.

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

The proposed move to community wellbeing hubs and locality teams means that service users will no longer receive generic support services from a culturally specific organisation. Barnet will continue to ensure that the diversity of needs of all service users are fully taken into account in service provision. Barnet's equality policy requires that all service users and residents are treated fairly with understanding and respect and that recruitment aims to reflect the broad diversity of service users and staff. Staff in locality teams will be aware of and responsive to cultural differences; their ability to know about, value and respond to the rich cultural diversity of Barnet Asian residents in relation to language, culture and religion, will be key to the success of wellbeing hubs and locality teams.

Asian residents who access support from the BAWA Mental Health Association will be offered alternative support if needed, before the contract ends 31 March 2017. The Council has identified specific transition funding to support people currently accessing this service to access other mental health provision (through referral for social prescribing and an offer of an emotional health check to the CCG's Barnet Wellbeing Hub and the Barnet Enablement Team [The Network]) in the borough. The funding will ensure that the Wellbeing Hub is able to support signposting to relevant services (such as Sangam Asian Women's Association) to meet the needs of Asian women; ensuring that there are no cultural or language barriers.

Services users will also be signposted to alternative services in Barnet and in neighbouring boroughs that are specifically for the Asian community and Asian women, for example the Multilingual Wellbeing Service, the Sangam Centre and Asian Women's Resource Centre (in borough).

If this proposal is agreed, when the contract with the Council ends the organisation will continue to operate in Barnet through its subcontracts with Solice for the Domestic Violence project and with AgeUK Barnet for Neighbourhood Services for Older People.

14. 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
Supporting people currently using the service	Work with Ageing Well to make sure that their services are accessible to people from the diversity of Asian communities in Barnet.		PA / KH / ZG	March 2017
	Work with Barnet CCG and the Wellbeing Hub to make sure that the hub is accessible to people from the diverse Asian communities in Barnet.		PA / RB	March 2017
	Signpost service users to alternative services in Barnet and in neighbouring boroughs that are specifically for the Asian community and Asian women, for example the Multilingual Wellbeing Service, the Sangam Centre and Asian Women's Resource Centre.		PA	March 2017
Communication with Service Users	Consultation process	To consult with as many service users as possible in time frame	PA	November 2016 to January 2017 - complete

Appendix E

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: Cessation of Council support to Community Focus through Corporate Grants	
Is it a new or revised function, policy, procedure or service? Revised function	
Department and Section: Adults and Health	
Date assessment completed: August 2016	
2. Names and roles of people completing this assessment:	
Lead officer	Zoë Garbett, Commissioning Lead Health and Wellbeing
Stakeholder groups	Council departments: Adults DU, Commissioning Group, Family Services, Housing Barnet CCG Councillors Residents
Representative from internal stakeholders	Commissioning Leads Grants Manager
Representative from external stakeholders	
Delivery Unit Equalities Network rep	
Performance Management rep	Adults Delivery Unit
HR rep (for employment related issues)	N/A
3. Full description of function, policy, procedure or service:	
Please describe the aims and objectives of the function, policy, procedure or service	
<p>The Service is funded through corporate grant. The corporate grant is for funding for 375 older service users and those with learning disabilities (131 at Friary Park and 244 throughout reach schemes) to receive art classes by providing a subsidy related for each individual service user at Friary Park and the grant allows CF to offer a reduced rate for the service they provide to care homes. Community Focus is not currently a commissioned provider of eligible care services for adults social care.</p>	

Context

Adults and Health is required to make £2,178,000 in savings over 3 years from third party expenditure. To meet this requirement, externally commissioned third sector organisations providing adults prevention provision have been reviewed and recommendations made with regards to securing savings from these contracts.

Early Intervention and Prevention is fundamental to future sustainability of Adult Social Care Services. Our offer to adults needs to be proportionate, of high quality and good value for money. This overall review explored the social care investment in early intervention and prevention.

Information provided through contract monitoring and discussions with commissioners was used to assess effectiveness, for example quantitative and qualitative information, regarding use of the service (numbers, targeting), service quality and impact as well as employing evidence of best practice to assess our offer. The review looked at the known triggers for entry and escalation into the social care system and how the services on offer and how they contribute to these

The review has also considered monitoring information provided by organisations to assess how effectively organisations are delivering. The review focusses on retaining services that we have evidence/know to have the highest impact and to be most effective at managing demand.

Barnet Council's grant agreement, which started in 2011, requires CF to provide a personalised service to disabled people and people with additional needs. Courses cater for small numbers of people (to ensure that service users are supported) – in most cases a maximum of fifteen at a time – and that CF maintains a staff-client ratio of at least one tutor and one to two volunteers to ten to twelve service users in each activity, depending on the needs of the client group.

A three-year agreement, extending to 31 March 2014, was negotiated with CF based on subsidising the fees payable for attendance on its courses. The agreement has since been extended by a further two years to the end of 2015/16. The agreement has recently been extended, at Community Leadership Committee (March 2016), for a further year ending 31 March 2017. Community Focus agreed to the agreement terms and therefore aware of the grant being awarded for one year. This was discussed again in August 2016.

Funding

The table below shows how the subsidy will reduce until March 2017. Barnet Council currently funds this subsidy to Community Focus service users through its central grants team and not through a service area (such as adults or childrens). The allocated grant and number of clients in respect of whom CF has claimed the subsidy for the duration of the agreement are as follows (includes the agreement for 2016/17):

2011/12 Grant – £83,300	2012/13 Grant - £75,300	2013/14 Grant - £67,300	2014/15 Grant - £59,300	2015/16 Grant - £51,300	2016/17 Grant - £47,300
660 (including 456 through outreach programme)	597 (including 397 through outreach programme)	533 (including 347 through outreach programme)	470 (including 307 through outreach program me)	406 (including 264 through outreach program me)	375 (including 244 through outreach program me)

EIAs were completed in 2011 and 2014 with regards to the reduction of the grant, the EIAs detailed that the following group would be impacted:

- Over 55's
- People with Disabilities including sensory and perception impairment
- Learning difficulties
- People with mental health conditions
- People on low incomes
- Carers by association
- Impact will be negative because the cost of the course will rise in direct proportion to the reduced subsidy

The outreach courses are delivered within care homes.

Barnet Council's funding to CF via this agreement for the financial year 2015/16 is now less than 20% of the total annual turnover of the organisation, therefore it is considered that there is a low risk that the funding reduction would destabilise the organisation. CF reported a turnover of just over £300,000 in March 2015 (Charity Commission). However, as a CF is a council tenant the council have concerns about the financial viability of the organisation.

It is worth noting that Children's have also had a contractual relationship with CF for six years. CF are part of the 4 year framework (April 2015 – March 2019) to provide short breaks and respite projects during school holidays for children and young people (10 – 19) with disabilities. The framework includes nine providers and there is a clear referral process to ensure that children and young people with the highest needs are accessing the service. CF provides 6 – 7 project a year through the framework with 14 children and young people attending each project. The annual value of the contract to CF is up to £30,000.

Proposal

This EIA is considering the proposal not to issue any further grants to fund the service for Adults through Corporate grants and the impact this may have on service users. The agreement has recently been extended, at Community Leadership Committee, for a further year ending 31 March 2017. Community Focus agreed to the agreement terms and therefore are aware of the grant being awarded for a further year to end in March 2017.

In-house Services

Currently around 80-85 individuals attend in-house courses provided by CF each year and repeat courses.

Withdrawal of subsidy related Barnet grant could affect the price of workshop for the target audience. Current subsidy is £126 per person per term roughly 50% of cost of course. It may be that CF are able to secure alternative sources of grant funding which will mean they do not pass on the full subsidy loss to the clients.

Outreach (care homes)

CF charge a 'subsidised' rate to these homes (using the LBB grant to reduce the cost), CF has supported Care Homes to apply for funding to pay for the courses. Attendance is dependent on client choice and preference. However, it is noted that generally all clients present at the home 'attend' when the activities take place in the care homes. Care homes would continue to purchase art courses either from Community Focus at a higher price or from other organisations or independent artists.

Organisation Business model

CF is a social enterprise with diverse funding streams –it is not solely dependent on Barnet grant.

<p>How are the equality strands affected? <i>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.</i></p>			
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 checked="" type="checkbox"/> / No <input type="checkbox"/>	<p>In-house</p> <p>Of the 76 people eligible for council subsidies for the in-house courses, 15.7% are over 65 which is only slightly higher than the proportion of people over 65 in Barnet population (14%). Therefore the proposal would have no disproportionate impact on any one age group.</p> <p>Outreach (care homes)</p> <p>All of the 167 people eligible for council subsidies for outreach were over 55. This demonstrates that any reduction in service is most likely to impact more significantly on this age group.</p>	<p>In-house</p> <p>CF will receive support from Community Barnet to review their current charging model and support the organisation to apply for alternative funding.</p> <p>LBB are currently working with CF to develop an appropriate payment plan to reduce the rent arrears.</p> <p>If the service closes, alternative provision has been identified and is listed I the table below (table 1)</p> <p>Outreach</p> <p>It is anticipated that care homes would continue to purchase art courses either from Community Focus at a higher price or from other organisations or independent artists.</p>
2. Disability	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>	<p>All clients of CF are reported as having a disability.</p> <p>In-house</p> <p>76 residents accessing subsidised in-house courses – majority of people using the service had a learning disability; a minority of which were also recorded as having mental health issues or behavioural difficulties and four of which are recorded as having a severe</p>	<p>In-house</p> <p>CF will receive support from CommUNITY Barnet to review their current charging model and support the organisation to apply for alternative funding.</p> <p>LBB are currently working with CF to develop an appropriate payment plan to reduce the rent arrears.</p> <p>If the service closes, alternative provision has been identified and is listed I the table below (table 1)</p>

		<p>learning disability.</p> <p>Outreach</p> <p>167 residents accessing subsidised courses in outreach venues – over two thirds of the people accessing these courses were diagnosed with dementia; this is due to the majority of the outreach venues being residential care homes.</p> <p>This demonstrates that any reduction in service is most likely to impact more on people with disabilities and in particular those with Dementia and learning disabilities.</p>	<p>Outreach</p> <p>It is anticipated that care homes would continue to purchase art courses either from Community Focus at a higher price or from other organisations or independent artists.</p> <p>Table 1 outlines other sources of similar services for these groups.</p>
3. Gender reassignment	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Information not provided	
4. Pregnancy and maternity	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Information not provided	
5. Race / Ethnicity	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>	<p>In-house</p> <p>Of the 76 people eligible for council subsidies for the in-house courses, 77% identify as white. In Barnet's population 61.3% of residents identify as white and therefore demonstrates that any reduction in service is most likely to impact people who identify as white.</p> <p>Race / ethnicity is not recorded for outreach clients.</p>	<p>In-house</p> <p>CF will receive support from CommUNITY Barnet to review their current charging model and support the organisation to apply for alternative funding.</p> <p>LBB are currently working with CF to develop an appropriate payment plan to reduce the rent arrears.</p> <p>If the service closes, alternative provision has been identified and is listed in the table below (table 1)</p> <p>Outreach</p> <p>It is anticipated that care homes are likely to make continuing provision for art courses either from Community Focus at a higher price or from other organisations or</p>

			independent artists.
6. Religion or belief	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Information not provided	
7. Gender / sex	<p>In house Yes <input type="checkbox"/> / No <input checked="" type="checkbox"/></p> <p>Outreach (care homes) Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/></p>	<p>In-house Of the 76 people eligible for council subsidies for the in-house courses, 53% identify as female and 47% identify as male which is broadly similar to the gender profile of the borough with 51.1% of residents identifying as female and 48.9% male.</p> <p>Outreach Of the 167 residents accessing the outreach courses, 68% identify as female and 30% identify as male (for 2% of the clients gender information was missing).</p> <p>As the outreach sessions are held in care homes and all clients are over 55 it is more relevant to compare these figures to the boroughs over 65 population profile which reflects the longer lifespans of women with 56.5% female and 43.5% male. However, the gender profile of the clients accessing the courses still shows an over representation of women and demonstrates that any reduction in service is most likely to impact more on females (although a reduction in service is not anticipated for the outreach sessions).</p>	<p>In-house CF will receive support from CommUNITY Barnet to review their current charging model including advice and support to CF to apply for alternative funding And grow the service user base.</p> <p>LBB are currently working with CF to develop an appropriate payment plan to reduce the rent arrears.</p> <p>If the service closes, alternative provision has been identified and is listed in the table below (table 1)</p> <p>Outreach It is anticipated that care homes would continue to purchase art courses either from Community Focus at a higher price or from other organisations or independent artists.</p>
8. Sexual orientation	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Information not provided	
9. Marital Status	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Information not provided	

<p>10. Other key groups?</p>	<p>Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/></p>		
<p>Carers</p>	<p>Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/></p>		
<p>People with mental health issues</p>	<p>Yes <input type="checkbox"/> / No <input type="checkbox"/></p>		
<p>Some families and lone parents</p>	<p>Yes <input type="checkbox"/> / No <input type="checkbox"/></p>	<p>People with a low income</p>	<p>Personal budgets have been designed to provide service users with choice and independence. People receiving a personal budget may choose to purchase art classes from CF if it is in accordance with the objectives in the care plan.</p>
<p>People with a low income</p>	<p>Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/></p>	<p>Withdrawal of subsidy related Barnet grant could affect the price of workshop for the target audience. Current subsidy is £126 per person per term roughly 50% of cost of course</p>	
<p>Unemployed people</p>	<p>Yes <input type="checkbox"/> / No <input type="checkbox"/></p>		
<p>Young people not in employment education or training</p>	<p>Yes <input type="checkbox"/> / No <input type="checkbox"/></p>		<p>CF will receive support from CommUNITY Barnet to review their current charging model and support the organisation to apply for alternative funding.</p>
			<p>It may be that CF are able to secure alternative sources of grant funding which will mean they do not pass on the full subsidy loss to the clients.</p>

Table 1 - Alternative provision:

Client group	If these services are no longer available
Adults	
<p>Adults with disabilities and older people who are not eligible for social care support.</p>	<p>Ageing Well – social inclusion programmes across the borough including Silver Service; discounted meals at local restaurants for older people</p>
	<p>Altogether Better locality projects in Burnt Oak, East Finchley and High Barnet activities include Wellbeing Cafes, table tennis, Men in Sheds and Computer and Cuppa sessions</p>

	<p>Barnet and Southgate College offer a number of learning opportunities (note: only some of the courses are provided free of charge)</p> <p>Maxability - art courses for people with disabilities (small charge)</p> <p>CAB information and advice service</p>
Adults eligible for social care support	<p>If any current user of CF is a client of Council adult social care (ASC) services (i.e. has eligible needs) and the change to CF funding will have an impact on them, a member of the ASC team will work with those users to identify alternatives.</p> <p>It is understood that circa 5 Your Choice Barnet (YCB) users attend some CF activities, although not as part of their statutory support plan. For these users, their YCB key worker will work with them to identify alternatives should they wish to continue to do these types of activities</p>
Adults with learning disabilities	<p>Barnet Mencap – for social inclusion and employment support for people with learning disabilities</p> <p>Barnet and Southgate College offer a number of learning opportunities including at the specialist Learning Disability (note: only some of the courses are provided free of charge)</p>
Adults with mental health problems	<p>Twining and Future Path – employment support for people with mental health problems</p> <p>Barnet Mind – for social inclusion activities (group and one to one support)</p> <p>Information and advice service via community access workers at the Network</p>
Adults with dementia	<p>Alzheimer’s Society - day opportunities, dementia advisors (specialist advice and support), dementia cafes, carer support</p>
Adults accessing services within residential care	<p>The residential care homes currently receiving courses from CF will be informed of CFs service no longer being available and supported to link with any of the services above.</p>

4. What will be the impact of delivery of any proposals on satisfaction ratings amongst different groups of residents?

It will be very important to build community and service user understanding about the strategic reasons for change. Barnet will need to communicate more broadly and persuasively about the changed approach to vulnerable service users by providing a personal budget and allowing more choice and independence about how that is spent. Service users will therefore have the choice to continue to support CF arty activities. However, if Community Focus are unable to maintain a presence at Friary Park and the in house service ceases, this could impact negatively on the satisfaction of residents, particularly those with accessing the in-house provision.

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

The proposal is unlikely to enhance Barnet’s reputation as a good place to work or live unless Barnet is able to communicate more broadly and persuasively about the changed approach to vulnerable service users by providing a personal budget and allowing more choice and independence about how that is spent.

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

It will be very important to build community understanding about strategic change in how Barnet supports vulnerable adults by providing a personal budget and allowing people more choice and independence about how that is spent.

7. 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?

CF have been aware of the grant agreement terms with the initial grant being for 3 years and then subsequent one year extensions (for a total of 6 years). Therefore, when the grant for 2016/17 was agreed in March 2016, CF were aware of the grant agreement only being in place for 2016/17. This was reiterated in a meeting in August 2016.

The Council will work with CF to ensure an exit and transition plan is in place that takes account of any ongoing support needs for existing service users who decide not to continue with the service. The process will be closely managed by the council from the point of serving notice to the provider and the date the contract ends.

The changes will be fully explained to service users through their contact with Adult Social Care and information will be provided about sources of information, advice to support their future art activities, including, if still available CF courses (albeit at an increased rate).

Data from the JSNA (2015 – 2020) was used for a comparison against the service data to determine any disproportionate impact.

8. How will the new proposals enable the council to promote good relations between different communities?

No impact anticipated

From the recent residents survey: 85% of residents agree that people from different backgrounds get on well together

9. 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?

The standard grant agreement, which CF has signed up to for 2016/17, state –

Any grant is given at the discretion of the Council and relates only to that financial year for which it is approved. Such approval implies no commitment on the part of the Council to give financial or other assistance in any succeeding year. The Council will not fund the second year of any project.

The agreement for CF for 2016/17 refers solely to 2016/17.

On the 25 August 2016, CF met with the Leader of the Council and the Commissioning Adults and Health to discuss the terms and conditions of the contract as well as current service performance. The Director communicated that the grant funding and agreement only ran for 2016/17 and ends in March 2017. Service performance was also discussed as, from service data, it is clear that the majority of in house clients continual access the service with very few new clients.

CF has adapted to a reduction in grant since 2011/12 as follows:

2011/12	2012/13	2013/14	2014/15	2015/16	2016/17
Grant – £83,300	Grant - £75,300	Grant - £67,300	Grant - £59,300	Grant - £51,300	Grant - £47,300
660 (including 456 through outreach programme)	597 (including 397 through outreach programme)	533 (including 347 through outreach programme)	470 (including 307 through outreach programme)	406 (including 264 through outreach programme)	375 (including 244 through outreach programme)

The point below were identified as actions in the EIA from 2014 which have been taken forward throughout work in the Council:

Service Users

If eligible increased use of personalised budget by service users provides choice and independence for the service user.

There may be alternative Adults and Communities provision
There may be alternative Your Choice Barnet provision
CF will continue to provide services and work closely with Delivery Units and if the proposal is endorsed LBB will work closely with CF to manage any transition

When plans are confirmed the council will communicate with service users what this will mean to them. The changes will be fully explained to CF in house service users who are supported by Barnet, through their contact with Adult Social Care. Information will be provided to them about sources of information, advice to support their future art activities, including, if still available CF courses (albeit at an increased rate).

Service users will still have the opportunity to undertake art activities at CF if it maintains a presence at Friary Park at an increased rate and elsewhere in the borough or so we do not consider it necessary to undertake public consultation on these changes.

Care Homes will also be notified of the Council's decision and may choose to continue to fund the provision.

The organisation will be offered specific support around sustainability and partnerships from Community Barnet. Community Barnet have been commissioned by the council to provide this support.

Overall Assessment

10. Overall impact		
Positive Impact <input type="checkbox"/>	Negative Impact or Impact Not Known ¹ <input checked="" type="checkbox"/>	No Impact <input type="checkbox"/>

11. Scale of Impact		
Positive impact: Minimal <input type="checkbox"/> Significant <input type="checkbox"/>	Negative Impact or Impact Not Known Minimal <input checked="" type="checkbox"/> Significant <input type="checkbox"/>	

12. Outcome			
No change to decision <input type="checkbox"/>	Adjustment needed to decision <input type="checkbox"/>	Continue with decision <i>(despite adverse impact / missed opportunity)</i> <input checked="" type="checkbox"/>	If significant negative impact - Stop / rethink <input type="checkbox"/>

¹ '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.

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

It is not clear whether CF will continue to offer art classes to this groups of service users and if so whether costs to those service users would increase.

There is alternative specialist provision in the borough as outlined in Table One.

Individuals who are eligible for personal independent payments will have the choice and independence to fund similar activities (art classes) either through specialist provision or mainstreamed.

Due to legal restrictions, the council is unable to extend the contract any further as this has been extended in the past and the council is required to go out to tender for this provision.

Following a review of early support and prevention services funded by Adults and Communities it is thought that the provision does not strategically fit with the borough's approach to early support and therefore the council will not be going out to tender for this provision.

In line with the Council's Corporate Plan which outlines a key principle of fairness, the review aimed to ensure that we are using our resources as fairly as possible; targeting services at those who need them most, where there is an evidence base of effective impact and where reach can be maximised.

To improve choice and control for residents eligible for social care services, personal budgets can be used to purchase a variety of activities that fit the needs and aspiration of the individual. Arts provision can be purchased through personal budgets.

The Council's grant to Community Focus currently represents 15% of the organisations turnover.

Community Focus are currently a tenant in a council building; the Council is currently working with Community Focus to ensure that appropriate rent payments are being made. Decisions regarding occupancy of Council properties is currently being made in line with the borough Community Benefit Assessment Tool.

Data provided by Community Focus was used in the development with EIA. Data from term 3 2015/16 covering 167 outreach clients (in care homes) and 76 in house clients eligible for subsidies. It is understood that there is a low turnover of clients accessing the in house services.

Community Focus were informed of the one year extension to their grant when the grant was extended and are aware that the grant ends in March 2017. Community Focus will be able to access support by Community Barnet.

Care homes may choose to continue to purchase courses from Community Focus.

14. 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
Communication with Community Focus	<ul style="list-style-type: none"> • Meeting with Commissioning Director Adults and Health and the Leader to inform (August 2016) • Ongoing communication and dialogue with the Council's Grants Manager • Ongoing dialogue with estates regarding premises and rent • Support from Community Barnet 	<p>To ensure that Community Focus are aware of the council's position regarding the contract and the strategic context in which decisions have been made.</p> <p>Community Focus will be provided with enough time to prepare for the end of the contract and seek support from Community Barnet.</p>	KA	<p>25 August 2016 - complete</p> <p>Ongoing</p> <p>Ongoing</p> <p>November 2016 - March 2017</p>
Communication with service users	<ul style="list-style-type: none"> • Consultation • Support to access alternative support 	Community Focus will be provided with enough time to prepare for the end of the contract.	ZG	November 2016 – January 2017 – complete
Communication with Care Homes	<ul style="list-style-type: none"> • To inform Care homes of the end of the contract 	Care homes will be given enough notice to make a decision regarding resourcing this provision.	Community Focus	October 2016

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Appendix F

**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: Outreach Barnet Service (provided by Genesis Housing Association)	
Is it a new or revised function, policy, procedure or service? Revised function	
Department and Section: Commissioning Group, Adults and Communities and CCG	
Date assessment completed: January 2017	
2. Names and roles of people completing this assessment:	
Lead officer	Sam Raffell, Care Quality Service Manager
Stakeholder groups	Council departments: Adults DU, Commissioning Group, Family Services, Housing Barnet CCG Councillors Residents
Representative from internal stakeholders	Commissioning Leads
Representative from external stakeholders	
Delivery Unit Equalities Network rep	
Performance Management rep	Delivery Unit
HR rep (for employment related issues)	N/A
3. Full description of function, policy, procedure or service:	
Context	
<p>Adults and Health is required to make £2,178,000 in savings over 3 years from third party expenditure. To meet this requirement, externally commissioned third sector organisations providing adults prevention provision have been reviewed and recommendations made with regards to securing savings from these contracts.</p> <p>Early Intervention and Prevention is fundamental to future sustainability of Adult Social Care Services. Our offer to adults needs to be proportionate, of high quality and good value for money. This review explored the social care investment in early intervention and prevention.</p> <p>Information provided through contract monitoring and discussions with commissioners was used to assess effectiveness for example quantitative and qualitative information regarding use of the service (numbers, targeting), service quality and impact as well as employing evidence of best practice to assess our offer. The review looked at the known triggers for entry and escalation into the social care system and how the services contribute to these.</p> <p>The review has also considered monitoring information provided by organisations to assess how effectively organisations are delivering. The review focuses on retaining services that we know to have the highest impact and to be most effective at managing demand.</p>	

Outreach Barnet Service 2017/18

For 2017/18, the mental health component, previously delivered by Genesis, has been included Accommodation and Support Tender. Equalities impact was specifically considered in the design and implementation of the new Accommodation and Support Approved Provider List commissioning in 2016 to start in April 2017, as this element of the service has been commissioned as part of the wider accommodation and support services. The approved list of providers is currently in award stage of the procurement process. The Support at Home lot is designed to offer flexible and short term housing related support for people with mental health conditions. The support is to help people live independently in their own accommodation (private renters and home owners) in the community.

This EIA only considers the generic floating support service.

Generic Floating Support

The Generic Floating Support component of this contract, with current budget of £503,661, will be extended for a further 12 months from 1 July 2017, of which is within the scope of the current contract term for potential extension of up to two years. This is to ensure time to do a thorough need analysis and service review of this component to meet future needs of borough. The provider is fully aware of this change and we are working with legal to draw up the deed of extension and variation. Over the extension period we will:

- Determine the reach of the current service and that of similar services in the borough. Identify what the unmet need is, if any, in the borough and the client groups most affected.
- Work with the current provider to continue to develop outcome based performance framework with generic clients and do market development/testing work for consideration of re commissioning this service for 2018/19.

The current contract value 2016/17 for Generic budget is £503,661; LBB propose a further reduction of circa 20% will be £403k for 2017/18 contract starting from 1 July 2017.

Outreach Barnet Service – performance 2016

The contract is for the provision of housing related floating support services in the form of generic floating support service. Outreach Barnet's key focus is to support people, in an innovative and creative way, who are finding it hard to maintain their accommodation or facing eviction.

The Generic contract supports 702 Barnet residents per annum, with a target of short term support being completed within 4 months.

Data from 1 July – 30 September 2016 (Q1 for Outreach Barnet contract) for the generic contract there were;

- 271 referrals, vast majority (124) were self referrals, with 59 referrals from social care and 32 from health services.
- 208 service users being supported (at the end of the quarter), with the total number supported in Q1 of 431
- Referrals by type of accommodation; 73 - local authority or housing association, 126 – private rented sector
- 185 residents were supported to remain within their own accommodation and 38 customers to move into appropriate accommodation.

Client group: Any adult within Barnet who requires support to maintain their tenancy or to stay within their accommodation. Outreach Barnet have a referral threshold, which in summary is 'those are imminent risk of homelessness'.

The figures used in this EIA are from the 1st Quarter of Outreach Barnet contract (1 July – 30 September 2016).

This acts as a preliminary EIA, which will be kept up-to-date as the proposals for changes to the service are developed.

How are the equality strands affected?			
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 checked="" type="checkbox"/> / No <input type="checkbox"/>	<p>Generic</p> <p>The vast majority of the 223 service users who were discharged from the service in Q1 were under 55 (153), with the 112 (50%) between 35 and 54.</p> <p>This demonstrates that any reduction in service is most likely to impact more significantly on this age group (and potentially, as this is the age group who are most likely to have children, also on under 18's).</p> <p>Only a small amount of service users are older people.</p> <p>Mental health</p> <p>There were 14 service users who received the service in quarter 1, all service users were under 65 and there was an even spread of ages, so it is unlikely there will be any adverse impact on a particular age group.</p>	<p>We will review the proposed changes as they develop and the service will focus its offer on those with the most need, regardless of age. This will also be mitigated through working with the provider to ensure the service has the capacity meet the needs of all service users. We will work with the provider, building on their experience of working with this cohort to maintain the numbers we currently see through a higher level of productivity and less missed appointments minimising the number of repeat failed tenancies and working closely with the Drug and Alcohol Service to address underlying issues such as drug dependency that lead to tenancy breakdown.</p> <p>Other services, such as Age UK Barnet's Neighbourhood Services, will be reviewed to ensure there is not a gap in support for older people.</p> <p>The continuing generic offer</p>

			will also focus its offer on those with the most need, regardless of age.
2. Disability	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>	<p>Generic</p> <p>137 of 223 service users in this quarter registered as having a disability. The most prominent disability was mobility issues (76) followed by mental health issues (37).</p> <p>There is a risk that a reduction in the value of the generic contract could disproportionately affect people with disabilities.</p>	<p>We will review the proposed changes as they develop and the service will focus its offer on those with the most need, ensuring we support people with disabilities with accommodation issues. The continuing generic contract will also focus its offer on those with the most need, ensuring we support people with disabilities, with accommodation issues.</p> <p>It is likely that the generic service will be able to continue to meet demand but in the unlikely case that people are unable to receive support via the generic contract (as appropriate):</p> <ul style="list-style-type: none"> • Barnet Homes • Citizen’s Advice Bureau • Carer’s Support Service.
3. Gender reassignment	Yes <input type="checkbox"/> / No <input checked="" type="checkbox"/>	Information not collected	
4. Pregnancy and maternity	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>	<p>Information not currently collected.</p> <p>Number of women who are pregnant or in maternity is likely to be low, but an important cohort to support due the risk factors at this life stage</p>	In the commissioning of the new accommodation and Support services form 2017/18, the impact on pregnancy and maternity will be taken into account, especially in regard to reducing family breakdown.
5. Race / Ethnicity	Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>	<p>Generic</p> <p>The service supports a wide range of people of different ethnicities. The highest number are white British (71), white other (40), Asian / Asian British: other (18),black/ black</p>	As part of the re-commissioning of the accommodation and support service the ability to engage with a range of different ethnic groups will continue be taken into account. The new service will focus its offer on those with the most

		<p>British: Africa (15) and Mixed other.</p> <p>The diversity of ethnicities supported by the service is one of its most positive features, and whilst those using the service general matches the population as a whole, there is a risk through reducing the service it might reduce number reach to certain communities. The reason for this is because the current service employs people from a range of backgrounds who speak numerous languages, helping to engage with different ethnic groups within the community.</p> <p>Mental Health</p>	<p>need, ensuring we support people from all ethnicities/race groups presenting.</p> <p>The continuing generic contract will also focus its offer on those with the most need, ensuring we support people from all ethnicities /race groups presenting.</p>
<p>6. Religion or belief</p>	<p>Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/></p>	<p>Generic</p> <p>The service supports people from a range of different religions or beliefs. In Quarter 1 more than 50% were Christian (119) followed by 39 Muslim and 11 Jewish. 48 were none or did not wish to confirm.</p> <p>Due to higher numbers of the service users being Christian or Muslim (compared to the population as a whole) there is the potential for a slightly more disproportionate impact on these groups.</p> <p>Data from the mental health cohort is too small to make a judgement on.</p>	<p>We will review the proposed changes as they develop and the new service will focus its offer on those with the most need, regardless of religion or belief. The new service aims to continue to reach out to varied religious communities to ensure equal access.</p> <p>The continuing generic contract will also focus its offer on those with the most need, regardless of religion or belief.</p>
<p>7. Gender / sex</p>	<p>Yes <input type="checkbox"/> / No <input checked="" type="checkbox"/></p>	<p>Generic</p> <p>104 service users were</p>	

		male in quarter 1, compared to 119 service users who were female. This is broadly similar to the gender profile of the borough with 51.1% of residents identifying as female and 48.9% male and therefore no gender would be disproportionately affected.	
8. Sexual orientation	Yes <input type="checkbox"/> / No <input checked="" type="checkbox"/>	<p>This data is recorded for both groups. In regard to the generic service Information / data recorded 204 (of 223) people who used the service stated they were heterosexual, with 8 stating 'other' and 10 'prefer not to say'. For mental health 11 of the 14 service users stated they were heterosexual.</p> <p>It is unlikely there would be a particular impact on any specific group.</p>	
9. Marital Status	Yes <input type="checkbox"/> / No <input checked="" type="checkbox"/>	Information / data not recorded	
10. Other key groups?	Yes <input type="checkbox"/> / No <input checked="" type="checkbox"/>	No further information / data recorded	

4. What will be the impact of delivery of any proposals on satisfaction ratings amongst different groups of residents?

The current contract value 2016/17 for Generic budget is £503,661; with a proposal to a reduction of circa 20% will be £403k for 2017/18 contract.

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

Extending the generic floating support service will give an opportunity to work with other departments, such as Children's and Families and Public Health (drug and alcohol) to ensure further work is done in terms of meeting needs of the borough.

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

The Council will continue, as it does with all its commissioning activity, to consider the reach do all communities within Barnet of the Outreach Barnet service.

7. 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?

The service will have a performance framework, as part of the Councils contract monitoring toolkit, which records key demographic data and is reviewed at a quarterly meeting. This information also informs future commissioning intentions and is reviewed if the service isn't reaching particular communities.

8. How will the new proposals enable the council to promote good relations between different communities?

The service will be based on need, regardless of the age, gender, race or religion of the individual. The service aims to support people into accommodation and become settled as part of their local community.

9. 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?

The consultation on this proposal was held between November 2016- Dec 16 as part of the budget consultation.

Specific workshops will be held for current and potential users, carers of the service, providers and the provider market in 2017/18. The outcome of the consultation will inform decision making and help shape the new support offer for generic floating support in the future.

Overall Assessment

10. Overall impact		
Positive Impact <input type="checkbox"/>	Negative Impact or Impact Not Known ¹ <input checked="" type="checkbox"/>	No Impact <input type="checkbox"/>

11. Scale of Impact		
Positive impact: Minimal <input type="checkbox"/> Significant <input type="checkbox"/>	Negative Impact or Impact Not Known Minimal <input checked="" type="checkbox"/> Significant <input type="checkbox"/>	

12. Outcome			
No change to decision <input type="checkbox"/>	Adjustment needed to decision <input type="checkbox"/>	Continue with decision <i>(despite adverse impact / missed opportunity)</i> <input checked="" type="checkbox"/>	If significant negative impact - Stop / rethink <input type="checkbox"/>

¹ '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.

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

Data from the January – March 2016 was used to make this assessment. The review was undertaken by Adults DU with input from the Adults Commissioning Group, JCU and Family Services. LBB does not anticipate any adverse impact, as the provider has indicated that there is capacity to continue to meet the demand of the service.

14. 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
Monitor outcomes of the revised service by equalities groups	Ensure specification includes statement of expectations	Review equality impact on the outcomes of the floating support contracts by equality strands	Commissioning project manager and senior category manager	After 3 months of contract start date
Stakeholder feedback	Review stakeholder feedback	Review equality impact on the outcomes of the floating support contracts by equality strands	Senior category manager	Quarterly
Ensure equality impact effectively considered as part of re-commissioning of service	EIA updated as part of Commissioning. Impact on families, people with disabilities and BAME groups to be a focus.	Ensure support is focussed at people with the highest need, regular of sex, age, race, gender and religion.	Commissioner	Part of Commissioning process.

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