

MEETING

ADULTS AND SAFEGUARDING COMMITTEE

DATE AND TIME

WEDNESDAY 24TH NOVEMBER, 2021

AT 7.00 PM

VENUE

HENDON TOWN HALL, THE BURROUGHS, LONDON NW4 4BG

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

Chairman: Councillor Sachin Rajput
Vice Chairman: Councillor Lisa Rutter

Saira Don
Golnar Bokaei
Felix Byers

Nicole Richer
Sarah Wardle
Paul Edwards

Anne Clarke
Gill Sargeant
Jess Brayne

Substitute Members

Helene Richman
Anthony Finn
Gabriel Rozenberg

Daniel Thomas
Claire Farrier

Reema Patel
Alison Moore

In line with the Constitution's Public Participation and Engagement Rules, requests to submit public questions or comments must be submitted by 10AM on the third working day before the date of the committee meeting. Therefore, the deadline for this meeting is 19 November 2021 at 10AM. Requests must be submitted to governanceservice@barnet.gov.uk

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

Andrew Charlwood – Head of Governance

Governance Service contact: Jan Natynczyk

Media Relations Contact: Tristan Garrick 020 8359 2454

ASSURANCE GROUP

ORDER OF BUSINESS

Item No	Title of Report	Pages
1.	Minutes	5 - 8
2.	Absence of Members	
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4.	Report of the Monitoring Officer (if any)	
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11.	Any other items that the Chairman decides are urgent	

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Decisions of the Adults and Safeguarding Committee

14 September 2021

Members Present:-

AGENDA ITEM 1

Councillor Sachin Rajput (Chairman)

Councillor Golnar Bokaei
Councillor Felix Byers
Councillor Nicole Richer
Councillor Sarah Wardle

Councillor Paul Edwards
Councillor Gill Sargeant
Councillor Jess Brayne
Councillor Alison Moore (sub for
Councillor Anne Clarke)

Apologies for Absence

Councillor Lisa Rutter
Councillor Saira Don

Councillor Anne Clarke

1. CHAIRMAN'S INTRODUCTION

The Chairman welcomed everyone to the meeting and outlined the covid protocols.

2. MINUTES

RESOLVED that the minutes of the meeting held on 3 June 2021, be approved as a correct record.

3. ABSENCE OF MEMBERS

Councillor Saira Don – no substitute present.

Councillor Rutter – no substitute present.

Councillor Anne Clarke – Councillor Alison Moore in attendance as substitute.

4. DECLARATIONS OF MEMBERS' DISCLOSABLE PECUNIARY INTERESTS AND OTHER INTERESTS

None.

5. REPORT OF THE MONITORING OFFICER (IF ANY)

None.

6. MEMBERS' ITEMS (IF ANY)

None.

7. PUBLIC QUESTIONS AND COMMENTS (IF ANY)

None.

8. THE IMPACT OF THE PANDEMIC ON THE ADULT SOCIAL CARE PROVIDER SECTOR AND THE ADULT SOCIAL CARE VOLUNTARY SECTOR

The Chairman explained that this report provided an overview of the impact of Covid-19 on care providers and the adult social care voluntary and community sector. It also covered the ways in which the Council and partners had worked together to mitigate these and future support arrangements.

The Chairman welcomed Helen Newman, Chief Executive, Age UK, Barnet and Ray Booth, Chief Executive, Barnet Mencap to the meeting, who both proceeded to address the Committee about the impact on their organisations during and post the pandemic.

The Chairman also noted the apology of Caroline Collier, Chief Executive, Inclusion Barnet, who was unable to attend the meeting.

Councillor Edwards raised concerns about the closure of one of the Borough's Care Homes in terms of impact on residents and staff.

The Chairman replied that staff across the whole sector were valued by the Council. However, this venue was going to be disrupted by works for up to 18 months. Therefore, the decision was taken to move residents in the interests of their health and safety and well-being. The Chairman also pointed out that the staffing issues did not fall under the jurisdiction of this Committee.

Dawn Wakeling, Executive Director Adults and Health, outlined the health and safety issues and explained that the Council would work with the Barnet Group to find alternative employment for workers.

RESOLVED that the report be noted.

9. FIT AND ACTIVE BARNET (FAB) FRAMEWORK (2016 - 2021) REVIEW

The Chairman introduced this report explaining that in March 2017, the Adults and Safeguarding Committee approved the Fit & Active Barnet Framework (2016-21), the Council's strategy for sport and physical activity, which set out a vision to make Barnet a 'more active and healthy borough'.

This report outlined the progress made throughout the strategy period to date, highlighting achievements against the four key outcomes of the Framework, made possible by working collaboratively across the Fit & Active Partnership.

Members were given the opportunity to ask questions and Officers responded accordingly.

RESOLVED that the Adults and Safeguarding Committee note:

1. **Progress and implementation of the Fit & Active Barnet Framework (2016 - 2021) outlined within Appendix A.**
2. **The timescale for developing a new Fit & Active Barnet Framework to be presented at a future Committee.**

10. BARNET MULTI-AGENCY SAFEGUARDING ADULTS BOARD ANNUAL REPORT 2020-21

The Chairman welcomed Fiona Bateman, Independent Chair of the Safeguarding Adults Board to the meeting.

Fiona Bateman spoke about the Annual Report for 2020-2021 and responded to Members questions. She also gave an open invitation to attend lunch and learn sessions held monthly, each covering a different topic.

Officers extended an invite to Members of the Committee to discuss case scenarios.

RESOLVED

1. **That the Adults and Safeguarding Committee note the Safeguarding Adults Board Annual Report 2020-21.**
2. **That the Committee note that following the Adults and Safeguarding Committee meeting, the Annual Report will be published on the Council website and BSAB webpages.**

11. QUARTER 1 (Q1) 2021/22 DELIVERY PLAN PERFORMANCE REPORT

The Chairman introduced this report and explained that the Committee received a performance report each quarter updating on progress, performance and risk against its priorities. This report provided a thematic overview of performance for Q1 2021/22, focusing on the activities to deliver both the corporate and committee priorities in the Adults and Safeguarding Delivery Plan.

Councillor Edwards stated that this report was written prior to the upcoming National Insurance increases and raised concerns about the impact of the increase and obligation to commissioning services and employees.

Councillor Edwards suggested that the matter be referred to Policy and Resources Committee. However, it was noted that the report was written in advance of the National Insurance increase and did not refer it, so a formal referral was not the appropriate mechanism for raising the issue.

However, the Chairman agreed to raise the issue, as a Member of Policy and Resources Committee, when the increase was discussed as part of the overall Council budget.

RESOLVED that the report be noted.

12. COMMITTEE FORWARD WORK PROGRAMME

The Chairman introduced the Forward Work Programme, which outlined details of future items for submission to the Committee.

RESOLVED that

- 1. The Work Programme be noted;**
- 2. Caroline Collier, Chief Executive, Inclusion Barnet, be invited to the January 2022 meeting to address the Committee.**

13. ANY OTHER ITEMS THAT THE CHAIRMAN DECIDES ARE URGENT

None.

The meeting finished at 9.45pm



Adults and Safeguarding Committee 24th November 2021

Title	Business Planning 2022-26
Report of	Councillor Sachin Rajput – Committee Chairman
Wards	All
Status	Public
Urgent	No
Key	Yes
Enclosures	Appendix A – Savings Proposals Appendix B – Fees & Charges
Officer Contact Details	Dawn Wakeling, Executive Director - Adults and Health dawn.wakeling@barnet.gov.uk Will Hammond, Head of Transformation – Adults and Health will.hammond@barnet.gov.uk

Summary

A Business Planning report was presented to Policy and Resources Committee on 30th September 2021 outlining the council’s updated Medium-Term Financial Strategy (MTFS) to 2025/26 and the future financial challenges facing the council.

Theme Committees were asked to consider their response to this challenge, by developing savings and efficiency proposals, prior to a revised MTFS being presented to Policy and Resources Committee in December 2021.

Work is ongoing to identify the impacts, both pandemic- and non-pandemic related, across the planning period. Given the high level of uncertainty in the MTFS period, particularly regarding 2022/23, 3 scenarios have been modelled. The central scenario estimates an overall budget gap of £16.2m, which may be reduced by £13.3m to £2.9m if all proposed savings are agreed.

This report asks the Committee to agree to the revenue savings proposals attached and to note the service pressures identified; and also to approve changes to Fees and Charges for implementation from 1 April 2022.

The outcomes of all theme committee discussions will go forward as recommendations to Policy and Resources Committee in December 2021.

Officers Recommendations

1. That Committee agree the revenue savings programme listed in Appendix A and recommend it to Policy and Resources Committee in December.
2. That Committee note the risks associated with these savings proposals. These risks relate both to impact on services and residents and deliverability of savings.
3. That Committee note the equalities impact assessments associated with these savings proposals.
4. That Committee agree the changes to fees and charges as set out in Appendix B.

1. WHY THIS REPORT IS NEEDED

1.1 Executive Summary

1.1.1 This report is required as part of the council's annual business planning process, to discuss and approve savings and fees & charges proposals for the Adults and Safeguarding Committee for 2022/23 and the subsequent two financial years, to the end of March 2026.

1.1.2 The Committee's approval is requested for:

- Savings proposals within its authority so they can then be recommended to Policy and Resources (P&R) Committee to set a balanced budget for 2022/23;
- Proposed changes to Fees and Charges within Committee's authority for 2022/23 that require approval and recommendation to P&R Committee.

2. STRATEGIC CONTEXT

2.1 Background to 2022/23 Business Planning

2.1.1 The council has a statutory duty to set a balanced budget for the coming financial year and uses the Medium-Term Financial Strategy (MTFS) to estimate the budget position for the following three years. Savings proposals for all years are proposed through theme committees, recommended to P&R Committee, and then on to Full Council in March to be approved.

2.1.2 Between 2010/11 to 2020/21, the council successfully identified savings averaging £17m per year.

2.2 Approach to MTFS 2022-26

2.2.1 In June 2021, P&R Committee were presented with an update on the impacts of COVID-19 and an introduction to the 2022/23 to 2025/26 MTFS process. This set out that recurrent resources were not expected to grow significantly from 2021/22 to 2022/23. Service areas were therefore asked to prepare budgets for 2022/23 within a nominal 'cash limit', set at the level of the budget in 2021/22.

2.2.2 A more detailed update on the MTFS was presented to September P&R committee which highlighted the level of uncertainty being faced in the short term. The report set out that the uncertainty is being driven by 3 factors – the level of service pressures, and whether they are short term or of longer duration; the level of government grant funding to be received; and whether there would be scope for a social care precept (SCP) in 2022/23 (although it is now clear that a 1% social care precept can be levied in 2022/23).

2.2.3 Considering these variables highlighted that each of them could have considerable impact. For example, a 1% SCP would yield c. £2m; service pressures were initially estimated at £15m; and changes to government grant, estimated at a loss of £2m per year, could be a loss or a gain of twice that. Accordingly, three scenarios were presented to September P&R committee, illustrating how these variables could lead to quite different outcomes, but also emphasising that the central scenario or base case was regarded as more likely and that it was preferred as a basis of planning. This central scenario is summarised below.

2.2.4 It is anticipated that a combination of government announcements, local political decisions, and the further development of service financial plans will reduce the overall level of uncertainty substantially by March 2022 when the budget is set.

2.3 MTFS September Summary – 'Base case'

2.3.1 As at September, the estimated budget gap between 2022/23 to 2025/26 is £73.386m. Considering 2022/23 in isolation, the estimated funding gap is £16.233m.

2021/22		2022/23	2023/24	2024/25	2025/26
£m	<u>MTFS Summary - Base Scenario</u>	£m	£m	£m	£m
333.101	Expenditure	342.102	369.561	394.431	418.983
(333.101)	Resources	(325.869)	(329.121)	(337.888)	(345.597)
(0.000)	Cumulative (Surplus)/Shortfall to Balanced Budget	16.233	40.441	56.543	73.386

2.4 Committee Context

2.4.1 On 8th February 2021, Policy and Resources Committee approved the Barnet Plan, which identified the four key priorities for the council over the next four years:

- **Clean, safe and well run:** a place where our streets are clean and antisocial behaviour is dealt with so residents feel safe. Providing good quality, customer friendly services in all that we do;
- **Family Friendly:** creating a Family Friendly Barnet, enabling opportunities for our children and young people to achieve their best;
- **Healthy:** a place with fantastic facilities for all ages, enabling people to live happy and healthy lives.
- **Thriving:** a place fit for the future, where all residents, businesses and visitors benefit from improved sustainable infrastructure & opportunity.

2.4.2 The Healthy workstream is the key focus for the Adults and Safeguarding Committee.

2.4.3 In March 2021, the Adults and Safeguarding Committee agreed its priorities and delivery plan for 2021/22. The priorities were:

- Recovery (from the COVID-19) pandemic
- Bringing health and care together
- Supporting residents to maintain their strengths and independence
- Focusing on mental health and wellbeing
- Greater facilities and opportunities to be physically active

2.5 National Context

Adult social care

2.5.1 It is widely acknowledged that adult social care has faced a considerable funding challenge for a number of years¹. The Local Government Association stated that: 'Over the past decade, adult social care costs increased by £8.5 billion while total funding (including the Better Care Fund) only increased by £2.4 billion. This left councils with a funding gap of £6.1 billion. Of this, £4.1 billion was managed through savings to the service, and £2 billion was managed through funding diverted from other services by cutting them faster than otherwise would have been the case.'²

2.5.2 Social care faces demographic pressure both in terms of the number of adults requiring support and the level of individual need. The UK has an ageing population, with more people living with multiple health conditions, and a

¹ <https://committees.parliament.uk/publications/3120/documents/29193/default/>

² <https://www.local.gov.uk/parliament/briefings-and-responses/debate-challenges-facing-social-care-england-following-pandemic>

steady increase in the number of people living with dementia.³ There is also a rising number of younger, ‘working-age’ adults with care needs, with the number of people with severe learning disabilities projected to increase by 34% between 2017 and 2027.⁴ Spend on working age adults now accounts for more than half of adult social care spending.

- 2.5.3 Social care providers are also facing significant challenges, with the LGA suggesting that around £1.5 billion is required to stabilise the care provider market and cover the difference between the benchmarked cost of care delivery and prices paid by councils, and significant vacancy rates for care staff.⁵
- 2.5.4 The COVID-19 pandemic both has exacerbated and highlighted some of the challenges faced by the sector (such as financial pressure on providers and staff shortages), while also emphasising the critical value of social care in enabling people to maintain quality of life and in supporting the wider health system. Significant funding was made available to councils and social care providers to deal with the immediate impact of the pandemic, although this is unlikely to be sustained.
- 2.5.5 In September 2021, the Government published ‘Build Back Better: Our Plan for Health and Social Care’, including a new 1.25% social care levy. This is projected to raise around £36 billion for health and social care, of which £5.4 billion will be invested in adult social care over the period of the plan. However, it is not yet clear how quickly this will be made available for adult social care, with the immediate funding priority being the backlog in NHS waiting lists. As it will also be targeted at protecting individuals against high costs of care, it may not completely address the wider funding challenges faced by the sector. According to the Plan, “demographic and unit cost pressures will [need to] be met through Council Tax, social care precept, and long-term efficiencies.”⁶
- 2.5.6 The October 2021 Government spending review has set out that local authorities with social care responsibilities will be able to increase the adult social care precept by up to 1 per cent per year.⁷
- 2.5.7 The new Health and Care Bill introduces a new duty for the Care Quality Commission (CQC) to review and make an assessment of local authorities’ delivery of their adult social care duties. This will mean the development of a new national assurance framework for adult social care.

³ <https://www.alzheimers.org.uk/about-us/policy-and-influencing/dementia-scale-impact-numbers>

⁴ <https://www.health.org.uk/sites/default/files/upload/publications/2020/Social%20care%20for%20adults%20aged%2018-64%20Analysis.pdf>

⁵ [Adult social care fragility | Care Quality Commission \(cqc.org.uk\)](https://www.cqc.org.uk/adult-social-care-fragility)

⁶ https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/101573/6/Build_Back_Better_-_Our_Plan_for_Health_and_Social_Care.pdf

⁷ https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/102997/3/Budget_AB2021_Print.pdf

Leisure

- 2.5.8 In July 2020, the LGA published a report outlining the impact of Covid 19 in relation to culture, leisure and sport. The research identified councils as one of the biggest funders in England for culture and leisure, spending approximately £2.2 billion a year these types of services. Many services also generate significant levels of income and inward investment, as well as having a multiplier effect on the local economy and contributing to health outcomes.
- 2.5.9 The closure of leisure facilities and restrictions placed an immediate pressure on finances, rapidly reducing income for many providers to zero and creating implications for the long-term financial sustainability of operators within the sector. Government funding such as the National Leisure Relief Fund (circa £116m) has provided relief for leisure services but has not covered the overall impact to many leisure providers.
- 2.5.10 The LGA report indicates that there will be continued financial uncertainty for leisure providers as we emerge from the pandemic.

2.6 Barnet Context

Adult Social Care

- 2.6.1 The most recently published benchmarking report (based on 2019/20 figures)⁸ showed that Barnet was the 33rd lowest spending authority on adult social care out of the 152 England authorities, per head of population. Alongside good performance against key quality / outcome measures, this demonstrates that Barnet continues to deliver value for money in adult social care.
- 2.6.2 According to this benchmarking, Barnet has relatively low numbers of older adults with long term care packages and has low levels of residential admissions. However, on average, Barnet spends relatively more than average per person in long term care, especially for working age adults. Unit costs for older adults for residential and nursing care are comparable with nearest neighbours, although slightly higher for working age adults, while the hourly rate paid for homecare is slightly higher than the median for statistical neighbours. This may be driven by the committee's previous decision to ensure all homecare staff are paid for their travel time between care calls.
- 2.6.3 While continuing to make good use of resources, Barnet faces significant demand and cost pressures. According to PANSI data, Barnet has the highest population of adults living with learning disabilities of any London borough, and consequently provides long term support for a comparatively high number of people with a learning disability. This number has increased by approximately 40 in the last two years, mostly driven by young adults transitioning from Families to Adults services. The needs - and average cost

⁸ LGA Adult Social Care Use of Resources Report (written by LG Inform) 19/20. Based on the National ASC Finance Return.

of meeting these needs - are generally higher than the average for the total cohort of adults with a learning disability supported by the council.

- 2.6.4 The absolute number of older adults supported is also increasing year on year. This is partly the result of an ageing population, but the pandemic has also generated increased demand for social care support. While initial numbers of people supported in residential and nursing care declined during the height of the pandemic, they are now higher than pre-pandemic levels. The number of homecare packages has increased by 40% (or 482) in two years, driven in particular by additional demand from hospital discharges through the pandemic. The level of need per individual (complexity), and associated cost has also increased. This is likely to be the result of people living longer with complex medical conditions and the high local prevalence of dementia (Barnet is in the top five London Boroughs for recorded prevalence, 4.59% of those over 65, compared to 3.96% in England).⁹
- 2.6.5 A large proportion of this demand is driven by the significantly higher number of residents needing care and support upon discharge from hospital. In the first six months of this year the number of adults supported was almost double that of the equivalent period in 20/21 (1,030 compared to 521). It is unclear how long this increased demand will continue.
- 2.6.6 There are also significant pressures on social care providers, with staff shortages, rising wage costs and inflation. Unit costs for care are therefore likely to increase above inflation over the coming years

Leisure

- 2.6.7 The council's leisure contract is currently in Year 4 (2021/22) of a 10-year term, in which Annual Payments were due to the Council from Year 3 (2020/21) to Year 10.
- 2.6.8 Since March 2020, the Council has continued to work in partnership with GLL (leisure operator) in relation to recovery and business planning, acknowledging the changes brought about by Covid-19 which has included enforced closures and adaptations to operations.
- 2.6.9 Current operations indicate that services are recovering well (with the current live membership level at 85% of pre-Covid levels). However, there are still financial challenges, and the council is continuing to work with GLL to address the income levels over the contract period.

2.7 In year (2021/22) Management

⁹ <https://fingertips.phe.org.uk/profile-group/mental-health/profile/dementia/data#page/4/gid/1938133052/pat/15/par/E92000001/ati/166/are/E38000240/iid/91891/age/27/sex/4/cat/-1/ctp/-1/yr/1/cid/4/tbm/1/page-options/tre-do-1>

- 2.7.1 The financial position for the current year continues to be marked by uncertainty over the outlook for costs and revenues as the impact of COVID-19 continues to evolve. It remains challenging to separate the short-term financial impacts of the pandemic from the longer-term impacts.
- 2.7.2 There is significant uncertainty in what the demand for adult social care service will be this year. This is for various reasons including:
- Across London the summer pressures this year for social care have been unprecedented with demand from both hospital discharges and community crises at or beyond normal winter levels. It is unclear how long this pressure will be sustained for.
 - It is also unclear what winter will bring, with potential rises in Covid and flu driving additional demand.
 - After a year in which the death rate was significantly higher for those with funded support, the rate for the first few months of 21/22 is below pre-pandemic levels (average of 38 per month in 21/21 compared to 69 last year). It is unclear how this will adjust over the winter.
 - The complexity of need for those leaving hospital is higher than it has been requiring a big increase in individuals requiring two carers for each call (up 32% compared to last year) and more 1-1 support in supported living and care homes.
 - It has been confirmed that NHS funding for discharge will continue until March but it is currently proposed that there will be no extension of the arrangements next year.
 - The care market is significantly challenged with providers managing mandatory vaccines and general recruitment challenges This risks pricing for the remainder of the year being pushed up.
- 2.7.3 The service continues to do all it can to manage the budget whilst meeting statutory duties under an increasingly pressured health and social care system. This includes senior sign-off of all high-cost packages, the negotiation of rates (including block contracts), quick reviews of people following discharge from hospital to ensure a proportionate level of care as people recover, the use of equipment and technology wherever suitable and maximising the benefits of enablement services.
- 2.7.4 As set out in the Q2 Performance Report also presented to this Committee, The Revenue Forecast (after reserve movements) for the Adults and Safeguarding Committee's service areas of adult social care and leisure is £109,438m. Of this, £6.456m is the impact of Covid 19, leaving a small underspend of £0.051m at Q2.
- 2.7.5 **Future years' projected financial pressure**
- 2.7.6 The (significant) total ongoing financial pressure over the period totals £13.324m (£6.482m 22/23, £2.263m 23/24, £2.281m 24/25 and £2.298m 25/26).
- 2.7.7 These are predominantly related to increasing demand for support and meeting increased complexity of need. Much of this pressure is from additional demand that has already materialised, as set out earlier in this

report, such as the 40% in homecare packages over the last two years and a 32% increase in new cases requiring ‘double-handed’ care. This will become a pressure in 22/23 because the demand is likely to remain, while specific COVID-19 funding covering the costs this year is not projected to continue.

2.7.8 Future years’ pressure forecasts are then based on the current demand trajectory ‘levelling off’, but this assumption will need to be kept under review.

2.7.9 There are also several ‘one-off’ pressures reflecting the continued response to the COVID-19 pandemic, which are currently being reviewed. Pressures from lost income from GLL contract are included here, as the ambition remains for the contract to deliver the initially agreed income level over the longer, total contract period.

2.7.10 Savings options

2.7.11 The pressures on the social care system, combined with the previous delivery of significant savings from Barnet Adult Social Care makes identifying further savings opportunities very challenging.

2.7.12 Given the high pressure on existing staff, delivering savings from the staffing budget would negatively impact service delivery. Less contact time with new and existing people who need care and support would also likely drive up the cost of care as the potential for creative, strengths-based social care practice would diminish.

2.7.13 Delivering savings from preventative services is also likely increase the overall costs of provision, given the vital role these play in reducing the level of demand for formal care.

2.7.14 Savings from adult social care are therefore reliant on ‘demand management’ or working with providers to constrain or reduce the unit cost of care. These savings are challenging to deliver given the increasing levels of need among individuals and the pressures facing the provider sector. The table below sets out the savings identified by year. The total savings amount identified is £3.384m over the MTFS period.

2.7.15 The detail of each saving proposal is contained in Appendix A – MTFS Proposed Savings for 22/23 to 25/26

Line Ref	Opportunity Area	2022/23 £000	2023/24 £000	2024/25 £000	Total savings (All years)
A&S9	VAT efficient leisure contract	(159)	(184)		(343)
A&S10	Additional income from leisure (SPA)	(373)	(258)		(631)
A&S21	Strengths-based provision for older	(200)			(200)

	adults and people with physical disabilities				
A&S22	Progression for people with a learning disability	(500)	(75)	(75)	(650)
	Increasing Independence in Mental Health	(250)			(250)
A&S13	Extra-Care Housing 2 (Stagg House)	(30)	(100)	(70)	(200)
A&S14	Extra-Care Housing 3 (Cheshir House)		(50)	(210)	(260)
A&S31	Increased use of prevention services		(200)	(200)	(400)
A&S27	Increasing independence through reablement	(200)			(200)
A&S32	Constraining homecare costs	(150)			(150)
A&S33	Constraining residential and nursing costs	(100)			(100)
Overall Savings		(887)	(867)	(555)	(3,384)

2.7.16 The key changes and additions from the 21/22-24/25 MTFS are set out below (all in 2022/23):

- A further £200k saving through continuation of strengths-based reviews for older adults (covering unachieved savings from 21/22)
- An increase in the saving through progression for people with a learning disability (from £275k to £500k) (covering unachieved savings from 21/22)
- A new saving of £250k from increasing independence for people using Mental Health services
- An additional £100k from enhancements to reablement services
- A new £150k saving from constraining homecare costs
- An additional £100k saving from constraining residential and nursing care costs

2.7.17 Given the context set out in sections 2.5 and 2.6 of this paper, there are significant risks and challenges associated with delivering these savings, in particular those associated with leisure services and reducing demand for adult social care services. The risks are set out in more detail in section 6.5.3.

2.7.18 Officers are continuing to review options to constrain pressures or identify further savings.

2.8 Fees & Charges

- 2.8.1 Further to recent Council decisions, all changes to fees and charges for clients who receive a chargeable service from April 2021 are to be approved by Theme Committee and Council, regardless of the level of any change to the fee. All relevant fees and charges are included in Appendix B to this paper, and those where a change is proposed have been marked as such.
- 2.8.2 The core fees and charges for Adult Social Care Services are reviewed at the same time as changes to Department of Work and Pension benefits / allowances, which are normally published around January / February each year.
- 2.8.3 From April 2022, the only proposed increase to adult social care charges is an increase of 2% to the Fairer Contributions Charge Rate for homecare. This is to reflect the increase in average hourly rate the council pays for homecare, to £18.76.
- 2.8.4 From April 2022, it is proposed that the majority of the fees and charges associated with leisure services are increased by 3.2%. The rationale for this is that the leisure industry, like some others, has been severely impacted by the pandemic, therefore we are supportive of GLL applying a 3.2% increase to assist financial recovery. The proposed fees and charges have been carefully assessed and where it was deemed that a 3.2% increase would be prohibitive, these have been constrained (with the lowest being 2%). The newly proposed fees have been benchmarked across local and neighbouring facilities and GLL continue to be competitive.
- 2.8.5 In real terms, proposed fee increases are largely beneath £0.50p. There are some items where, even after applying only 2% increase, this is higher. This is considered of lower impact to individuals given that:
- Fitness Induction (and programme) is included within memberships at no additional cost. It is seldom purchased as a standalone service.
 - Sports Hall, Court and Pitch Hires are a shared cost between teams / multiple participants
 - Burnt Oak Leisure Centre Nursery Fees and Charges remain competitive (significantly below the highest charging competitor rate of £91.76 per day) and therefore continues to be accessible to the community in which it is located and serves

3. REASONS FOR RECOMMENDATIONS

- 3.1 Local Government continues to face significant reductions in funding and increased demand for services, as set out in the above context. These challenges require longer term, robust financial and strategic planning and the recommendations in this report support this.

3.2 By law, the council is required to set a balanced budget. These proposals are the best way of doing that by meeting financial requirement and delivering outcomes and ambitions for Barnet.

4. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

4.1 The alternative option is not to approve the MTFS. This, however, is not considered to be good practice and may expose the council to the risk of not achieving the savings targets or being able to set a balanced budget. There is a statutory requirement to set a balanced budget and submit budget returns to the Ministry of Housing, Communities and Local Government (MHCLG).

5. POST DECISION IMPLEMENTATION

5.1 If the Adults and Safeguarding Committee approves recommendation 1 made by this report, then the savings proposals will be referred to Policy and Resources Committee on 9th December 2021 as part of the council's Medium-Term Financial Strategy (MTFS). Public consultation on the MTFS will commence in December.

6. IMPLICATIONS OF DECISION

6.1 Corporate Priorities and Performance

6.1.1 On 8th February 2021, Policy and Resources Committee approved the Barnet Plan, which identified the four key priorities for the council over the next four years:

- **Clean, safe and well run:** a place where our streets are clean and antisocial behaviour is dealt with so residents feel safe. Providing good quality, customer friendly services in all that we do;
- **Family Friendly:** creating a Family Friendly Barnet, enabling opportunities for our children and young people to achieve their best;
- **Healthy:** a place with fantastic facilities for all ages, enabling people to live happy and healthy lives.
- **Thriving:** a place fit for the future, where all residents, businesses and visitors benefit from improved sustainable infrastructure & opportunity.

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

6.2.1 The Adults and Safeguarding Committee savings programme will enable the council to meet its savings target as set out in the MTFS. These budgets will be formally agreed each year, and individual proposals will be subject to appropriate consultation and equality impact assessments where necessary. For this reason, the proposals are subject to change.

6.3 Social Value

- 6.3.1 None applicable to this report, however the council must take into account the requirements of the Public Services (Social Value) Act 2012 to try to maximise the social and local economic value it derives from its procurement spend. The Barnet living wage is an example of where the council has considered its social value powers.

6.4 Legal and Constitutional References

- 6.4.1 Section 151 of the Local Government Act 1972 states that: “without prejudice to section 111, every local authority shall make arrangements for the proper administration of their financial affairs and shall secure that one of their officers has responsibility for the administration of those affairs”. Section 111 of the Local Government Act 1972, relates to the subsidiary powers of local authorities.
- 6.4.2 Section 31A of the Local Government Finance Act 1992 requires billing authorities to calculate their council tax requirements in accordance with the prescribed requirements of that section. This requires consideration of the authority’s estimated revenue expenditure for the year in order to perform its functions, allowances for contingencies in accordance with proper practices, financial reserves and amounts required to be transferred from general fund to collection fund.
- 6.4.3 Local authorities owe a fiduciary duty to council tax payers, which means it must consider the prudent use of resources, including control of expenditure, financial prudence in the short and long term, the need to strike a fair balance between the interests of council tax payers and ratepayers and the community’s interest in adequate and efficient services and the need to act in good faith in relation to compliance with statutory duties and exercising statutory powers.
- 6.4.4 These savings proposals are to be referred to Policy and Resources Committee. They will then be subject to consultation and a cumulative equality impact assessment before being referred on to Council so that Council may set the Council Tax, being mindful of any equality impacts and consultation responses.
- 6.4.5 The Council’s Constitution (Article 7, Article 7 – Committees, Forums, Working Groups and Partnerships) sets out the responsibilities of all council Committees. The responsibilities of the Adults and Safeguarding Committee can be found here: <http://barnet.moderngov.co.uk/documents/s47983/08Article7CommitteesForumsWorkingGroupsandPartnerships.doc.pdf>. Responsibilities include:
- (1) Responsibility for all matters relating to vulnerable adults, adult social care and leisure services.
 - (2) Work with partners on the Health and Well Being Board to ensure that social care interventions are effectively and seamlessly joined up with public health and healthcare and promote the Health and Wellbeing Strategy and its associated sub strategies.

(3) To submit to the Policy and Resources Committee proposals relating to the Committee's budget for the following year in accordance with the budget timetable.

(4) To make recommendations to Policy and Resources Committee on issues relating to the budget for the Committee, including virements or underspends and overspends on the budget. No decisions which result in amendments to the agreed budget may be made by the Committee unless and until the amendment has been agreed by Policy and Resources Committee.

(5) To receive reports on relevant performance information and risk on the services under the remit of the Committee.

6.4.6 A link to the council's Financial Regulations can be found at (see section 2.3.6): [4 \(modern.gov.co.uk\)](http://modern.gov.co.uk), in which the following is stated:

6.4.7 2.3.6 - Changes to fees and charges should be included in the budget proposals submitted by theme Committees or the relevant committee as part of the budget setting process. Theme Committees and other committees refer all fees and charges to the Policy and Resources Committee. The Policy and Resources Committee reviews all fees and charges which then form part of the budget that is subject to public consultation. Subject to public consultation outcomes, the Policy and Resources Committee recommends all fees and charges to Full Council for approval as part of the council's overall budget

6.4.8 Some of the proposals, relate to savings resulting from operational decisions being made in a different way and are therefore estimated savings. The saving is therefore an indicative saving and its deliverability will be dependent on a number of factors. As part of the budget setting process, Policy and Resources Committee will consider the need for an appropriate contingency to cover any savings that are indicative and may not be met due to operational decisions. Some of the proposals in the MTFs relate to proposals that are at a very early stage. These proposals will be subject to further business planning and decision making to test whether they can be delivered and what the impact of such a proposal will be. These proposals will be considered in further detail during future business planning reports.

6.4.9 All proposals emerging from the business planning process will need to be considered in terms of the council's legal powers and obligations (including, specifically, the public-sector equality duty under the Equality Act 2010).

6.5 Risk Management

6.5.1 The Council has taken steps to improve its risk management processes by integrating the management of financial and other risks facing the organisation. The allocation of an amount to contingency is a step to mitigate the pressures that had yet to be quantified during the budget setting process.

6.5.2 The allocation of budgets from contingency seeks to mitigate financial risks which have materialised.

6.5.3 The initial risk assessment on the proposals outlined in this document has identified the following as the most significant risks:

Project / savings line	Risk description(s)	Mitigation approach (if possible)
Various	<ul style="list-style-type: none"> • COVID-19 has caused significant disruption to adult social care services, both in terms in net increases to demand for services and social worker input, and necessary changes in practice. The full (length of this) impact is hard to be certain about, and therefore future financial pressures can only be estimated at this stage. 	<ul style="list-style-type: none"> • Continue to monitor pressures and demand and adjust forecasts accordingly.
SPA Income	<ul style="list-style-type: none"> • Covid 19 has had a significant impact on the leisure industry and therefore the to the sustainability of the leisure services provider given payments expected to be made to the council. 	<ul style="list-style-type: none"> • The extent of the total loss of revenue and the future financial impact on the service continues to be subject to a full commercial assessment.
VAT efficient leisure contract	<ul style="list-style-type: none"> • Achievement of this saving is dependent on complex legal and treasury arrangements and may therefore not materialise if legal and HMRC assurance is not received. 	<ul style="list-style-type: none"> • Completion of a thorough legal and HMRC review and continued monitoring of VAT levels by finance.
All 'demand management' savings	<ul style="list-style-type: none"> • Savings are inherently unpredictable given that they are linked to individual circumstances and needs • Barnet is a low-spending authority on social care and has already delivered significant efficiencies. Savings are therefore often reliant on meeting complex needs in different ways, which is challenging • Monitoring of savings is complex due to the challenges of predicting 'baseline' demand and avoided costs. 	<ul style="list-style-type: none"> • Service and finance colleagues will continue to work closely together to maximise savings achieved and evidence of this. • Investment in staffing resources to deliver savings initiatives

6.6 Equalities and Diversity

6.6.1 Equality and diversity issues are a mandatory consideration in the decision making of the council.

6.6.2 Decision makers should have due regard to the public sector equality duty in making their decisions. The Equality Act 2010 and the Public-Sector Equality Duty require elected Members to satisfy themselves that equality considerations are integrated into day-to-day business and that all proposals emerging from the business planning process have taken into consideration the impact, if any, on any protected group and what mitigating factors can be put in place. The equalities duties are continuing duties they are not duties to secure a particular outcome. The statutory grounds of the public sector equality duty are found at section 149 of the Equality Act 2010 and are as follows:

6.6.3 A public authority must, in the exercise of its functions, have due regard to the need to:

- Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
- Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

6.6.4 Having due regard to the need to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to:

- Remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic;
- Take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it;
- Encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

6.6.5 The steps involved in meeting the needs of disabled persons that are different from the needs of persons who are not disabled include, in particular, steps to take account of disabled persons' disabilities.

6.6.6 Having due regard to the need to foster good relations between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to:

- Tackle prejudice, and
- Promote understanding.

6.6.7 Compliance with the duties in this section may involve treating some persons more favourably than others; but that is not to be taken as permitting conduct

that would otherwise be prohibited by or under this Act. The relevant protected characteristics are:

- Age
- Disability
- Gender reassignment
- Pregnancy and maternity
- Race,
- Religion or belief
- Sex
- Sexual orientation
- Marriage and Civil partnership

6.6.8 This is set out in the council’s Equalities Policy together with our strategic Equalities Objective - as set out in the Corporate Plan - that citizens will be treated equally with understanding and respect; have equal opportunities and receive quality services provided to best value principles.

6.6.9 Progress against the performance measures we use is published on our website at:

<https://www.barnet.gov.uk/your-council/policies-plans-and-performance/equality-and-diversity>

6.6.10 Where there are changes to service delivery or changes to staff, these will impact on individuals in different ways. However, at each stage of the process, the council will conduct an equalities impact assessment (EqIA) where appropriate to ensure that where persons are impacted, proper measures are considered to mitigate the effect as far as possible. Those affected by any changes resulting from any of the proposals will be engaged, as set out in Appendix A under ‘Consultation’. Where necessary, proposals will not be implemented or agreed until members have fully considered the equality impacts and responses to any consultation.

6.6.11 The revenue savings sheet shown at Appendix A indicates where equalities impact assessments (EqIAs) have been carried out. Overall, five EqIAs have been carried out or refreshed, each of which showed an overall positive impact. For all proposals, the advised outcome is to ‘Proceed with no changes’, although equalities impacts will continue to be kept under review and mitigating actions implemented where identified.

EqIAs are available at: [Equality Impact Assessments 2022/23 | Barnet Council](#)

Ref	Opportunity Area	EIA required?	Positive Impact	Negative Impact		No impact
				Minor	Major	
A&S9	VAT efficient leisure contract	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A&S10	SPA income	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A&S13	Extra-Care Housing 2 (Stagg House)	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A&S14	Extra-Care Housing 3 (Cheshir House)	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A&S21	Strengths-based provision for older adults and people with physical disabilities	✓	✓	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A&S22	Progression for people with a learning disability	✓	✓	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A&S27	Increasing the breadth of the reablement offer	✓	✓	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A&S31	Expansion of Prevention and Wellbeing Team	✓	✓	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A&S32	Increasing Independence in Mental Health	✓	✓	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A&S33	Homecare costs	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A&S34	Residential / nursing care costs	x	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6.6.12 Any human resources implications will be managed in accordance with the Council's Managing Organisational Change policy, which supports the Council's Human Resources Strategy and meets statutory equalities duties and current employment legislation.

6.7 Corporate Parenting

6.7.1 In line with Children and Social Work Act 2017, the council has a duty to consider Corporate Parenting Principles in decision-making across the council. The outcomes and priorities in the refreshed Corporate Plan, Barnet 2024, reflect the council's commitment to the Corporate Parenting duty to ensure the most vulnerable are protected and the needs of children are considered in everything that the council does. To this end, great attention has been paid to the needs of children in care and care leavers when approaching business planning, to ensure decisions are made through the lens of what a reasonable parent would do for their own child.

6.7.2 The Council, in setting its budget, has considered the Corporate Parenting Principles both in terms of savings and investment proposals. The Council proposals have sought to protect front-line social work and services to children in care and care leavers and in some cases, has invested in them.

6.7.3 The council provides discounted and free access to leisure services for young people in care and care leavers. This has been maintained in the proposals above. Adult social care provides support to adults with eligible needs who are care experienced and this is relevant to all the proposals above.

6.8 Consultation and Engagement

- 6.8.1 As a matter of public law, the duty to consult with regards to proposals to vary, reduce or withdraw services will arise in four 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
 - Where consultation is required to complete an equalities impact assessment.
- 6.8.2 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 considered 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
 - where relevant and appropriate, the consultation is clear on the reasons why and extent to which alternatives and discarded options have been discarded. The more intrusive the decision, the more likely it is to attract a higher level of procedural fairness.
- 6.8.3 The council will perform a budget consultation from December 2020 through to January 2021. This consultation will cover any proposals to increase council tax together with seeking views on the council's budget overall.
- 6.8.4 In terms of service specific consultations, the council has a duty to consult with residents and service users in a number of different situations including proposals to significantly vary, reduce or withdraw services. Consultation is also needed in other circumstances, for example to identify the impact of proposals or to assist with complying with the council's equality duties. Service specific consultations will take place where necessary in line with timescales for any changes to be implemented.
- 6.8.5 If when council sets the budget envelope some service specific consultations have not been completed then Council will allow a contingency so that decision makers may make alternative decisions should there be undesirable equalities impacts.

6.9 **Insight**

6.9.1 None in the context of this report

7. BACKGROUND PAPERS

7.1 Barnet Plan Policy and Resources Committee 8th February [Appendix A - Barnet Plan.pdf \(moderngov.co.uk\)](#)

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Adults & Safeguarding

Line Ref	Theme Committee	Title	Outcome	Description of saving	Consultation (How are we consulting on this proposal)	Impact on Service Delivery	Impact on Customer Satisfaction	Impact Assessment					Total savings (All years)
								Equalities Impact	2022/23	2023/24	2024/25	2025/26	
A&S8	Adults and Safeguarding	VAT efficient leisure contract (Income)	Healthy	Working with our leisure services provider to maximise the VAT efficiency of their contract and service, with the Council benefitting from the saving.	Service specific consultation not required	No resident or staff impact	No resident or staff impact	An equalities impact assessment is not required as there is no change to the service provided to residents and no impact on LBB staff.	(159)	(184)			(343)
A&S9	Adults and Safeguarding	Leisure Management Contract – Annual Payment (subject to market conditions) (Income)	Healthy	Over-delivery against projected income from the GLL leisure services contract	Service specific consultation not required	No resident or staff impact	No resident or staff impact	An equalities impact assessment is not required as there is no change to the service provided to residents and no impact on LBB staff.	(373)	(258)			(631)
A&S13	Adults and Safeguarding	Extra-Care Housing 2 (Stagg house)	Healthy	Extra Care development of fully integrated service for older people to rent, offering a wide range of services as an alternative to more expensive residential care. Proposed scheme of 50 units based with 50% high needs, 25% medium needs and 25% low needs. Saving is modelled on a 10K saving per person per year, based on the difference between the costs of residential care and extra care. Saving will be achieved if the scheme is targeted at those who would otherwise have their needs met by residential care.	Design principles agreed through consultation on Extra Care 1 (Ansell Court) will be applied in extra care 3, e.g. all flats fully wheelchair accessible. Service specific consultation will be undertaken if required.	This change will increase the range and choice of services available in Barnet.	Satisfaction should increase for users who should live more independent lives.	Equalities impact assessments will be undertaken as the scheme progresses and potential residents are identified.	(30)	(100)	(70)		(200)
A&S14	Adults and Safeguarding	Extra-Care Housing 3 (Cheshir House)	Healthy	Plans are in place to develop a third Extra-Care Housing scheme at Cheshir House, with 75 units. Current savings projections are based on conservative assumptions using evidence from the first scheme.	Design principles agreed through consultation on Extra Care 1 and 2 will be applied in extra care 3, e.g. all flats fully wheelchair accessible. Service specific consultation will be undertaken if required.	This change will increase the range and choice of services available in Barnet.	Satisfaction should increase for users who should live more independent lives.	Equalities impact assessments will be undertaken as the scheme progresses and potential residents are identified.		(50)	(210)		(260)
A&S21	Adults and Safeguarding	Strengths-based provision for older adults and people with physical disabilities	Healthy	This saving is a continuation and evolution of the previous savings in older adults. We will be continuing to apply a strengths-based approach to care reviews for older adults and people with physical disabilities, ensuring that social care needs are met in a way that maximises independence and utilises people's strengths and assets within their communities. In 2022/23, this saving includes potential savings from reviews of Direct Payment packages where needs can be met at a lower cost.	Individual consultation and engagement with individuals and their families as part of the care and support planning process. Individuals and families will continue to be at the centre of the process as any plans are developed and supported.	Review work will lead to changes in the way in which the needs of eligible individuals are met but eligible needs will continue to be met.	Moderate - likely to require changes to packages of care for some people. Eligible needs will still be met but some users and their families may have preferred to continue with original packages. Others may be more satisfied given increased levels of independence and meeting personal goals.	The equalities impact assessment has been refreshed and to continue to show positive impact on service users.	(200)				(200)
A&S22	Adults and Safeguarding	Progression for people with a learning disability	Healthy	This is a continuation of a saving based on the principle of 'progression', which is that each person with a learning disability has the potential to increase independence if they are given the appropriate care and support. There are several strands of work to achieve this saving, which will include work with people known to the adult social care learning disabilities service and those who are due to transition into that service at the age of 25 (from Families Services). These are: - Continuing to review support packages and develop support plans to increase independence, improve wellbeing and reduce costs. Some people will require less support in their current accommodation, while others may move to a different type of accommodation to promote independence and progression. There will also be a focus on supporting individuals to gain and maintain employment. - Expanding the Shared Lives (https://sharedlivesplus.org.uk/) service within LBB and increasing the number of referrals and placements - Working closely with providers to ensure that their models of support promote independence and progression - Utilising technology to promote independence and ensure appropriate levels of care and support. This will include the use of Electronic Call Monitoring (ECM) systems in Supported Living settings	Individual consultation and engagement with individuals and their families as part of the care and support planning process. Individuals and families will continue to be at the centre of the process as any plans are developed and supported.	Will lead to changes in the way in which the needs of eligible individuals are met but eligible needs will continue to be met.	Moderate - likely to require changes to packages of care. Eligible needs will still be met but some users and their families may prefer alternative care and this could lead to dissatisfaction. Others may be more satisfied given increased levels of independence and meeting personal goals.	The equalities impact assessment has been refreshed and continues to show positive impact	(500)	(75)	(75)		(650)
A&S27	Adults and Safeguarding	Increasing independence through reablement	Healthy	This is a continuation of the saving line to increase the number of these clients who receive enablement services, and ensure that we are maximising the impact of our enablement offer. A saving will be realised when the additional people receiving enablement services become more independent and require less ongoing care and support than they otherwise would have needed.	Individual consultation and engagement with individuals and their families as part of the care and support planning process. Individuals and families will continue to be at the centre of the process as any plans are developed and supported.	This change will increase the range and choice of services available in Barnet.	Satisfaction should increase for users who should live more independent lives.	An equalities impact assessment has been undertaken and shows an overall positive impact.	(200)				(200)
A&S31	Adults and Safeguarding	Increased use of prevention services	Healthy	The saving from 21/22 onwards is based on prevention co-ordinators working with more people at the first point of contact for adults requesting care and support (the 'Front Door'), to delay the development of care needs and ensure that preventative / alternative options to formal care are fully considered and utilised. Additional savings from 23/24 onwards are based on building and utilising additional capacity in the community to prevent, reduce, or delay people's development of care needs, building on social prescribing and local area co-ordination models. These will be subject to further assessment and evaluation prior to implementation.	Individual consultation and engagement with individuals and their families as part of the care and support planning process. Individuals and families will continue to be at the centre of the process as any plans are developed and supported.	This change will increase the range and choice of services available in Barnet.	Satisfaction should increase for people, who should live more independent lives. Wherever a person requires or requests a social care needs assessment, these will continue to be carried out in accordance with the Care Act (2014).	An equalities impact assessment has been undertaken and shows an overall positive impact		(200)	(200)		(400)
A&S32	Adults and Safeguarding	Increasing independence in Mental Health	Healthy	Following completion of transformation work in mental health services, working with people who use care and support services to be more independent and where appropriate to be supported with less intensive forms of support.	Individual consultation and engagement with individuals and their families as part of the care and support planning process. Individuals and families will continue to be at the centre of the process as any plans are developed and supported.	Will lead to changes in the way in which the needs of eligible individuals are met but eligible needs will continue to be met.	Moderate - likely to require changes to packages of care. Eligible needs will still be met but some users and their families may prefer alternative care and this could lead to dissatisfaction. Others may be more satisfied given increased levels of independence and meeting personal goals.	An equalities impact assessment has been undertaken and shows an overall positive impact.	(250)				(250)
A&S33	Adults and Safeguarding	Homecare costs	Healthy	Reductions in homecare costs through (a) working with providers to manage their costs, constraining or reducing prices the council pays and (b) commissioning of specific services for people require 24-hour or complex live-in care, meaning the council pays a lower cost while continuing to meet needs	Consultation not required as there will be no change to the services people receive.	None	None	An equalities impact assessment will be undertaken as part of recommissioning work for complex live-in care, however this is likely to have a positive impact as it will support the availability of services for people	(150)				(150)
A&S34	Adults and Safeguarding	Residential / nursing care costs	Healthy	Increasing the level of beds under 'block' contracts, especially for more complex needs including dementia care. This will reduce the amount paid per bed compared to 'spot' purchased provision, assuming block contracted beds are not void.	Consultation not required as there will be no change to the services people receive.	None	None	Not required	(100)				(100)
									(1,962)	(867)	(555)	0	(3,384)

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Fees and Charges 2022/23

Department: **Adult Social Care**
 Area: **Care and support**

Reference/ Area	Fee/Charge Title	Area	Description	Unit of Measure	Charges 2021/22	Charges 2022/23	Change from prior year (actual)	Change from prior year (%)	Comments	Additional detail for new charges / above inflation
Adult Social Care	Residential and Nursing Care (1) *	Social Care	Standard Charge persons aged 60+	Weekly	£152.20	£152.20	£0.00	0%	Are set at the same time as contribution/allowance updates, Jan/Feb each year	
Adult Social Care	Residential and Nursing Care (1) *	Social Care	Standard Charge persons aged 25-59	Weekly	£84.90	£84.90	£0.00	0%	Are set at the same time as contribution/allowance updates, Jan/Feb each year	
Adult Social Care	Residential and Nursing Care (1) *	Social Care	Standard Charge persons aged 18-25	Weekly	£69.40	£69.40	£0.00	0%	Are set at the same time as contribution/allowance updates, Jan/Feb each year	
Adult Social Care	Respite Care (All client groups) (2)	Social Care	Residential Respite (per week)	Weekly	£112.70	£112.70	£0.00	0%	Are set at the same time as contribution/allowance updates, Jan/Feb each year	
Adult Social Care	Fairer Contributions charge rate	Community Services	The rate charged for Community Services	Hourly	£18.39	£18.76	£0.37	2%	Increase in the maximum charge rate for community services to reflect the higher hourly rate the Council pays for delivery of homecare.	Current average homecare hourly rate is £18.76
Adult Social Care	Charges for arranging care for people above the capital/savings threshold		One-off arrangement fee for new care packages / placements	One-off	£300.00	£300.00	£0.00	0%	Charges for arranging care for people above the capital/savings threshold	
Adult Social Care	Other Community Support Services (4) ** Assessed in accordance with charging policy for community based services	Social Care	Community Support Services		Up to full cost		n/a	n/a		
Adult Social Care	Clients' access to files	Social Care	Statutory charge	One-off	£15.00	£15.00	£0.00	0%		
Adult Social Care	Charges for arranging care for people above capital/savings threshold	Social Care	Standard hourly brokerage charge	Hourly	£23.62	Not required as £300 covers				
Adult Social Care		Social Care	Standard hourly administrative charge	Hourly	£14.74	Not required as £300 covers				
Adult Social Care	Charges for Universal Deferred Payments	Social Care	Standard hourly administrative and processing charge	Hourly	£18.82	£18.82	£0.00	0.00%	The interest rate for deferred payments was set at 1% from 1 April 2021. It is proposed that the interest rate charges will be reviewed every three months. The power to vary and change interest rates for deferred payments will be delegated to the Council's section 151 officer.	
Adult Social Care	Charges for Universal Deferred Payments	Social Care	Standard legal hourly charge	Hourly	£52.29	£52.29	£0.00	0%		
Adult Social Care	Charges for Universal Deferred Payments	Social Care	Non- standard legal hourly charge e.g. debt recovery	Hourly	£71.59	£71.59	£0.00	0%		
Adult Social Care	Charges for Universal Deferred Payments	Social Care	Land Registry Fees	One-off	£26.00	£26.00	£0.00	0%		
Adult Social Care	Charges for Universal Deferred Payments	Social Care	Property Valuation Fees	One-off	£250.00	£250.00	£0.00	0%		

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Fees and Charges 2022/23

Department:
Area:

Leisure
Sport & Physical Activity

Activities	2021/22 (Current)						2022/23 (Proposed)																	
	Adult Non Member	FAB Card Adult	FAB Card Adult Concession	Jnr Non Mem	FAB Card Jnr	FAB Card Jnr Concession	Adult Non Member	£ Increase	% Increase	FAB Card Adult	£ Increase	% Increase	FAB Card Adult Con	£ Increase	% Increase	Jnr Non Mem	£ Increase	% Increase	FAB Card Jnr	£ Increase	% Increase	FAB Card Jnr Con	£ Increase	% Increase
Swimming																								
Casual Swim - all sessions	£6.90	£4.85	£2.98	£4.25	£2.87	£2.15	£7.12	£0.22	3.2%	£5.01	£0.16	3.2%	£3.08	£0.10	3.2%	£4.39	£0.14	3.2%	£2.96	£0.09	3.2%	£2.22	£0.07	3.2%
Tots Water World	£8.20	£5.60	£4.05				£8.46	£0.26	3.2%	£5.78	£0.18	3.2%	£4.18	£0.13	3.2%									
Health & Fitness																								
Fitness Induction - (All Centres)		£34.15	£17.80		£17.85	£12.70				£35.24	£1.09	3.2%	£18.37	£0.57	3.2%				£18.42	£0.57	3.2%	£13.11	£0.41	3.2%
Fitness induction and Programme - (All Centres)		£41.90	£21.85		£21.00	£14.95			£43.24	£1.34	3.2%	£22.55	£0.70	3.2%				£21.67	£0.67	3.2%	£15.43	£0.48	3.2%	
Casual Gym (All Centres)	£12.00	£9.15	£4.65		£4.65	£3.24	£12.00	£0.38	3.2%	£9.44	£0.29	3.2%	£4.80	£0.15	3.2%				£4.80	£0.15	3.2%	£3.34	£0.10	3.2%
Group Exercise Class (All Centres)	£12.70	£9.05	£4.65				£13.11	£0.41	3.2%	£9.34	£0.29	3.2%	£4.80	£0.15	3.2%									
Water Aerobics Class (1 hr) all centres	£10.55	£7.35	£4.50				£10.89	£0.34	3.2%	£7.59	£0.24	3.2%	£4.64	£0.14	3.2%									
Racket Sports																								
Table Tennis - per table	£12.50	£8.70	£6.40	£8.00	£6.40	£3.95	£12.90	£0.40	3.2%	£8.98	£0.28	3.2%	£6.60	£0.20	3.2%	£8.26	£0.26	3.2%	£6.60	£0.20	3.2%	£4.08	£0.13	3.2%
Badminton - per court	£18.70	£12.90	£9.90	£9.85	£6.65	£4.85	£19.30	£0.60	3.2%	£13.31	£0.41	3.2%	£10.22	£0.32	3.2%	£10.17	£0.32	3.2%	£6.86	£0.21	3.2%	£5.01	£0.16	3.2%
Tennis - 1 hour per court (Burnt Oak & New Barnet)	£9.60	£6.45	£4.70	£4.85	£3.29	£2.30	£9.91	£0.31	3.2%	£6.66	£0.21	3.2%	£4.85	£0.15	3.2%	£5.01	£0.16	3.2%	£3.40	£0.11	3.2%	£2.37	£0.07	3.2%
Multi Use Games Area																								
MUGA - 1 hour (Burnt Oak)	£9.60	£6.45	£4.65	£4.80	£3.29	£2.28	£9.91	£0.15	3.2%	£6.66	£0.10	3.2%	£4.80	£0.15	3.2%	£4.95	£0.15	3.2%	£3.40	£0.05	3.2%	£2.35	£0.07	3.2%
Ball Sports (Sports Hall Hire)																								
Football / Full Hall (Hendon & Copthall)	£79.50						£81.09	£1.59	2.0%															
Football / Full Hall (Burnt Oak)	£58.90						£60.08	£1.18	2.0%															
Basketball / Half Hall (Hendon & Copthall)	£31.90						£32.54	£0.64	2.0%															
Basketball / Half Hall (Burnt Oak)	£28.70						£29.27	£0.57	2.0%															
Courses																								
Gymnastics 1 hour - Hendon only					£8.20	£5.70													£8.46	£0.26	3.2%	£5.88	£0.18	3.2%
Gymnastics 1 hour					£6.65	£5.00													£6.86	£0.21	3.2%	£5.16	£0.16	3.2%
Football 1 hour					£7.05	£5.10													£7.28	£0.23	3.2%	£5.26	£0.16	3.2%
Badminton 1 hour					£7.05	£5.10													£7.28	£0.23	3.2%	£5.26	£0.16	3.2%
Trampoline 1 hour - Hendon only					£8.20	£5.70													£8.46	£0.26	3.2%	£5.88	£0.18	3.2%
Tennis 1 hour					£8.95	£6.25													£9.24	£0.29	3.2%	£6.45	£0.20	3.2%
Pilates 1 hour		£9.05	£6.90						£9.34	£0.29	3.2%	£7.12	£0.22	3.2%					£9.00					
Swimming 30 mins		£7.40	£5.20		£7.35	£5.15			£7.64	£0.24	3.2%	£5.37	£0.17	3.2%					£7.59	£0.24	3.2%	£5.31	£0.16	3.2%
Swimming 45 mins		£7.70	£5.40		£7.65	£5.20			£7.95	£0.25	3.2%	£5.57	£0.17	3.2%					£7.89	£0.24	3.2%	£5.37	£0.17	3.2%
Drop In Sessions																								
Gymnastics Session - Adults	£14.40	£9.85	£7.15				£14.86	£0.46	3.2%	£10.17	£0.32	3.2%	£7.38	£0.23	3.2%									
Burnt Oak - Floodlit artificial (5-a-side) 1hr		£47.15	£23.60						£48.09	£0.94	2.0%	£24.07	£0.47	2.0%										
Burnt Oak - Floodlit artificial (7-a-side) 1hr		£68.05	£39.30						£69.41	£1.36	2.0%	£40.09	£0.79	2.0%										

Burnt Oak - Grass Pitch (junior) 7-a-side		£30.35					
Burnt Oak - Grass Pitch (junior) 11-a-side		£39.45					
Toddlers' World sibling price at Burnt Oak					£2.37	£2.37	£2.37
Toddlers' World standard price at Burnt Oak (first child)					£6.05	£4.30	£2.98
Toddlers World (Hendon)					£6.20	£4.45	£3.14
Birthday Parties							
Burnt Oak (Soft Play)		£182.00					
Cophthall (Soft Play)		£182.00					
Cophthall (Pool)		£178.00					
New Barnet (Soft Play)		£182.00					
New Barnet (Pool)		£178.00					
Finchley Lido (Pool)		£178.00					
Badminton Club - Adult							
Burnt Oak		£5.50	£3.59	£1.67			
Creche							
Burnt Oak			£4.35	£3.54			
Sauna							
Finchley Lido		£12.10	£8.35	£4.40			
Barnet Training Scheme							
Seniors		£100.00					
Age Group				£90.00			
Junior Age				£75.00			
Preliminary				£62.00			
Sharks				£56.00			
Senior Club		£56.00					
Masters		£68.00					
Dolphins				£47.00			
Dolphins Junior Club				£47.00			
Finchley / New Barnet				£36.00			

	0-2	2yr old fee paying	2yr old free entitlement	3yr old free entitlement	3yr old full fee paying
Nursery					
Half a day	£37.05	£34.95			£32.95
Full day	£68.00	£65.95			£63.90
Additional hours to free entitlement (per hour)			£6.05	£5.55	

	£ Increase	% Increase	2yr old fee paying	£ Increase	% Increase	2yr old free entitlement	£ Increase	% Increase	3yr old free entitlement	£ Increase	% Increase	3yr old full fee paying	£ Increase	% Increase
0-2														
Half a day	£38.01	£0.96	2.6%	£35.86	£0.91	2.6%						£33.81	£0.86	2.6%
Full day	£69.77	£1.77	2.6%	£67.66	£1.71	2.6%						£65.56	£1.66	2.6%
Additional hours to free entitlement (per hour)						£6.21	£0.16	2.6%	£5.69	£0.14	2.6%			



AGENDA ITEM 8

Adults and Safeguarding Committee

November 2021

Title	Adult Social Care Annual Complaints Report – 2020/21
Report of	Chairman of the Adults and Safeguarding Committee
Wards	All
Status	Public
Urgent	No
Key	No
Enclosures	Appendix: Adult Social Care Annual Complaints Report 2020-2021
Officer Contact Details	Appy Reddy, Head of Performance & Improvement, appy.reddy@barnet.gov.uk, 020 8359 3127

Summary

The production of an annual complaints report is a statutory requirement for Councils with adult social care responsibilities. The report provides an overview of the management of and performance in responding to adult social care complaints.

Effective complaints management is an important element in maintaining the Council's reputation. Complaints are a valuable tool in helping to understand resident expectations of the services they receive. As well as providing a meaningful response to all complainants, the outcomes of investigations are used by the council to improve services and resident experience.

Officers Recommendations

1. That the Adults and Safeguarding Committee notes the Annual Complaints Report 2020-2021 and approves the report for publication.

1. WHY THIS REPORT IS NEEDED

1.1 This report is produced in accordance with the requirements of the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 (hereby referred to as 'the Regulations'). Under those regulations, Barnet Council is required to report annually to the relevant Council committee on adult social care complaints.

1.2 The Council is required to operate a separate statutory complaints and representations procedure for adult social care under these regulations. Any complaint which does not fall under these requirements is considered under the Council's corporate complaints procedure.

1.3 Learning from complaints is a valuable tool in helping to understand residents' and customers' expectations of service delivery and plays a key part in identifying service improvements in adult social care.

1.4 The report provides information on complaints and compliments for Barnet Council's adult social care services for the period 1 April 2020 to 31 March 2021. The report considers complaints dealt with through both the Statutory Adult Social Care and Corporate Complaints procedures.

1.5 Between 1 April 2020 and 31 March 2021, the following were received from Individuals, carers and/or their representatives:

- 224 compliments
- 51 statutory complaints
- 3 corporate complaints
- 12 Local Government Ombudsman enquiries

1.6 The main themes from the complaints were:

- Decision.
- Conduct/ behaviour
- Quality

1.7 Of the 51 statutory complaints, 39 resulted in an outcome. 12 were withdrawn.

- 32 (82%) were not upheld
- 1 (3%) was upheld

- 6 (15%) were partially upheld

1.8 Three complaints were managed under the council's corporate complaints procedure. These all related to back office functions of the service.

2. REASONS FOR RECOMMENDATIONS

2.1 The publication of this report is a statutory duty.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

3.1 None. It is a statutory requirement to publish a Complaints Report for adult social care.

4. POST DECISION IMPLEMENTATION

4.1 The Annual Complaints Report 2020-2021 is a public document and will be made available through the Council website and the staff intranet.

4.2 The Annual Complaints Report includes examples of 'lessons learnt'. These are actions for improvement identified as the result of complaints investigations. Implementation of these actions will continue during 2021/22.

5. IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

5.1.1 The Council's corporate plan (2021-25) sets out that providing excellent customer service remains a key priority for the council. Efficiently managing, and learning from complaints is an essential part of this as it supports our service improvement and achieving the best outcomes we can for residents.

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

5.2.1 The work carried out in responding to comments, compliments and complaints is contained within the current staffing establishment and budget.

5.3 Social Value

5.3.1 This paper does not relate to a procurement exercise.

5.4 Legal and Constitutional References

5.4.1 The Annual Complaints Report 2020-2021 complies with the statutory requirement to produce an annual report of Adult Social Care complaints in accordance with the Local Authority Social Services and National Health Services Complaints (England) Regulations

2009, and the Local Authority Social Services and National Health Service Complaints (England) (Amendment) Regulations 2009 (the Regulations).

5.4.2 The Regulations identified in 5.4.1 above also require the Council to operate a statutory complaints procedure which complies with the provisions.

5.4.3 The Council Constitution, Article 7 states that the Adults and Safeguarding Committee is responsible for those powers, duties and functions of the Council in relation to adult social care including the following specific functions:

- Responsibility for all matters relating to vulnerable adults, adult social care and leisure services
- To receive reports on relevant performance information and risk on the services under the remit of the Committee.

5.5 Risk Management

5.5.1 The publication of the report is a statutory requirement, the impact of not publishing it would be a breach of the regulations.

5.5.2 Complaints are an essential means by which the Council assures the quality of Adult Social Care provision, and compliance with statutory duties. By listening to complaints and taking improvement action, the Council minimises the risk of non-compliance and ensures improvements to customer satisfaction.

5.5.3 Where complaints are received and highlight any safeguarding issues, these are dealt with under the agreed Pan-London Multi-Agency Adult Safeguarding Policy and Procedures.

5.6 Equalities and Diversity

5.6.1 The Complaints Report supports the Council's duty under the Equality Act 2010, under which the Council and all other organisations exercising public functions on its behalf must have due regard to the need to eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act; advance equality of opportunity between those with a protected characteristic and those without; promote good relations between those with a protected characteristic and those without. The relevant protected characteristics are age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, sexual orientation. It also covers marriage and civil partnership with regards to eliminating discrimination.

5.6.2 Adult social care helps people who are not able to make representations and complaints in their own right to do so through the use of advocacy services such as POhWER, Barnet Community Advice Service (CAS), and Mind in Barnet.

5.6.3 Learning from complaints also assists the Council in fulfilling its statutory duty under s149 of the Equality Act.

5.7 **Corporate Parenting**

5.7.1 In line with the Children and Social Work Act 2017, the Council has a duty to consider Corporate Parenting Principles in all decision making. Young people who have received care and support as children may go on to receive support from Adult Social Care Services. Efficient management of complaints, and service improvements identified as a result will benefit this group of residents.

5.8 **Consultation and Engagement**

5.8.1 Learning from complaints can assist the Council in identifying changes to services, local policy and procedure. Any changes will be subject to appropriate consultation with relevant groups.

5.9 **Insight**

5.9.1 Learning from complaints provides insight into service improvement opportunities, complementing quantitative and statistical data on service performance.

6. **BACKGROUND PAPERS**

6.1 None.

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Barnet Council

Adult Social Care

Annual Complaints Report

2020-2021

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1. Introduction

Barnet Council's adult social care service, part of the Adults and Health directorate, provides statutory social care services including individual care and support; safeguarding; information and advice; preventative services; assessments under the Mental Health Act (MHA 1983, amended 2007) and the Mental Capacity Act (MCA 2005). Social Care Direct acts as the front door for adult social care enquiries.

Comments, complaints and compliments are welcomed by the Service and are seen as a tool to help improve and develop services and practice. They provide the opportunity to learn from mistakes and to put things right for an individual when they have gone wrong.

Barnet Council is required, under statutory regulations, to report annually to the relevant Council Committee on adult social care complaints.

This report provides information about complaints for Barnet's Adult Social Care Service for the period 1 April 2020 to 31 March 2021. The report considers complaints dealt with through both the Statutory Adult Social Care and Corporate Complaints Procedures where these relate to Adult Social Care.

2. Adult Social Care Statutory Complaints Procedure

The Council is required to operate a separate Statutory Complaints and Representations procedure for adult social care, in accordance with the Local Authority Social Services and National Health Services Complaints (England) Regulations 2009 and the Local Authority Social Services and National Health Service Complaints (England) (Amendment) Regulations 2009 (hereby referred to as 'the Regulations'). Any complaint which does not fall under these requirements is considered under the Council's Corporate Complaints Procedure.

All complainants who have exhausted the Council's Statutory Complaints Procedure retain the right to approach the Local Government and Social Care Ombudsman (LGSCO). The LGSCO is impartial and independent and act as the final stage for complaints about the Council, Social Care Providers, Care Homes and Home Care Agencies.

3. Accessing the complaints procedure

The service continually seeks to encourage people who use social care, and their carers, to provide feedback (positive or negative) on the services and customer care that they have received.

The process is publicised through the following means:

- The Comments, Compliments and Complaints booklets are widely distributed to public offices in the Borough.
- The Easy Read version of the booklet 'Comments, Compliments and Complaints' is also widely distributed. This is aimed at people with Learning Disabilities and others who would find a simplified version easier to understand.
- Information about making a comment, compliment or complaint in relation to Adult Social Care is published on the council website. This route became even more important during the pandemic. The information can be found at www.barnet.gov.uk/comments-and-complaints-adult-social-care.
- Individual staff and managers make residents, people who draw on social care support, their family carers and relevant organisations aware of the procedures during their interactions with them, as appropriate.
- Managers are asked to feature compliments and complaints as a standing item in their

team meetings and briefing sessions.

- Historic complaints reports are published on Open Barnet the council's data portal, an important tool in pushing forward Barnet's Transparency Agenda.
- Compliments are shared with staff and promoted internally through the staff newsletter, senior manager briefings and staff awards.
- Information about complaints and the learning from them is shared with the Management Team and with staff, to improve practice.

The council has commissioned Barnet Citizens' Advice Bureau as the local lead provider for specialist information, advice and advocacy support. This ensures that the Council has a dedicated support service in place for people who require access to independent information, advice and advocacy. Staff are trained in accordance with the Care Act 2014 and staff understand their statutory duties in relation to advocacy.

4. Overview

The following complaints and compliments were received into Adult Social Care from individuals, carers and/or their representatives:

- 224 compliments
- 51 statutory complaints
- 3 corporate complaints
- 12 Local Government Ombudsman enquiries

Of the 51 statutory complaints, 39 resulted in an outcome, 12 were withdrawn. Of the 39:

- 32 (82%) were not upheld
- 1 (3%) was upheld
- 6 (15%) were partially upheld

The main themes of the complaints were:

- Decision – disagreement with the outcome of a care assessment; or with the outcome of a financial assessment under the charging policy; or a decision made as a result of a statutory duty or national policy.
- Conduct – behaviour, communication or conduct of staff employed by care providers or by the council.
- Quality - relates to the quality of service from care homes, home care agencies or care assessments.

Common improvement themes were:

- Staff – formal reflection and training
- Care Providers – working with a provider to improve working practices, policies and contract compliance
- Procedures – updates and amendments to, or staff reiteration of procedures

5. Compliments

Compliments are just as useful as complaints in helping to improve service. By having people tell the Council when things are done well, the Council can make sure that it continues to recognise and build on its strengths. It is also important to recognise the good work that is being delivered by the directorate and provides balance within the complaints annual report.

The number of compliments received in 2020-21 are an improvement on 2019-20 figures.

224 compliments were received in 2020/21. The table below provides an overview of compliments by service area:

<i>Service Area</i>	2018-19	2019-20	2020-21
Localities (Older People & Physical Disabilities)	29	42	43
Integrated Care Learning Disabilities	23	7	6
Integrated Care Quality	13	7	19
Assessment & Prevention	23	37	66
Hospitals & Health	9	14	9
Mental Health	131	82	68
Other Teams: Performance & Systems, Argenti	17	10	13
	245	199	224

Many individuals who compliment staff and teams provide verbal feedback directly to individuals via face to face conversations or by phone; we do not reflect these in our annual figures.

The compliments received in the period were varied and ranged from individual messages of gratitude to specific members of staff and thank you cards to whole teams for their work.

The mental health service includes compliments received by the Network, the council's mental health enablement service. This service provides therapeutic group programmes and individual direct work for people experiencing mental health issues. The figures include compliments received via customer feedback/enablement group questionnaires. The reduction in compliments received is due to the impact of the pandemic, as the Network had to significantly reduce levels of activity.



Examples of compliments received in 2020-2021

“ As a family, please let it be noted we felt you played such an important role in making xxx final few months so much better than it could have been. You are a credit to the social work profession, but moreover a credit as a person. Thank you truly so very much” *Compliment regarding a member of MASH, Assessment and Prevention Service.*

“ Thank you so much for your unfailing kindness xxx. You have organised yyy’s care and needs package with sensitivity and understanding. All of my dealings with you and your department have been excellent” *Compliment regarding a member of the Hospitals Discharge Team*

“ I just want to say how grateful I am for your help and advice in supporting myself and my Mum whilst her ability to care for herself declines (with her dementia and decreasing physical abilities). You are so professional and thank you for listening to me. Thank you, Thank you” *Compliment regarding a member of the Urgent Response Team*

“ Very thankful for all the support that xxx has received, everybody has been wonderful - helpful and nice to speak with - "which makes such a difference". Now joining in with the Thursday national clapping for carers and frontline staff.” *Compliment regarding a member of the Care Quality Team*

“Thank you for all your help in sorting out funding for a home carer for my mother who suffers from Vascular Dementia. In particular to xxx for her genuine care, understanding & assistance on behalf of my 98 year old mother. A delightful person and extremely efficient in her job”. *Compliment regarding a member of Localities*

“how grateful we are to xxx for the empathic and professional care xxx has given yyy since she was accepted to the Learning Disability Team. xxx's care of yyy during Lockdown - phone calls checking how she is, together with yyy’s pleasure and looking forward to the contact, was also a great support to us as yyy’s parents. At the recent Review meeting xxx behaved with professional wisdom trying to keep yyy as the focus of the Review, to improve her care package and support plan”. *Compliment relating to the Learning Disabilities Service*

“Please pass on our appreciation to the staff at LBB social services for the excellent support they have given our 96 yrs. old dementia stricken mum during these difficult times Thanks to all at LBB.”. *Compliment relating to Mental Health Services*

“You gave me more than one thing, options, what was best for me, you listened, I felt listened to”. *Compliment for the Network*

“Thanks to such an amazing member of OT Team- Made a huge difference in mum's life - when I gave up hope she fought mum’s corner with support plans- she works unconditionally and selflessly” *Compliment for OT Team*

“I am extremely grateful for the support given. What would we do without you all dedicating yourselves to help us? You take care and be safe” *Compliment for Prevention and Wellbeing Team*

Benchmarking data

The following benchmarking data compares the number of compliments received in 2019-20 against a selection of our nearest statistical neighbours¹:

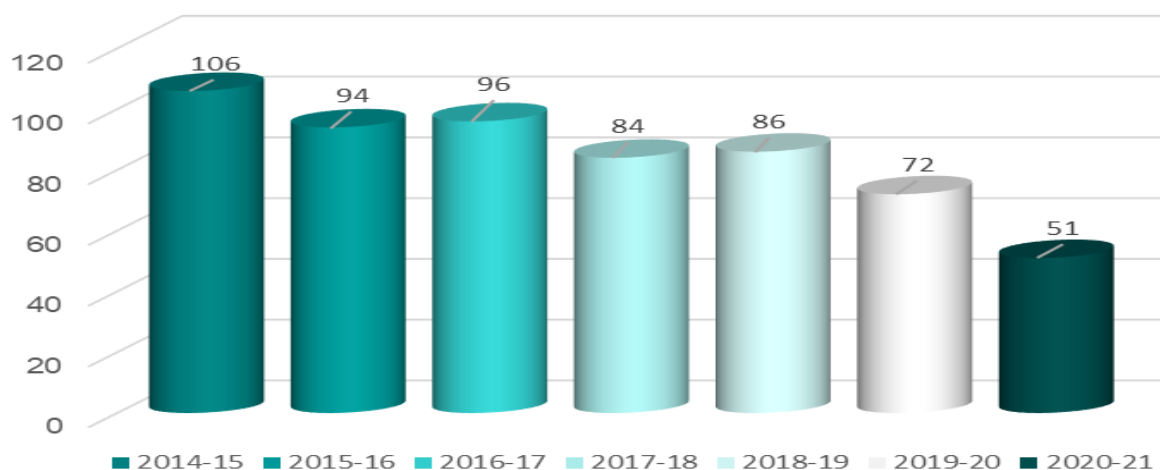
Borough	Compliments received	Per 100k population:²
Barnet	119	39.4
Bexley	56	29.3
Brent	33	13.1

6. Complaints

6.1 Overview of performance

The number of statutory complaints for ASC have steadily decreased, whilst the number of Corporate Complaints remains fairly consistent with between 1-3 complaints a year. In 2020/21 complaint numbers have fallen by 29% compared to the same period in 2019-20.

Statutory complaint figure comparison



From 1 April 2020 to 31 March 2021, Adult Social Care received a total of 54 complaints of which 51 were statutory complaints and 3 corporate complaint.

To give our complaint figures some context, there were 5,865 new requests for services in 2020/21 – 2,346 resulting from a Hospital discharge. 5,342 people were receiving a long-term service (4,037 receiving a community service & 1,305 receiving residential/nursing services).

The complaint numbers equate to 1% of ASC service users or someone acting on their behalf, raising a complaint in 2020-21. This percentage reduces to under 1% if we take into consideration all contacts into the service.

¹ Based on members of the group of nearest statistical neighbours identified by CIPFA

² Population data based on the 18+ population according to ONS mid-year estimates for 2019.

The chart above shows complaints received and dealt with under the statutory procedure and provides comparison over the years. For transparency purposes, it should be noted that the service also receives some initial complaints which are resolved within 24 hours to the resident/person's satisfaction. Under the statutory procedure guidelines, these do not require logging under the statutory procedure. 26 were received in 2019-20, 28 in 2020-21.

6.2 Complaints received by category

The 51 statutory complaints were managed in line with the Statutory Social Care Complaints Procedure. Three complaints were dealt with under the council's Corporate complaints procedure. These were all financial complaints received from companies.

Of the 51 Statutory Complaints received:

- 36 were considered as straightforward complaints
- 3 were considered as serious and/or complex complaints
- 12 were withdrawn

Category	2018 - 2019	%	2019 - 2020	%	2020-2021	%
Statutory Straightforward (Low/Moderate risk)	71	83%	50	69%	36	67%
Statutory Serious and/or Complex (High risk)	6	7%	12	17%	3	6%
Withdrawn	6	7%	9	13%	12	22%
Corporate	3	3%	1	1%	3	6%
Total complaints	86	100%	72	100%	54	100%

6.3 Statutory Complaint outcomes

Of the 39 complaints with an outcome:

- 32 were not upheld
- 6 were partially upheld
- 1 was upheld

6.4 Statutory Complaints by Service Area

The table below provides a breakdown of statutory complaints figures for complaints with an outcome:

Service Area	2019-20	2020-21	Number of complaints DOT	No. of cases upheld (2019-20)	No. of cases upheld (2020-21)	No. of cases partially upheld (2019-20)	No. of cases partially upheld (2020-21)
Localities (Older People & Physical Disabilities)	10	5	◀	2 (20%)	1 (20%)	1 (10%)	0 (0%)
Assessment & Prevention	5	5	-	1 (20%)	0 (0%)	2 (40%)	0 (0%)
Integrated Learning Disabilities	17	4	◀	5 (29%)	0 (0%)	6 (35%)	1 (25%)
Mental Health	6	4	◀	0 (0%)	0 (0%)	0 (0%)	1 (25%)
Customer Financial Affairs	4	4	-	1 (25%)	0 (0%)	2 (50%)	0 (0%)
Integrated Care Quality	14	12	◀	6 (43%)	0 (0%)	1 (7%)	2 (15%)
Hospitals & Health Partnerships	6	5	◀	1 (17%)	0 (0%)	4 (67%)	2 (40%)

In 2019-20, 63 corporate and statutory investigations were conducted, this number decreased to 54 in 2020-21. It follows that 2020-21 also witnessed a reduction in the number of upheld or partially upheld cases in all service areas.

In Localities, three complaints were withdrawn which related to care assessment delays during the Covid-19 lockdowns. Improvements made included all care teams quickly embracing new ways of working with technology to conduct assessments utilising platforms such as MS Teams. Three cases related to assessment requests which were not upheld and the one upheld complaint related to an assessment for a service user placed outside of Barnet. The Localities complaints regarding care assessment disagreements were not upheld, this evidenced that the assessments being conducted met people's statutory needs and our duties under the Care Act.

In the Assessment & Prevention Service, two cases were withdrawn and cases investigated related to care assessment disagreements in relation to a decision resulting from a statutory duty in relation to national care legislation, regulations or policy.

In Learning Disabilities, three complaints related to supported living arrangements, one of these cases was partially upheld, due to constraints imposed by the pandemic. The fourth complaint, that related to the quality of service provided, resulted in a compliment from the complainant, who expressed a desire to acknowledge and thank all staff involved in resolving the concerns raised.

In Mental Health, two complaints related to assessment disagreements the other complaints received were diverse in content.

Complaint figures have remained static for Customer Financial Affairs. One case required legal advice, another case required confirmation back from the Court of Protection, one was a complex deputyship issue and the fourth was an assessment disagreement.

Eight of the complaints received into the Integrated Care Quality service concerned the quality of service received from care providers and care homes. As these relate to the service provided by an external organisation, these are passed to providers for initial investigation. If the outcome of their investigation is not satisfactory to the complainant or to the Care Quality Service, Adults Social Care may take further action.

In Hospitals and Health, two complaints related to the discharge process, both cases were not upheld: two related to a perceived/experienced lack of communication, alongside one complaint relating to a delay in the care assessment process.

6.5 Complaints by category

The table below identifies complaints by subject and the investigation outcome

	Category	Upheld	Partially upheld	Not upheld	Total
Decision	Care Assessment - Assessment disagreement (including unhappy with decision)	0	1	4	5
	Care Home - Assessment disagreement (including unhappy with decision)	0	0	1	1
	Finance - Assessment disagreement (including unhappy with decision)	0	0	4	4
	Total	0	1	9	10
Conduct	Staff Conduct - Conduct of council employed staff (attitude/behaviour)	0	0	0	0
	Care Agency - Conduct of staff (attitude/behaviour)	0	1	3	4
	Care Home - Conduct of staff (attitude/behaviour)	0	0	3	3
	Total	0	1	6	7
Quality	Care Agency - Quality of service	0	0	1	1
	Care Assessment - Quality of service	0	1	0	1
	Care Home - Quality of service	0	0	1	1
	Hospitals - Quality of service	0	0	0	0
	Care Assessment (process)	0	0	2	2
	Care agency - Assessment request (process)	0	0	1	1
	Finance - Quality of service	0	0	1	1
Total	0	1	6	7	
Timeliness & Delays	Care Assessment - Assessment delay (including delay in making a decision)	1	1	1	3
	Financial assessment/charging – Timeliness	0	0	0	0
	Total	1	1	1	3
Communication	Care Assessment - Lack of communication	0	1	0	1
	Finance - Lack of communication	0	0	0	0
	Care Home - Lack of communication	0	0	2	2
	Hospitals – Lack of Communication	0	0	1	1
	Total	0	1	3	4
	Hospitals – Discharge Process	0	0	2	2
	Other	0	1	5	6
	Total	1	6	32	39

Decisions

The largest number of complaints received were due to dissatisfaction with a decision reached by the Council, for example: the outcome of a care or financial assessment; disagreement in relation to a financial/charging decision; or policy decisions. Of these only two complaints were partially upheld as the complaint results from a statutory duty in relation to financial charging or national care legislation, regulations or policy, where the council cannot influence the outcome.

Where complainants are unhappy with the outcome of an assessment, the council can offer a reassessment or take into consideration changes of circumstances where relevant; these types of changes contribute to a number of the upheld and partially upheld complaints.

Conduct & Quality

These complaints are in regard to services provided directly from Barnet or relate to the quality or conduct of staff employed by providers. The partially upheld complaint regarding Barnet's services were addressed through the Learning from Complaints procedure and through line management, with resulting changes to policy or procedure monitored by senior management.

The partially upheld case was an issue concerning provider services. This was addressed through contract management procedures, with lessons learned fed into the work of the Integrated Care Quality team to shape the work it does with providers, thus improving the quality of provision across the social care market.

Delays & Timeliness

This category relates to the time taken to carry out an assessment or provide a service. Waiting times for assessments and financial reviews are the main cause of complaints relating to timeliness.

The Council always seeks to avoid delays in assessing or reviewing clients, but as social care is a demand led service and due to the impact of Covid this was not always possible. Adult Social Care targets resources to ensure the most urgent cases and people with the highest levels of need are prioritised. However, any delay may understandably still be dissatisfying for members of the public whose assessments have not been prioritised.

Communication

Four complaints relating to poor communication were received in 2020-21. One complaint was partially upheld, where the team in question failed to communicate to expected standards.

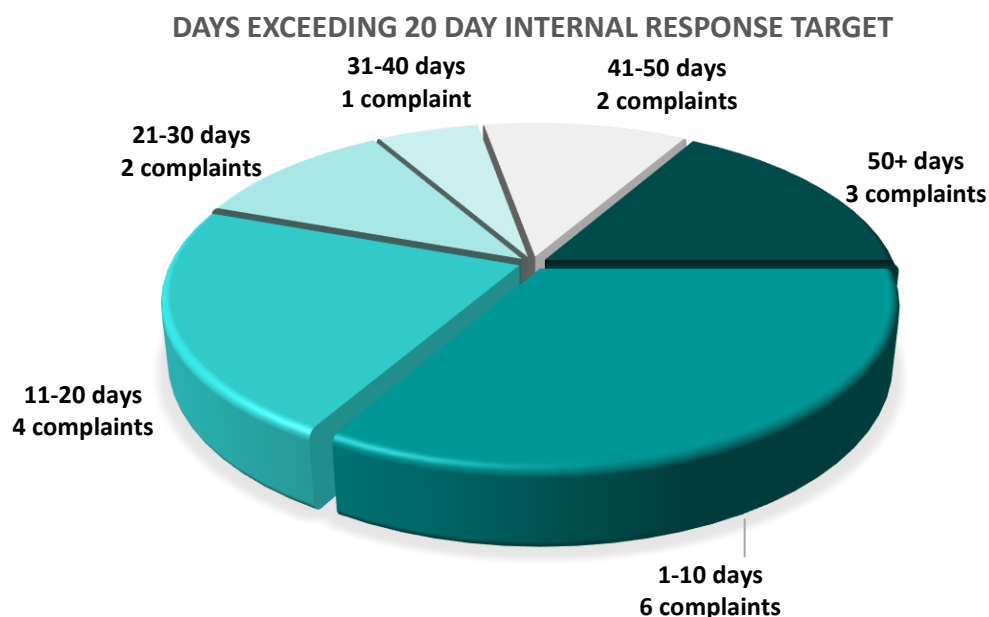
6.6 Timeliness of responses to statutory complaints within the internal 20 working day target

It is important to note that the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009 Statutory Complaints guidance allows six months (commencing on the day on which the complaint was received, or such longer period allowed if agreed by all concerned) for the resolution of Social Care statutory complaints. Adult Social Care are committed to help resolve as many complaints as speedily and efficiently as possible.

The Service decided to maintain an internal target of 20 working days for straightforward complaints and 25 working days for more complex or serious complaints (or within an extended period of up to 65 working days) throughout the pandemic period. However, all complainants were advised in their acknowledgement that due to the pandemic (COVID-19) the council's response to their complaint may be delayed due to urgent operational matters

taking priority.

It is also important to note, that statutory complaints are managed through a single stage process, if the complainant is not satisfied with the initial response to their complaint, they have the opportunity to request further information or a further investigation which may prolong the overall outcome of a complaint.



The complaints process is intended to be resolution focused and offer complainants the option of discussing their concerns in face-to-face meetings, family meetings and mediation where appropriate.

When a complaint was likely to exceed our initial target response date, we endeavour to keep complainants informed of their complaint progress throughout the process.

The three cases in the 50+ days range were complex investigations where the depth of the investigation and the time needed to investigate were proportionate to the seriousness of the complaint; examples include where legal advice on a case was required, changes in circumstances/ongoing developments impacting an investigation and one case that was substantially delayed due to a response being required from a third party.

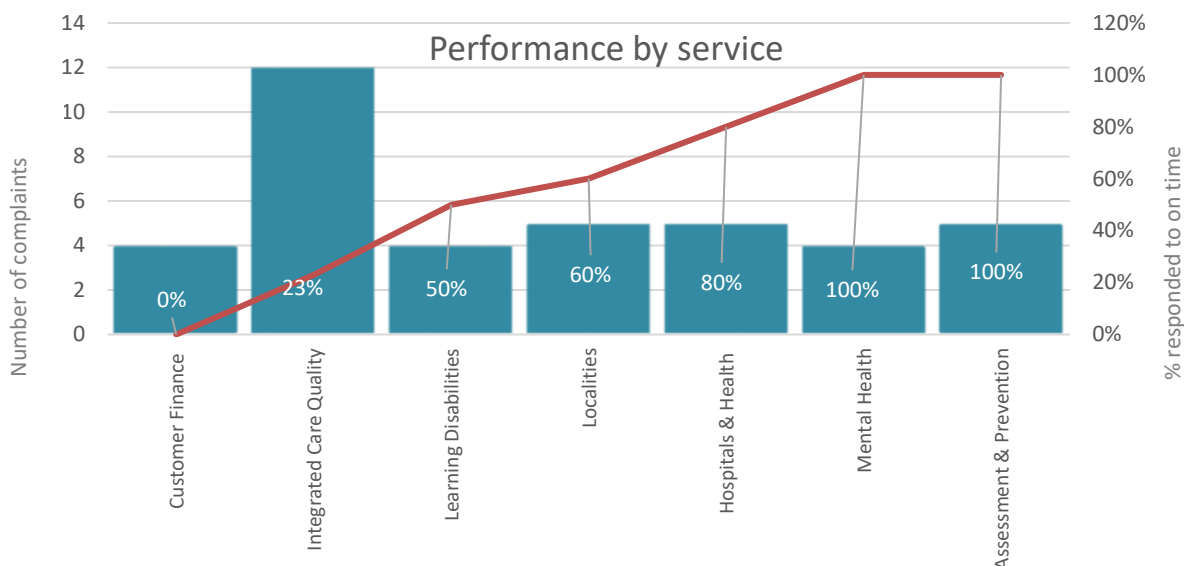
The five cases in the 21-51 day categories were cases requiring a joint investigation with either care providers or other organisations such as the NHS. Due to the pandemic, it was critical that operational priorities that ensured the wellbeing and safety of our residents took precedence, so a small number of responses were delayed due to either the council or providers.

Co-ordination of responses with the NHS means that the Council may be obliged to work to the Statutory Social Care and National Health Service timescales, which allows a six-month timeframe for complaints to be investigated and responded to.

Complaints about providers being received through the complaints process, must be either signposted to the provider's internal complaints process or managed through our internal procedures on behalf of the complainant. We do ask partner organisations to work within our timeframes, however this is a request and is not enforceable.

The below chart provides an overview of performance by service area.

Represented as % of cases responded to on time



The Complaints & Information Management Team continued to work closely with service areas to improve performance; by meeting with senior managers, producing weekly open case reports and providing complaint analysis reports on a monthly basis.

Adult Social Care Statutory Complaints – Benchmarking

The following benchmarking data has been collected to compare the number of statutory complaints received against figures for a selection of our nearest statistical neighbours in Population size.

Borough	Statutory complaints received in 2019-20	Per 100k population:
Barnet	39	12.9
Bexley	59	30.9
Brent	81	32.1
Bromley	117	45.5

7. Learning from Complaints

Learning from our complaints provides an opportunity to gain wider learning, to ensure opportunities for improvement are realised and that issues can be prevented, where possible, before they occur.

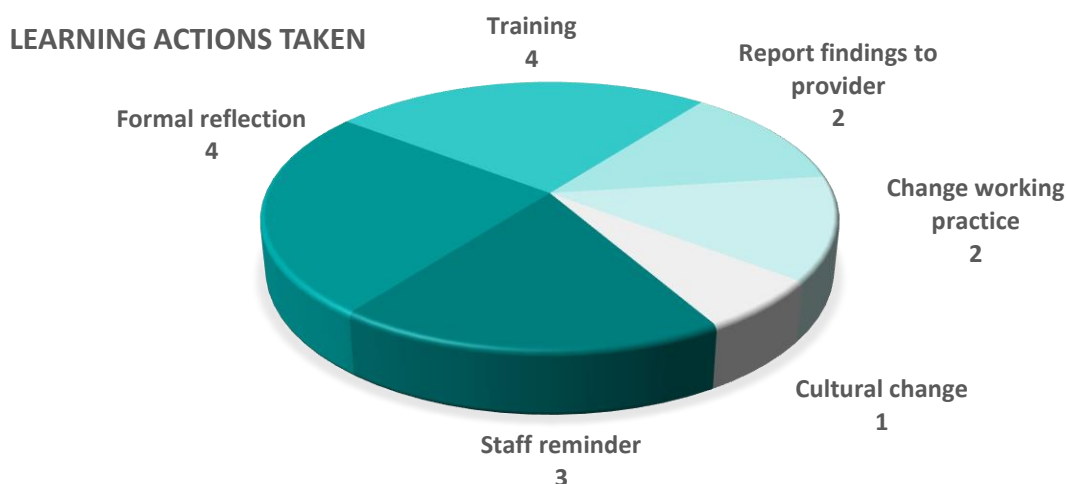
In some cases, outcomes to complaints are case specific and there are no general learning points that would influence policy or procedure. Individual issues and staff/team specific learning is addressed through training, reflection, supervision and team meetings.

The table below categorises the learning themes and the number of lessons learnt that fell into each category. The table identifies the types of actions Adults Social Care's management team and our providers and partners have taken to try and mitigate any further

complaints of a similar nature. These are broad themes that enable us to monitor trends, however different actions will result from a theme.

Theme	No of lessons identified	Action
People Issues relating to the behaviour or conduct of a member of staff	11	<ul style="list-style-type: none"> Formal reflection Training Staff reminder
Policy Review or amendment of a formal policy to reflect the need for change	0	<ul style="list-style-type: none"> Reflect Audit Amend policy
Systems Preventative updates /amendments to system/s, staff training on systems or applications	0	<ul style="list-style-type: none"> Amend system Change working practice
Procedure Changes to current procedures and working practice as a preventative measure	2	<ul style="list-style-type: none"> Change working practice Amend procedure Cultural change
Provider Work with a provider to review working practices, procedures, policies and contract compliance	3	<ul style="list-style-type: none"> Report findings to provider Review contract Suspend provider

The below chart provides an overview of the actions taken as a result of learning from our complaints. In a number of cases there were several actions identified that were addressed to mitigate further complaints of a similar nature. In 2020-21 seven of the 16 actions taken directly relate to measures carried out in response to a complaint to our providers or partners



Examples of some of the learning from our complaint investigations:

Lesson Identified	Outcome
Training for Customer Support Group to improve awareness of ASC timescales.	Further guidance and training provided to the Coventry contact centre, regarding response times to ensure clients expectations are met.
Ensure staff were kept up to date with changes in PPE requirements.	Improved & regular up to date communication, training, reminders and disciplinary action by providers.
Excellent work was taking place in the background, but the client & family were not aware due to insufficient communication.	Case highlighted to staff as a reminder that clients/families need to be regularly updated of progress.

8. Local Government & Social Care Ombudsman

The Local Government and Social Care Ombudsman (LGSCO) is an external body that looks at complaints relating to councils and Adult Social Care providers. The LGSCO investigates matters where there is an alleged or apparent maladministration or service failure.

8.1 Complaints and enquiries dealt with by the LGSCO 2020-2021

A complainant has the right to raise a complaint with the Local Government Ombudsman at any time. However, the Ombudsman will usually refer back a complaint to the council if it has not previously been considered under the council's procedures. Such complaints are described as premature.

The table below shows the total number of new LGSCO enquiries received by Adult Social Care, for the period 1 April 2020 to 31 March 2021.

To allow authorities to respond to the Covid-19 pandemic, the LGSCO did not accept new complaints and stopped investigating existing cases between March and June 2020. This reduced the number of complaints received and decided in the year. This needs to be considered when comparing data from previous years.

	2016-2017	2017-2018	2018-2019	2019-2020	2020-2021
Enquiries/Complaints	22	18	20	19	12

12 enquiries were received:

- 6 premature enquiries were signposted back for local resolution.
- 2 complaints were upheld.
- 1 complaint was not upheld.
- 3 cases were closed by the ombudsman after initial enquiries.

In 100% of cases the Ombudsman were satisfied that Adult Social Care had successfully implemented their recommendations.

8.2 LGSCO Benchmarking

Borough	Upheld social care complaints 2020-21	Per 100k population:
Barnet	2	0.7
Bexley	0	0.0
Brent	1	0.0
Bromley	4	1.6
Ealing	6	2.3

9. Responding to complaints and concerns about quality relating to external service providers

The Service is responsible for ensuring its contracted providers meet the high standards they have been set.

Adult Social Care requires all external providers of care and support services to operate a complaints procedure. For services regulated by the Care Quality Commission under the Care Standards Act 2000 (Homecare, Residential Care and Supported Living and Extra Care), this is a statutory requirement. For services that are not regulated, there is no statutory requirement but all new contracts for services commissioned by the council include a requirement to have a complaints procedure. This is also examined during the procurement process.

Where a person who used social care services or their representatives raises a concern about the quality of an external provider with the council, the Care Quality Service logs the matter and passes it to the provider to investigate, in line with their complaint's procedure. If the outcome of their investigation is not satisfactory to the complainant or to the Care Quality Service, Adult Social Care may take further action, through the complaints process if this is the most appropriate route.

The Service takes complaints about providers very seriously, both to ensure individuals and their carers receive high quality services and to learn lessons and make improvements more widely where necessary.

If it is found that a provider regulated by the Care Quality Commission (CQC) does not meet the CQC's fundamental standards, the Service will inform the CQC, acting first and foremost to ensure the safety of individuals and, once this is established, working with the provider to improve their standards.

Monitoring Care Quality

The quality of care and support services is monitored by the Care Quality Service through a range of contract compliance mechanisms. These include:

- Quality Assurance visits, which include a review of complaints management by the provider.
- Quality alerts, which are written / telephone / electronic communications alerting us to a shortcoming in the delivery of a service.
- Working with the Care Quality Commission as appropriate when services do not meet the fundamental standards below which the provision of regulated activities and the care people receive must never fall.

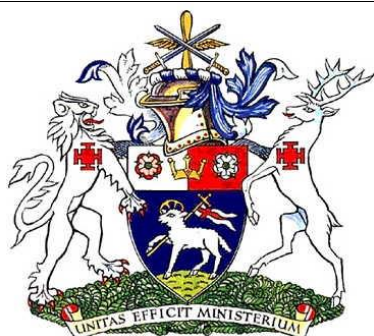
Responding to any other events, including safeguarding incidents which indicate that the provider is not fully complying with contractual requirements.

The table below provides a breakdown of concerns about quality that were passed to providers to investigate

	2016 – 2017	2017-2018	2018-2019	2019-2020	2020-2021
Complaints and quality alerts	123	94	85	73	117

Our analysis indicates that the increase in the number of complaints and quality alerts in 20/21 is related to the impact of the pandemic. In For example, the Council has seen a significant increase in the number of people receiving homecare services, so proportionately, the increases in complaints and quality alerts is not as large as would appear. However, the care market experienced an incredibly challenging year, which is likely to have led to some shortfalls in standards, in turn leading to an increase in quality alerts & complaints received.

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Adults and Safeguarding Committee

24 November 2021

Title	Quarter 2 (Q2) 2021/22 Delivery Plan Performance Report
Report of	Councillor Sachin Rajput – Committee Chairman
Wards	All
Status	Public
Urgent	No
Key	No
Enclosures	
Officer Contact Details	<p>Courtney Davis, Assistant Director Communities and Performance courtney.davis@barnet.gov.uk</p> <p>Appy Reddy, Head of Business Intelligence, Performance and Systems appy.reddy@barney.gov.uk</p> <p>Dean Langsdon, Finance Business Partner for Adults, Public Health and Leisure dean.Langsdon@barnet.gov.uk</p>

Summary

The committee receives a performance report each quarter updating on progress, performance and risk against its priorities. This report provides a thematic overview of performance for Q2 2021/22, focusing on the activities to deliver both the corporate and committee priorities in the Adults and Safeguarding Delivery Plan.

Officers Recommendations

The Committee is asked to review the performance, budget and risk information for Q2 2021/22 and make any referrals to Policy and Resources Committee or Financial Performance and Contracts Committee in accordance with the terms of reference of these Committees, as it decides appropriate.

1. INTRODUCTION

- 1.1 The Barnet Plan sets out four priorities for the borough, these are: thriving, family friendly, healthy and clean, safe & well-run. The Adults and Safeguarding (A&S) Committee is the lead committee for the corporate plan's healthy theme, covering adult social care, integrated care, sports, physical activity & leisure; and working with partners on the Health and Wellbeing Board (HWB) to ensure that social care interventions are effectively joined up with healthcare. However, healthy is a cross-cutting theme and elements of it report to other committees, including activity on homelessness, domestic abuse and gender-based violence, and tackling the longer-term impacts of Covid-19.
- 1.2 Each year the committee adopts an annual plan, setting out the key priorities for the services within its remit, which includes key performance indicators. The plan for this financial year reflects both the Council's policy aims of safeguarding residents and supporting them to live independently; enabling residents to live healthy and active lives; and the Council's on-going response to the Covid-19 pandemic for the services within the committee's remit.
- 1.3 This report provides a thematic overview of performance for Q2 2021/22 focussing on the budget forecast and activities to deliver the priorities in the A&S Committee Delivery Plan 2021/22.

2. DELIVERY PLAN PRIORITIES 2021/22

2.1 Pandemic response

- 2.1.1 In common with NHS partners, adult social care saw an increase in demand for care and support in Q2. This included supporting greater numbers of residents to leave hospital with care and support, rising demand from the community for new or increased needs and additional demand in the mental health system.
- 2.1.2 In sports, physical activity and leisure, the council's team has focused on supporting the continued development and up-take of services and activities across the borough, following the re-opening of leisure centres in Q1.

2.2 Bringing health and care together

- 2.2.1 We have continued to facilitate high numbers of discharges from hospital (with increased activity compared to the last three years) using the four weeks of national funding to facilitate recovery within community settings. 908 discharges were facilitated in Q2 of this year, of which 85% were for people not previously known to social care.
- 2.2.2 The Barnet Integrated Care Partnership (ICP) has continued to develop its work programme. Priority workstreams on mental health, health inequalities, children & young people, frailty, neighbourhood working and co-production are in development. NCL CCG has established an inequalities fund. The Barnet ICP has already secured funding for a project on oral health and has recently submitted a proposal for a project on mental health

support for young Black residents. The project on health inequalities in BAME communities continues to be developed.

2.2.3 Key performance indicators for this priority monitor demand from hospital pathways into social care and the cumulative number of clients with joint funding (CHC) arrangements. These are local measures based on the national discharge to assess health and care pathways established in 2020-21.

Indicator	Polarity	20/21 EOY	21/22 Target	Q2 21/22		Q2 20-21	Benchmarking
				Result	DOT	Result	
Total number of Hospital discharges in the year (pathway 1,2,3)	-	3876	No Target	2960	↑	1978	No benchmark available
Adults discharged in to social care (pathway 1 or 3)	-	2086	No Target	1030	↑	521	No benchmark available
Number of clients with Joint Funding (CHC) arrangements	Bigger is Better	351	No Target	315	↓	-	No benchmark available

2.3 Supporting residents to maintain their strengths and independence

2.3.1 The council's adult social care service has focused on supporting independent living using a strengths-based practice model for many years. The new corporate plan re-affirms this commitment.

2.3.2 We have been continuing to develop our two new extra care schemes, Atholl House in Burnt Oak, due for completion in Spring 2022, and Cheshire House in Hendon, due for completion in Summer 2023. Vacant possession has now been secured on the second site, ensuring that the capital works can now proceed.

2.3.3 We are procuring new accommodation and support providers; formal bids were submitted at the end of August 2021 with formal procurement evaluation now underway.

2.3.4 We have been working with family services to make improvements in the transition pathway for young adults with learning and complex disabilities. These are making the experience for residents and their families smoother and more coherent.

2.3.5 The Liberty Protection Safeguards are planned to come into force in April 2022 and will provide protection for people aged 16 and above who are or who need to be deprived of their liberty in order to enable their care or treatment; and lack the mental capacity to consent to their arrangements. The detailed guidance is still to be published but we have restarted our implementation project to prepare, including building a plan for the training of front-line staff.

2.3.6 In Q2 there was high demand for support across the health and social care system. In the same period, we received 692 safeguarding concerns and recorded 1,965 contacts at the front door to adult social care.

2.3.7 There are 9 Key performance indicators for this priority, which are a combination of 5 local measures and 4 national measures from the Adult Social Care Outcomes Framework (ASCOF).

Indicator	Polarity	20/21 EOY	21/22 Target	Q2 21/22		Q2 20-21	Benchmarking
				Result	DOT	Result	2019-20
Numbers of shared lives carers recruited	Bigger is Better	4	-	9	↑	-	No benchmark available
Number of shared lives placements	-	3	-	3	→	-	No benchmark available
People provided with information, advice and guidance	Bigger is Better	3639	-	3860	↑	1914	No benchmark available
Total Number of clients who received reablement services in the year from both hospital and community routes	Bigger is Better	1002	-	908	↑	Not comparable due to changed pathways	No benchmark available
Percentage of safeguarding contacts leading to S42 safeguarding referrals	-	24.3%	-	22.9%	↓	28.2%	No benchmark available
Adults with learning disabilities who live in their own home or with their family	Bigger is Better	82.2%	80%	77.8%	↑	77.1%	CIPFA Neighbours 75.9% London 76.2% England 77.3%
Adults with learning disabilities who are in paid employment	Bigger is Better	8.4%	-	8.9%	↑	7.8%	CIPFA Neighbours 7.6% London 7.0% England 5.6%
Permanent admissions to residential and nursing care homes, per 100,000 population age 65+ (c)	Smaller is Better	509.6	-	209.7	↑	190	CIPFA Neighbours 436.6 London 431.3 England 584.0
Permanent admissions to residential and nursing care homes, per 100,000 population age 18-64 (c)	Smaller is Better	14.7	-	3.3	↓	4.5	CIPFA Neighbours 11.4 London 10.8 England 14.6

2.4 Focusing on Mental Health and wellbeing

- 2.4.1 The Council's mental health social work teams and recovery service, the Network, are integrated with NHS mental health services and work closely with the voluntary sector.
- 2.4.2 The Council, CCG and Trust have been working collaboratively to support further development and implementation of the new community mental health model for people with severe and enduring mental health illness which is being piloted in PCN 3 from Q2 2021/22. As part of this work the council is working with the Trust to improve provision of community mental health rehabilitation and mental health pathways.
- 2.4.3 Through the suicide prevention group partners in Public Health, Adult Social Care, the CCG and BEHMHT are looking to develop joint training to raise awareness of suicide prevention for staff.

2.5 Greater facilities and opportunities to be physically active

- 2.5.1 The service continues to work with partners, stakeholders and community groups to develop a new Fit and Active Barnet Framework, a future report will be presented to Adults & Safeguarding Committee on a draft strategy for approval to progress with public consultation.
- 2.5.2 During Q2 the council and GLL worked together to reinstate a full sport, health and community programme across all facilities. As a result, the total live membership base is now operating at 85% of pre-pandemic levels:
- Total live membership at the end of Q2: 9,370 (+518 members vs Q1)
 - Total FAB Card holders live at end of Q2: 34,249 (+6,287 members vs Q1)
 - Total Q2 live membership: 43,619.

Leisure centre attendances have also risen during Q2 with a total of 316,700 visits across all facilities:

- July 21 = 103,018
- August 21 = 102,229
- September 21 = 111,453

Q2 Total = 316,700 (+86,063 attendances vs Q1)

- 2.5.3 Other key service headlines include;
- 51 referrals received for an adult weight management intervention
 - 182 Barnet school children participated in an Activate schools programme
 - 250 referrals across all health interventions received and processed
 - 294 children and young people took part in summer holiday camps led by Better

3 BUDGET FORECASTS

- 3.1 The Revenue Forecast (after reserve movements) for the Adults and Safeguarding Committee's service areas of adult social care and leisure is £109,438m. Of this, £6.456m is the impact of Covid 19, leaving a small underspend of £0.051m at Q2.

Revenue Forecast (Q2 2021/22)

Service Area	21/22 Budget	Projected Outturn	Variance (under)/over		Reserves (applied)/contributed	Covid Impact £000	Revised Variance (under)/over	
	£'000	£'000	£'000	%	£'000	£'000	£'000	%
ASC Prevention Services	2,709	2,645	(64)	-2.3%		0	(64)	-2.3%
ASC Workforce	17,657	19,962	2,305	13.1%	(316)	1,989	0	0.0%
<i>Non-placements Covid Commitments</i>	0	99	99			99		
Sub-total	20,365	22,706	2,341	11.5%	(316)	2,088	(63)	-0.3%
Placements Budget								
Integrated Care - LD	29,398	30,214	816	2.8%	(500)	0	316	1.1%
Integrated care - MH	9,422	9,949	527	5.6%	(500)	0	27	0.3%
Integrated Care - OA	35,513	38,236	2,723	7.7%	(1,700)	1,743	(720)	-2.0%
Integrated Care - PD	10,037	10,927	890	8.9%	(500)	0	390	3.9%
<i>Placements Covid Commitments</i>	0	0	0		0	0		
Sub-total	84,370	89,326	4,956	5.9%	(3,200)	1,743	13	0.0%
<i>Non-demand Covid Commitments</i>	0	781	781			781		
Sub-total	0	781	781		0	781	0	
Adults Social Care Total	104,736	112,813	8,077	7.7%	(3,516)	4,612	(51)	0.0%
Leisure								
Leisure	(1,703)	141	1,844	-108.3%	0	1,844	0	0.0%
Leisure Sub-total	(1,703)	141	1,844	-108.3%	0	1,844	0	0.0%
Total Adults	103,033	112,954	9,921	9.6%	(3,516)	6,456	(51)	0.0%

Projections for Covid financial impact are set out below, as set out in the September 2021 return to the Ministry of Housing, Communities and Local Government (MHCLG). The table below details the main spend areas in response to Covid and reconciles to the 'Covid impact' column in the revenue forecast table above.

Service Area	Covid-19 Impact	Category
	£'000	Commentary
Adult Social Care	500	VCS sustainability fund
	100	Falls prevention, isolation and loneliness support
	2,088	ASC workforce pressures
	181	Support to vulnerable people
	643	Placements - support to efficiency planning
	1100	Paying for voids in Residential Block provision
Sub-total	4,612	
Leisure	1,843	Leisure SPA Income Pressure
Sub-total	1,843	
Total	6,455	

3.2 Factoring in the additional government funding given to Councils, ASC is showing an overspend (before reserve drawdown), equivalent to 3.36% of the budget. Overspends in

placements are primarily due to continued demand increases in community settings. Costs associated with scheme 2 and scheme 3 of the hospital discharges/avoidance process are estimated at £1.9m which is expected to be recouped from the CCG, although this position is subject to movement.

- 3.3 The service has seen an increase in demand, largely from people being discharged from hospital in larger numbers and with more complex needs. This is in excess of the volumes used in the model to set the 21/22 budget. There has been an increase of approximately 25% in homecare commissioned hours from the period used to set this year's budget.
- 3.4 A recent announcement to continue with Hospital Discharge (scheme 3) funding until the end of this financial year has been factored into current projections.
- 3.5 The Leisure, Sports and Physical Activity budget is forecast to overspend by £1.843m, due to the continued loss of planned surplus income caused by the mandated closure of centres during the initial stages of the pandemic. This cost is being covered by the application of central government funding, leading to a balanced position for leisure.
- 3.6 The **Capital Forecast** for areas within the committee's remit is **£5.002m**, this reflects £0.408m underspend reported position at Q2."

Capital Forecast (Q2 2021/22)

Capital Programme Description	2021-22 M6 Budget	2021-22 M6 Forecast	Variance
	£000	£000	£000
Sport and Physical Activities	540	132	-408
Community Equipment and Assistive Technology	1,417	1,417	0
Investing in IT	379	379	0
Disabled Facilities Grants Programme	3,074	3,074	0
Adults Total	5,411	5,002	-408

- The Sports and Physical Activities projected forecast at month 6 is £0.132m and retention payment have been released for the two sites. There is some slippage of £0.408m against the budget and is due to anticipated works on the Playing Fields, which is to take place next year.
- Mosaic 'Investing in IT' budget will fund the continuation of the project's phase 2 and is expected to be fully spent.
- Community Equipment spend is incurred in revenue initially, current levels indicate that relevant spend is line with previous years. Spend continues to be monitored.
- Disabled Facilities Grant – forecast to budget spend being reviewed. Slippage from 2020/21 has been profiled over the next two financial years. Awaiting news on any potential DFG grant change later this year.

4. SAVINGS

- 4.1 The total amount of savings identified for A&S Committee for 2021/22 is £1.716m. This is shown in the table below. Savings have been reviewed and risk assessed. The current position is as follows:

Line Ref	Description of Savings	2021/22	Comment
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		£'000	
A&S8	Leisure VAT efficiency	-124	Impacted by Covid
A&S9	Leisure - over delivery against projected income.	-747	Impacted by Covid
A&S 21	OAPD - strength based approach to care reviews.	-160	Some progress being made. Likely to be impact by Covid. Continues to be reviewed
A&S22	LD - support for working age adults.	-325	
A&S25	Charging - increase in hourly homecare rate	-60	
A&S27	Reablement - maximising impact of offer.	-200	
A&S31	Prevention - front door offer	-100	
		-1,716	

5. DEBT

- 5.1 There is a significant amount of debt which relates to adult social care residential placements and community care packages where the client is financially assessed as being able to contribute to the costs of their care and support but where these contributions have not been paid. Most individuals do pay their contributions and the council typically receives around £12-14 million each year in financial contributions. The current level of debt related to individuals who receive adult social care services is £8.730m. Just under half a million of this debt is less than 30 days old and the majority is over 90 days old. The current debt includes £2.823m in relation to deceased clients and £1.674m in relation to Deferred Payment Agreements (DPA - Secured Debt). A DPA is an agreement where the council pays the costs of care, which is recouped after the individual's death, and secured against their property. Funds owed under DPAs are shown as a debt even if the individual is still living.
- 5.2 Adults and Health, working closely with finance, have established a dedicated project which aims to reduce the current level of debt, improve the active management of debt and prevent future debt. The initial focus of the project has been to reduce the current level of debt. The project has initially focussed on individuals with the highest levels of outstanding debt and to date has reduced the debt by £642,362. The table below summarises the financial benefit to the Council to date.

Financial Benefit	Amount
Individual Payments	£353,137.38
Recharged to Health	£66,464.00
Debt avoidance	£222,761.24
Total financial benefit	£642,362.62

- 5.4 The project is also carrying out a full-scale review of the Council's approach to managing adult social care debt as well as wider finance processes which may reduce future debt,

such as billing processes. The project will include a review of roles and responsibilities, standard operating procedures as well as the end-to-end billing processes.

5.5 The aim of the project is to:

- Reduce long-standing debt
- Identify where an individual is getting into debt at an early stage, working with individuals to secure payment and put a long-term payment plan in place
- Ensure the Council secures all debt in a timely manner
- Transition more individuals to Direct Debit payments
- Improve communication with individuals on billing and outstanding debt

5.6 The project is progressing well but due to high levels of debt, complexity of cases and vulnerability of individuals who access adult social care services, there will be a requirement for additional resource to work on this project until at least March 2023.

6. REASONS FOR RECOMMENDATIONS

6.1 These recommendations are to provide the Committee with relevant budget, performance and risk information in relation to the corporate and committee priorities in the Corporate Plan (Barnet 2024) and A&S Committee Delivery Plan.

7. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

7.1 None.

8. POST DECISION IMPLEMENTATION

8.1 None.

8. IMPLICATIONS OF DECISION

9.1 Corporate Priorities and Performance

9.1.1 Robust budget, performance and risk monitoring are essential to ensure that there are adequate and appropriately directed resources to support delivery and achievement of corporate and committee priorities as set out in the Barnet Plan and Annual Delivery Plans.

9.1.2 Relevant Council strategies and policies include the following:

- Medium Term Financial Strategy
- The Barnet Plan
- A&S Committee Delivery Plan
- Performance and Risk Management Frameworks

10 RESOURCES (Finance and Value for Money, Procurement, Staffing, IT, Property, Sustainability)

- 10.1 The budget forecasts are included in the report. More detailed information on financial performance is provided to Financial Performance and Contracts Committee.

11 SOCIAL VALUE

- 10.1 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. The Council's contract management framework oversees that contracts deliver the expected services to the expected quality for the agreed cost. Requirements for a contractor to deliver activities in line with Social Value will be monitored through this contract management process.

12 LEGAL AND CONSTITUTIONAL REFERENCES

- 11.1 Section 151 of the Local Government Act 1972 states that: "without prejudice to section 111, every local authority shall make arrangements for the proper administration of their financial affairs and shall secure that one of their officers has responsibility for the administration of those affairs". Section 111 of the Local Government Act 1972, relates to the subsidiary powers of local authorities.
- 11.2 Section 28 of the Local Government Act 2003 (the Act) imposes a statutory duty on a billing or major precepting authority to monitor, during the financial year, its income and expenditure against the budget calculations. If the monitoring establishes that the budgetary situation has deteriorated, the authority must take such action as it considers necessary to deal with the situation. Definition as to whether there is deterioration in an authority's financial position is set out in section 28(4) of the Act.
- 11.3 The Council's Constitution (Article 7, Article 7 – Committees, Forums, Working Groups and Partnerships) sets out the responsibilities of all Council Committees. The responsibilities of the Adults and Safeguarding Committee include:
- (1) Responsibility for all matters relating to vulnerable adults, adult social care and leisure services.
 - (2) Work with partners on the Health and Well Being Board to ensure that social care, interventions are effectively and seamlessly joined up with public health and healthcare and promote the Health and Wellbeing Strategy and its associated sub strategies.
 - (3) To submit to the Policy and Resources Committee proposals relating to the Committee's budget for the following year in accordance with the budget timetable.
 - (4) To make recommendations to Policy and Resources Committee on issues relating to the budget for the Committee, including virements or underspends and overspends on the budget. No decisions which result in amendments to the agreed budget may be made by the Committee unless and until the amendment has been agreed by Policy and Resources Committee.
 - (5) To receive reports on relevant performance information and risk on the services under the remit of the Committee.

11.4 The Council's Financial Regulations can be found at:
<http://barnet.moderngov.co.uk/documents/s46515/17FinancialRegulations.doc.pdf>

12. RISK MANAGEMENT

12.1 The Council has an established approach to risk management, which is set out in the Risk Management Framework. Risks are reviewed quarterly (as a minimum) and any high level (scoring 15+) risks are reported to the relevant Theme Committee and Policy and Resources Committee

Risk description	Risk Mitigations and Q2 Update
<p>AC001 Finances: Uncertainty about future demand for services, increasing complexity and cost of care packages, legislative changes and, specifically related to COVID, the availability of funding streams, reimbursements, on-going support and future waves could lead to a worsening budget overspend for the service resulting in insufficient resources to meet statutory obligations and a deterioration in the council's overall financial position. Risk Rating: 16</p>	<p>The Council's budget management process forecasts demographic growth and pressures over a multi-year period. Budget and performance monitoring and management controls are used throughout the year including monthly analysis and budget monitoring.</p> <p>Adult Social care and finance are working closely to assess and monitor the financial impact of COVID. The Council continues to liaise with Health and submit discharge returns, currently discharge funding has been agreed to the end of March 2022.</p> <p>Adult social care will continue to undertake initiatives focused on reducing and managing future demand.</p>
<p>AC016: Funding and sustainability challenges facing the voluntary sector could lead to a reduction in the capacity of the Borough's preventative services resulting in adults being without the appropriate services and an increase in demand for more intense, longer and more expensive care and support services over time. Covid 19 has presented further risks to the VCS regarding financial sustainability and increased demand for support.</p> <p>Risk Rating: 16</p>	<p>To mitigate risk and ensure a coordinated and joined approach with the VCS in response to Covid 19 a community infrastructure programme was established in conjunction with Barnet Together. As part of this programme the Council committed £125k funding to aid the work of the boroughs VCS as they support the people most affected by the Covid 19 crisis (the Barnet Community Response Fund and the Barnet Covid 19 Sustainability Impact fund). As part of the programme of work a dedicated workstream to consider support for adults was also developed and this workstream holds weekly meetings with key providers to promote joint working and manage risks. Alongside this, the prevention and wellbeing service continue to ensure regular communication is occurring with the wider VCS and look at opportunities to work jointly together.</p>
<p>AC002 Failure of a care provider: A care provider suddenly being unable to deliver services could lead to HSE breach, harm to individuals resulting in a violation of statutory</p>	<p>For all contracted services due diligence is undertaken at the start of each contract to ensure quality and sustainability of providers. Regular contract monitoring is undertaken with providers and</p>

<p>duty and financial consequences. This risk covers both quality and financial risk to care providers.</p> <p>Risk Rating: 16</p>	<p>financial health and sustainability risks are also monitored. Care Quality advisors support homes through best practice support and supporting staff development. If issues are identified then there is a clear provider concerns process to assess risk to individuals and support improvement. There is also a clear provider failure / closure approach to manage closure of homes and the safe transition of individuals if required.</p> <p>The care quality team are also reviewing business continuity plans with care homes in response to the new mandatory vaccines regulations to ensure that homes a) have plans to deal with staff shortfalls and recruit accordingly and b) assess risks to residents and ensure resident needs can be met</p> <p>Additional costs to the sector resulting from Covid 19 have been addressed by a combination of local measures and national schemes that provided PPE and Infection Prevention and Control (IPC) funding, which the Council has passported to care providers. IPC funding will continue until March 2022.</p>
<p>AC008 Safeguarding demand: Insufficient staff in post who are effectively trained/managed or if demand/complexity rises significantly could lead to non-adherence with policies and procedures (specifically safeguarding within the Care Act and London-wide safeguarding policies and procedures) resulting in harm to vulnerable persons.</p> <p>Risk Rating: 12</p>	<p>Quality assurance framework in place to manage staff training, practice forums, case file audits etc. Safeguarding cases are reviewed on a daily and weekly basis by the heads of service. Senior management and DASS review weekly. Monthly reporting to leadership team on safeguarding activity. Monthly quality and safeguarding meeting with DASS includes review of complex cases. The Safeguarding Adults Board (multi-agency) meets regularly and monitors performance through its PQA framework. Tools are available to support practitioners (e.g. recording templates, assessment tools etc.), as well as learning processes such as safeguarding adult reviews (SARs) and the domestic homicide review process. All safeguarding leads are in regular contact to discuss the processing of safeguarding referrals within the context of the current pandemic.</p>

<p>AC0044 Leisure: The performance of the leisure operator to deliver against contractual obligations and commitments could lead to the health and wellbeing priorities not being fulfilled resulting in possible consequences to service delivery, operations and finances. Risk Rating 15</p>	<p>The leisure contract continues to be monitored in alignment with the Performance Management Framework to ensure delivery against obligations / commitments and targets are met.</p>
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13. EQUALITIES AND DIVERSITY

13.1 Section 149 of the Equality Act 2010 sets out the Public-Sector Equality Duty which requires a public authority (or those exercising public functions) to have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010.
- Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not.
- Fostering of good relations between persons who share a relevant protected characteristic and persons who do not.

13.2 The broad purpose of this duty is to integrate considerations of equality into everyday business and keep them under review in decision making, the design of policies and the delivery of services. The protected characteristics are: age; disability; gender reassignment; pregnancy and maternity; race; religion or belief; sex and sexual orientation.

13.3 In order to assist in meeting the duty the Council will:

- Try to understand the diversity of our customers to improve our services.
- Consider the impact of our decisions on different groups to ensure they are fair.
- Mainstream equalities into business and financial planning and integrating equalities into everything we do.
- Learn more about Barnet's diverse communities by engaging with them.

This is also what we expect of our partners.

This is set out in the Council's Equalities Policy, which can be found on the website at: <https://www.barnet.gov.uk/your-Council/policies-plans-and-performance/equality-and-diversity>

14. BACKGROUND PAPERS

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**London Borough of Barnet
Adults and Safeguarding
Committee Forward Work
Programme
November 2021 - March 2022**

Contact: governanceservice@barnet.gov.uk

Title of Report	Overview of decision	Report Of (<i>officer</i>)	Issue Type (Non key/Key/Urgent)
11th January 2022 (TBC)			
Draft revised Fit & Active Barnet (FAB) Framework	The committee to approve the framework prior to consultation	Assistant Director Community & Performance, Adults & Health Assistant Director Greenspaces & Leisure, Environment	Non-key
7th March 2022 - TBC			
Performance Report Q3 2021/22	Regular performance report.	Head of Programmes, Performance, Risk Growth and Corporate Services	Non-key
Fit & Active Barnet (FAB) Framework	The committee to approve the Fit & Active Barnet (FAB) Framework following consultation.	Assistant Director Community & Performance, Adults & Health Assistant Director Greenspaces & Leisure, Environment	Non-key
Committee Delivery Plan 2022-23	The committee to approve the delivery plan.	Assistant Director Communities and Performance – Adults and Health and	Non-key