

MEETING

ADULTS AND SAFEGUARDING COMMITTEE

DATE AND TIME

THURSDAY 13TH OCTOBER, 2022

AT 7.00 PM

VENUE

HENDON TOWN HALL, THE BURROUGHS, LONDON NW4 4BG

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

Chair: Councillor Paul Edwards
Vice Chair: Councillor Marianne Haylett

Councillors

| | | |
|-------------------|--------------|----------------|
| Ernest Ambe | Dean Cohen | Liron Velleman |
| Andrea Bilbow OBE | Edith David | Lucy Wakeley |
| Anne Clarke | Michael Mire | Sarah Wardle |

Substitute Members

| | | |
|------------------|---------------|------------------|
| Alison Cornelius | Laithe Jajeh | Humayune Khalick |
| Linda Lusingu | Gill Sargeant | Caroline Stock |

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 Monday 10 October 2022 at 10AM. Requests must be submitted to Salar.Rida@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: Salar Rida

Media Relations Contact: Tristan Garrick 020 8359 2454 Tristan.Garrick@Barnet.gov.uk

ASSURANCE GROUP

Please consider the environment before printing.

ORDER OF BUSINESS

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| 1. | Minutes | 5 - 8 |
| 2. | Absence of Members | |
| 3. | Declarations of Members' Disclosable Pecuniary Interests and Other Interests | |
| 4. | Report of the Monitoring Officer (if any) | |
| 5. | Members' Items (if any) | |
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| 13. | Any other items that the Chairman decides are urgent | |

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Decisions of the Adults and Safeguarding Committee

6 June 2022

Members Present:-

AGENDA ITEM 1

Councillor Paul Edwards (Chair)
Councillor Marianne Haylett (Vice-Chair)

Councillor Ernest Ambe
Councillor Andrea Bilbow
Councillor Anne Clarke

Councillor Liron Velleman
Councillor Lucy Wakeley
Councillor Sarah Wardle

Apologies for Absence

Councillor Dean Cohen
Councillor Edith David

Councillor Michael Mire

1. MINUTES

RESOLVED that the minutes of the meeting held on 7th March 2022 be agreed as a correct record.

2. ABSENCE OF MEMBERS

Apologies were received from Councillor Dean Cohen who was substituted by Councillor Alison Cornelius.

Apologies were received from Councillor Edith David who was substituted by Councillor Khalick.

Apologies were received from Councillor Mire who was substituted by Councillor Jajeh.

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

Councillor Paul Edwards declared an interest by virtue of being on the Barnet Group Board in relation to item 9 of the agenda.

Councillor Sara Wardle declared an interest by virtue of being on the Barnet Group Board in relation to item 9 of the agenda.

Councillor Alison Cornelius declared an interest by virtue of being a Trustee of the Eleanor Palmer Trust in relation to item 7 of the agenda.

4. REPORT OF THE MONITORING OFFICER (IF ANY)

None.

5. MEMBERS' ITEMS (IF ANY)

None.

6. PUBLIC QUESTIONS AND COMMENTS (IF ANY)

None.

Guests from the Barnet Carers Centre:

The Chair introduced two guests who had been invited to the Committee from the Barnet Carers Centre – The Chief Executive, Mike Bridge and Poppy Halksworth.

Mike Bridge explained that most carers organisations were working to put carers on the map with around 40,000 carers in Barnet at any one time. The Barnet Carers Centre work with around 3,500 of those carers. Mr Bridge explained that they were a charitable organisation that had been in the Borough for over 30 years, supporting informal carers living in, or looking after someone living in the Borough, to provide them with support.

Poppy Halksworth explained that she was a young carer who had now moved onto work for Barnet Carers centre, mentoring young carers. She advised that school workshops were frequently run, and that they worked closely with schools to help identify young carers. Poppy outlined activities and opportunities that were available to young carers throughout the school holidays, giving them a chance to have fun and make new friends who could relate to their experiences.

Mr Bridge explained that their job was to identify carers, assess them, support them, and then review their support. He said that identification was through carers week, outreach projects working with other organisations including Barnet Mencap, Age Uk, Dementia Club Uk, and Alzheimer's society. The centre often targeted support within the community, including a project in Grahame Park library every 2 weeks. Mr Bridge explained that support included practical solutions, advise on benefits available, grants, tuition, personal development, and training. He also advised that support had been made available throughout the pandemic, including financial and wellbeing support. He said that the pandemic had led to hybrid options for support being made available and that these were set to continue.

Mr Bridge highlighted that the pandemic had led to an increased demand on services, as the isolation and difficulties experienced over the last couple of years had left some people not in a good place mentally or financially. Members were advised that they could complete a Councillor referral form for a carer to assist them in getting the help and support they required.

Mr Bridge outlined one of the biggest challenges was recruitment and retention of staff. He said that nationally staff shortages were around 13.5%. However, he explained the majority of their work was focused on supporting unpaid family carers in the borough.

7. DELIVERING THE ADMINISTRATION'S MANIFESTO COMMITMENTS

The Chair introduced the report which set out the proposed approach to bring forward the new Labour Administration's priorities in the areas of adult social care, mental health and healthy lives which fall within the remit of the Adults and Safeguarding Committee.

During the discussion on the report a Member asked for further detail on how the priorities set out within the report had been decided upon and how they would be met. The Chair explained that the priorities would involve building on the work that had already been commenced by officers, rather than starting from a blank canvas. One of the key priorities was to address the issue around keeping people in their own homes and another was to attract more people into the social care sector. Work would be focused on looking into providing qualifications as recognition for the skills required for social work jobs and to empower people to feel they are working in a qualified role. The Chair explained that a further priority was around developing a mental health strategy, the pandemic had highlighted the need for mental health support to be prioritised and to work towards making Barnet a more dementia friendly borough. The chair explained that the administration would be looking to engage more with residents to help build on the priorities, as well as establishing steering groups to investigate some of the issues. Officers would be asked to provide more detailed information at future committee meetings. The Executive Director for Adults and Health explained that steering groups were already established but these would be built upon to enable further co-production and consultation to take place. These groups would meet both virtually and face to face a minimum of once a month.

A member enquired about the dedicated project manager being employed. The Executive Director for Adults and Health explained that this would be a short-term paid role for a minimum of 6 months, it was felt that due to the extensive and wide-ranging work required a dedicated person was required. A report on the work would be brought back in September, with a final strategy proposed to be provided in November.

A member enquired about the cost pressure that would be associated with co-producing the strategies. The Chair advised that the administration would be working within the budget to deliver the proposals.

Following discussion, the Chair moved to vote on the recommendations within the report. All 3 recommendations were voted on at the same time, the votes were recorded as follows

For:7

Against: 0

Abstain: 4

RESOLVED that:

- 1) The Adults and Safeguarding Committee agreed the approach set out in the report and to bringing forward proposals to meet the manifesto commitments.**
- 2) The Adults and Safeguarding Committee agreed to the high-level plan for the development of the new engagement strategy and the charter, subsequent to the Executive Director of Adults and Health will implement the plan in consultation with the committee Chair.**
- 3) The Adults and Safeguarding Committed noted the Executive Director of Adults and Health will develop proposals for the delivery of the administrations' other adult social care commitments which will be presented to future Committee meetings.**

8. SOCIAL CARE REFORM IMPLEMENTATION

The Chair introduced the report which outlined the new adult social care responsibilities that would need to be implemented by all Councils over the next 12 to 18 months, because of the new Health and Care Act and the government's national plan for adult social care reform. The report outlined the next steps and planned implementation activity.

The Executive Director of Adults and Health presented the implications and steps that the Council would need to take in-line with the Health and Care Act which became law at the end of April 2022. The Executive Director Adults and Health explained the key changes which included a new CQC led assurance framework for Local Authorities, Cap on Care costs and Fair costs of care. The Executive Director Adults and Health explained there was still a lot of uncertainty, including what kind of demand there would be from residents, with the gap on care currently unknown. Also, the impact of staff resources for sufficient workforces to carry out additional assessments, reviews, case management and monitoring progress towards the gap. In addition, there would be increased costs in terms of system upgrades.

The Executive Director of Adults and Health advised Members that preparations were already in place based on what was known, including the development of an implementation plan and technology assessments.

The Chair advised that a further report would be reported to the September meeting.

Following discussion, the Committee unanimously noted the report.

RESOLVED that the Adults and Safeguarding Committee note the changes to social care and the requirements for the council arising from the Health and Care Act and national plan for social care reform.

9. QUARTER 4 (Q4) 2021/22 DELIVERY PLAN PERFORMANCE REPORT

The Chair introduced the Quarter 4 2021/22 delivery plan performance report which outlined the progress to date on performance and risk priorities.

The Committee unanimously noted the report.

RESOLVED that the Committee reviewed the performance, budget and risk information for Q4 2021/22 and made any referrals to Policy and Resources Committee in accordance with the terms of reference of the Committee, as it decides appropriate.

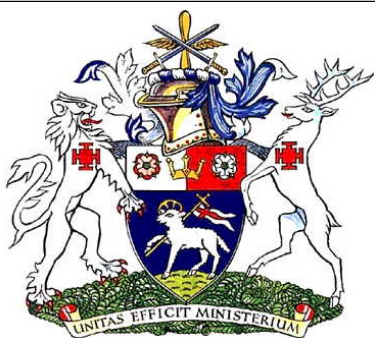
10. COMMITTEE FORWARD WORK PROGRAMME

RESOLVED that the Committee unanimously noted the work programme.

11. ANY OTHER ITEMS THAT THE CHAIRMAN DECIDES ARE URGENT

None.

The meeting finished at 20.30



Adults and Safeguarding Committee AGENDA ITEM 7 **13 October 2022**

| | |
|--------------------------------|--|
| Title | Engagement and Co-Production Strategy and Charter progress report |
| Report of | Cllr Paul Edwards, Chair, Adults and Safeguarding Committee |
| Wards | All |
| Status | Public |
| Urgent | No |
| Key | No |
| Enclosures | Appendix: Engagement Strategy update for Adults and Safeguarding Committee |
| Officer Contact Details | Ella Goschalk, ella.goschalk@barnet.gov.uk |

Summary

This report provides an update on the progress towards producing a new engagement and co-production strategy and charter for adult social care, which is one of the administrations key priorities. It summarises the work done so far to establish a steering group, launch the project, begin engagement with a wide range of people, undertake research and learn from best practice in order to deliver the new strategy and charter.

Officers Recommendations

1. The **Adults and Safeguarding Committee** is asked to note the progress towards developing a new Engagement and Co-Production Strategy and Charter for adult social care

1. Why this report is needed

- 1.1 This report follows an update to Adults and Safeguarding Committee in June 2022 outlining the proposals to meeting the Administration's commitments.
- 1.2 Key to the delivery of the Administration' commitments was to develop engagement and co-production with people who draw on care & support, including through the codesign with residents and the voluntary and community sector, of a new strategy and charter.

- 1.3 This strategy and charter also align with the Administration's approach to working more closely with residents and the community, and is closely linked to the new Community Participation strategy.
- 1.4 The strategy and charter build on the council's existing work, a strong foundation of involving people in quality assuring, shaping and improving adult social care services. The strategy and charter will enable us to step up our ambition and further embed this way of working.
- 1.5 The table below provides a summary of our approach as set out in the June 2022 committee paper, and provides an update on each area:

| What we said we'd do (June 2022) | What we've done: September 2022 |
|---|---|
| <p>Establishing a steering group to develop and lead the work programme.</p> <p>The steering group will include people with lived experience, local voluntary groups, and people/organisations with expertise in co-production and engagement, including national experts</p> | <p>Steering group has been established and meeting monthly.</p> <p>The group includes all the stakeholders mentioned, and we have benefited from insight from local and national experts.</p> |
| <p>Appointing a dedicated project manager for the work</p> | <p>Project has been led by a dedicated project manager. In addition, we have recruited a new Engagement and Co-Production project lead, starting early October who will lead on finalising the strategy, action plan and overseeing implementation.</p> |
| <p>Commissioning experts in co-production to work on the project</p> | <p>We are working with various organisations including Think Local Act Personal (national experts) and Inclusion Barnet (local experts)</p> |
| <p>Holding a series of events and activities with people who draw on care & support</p> | <p>We have been working closely with voluntary and community organisations to join in with existing events and hear people's views. The majority of engagement has been face to face conversations and focus groups, with plans to engage with more over the next month. The official launch event was held on 5th July at Age UK Barnet which was a chance to speak to residents and celebrate work in the community.</p> |

| | |
|---|---|
| | By the date of this committee we will have attended or held 12 groups, meetings or events and run 2 surveys. |
| Establishing a range of communication channels | <p>We have new branding for adult social care, which has been shaped by residents and staff.</p> <p>We have run a campaign to promote engagement and co-production and recruit people to join, including joining the People's Voice group. This has raised the visibility of the work.</p> |
| Putting in place access & support arrangements so that people with a range of needs can participate | We continue to make use of our Reward and Recognition policy to cover expenses and payments for participation, in order to recognise people's time and effort in having their say. We also ensure our engagement activities are accessible and inclusive for example providing interpreters, accessible venues, adapting engagement methods for different communication styles. |
| Research on best practice | We have started to research best practice, working with Inclusion Barnet and Think Local, Act Personal, and have been in touch with colleagues across different local authorities and the NHS to develop a community of practice. We have attended London ADASS (Association of Directors of Adult Social Services) meetings to share practice and approaches. |

1.6 The slides in the appendix give a more detailed update on the following areas:

- 1.6.1 The 'road map' – setting out our plans for completing the strategy and what has already been achieved
- 1.6.2 Steering group – information about the steering group membership, how we work, and people's feedback
- 1.6.3 Project launch and promotion – information about the project launch at Age UK Barnet, new branding and social media campaign
- 1.6.4 Structure of the strategy – what the strategy will look like, as agreed by the steering group
- 1.6.5 Engagement update – who we have spoken to so far about the strategy, and the plans for engagement to make sure we hear a range of people's voices

- 1.6.6 Looking outwards – how we are using research, best practice, expertise and networks to shape the strategy to be the best it can be.

2. Reasons for recommendations

- 2.1 The reports set out a progress update towards the new engagement and co-production strategy and charter for adult social care as part of the implementation of the Administration's manifesto priorities and a critical part of the work we do to work with residents.

3. Alternative options considered and not recommended

- 3.1 None

4. Post decision implementation

- 4.1 We will continue to deliver the project, with the full strategy and charter to be presented at Adults and Safeguarding Committee in November. This will be living document open to continued engagement.

5. Implications of decision

Corporate Priorities and Performance

- 5.1.1 The new corporate plan will set out the council's corporate priorities, this will include a new outcomes framework that will be developed to monitor performance and ensure we continue to keep residents and the work we do together at the centre of everything we do.
- 5.1.2 The new Community Participation Strategy is a key interdependency to this work, and we continue to work closely to ensure that it is aligned.

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

- 5.2.1 This programme of work has been supported by dedicated staff time, the recruitment of two new staff members, as well as continuing our approach of covering expenses, Reward and Recognition payments and costs for engagement. We have also offered grants to voluntary and community sector groups to reach lesser-heard communities.

5.3 Legal and Constitutional References

- 5.3.1 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 at <https://barnet.moderngov.co.uk/documents/s68757/08Article7CommitteesForumsWorkingGroupsandPartnerships.doc.pdf>
- 5.3.2 Responsibilities include:

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

5.4 Insight

- 5.4.1 This programme of work is led by people with lived experience, using feedback and insight from residents, alongside best practice and 'next practice' research to shape the Engagement and Co-Production Strategy..

5.5 Social Value

- 5.5.1 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.

5.6 Risk Management

- 5.6.1 The programme of work will be managed in accordance with the council's risk management framework.

5.7 Equalities and Diversity

- 5.7.1 Equality and diversity issues are a mandatory consideration in the decision making of the council.
- 5.7.2 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:
- 5.7.3 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.
- 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.
- The steps involved in meeting the needs of disabled persons that are different from the needs of persons who are not disabled include, in particular, steps to take account of disabled persons' disabilities.

5.7.4 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.

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

5.7.5 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.

5.7.6 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-anddiversity>

5.8 Corporate Parenting

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 engagement strategy and charter are relevant to care experienced adult who may be drawing on support from adult social care. Engagement with younger adults has taken place as part of the programme of work.

5.9 Consultation and Engagement

Co-production and engagement are central to the work on this new strategy and charter. We have involved people with lived experience from the start and are engaging widely with people who have experience of adult social care, carers, and people who may draw on services in the future. The draft strategy will also be shared and circulated widely for comments from many stakeholders.

5.10 Environmental Impact

5.10.1 None in the context of this report

6. Background papers

- 6.1 Adults and Safeguarding Committee – 6 June 2022 – Delivering the administration's manifesto priorities:
<https://barnet.moderngov.co.uk/documents/s72702/Delivering%20the%20Administrations%20manifesto%20priorities.pdf>

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London Borough of Barnet

Engagement and co-production strategy and charter

Update for Adults and Safeguarding Committee:
13th October 2022

Contents

1. Summary
2. The 'road map'
3. Steering group
4. Structure of the strategy
5. How are people's views shaping the strategy and charter?

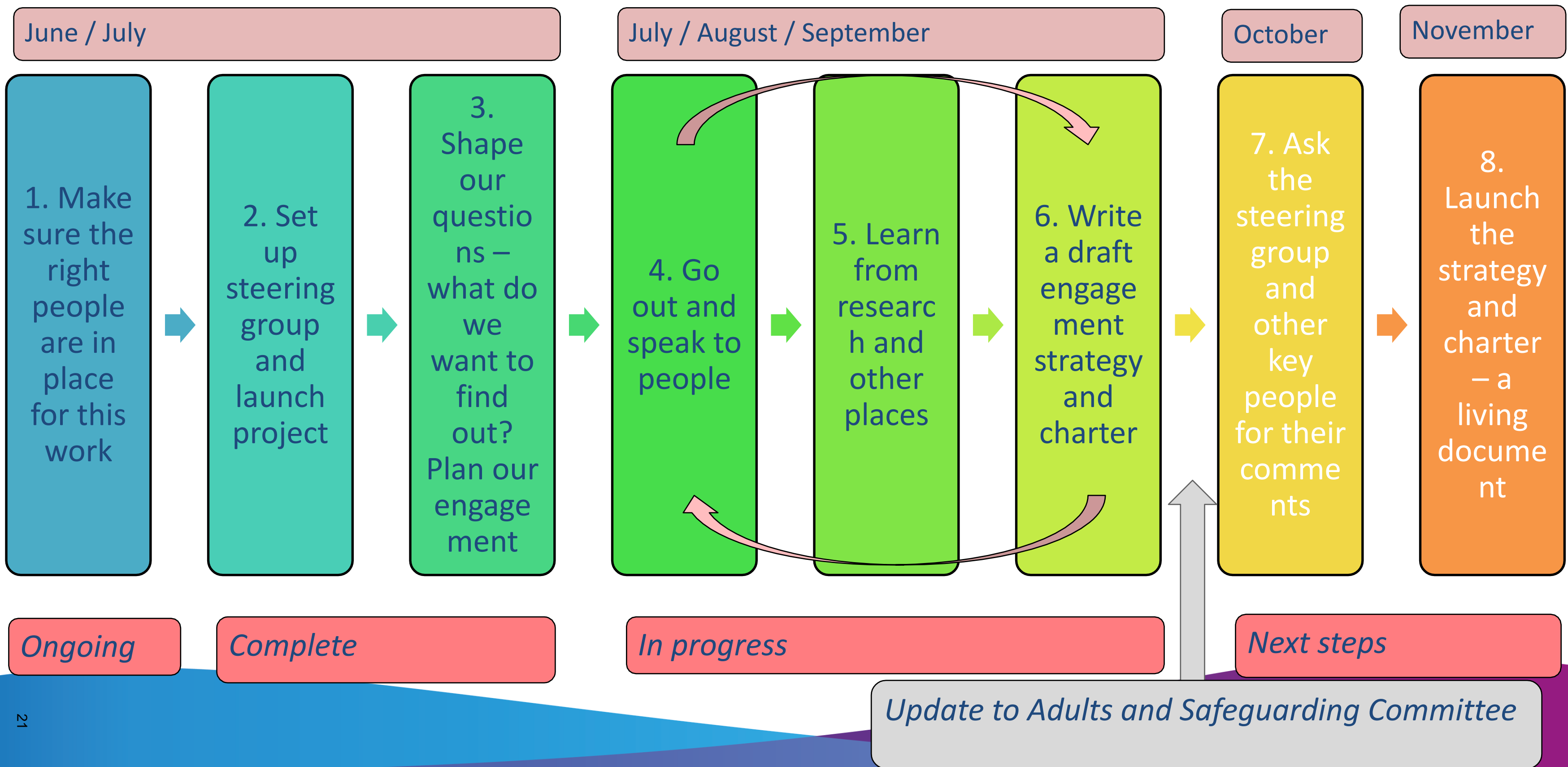
1. Summary

| What we said we'd do (June 2022) | What we've done: September 2022 |
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| <p>Holding a series of events and activities with people who draw on care & support</p> | <p>We have been working closely with voluntary and community organisations to join in with existing events and hear people's views. The majority of engagement has been face to face conversations and focus groups, with plans to engage with more over the next month. The official launch event was held on 5th July at Age UK Barnet which was a chance to speak to residents and celebrate work in the community. By the date of this committee we will have attended or held 8 groups or events and run 2 surveys.</p> |

1. Summary

| What we said we'd do (June 2022) | What we've done: September 2022 |
|---|---|
| Establishing a range of communication channels | We have new branding for adult social care, which has been shaped by residents and staff. We have run a campaign to promote engagement and co-production and recruit people to join, including joining the People's Voice group. This has raised the visibility of the work. |
| Putting in place access & support arrangements so that people with a range of needs can participate | We continue to make use of our Reward and Recognition policy to cover expenses and payments for participation, in order to recognise people's time and effort in having their say. We also ensure our engagement activities are accessible and inclusive for example providing interpreters, accessible venues, adapting engagement methods for different communication styles. |
| Research on best practice | We have started to research best practice, working with Inclusion Barnet and Think Local, Act Personal, and have been in touch with colleagues across different local authorities and the NHS to develop a community of practice. We have attended London ADASS (Association of Directors of Adult Social Services) meetings to share practice and approaches. |

2. The ‘road map’



3. Steering group

What do the members say?

"I'm relishing this opportunity to be involved in the 'Steering Committee' as I think it's an honour to have been asked in the first place. Knowing that I'm part of the process to encourage as many adults as possible into knowing about the services that Barnet has to offer is reward in itself.

However, I'm also gaining valuable insights into how a council committee works and I'm thankful to be able to input my thoughts and feelings into that whole process.

All in all, I'm grateful for the opportunity to 'give back' for all that I've received." Alan, resident representative

How we work

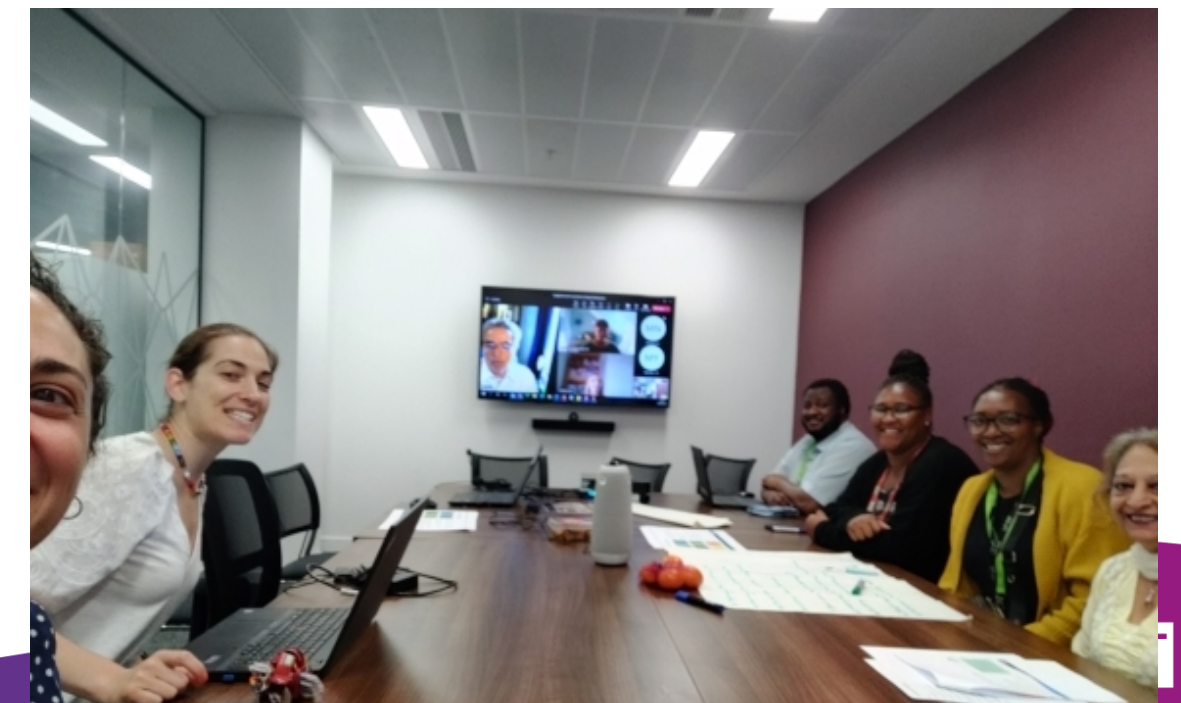
The steering group leads on the work of the strategy, but also is a chance for us to put the principles of co-production into practice and learn for future projects

The steering group consists of:

- 4 resident representatives with experience of adult social care
- 3 Representatives from the voluntary sector
- Council staff members
- Representatives from the NHS including those with joint posts
- Invitations to join the steering group have been widely circulated and there are ongoing opportunities to join

What we have worked on so far

- Agreed the structure of the strategy and what needs to be included
- Discussed engagement methods and approaches
- Introduced the idea of co-production and discussed what it means to us in Barnet
- Agreed the scope of the charter



4. Structure of the strategy

We worked with the steering group to agree this structure

1. Introduction and what is important to us

2. What we do at the moment and how it's going

3. How we will do engagement and co-production

4. How we will include a wide range of people

5. How we work together with other organisations

6. How we will know it's working

5a. How are people's views shaping the strategy?

We have an engagement plan, to speak to as many people as possible for their views on engagement & co-production to shape the new strategy.

The bulk of engagement has been **face to face**, which has enabled us to have more in depth conversations and understand people's perspectives. We have attended groups including:

- Hub connections (Meridian Wellbeing)
- Mencap 'have your say' group
- Centre of Excellence (Somali community)
- Barnet Asian Women's Association
- People living in Extra Care
- Age UK Barnet
- Silver Sunday
- LBB event

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We have also sent out surveys to understand the views of:

- People's Voice group (our existing community of people who engage with adult social care – 200+ people)
- People known to Mencap's autism service

We have had detailed conversations with members of the steering group and other local experts.

We have widely promoted People's Voice and this work with an article in Barnet First, social media posts across Twitter, Instagram, Facebook and the council's website →



5b. What are the key themes so far?

People who are already involved in engagement:

When asked what would help them to be more involved they said they are interested in

- having a wider range of topics to engage on
- seeing a greater impact
- having different ways to have their say

In terms of what they are most interested in:

- Helping to check the quality of adult social care
- Recruiting new social care staff
- Choosing new providers of care

What is working well? “Regular meetings and opportunity to ask questions of concern” “It’s a great concept. I enjoy feeling that my views matter”

What could be improved? More updates and feedback about what happened next. Greater involvement of front line staff

Other members of the community:

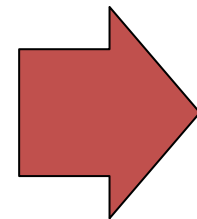
How can we engage effectively?

- Engage within existing community / groups settings – where people feel more comfortable and known support is available
- Give reassurance up front that confidentiality is protected, especially when giving feedback and views about personal experiences
- Be careful and specific with language - people haven’t always heard of ‘adult social care’ but have heard about the types of support available such as home care.
- Flexibility and a variety of engagement methods depending on people’s needs
- Be clear about what happens next and how feedback will be used. It takes time to build people’s trust and confidence

5c. How will we reach more people?

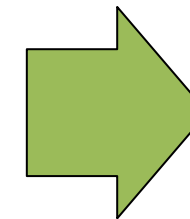
Plans in place to speak to:

New Citizens Gateway
(refugees)
Opening Doors London
(LGBTQ+)
Middlesex Association for
the Blind
Carers via Barnet Carers
Centre
Prevention & Wellbeing
team
People who draw on mental
health services
We are also running a
dedicated event on 30
September



Groups who have successfully applied for funding to run engagement:

Community Focus
Barnet Mencap
Barnet Asian Women's
Association
JDA (Deaf community)
Jewish Care



Whose voices are we missing ?

Working proactively to hear from:

People with experience of
mental health challenges
People living in care homes

| | |
|--|--|
|  | <h2 style="text-align: center;">Adults & Safeguarding Committee</h2> <h3 style="text-align: center;">Thursday 13 October 2022</h3> <p style="text-align: right;">AGENDA ITEM 8</p> |
| Title | Barnet Multi-Agency Safeguarding Adults Board Annual Report 2021- 22 |
| Report of | Fiona Bateman, Independent Chair of the Safeguarding Adults Board |
| Wards | All |
| Status | Public |
| Urgent | No |
| Key | No |
| Enclosures | Appendix A: Safeguarding Adults Board Annual Report 2021-22 |
| Officer Contact Details | Joyce Mbewe, Safeguarding Adults Board Business Manager e-mail: joyce.mbewe@barnet.gov.uk Tel: 0208-359 2519 |

Summary

The Local Authority is required (by virtue of s.43 Care Act 2014) to establish a Safeguarding Adults Board [SAB] for their area. Each SAB must publish an annual report setting out details of what it has done to achieve objectives within its strategic plan and steps taken to implement the learning from any Safeguarding Adults Reviews undertaken during the period.

This report presents the Barnet SAB annual report to the committee.

Officers Recommendations

1. That the Adults and Safeguarding Committee note the Safeguarding Adults Board Annual Report 2021-22.

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.

1. WHY THIS REPORT IS NEEDED

- 1.1 The Care Act 2014 (the Act)¹ requires each local authority to establish a Local Safeguarding Adult Board for their area pursuant to Section 43(1). The Barnet Safeguarding Adults Board was established in 2002 and from 1 April 2015 it adopted the following terms of reference.
- 1.2 The Barnet Safeguarding Adults Board is a partnership of voluntary, statutory and community organisations. BSAB's purpose is to enable partner agencies to review practice across the entire 'system' and provide positive cross-agency challenge to encourage accountability and strengthen a culture of continuous improvement. It is a very active partnership with commitment from across the statutory, voluntary and community-based organisations.
- 1.3 The SAB's governance arrangements ensure that it reports work to the Council through the Adults and Safeguarding Committee and, due to the important multi-agency arrangements and the role of health, the Board's Annual Report is noted by the Health and Wellbeing Board as well as each partners' executive Board. The report will update on how the agencies in Barnet whose services impact adults in need of care and support have cooperated to keep the vulnerable safe and promote their wellbeing. It will also evidence steps taken to share learning to improve safeguarding practice amongst practitioners and service providers.
- 1.4 Committee members will be aware that the Coronavirus Act 2020 did not provide for any 'easement' of safeguarding responsibility for the SAB or partner agencies. As such it was very much 'business as usual'. BSAB sought and received assurance that safeguarding remained a priority and those partners were working in a coordinated way to address the likely risk that Covid 19 restrictions presented and any change in safeguarding concerns as restrictions were eased. The Council's Adult Social Care Service, Barnet Homes, the Public Health team, North Central London Clinical Commissioning Group, Royal Free NHS Trust, Central London Community HealthCare NHS Trust, Barnet Enfield & Haringey Mental Health Trust, London Fire Brigade, the Metropolitan Police and the BSAB partners from the voluntary sector provided assurance reports on steps taken to reduce risk for adults with care and support needs.

2. REASONS FOR RECOMMENDATIONS

- 2.1 For each financial year, the SAB must publish an annual report in accordance with Schedule 2 of the Act. Following consideration by this Committee, the annual report will be published on the Council's website.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

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

Non-Applicable

4. POST DECISION IMPLEMENTATION

The Barnet Safeguarding Adults Board Strategic Plan and annual report is a public document and following this Committee meeting, will be published on the Council's website. The Board's Annual Report will also be reported to the Health and Wellbeing Board for noting as well as each partners' executive Board. The learning from this report will continue to be part of the BSAB work plan for 2022-23 for quality assurance and implementation of good practice.

4.1 Corporate Priorities and Performance

The work of the Barnet SAB is a statutory duty. It also supports the council's priorities especially in the areas of supporting residents to stay independent and integrated care.

5 IMPLICATIONS OF DECISION

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

5.1.1 There are no additional resource implications arising from the recommendations of this report. The activities listed will be managed within the appropriate organisation's existing budgets.

5.1.2 Safeguarding training is currently provided by the Council's Communities, Adults and Health Directorate and this training is mandatory for all Communities, Adults and Health staff. Safeguarding training is also offered to all care providers commissioned through Adults and Health and the provision is covered within the directorate budget.

5.1.3 The current annual budget for the BSAB is £95,500, which covers the post of Independent Chair and Safeguarding Adults Board Business Manager as well as the delivery of the Board priorities including training and communications. Each partner has been asked to provide a contribution towards Board costs, with the following received for 2021-22:

Table 1: BSAB Partner Financial Contributions 2021-22

| Statutory Partner | Contribution |
|---|---------------------|
| London Borough of Barnet | £60,000 |
| Barnet Clinical Commissioning Group | £20,000 |
| Barnet Enfield & Haringey Mental Health Trust | £5,000 |
| Metropolitan Police | £5,000 |
| Central London Community Health | £5,000 |

| Non-statutory Partner | Contribution |
|------------------------------|---------------------|
| London Fire Brigade | £500 |

5.2 Social Value

5.2.1 The BSAB supports the Public Services (Social Value) Act 2012 by ensuring that robust safeguarding procedures are in place throughout the borough. The council ensures that care providers commissioned to work with adults accessing social care services have the required skills and training to support effective safeguarding throughout the borough and the Board aims to publicise the key issues surrounding safeguarding within the borough to strengthen the public's awareness of safeguarding issues.

5.3 Legal and Constitutional References

5.3.1 The Care Act 2014 (the Act)² places on a statutory footing some of the safeguarding obligations that were previously located in guidance. The Act requires each local authority to establish a Local Safeguarding Adult Board (SAB) for their area pursuant to Section 43(1).

5.3.2 For each financial year, the BSAB must publish an annual report in accordance with Schedule 2 of the Act. The report will be published on the Council's website.

5.3.3 The responsibilities of the Adults and Safeguarding Committee are contained within the Council's Constitution – Article 7, section 7.5. Specific responsibilities of those powers, duties and functions of the Council in relation to adult social care include the following specific function:

- Responsibility for all matters relating to vulnerable adults, adult social care and leisure services.
- Working with partners on the Health and Wellbeing Board to ensure that social care interventions are effectively and seamlessly joined up with public health and healthcare and promote the Health and Wellbeing Strategy and its associated sub strategies.
- Ensuring that the local authority's safeguarding responsibilities are considered.

5.4 Insight

5.4.1 Effective quality assurance drives continuous improvement and is recognised as a critical function of the BSAB. The Performance Quality Assurance (PQA) Subgroup of the BSAB provides assurance that local safeguarding arrangements are in place and work effectively, and risks and concerns are escalated to the Independent Chair and BSAB. The group meets quarterly to review safeguarding performance via an integrated monitoring report which reviews data and key performance indicators from across the partnership.

5.4.2 The annual report was developed using insight from the Local Authority Mosaic system and contributions from the SAB partners.

5.5 Risk Management

² The Care Act 2014 – www.legislation.gov.uk/ukpga/2014/23/contents

5.5.1 A failure to keep adults at risk of abuse safe from avoidable harm represents not only a significant risk to residents but also to the reputation of the Council and partner agencies, including statutory safeguarding partners (namely the police and NHS). Although safeguarding must be the concern of all agencies working with vulnerable adults, the Local Authority is the lead agency. As such, both Members and senior officers carry a level of accountability for safeguarding practice in Barnet. Governance structures are in place to ensure that other lead stakeholders, including the NHS and the police, are represented to ensure that practice across the partnership meets safeguarding requirements.

5.6 Equalities and Diversity

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

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

- a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Act
- b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it
- c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it

5.6.3 The annual report provides progress against the business plan 2021-22. The BSAB key priorities are:

- Establish consistent practice across partnership agencies which reflect the 'Making Safeguarding Personal' principles'
- Adults at risk' are heard and understood and their experiences and views shape continuous improvement
- Advance equality of opportunity, including access to justice for 'Adults at Risk'

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

5.7 Consultation and Engagement

5.7.1 The report will assist us in identifying any improvements that need to be made to our services or, to policy and procedure. This will be done in full consultation with relevant groups before any changes are recommended and implemented.

5.8 Corporate Parenting

- 5.8.1 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 Adults Safeguarding Board works closely with the Barnet Safeguarding Children's Partnership. It recognises the need for everyone to 'think family' when addressing their safeguarding functions. The two partnerships also have mechanisms in place to coordinate on work priorities arising from case reviews where they impact on respective safeguarding duties. Both Boards have focused on transitional safeguarding and ensuring good practice in this area.

6 BACKGROUND PAPERS

- 6.1 Barnet Safeguarding Adults Board strategic plan 2021-22 available at: <https://www.barnet.gov.uk/adult-social-care/keeping-safe/safeguarding-adults-board>



Barnet Safeguarding Adults Board Annual Report 2021-22

DRAFT

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Foreword from the Independent Chair, Fiona Bateman

I paid tribute in last year's annual report to the remarkable energy, compassion and fortitude shown by volunteers and colleagues across the partnership during the Pandemic. Again, you will see from this report, that despite ongoing challenges the Pandemic presented throughout 2021-22, there is no questioning the strong commitment to public service demonstrated by all partners. Throughout the year we saw countless examples of practitioners working together and alongside our communities to address risks posed by rising levels of infections, new variants, and risks posed by old harms (such domestic abuse, hate crime and scamming) which continued to be cruelly dispensed throughout the period.

Time and time again I saw examples where partners, practitioners and members of the public also openly embraced additional responsibilities, new tasks or new methods of delivery for services in order to ensure we could better protect our most vulnerable residents. The most celebrated example of this was the amazingly effective vaccine rollout, but throughout this report there are many other examples. I remain extremely proud to work with so many people so committed to safeguarding and so focused on continually seeking to improve care for those people reliant on health, social care and public services for protection.

Thank you for taking the time to read through this report. I know I am lucky to chair a group of energetic people who, despite significant pressures on public services, provide regular assurance reports to the Barnet Safeguarding Adults Board [hereafter referred to as 'BSAB' or 'Board'] about the work they were doing within their own organisation and collectively to keep adults with care and support needs safe.

Best wishes,



Fiona Bateman,
BSAB Independent Chair

1. Safeguarding activity in Barnet 2021-22

Summary

The following data comes from the Council's 2021-22 Safeguarding Adults Collection (SAC) which records details about safeguarding activity for adults aged 18 and over in England, reported to, or identified by, Councils with Adult Social Services Responsibilities.

In Barnet in 2021-22 there were fewer safeguarding concerns reported and enquiries investigated than during 2020-21. This has followed concerted efforts by the adults MASH to work with frequent referrers to educate on what is best reported as a safeguarding concern and what should be addressed through an alternative pathway. The outcomes for residents involved in the safeguarding process were improved, with risks reduced and removed in 93.1% of the cases compared to 91.7% in 2020-21.

Although the location of abuse order has not changed significantly the proportions have, with own home location accounting for fewer than during the height of the pandemic and Care Homes for both residential and nursing both increasing. The reduction in care home visiting restrictions as the pandemic eased has meant greater ability for professionals and family members to identify and report concerns.

The most common type of risk in Section 42 enquiries that concluded in the year for Barnet and nationally was Neglect and Acts of Omission, which accounted for 39% of risks (this was 31% nationally and up from 38.1% in 2020/21).

National picture

Safeguarding concerns¹:

- Nationally there were an estimated 541,535 concerns of abuse raised during 2021-22, an increase of 9% on the previous year, this is slightly above the average annual growth rate per year for the previous four years (8% per year on average between 2016-17 and 2020-21).

Section 42 enquiries²:

- The number of enquiries that commenced under Section 42 of the Care Act 2014 during the year increased by 6% to an estimated 161,925, following a similar decrease the previous year, and involved 129,685 individuals.

Type and location of risk:

- The most common type of risk in Section 42 enquiries that concluded in the year was Neglect and Acts of Omission, which accounted for 31% of risks, and the most common location of the risk was the person's own home at 48%

Outcomes:

- In 91% of concluded Section 42 enquiries where a risk was identified, the reported outcome was that the risk was reduced or removed.

Safeguarding in Barnet

Individuals:

- ↓ A total of **1,265** individuals were involved in safeguarding concerns during 2021-22, down from **1,458** in 2020-21 (13.2% decrease equivalent to 193 fewer individuals).

¹An adult safeguarding concern is any worry about an adult who has or appears to have care and support needs, that they may be subject to, or may be at risk of, abuse and neglect and may be unable to protect themselves against this.

² A safeguarding enquiry is initiated when the initial concern has been assessed and meets the threshold for a Section 42 enquiry within the [Care Act 2014](#), which requires the local authority to make enquiries (or cause others to do so) if it believes an adult is experiencing, or is at risk of, abuse or neglect. When an allegation about abuse or neglect has been made, an enquiry is undertaken to find out what, if anything, has happened.

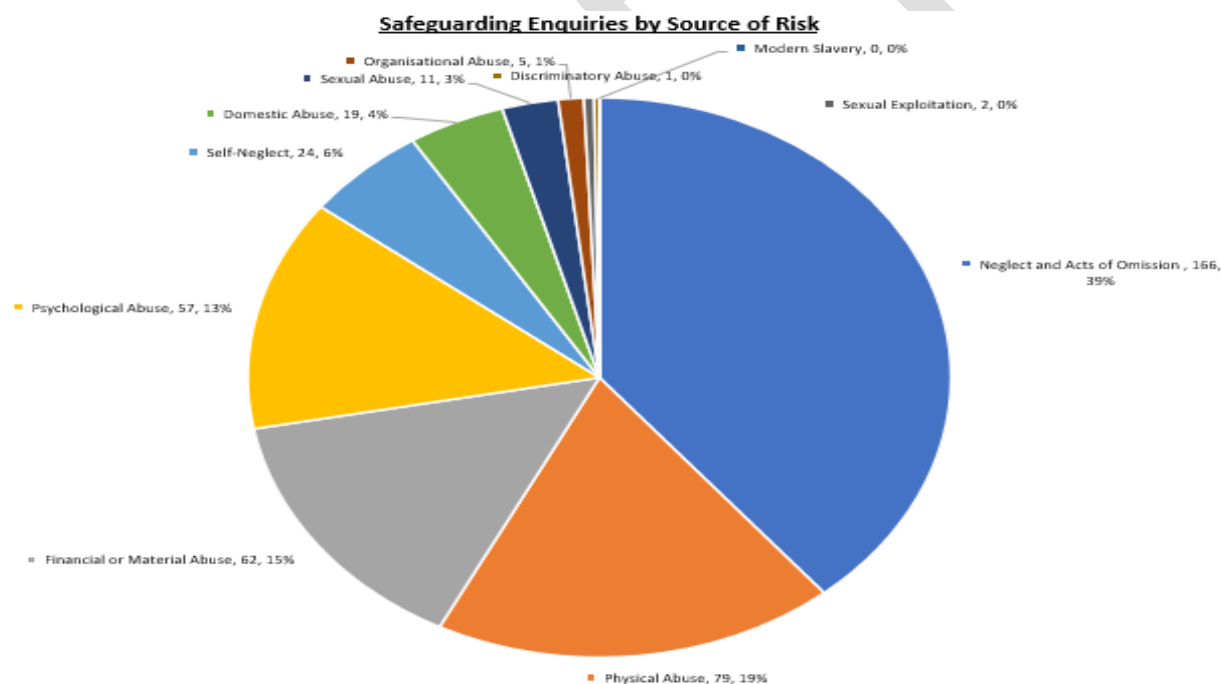
- ▼ A total of **303** individuals were involved in Section 42 Safeguarding Enquiries, down from **367** in 2020-21 (17.4% decrease equivalent to 64 fewer individuals).

Activity:

- ▼ 1,463 Safeguarding Concerns were completed during 2021-22, down from 1,695 in 2020-21 (13.7% decrease equivalent to 232 fewer Safeguarding Concerns).
- ▼ 318 s42 Safeguarding Enquiries were completed during 2021-22, down from 384 in 2020-21 (17.2% decrease equivalent to 66 fewer s42 Safeguarding Enquiries).
- ▼ 11 Other Safeguarding Enquiries were completed during 2021-22, down from 28 in 2020-21 (60.7% decrease equivalent to 17 fewer individuals).

Safeguarding Enquiries by Source of Risk

- The top five sources of risk have remained the same this year and are:
 1. Neglect and Acts of Omission - 39% (▲ up from 38.1% last year).
 2. Physical Abuse - 18.5% (▼ down from 19% last year)
 3. Financial or Material Abuse - 14.6% (▼ down from 15.4% last year)
 4. Psychological Abuse - 13.4% (▲ up from 12.7% last year)
 5. Self-Neglect - 5.6% (▼ down from 6.1% last year)
- There were no recorded Safeguarding Enquiries for Modern Slavery in both 2020-21 and 2021-22.



Safeguarding Enquiries by Location

- ▼ Own home continues to be the highest proportion of location of abuse in safeguarding enquiries (46.2% down from 54% in 2020-21).
- ▲ Care Home – Residential continues to be the second highest proportion of location of abuse in safeguarding enquiries (18.6% up from 14.5% in 2020-21).
- ▲ Care Home – Nursing is the third highest proportion of location of abuse in safeguarding enquiries (was joint 2nd last year) (17.4% up from 14.5% in 2020-21).
- ▲ Other accounted for the fourth highest proportion of location of abuse in safeguarding enquiries (was joint 5th last year) (6.4% up from 3.1% in 2020-21).
- ▼ In the community (excluding community services) was the fifth highest proportion of location of abuse in safeguarding enquiries (was 4th last year) (4.1% down from 7.5% in 2020-21).
- ▶ There were no recorded Safeguarding Enquiries in Hospital – Mental Health in both 2020-21 and 2021-22.

Risk Assessment Outcomes

- ↑ Risk Identified and **action taken** continues to be the highest proportion of outcomes with 75.1% (up from 64.9% last year) of risk outcomes falling into this category.
- ↑ Risk – Assessment inconclusive and **action taken** continues to be the second highest proportion of outcomes with 9% (down from 11% last year) of risk outcomes falling into this category.
- ↑ No risk identified and **no action taken** continues to be the third highest proportion of outcomes with 6% (down from 4.8% last year) of risk outcomes falling into this category.
- ↑ No risk identified and **action taken** was the fourth highest proportion of outcomes (was 7th last year) with 5.7% (up from 2.7% last year) of risk outcomes falling into this category.
- ↑ Risk identified and **no action taken** was the fifth highest proportion of outcomes (was 6th last year) with 2.7% (down from 4.1% last year) of risk outcomes falling into this category.

Risk Outcomes

Where risks were identified the outcome/ expected outcome when the case was concluded were as follows:

- ↑ Risk Reduced in 60.4% of the time (up from 58.6% last year)
- ↓ Risk Removed in 32.7% of the time (slightly down from 33.1% last year)
- ↑ Risk Remained in 6.9% of the time (down from 8.3% last year)

Mental Capacity for concluded S42 Safeguarding Enquiries

- ↑ 46.1% of concluded S42 Safeguarding Enquiries pertained to individuals assessed as lacking capacity to make decisions as to how they were kept safe (up from 38.4% last year)
- ↓ 41.3% of concluded S42 Safeguarding Enquiries pertained to individuals assessed as having capacity (down from 49.7% last year)
- ↑ 6.8% of concluded S42 Safeguarding Enquiries pertained to individuals assessed whose mental capacity was not recorded (slightly up from 5.1% last year)
- ↓ 5.8% of concluded S42 Safeguarding Enquiries pertained to individuals assessed for whom it was not known what their mental capacity was (slightly down from 6.7% last year)
- ↑ 95.8% of people who were identified as lacking capacity were provided support by an advocate, family, or friend (up from 94.4% in 2020-21).

Making Safeguarding Personal

- ➡ 74.2% of concluded S42 Safeguarding Enquiries the individual or individual's representative were asked, and outcomes were expressed (slightly down from 74.7% last year).
- ↑ 20% of concluded S42 Safeguarding Enquiries the individual or individual's representative were asked, but no outcomes were expressed (up from 15.1% last year).
- ↓ 3.5% of concluded S42 Safeguarding Enquiries the individual or individual's representative were not asked about desired outcomes (down from 6.2% last year).
- ➡ 1.6% of concluded S42 Safeguarding Enquiries it was not recorded that the individual or individual's representative were asked about desired outcomes (slightly down from 1.9% last year).
- ↑ 0.6% of concluded S42 Safeguarding Enquiries the individual or individual's representative did not know about desired outcomes (down from 2.2% last year).

Of those cases where desired outcomes were achieved the proportion of them that were recorded as

- ➡ Fully achieved - 47.8% (was 48.9% last year).
- ➡ Partially achieved – 40% (was 41% last year).
- ↓ Not achieved - 12.2% (was 10.1% last year).
- ➡ 87.8% of cases where desired outcomes were recorded were fully or partially achieved (was 89.9% last year).

1. Barnet Safeguarding Adults Board: Our vision and purpose

The Barnet Safeguarding Adults Board ['BSAB'] is a partnership of voluntary, statutory and community organisations. The BSAB's purpose is to enable partner agencies to review adult safeguarding practice across the borough's health, care and criminal justice system to provide positive cross agency challenge, to encourage accountability and strengthen a culture of continuous improvement.

Our vision is for all 'adults at risk'³ in Barnet to be safeguarded from abuse and neglect in a way that supports them to make choices and have control about how they want to live safely. 2020-21 was the final year of our three-year strategic plan, in which we set out three key priority areas:

- Establish consistent practice across partnership agencies which reflect the 'Making Safeguarding Personal' principles⁴
- Ensure 'adults at risk' are heard and understood and their experiences and views shape continuous improvement
- Advance equality of opportunity, including access to justice for 'adults at risk'

2. BSAB quarterly meetings

In March 2021 the BSAB Constitution was revised to streamline the subgroup structure, to reflect how we operate, and to consider issues raised regionally and nationally, for example by the LGA/ADASS Analysis of Safeguarding Adults Reviews⁵. The Board's original Quality Assurance Framework (QAF) was updated to reflect changes in the Care and Support Guidance 2016, our own priorities, learning from the National SAR analysis and local SARs. Key policies and protocols, such as the Self-neglect and Hoarding policy, and the BSAB escalation protocol were also reviewed.

In June 2021 the BSAB focused on issues highlighted in both local and national safeguarding reviews around young people transitioning from different services, education providers and locations and the need for bespoke safeguarding provision for young people transitioning into adulthood. The Board and Barnet Safeguarding Children's Partnership (BSCP) came together to review how effectively we identify those young people at risk, and what support we currently offer. BSCP and BSAB agreed to continue to work closely together to bridge the gap for young people facing potential safeguarding issues when transitioning to adulthood. Progress will also be monitored through the Vulnerable Adolescent Strategy Group.

The Board also approved a 'Making Safeguarding Personal (MSP) - Steps to success for VCFS' leaflet, which explains how to incorporate MSP principles into business as usual for all practitioners, including those working across our voluntary, community and faith organisations. This work was co-produced with VCFS organisations, was launched in June (during carers week) and was also featured at a lunch and learn event in December.

In September 2021 the BSAB focussed on recruiting members with lived experience of safeguarding to join the Board and successfully recruited three experts by experience. These three Board members have also been invited to be our delegates at the London Voices group for adults with lived experience of care and support. The Vice Chair role has also been revised and this role is now held by a person with lived experience. All of these developments support our vision that Adults at risk are heard and understood and their experiences and views shape continuous improvement.

The Board also reviewed qualitative and quantitative data on safeguarding concerns mapped against Barnet's demographics to ascertain why there is under reporting from certain communities. Discussions with the Voluntary, Charities and Faith Sector group highlighted cultural barriers that exist and prevent our ambitions to ensure all of our communities are confident to seek support from partner agencies in relation to safeguarding. We produced a [Safeguarding checklist](#) to support the Voluntary, Charities and Faith Sector, designed for smaller organisations so they can demonstrate good safeguarding practice. This supplements the many links and support for organisations to understand their role and what is expected of them, to support

³ Defined by s42 Care Act 2014 as adults with care and support needs who are at risk of abuse or neglect and unable to protect themselves

⁴ Set out in more detail at: <https://local.gov.uk/our-support/our-improvement-offer/care-and-health-improvement/making-safeguarding-personal>

⁵ Available at: <https://www.local.gov.uk/sites/default/files/documents/National%20SAR%20Analysis%20Final%20Report%20WEB.pdf>

safer service delivery. We also agreed to deliver actions which improve identification and reporting of safeguarding concerns from communities where there is under reporting.

In December 2021 the BSAB sought assurance from partners that we were effectively addressing identified needs in respect of Carers and Safeguarding. Locally we have seen increasingly complex challenges to supporting unpaid carers to provide safe care during and following the Pandemic. This correlates to national research by Carers UK in 2021. Barnet Carers Centre support over 2500 adult carers and 700 young carers. It is estimated that there are up to 40,000 unpaid carers in Barnet providing care for individual with physical, mental health, sensory or cognitive impairments and learning disabilities and substance misuse. The findings from BSAB 'Gabrielle' SAR [Report & Recommendations](#) from a previous year and earlier audit activity in medical treatments demonstrated more needs to be done to support Carers to understand their rights to information, including the right to information about care and treatment plans for those they care for.

In response to this, BSAB's [Unpaid Carer's Leaflet](#) sets out their rights and responsibilities when taking on an unpaid caring role for dissemination by partner agency staff. We also hosted a 'lunch and learn' for partners, staff, volunteers and carers on 'Carers and Safeguarding'. This included a focus on the support offered by the Carers Centre, and covered numerous practical courses to support carers meet key standards in care specifically in respect of common safeguarding issues such as pressure care and manual handling.

In March 2022 the BSAB reviewed how effectively partner agencies were working together to holistically respond when adults with care and support need are at risk of domestic abuse. Nationally, the level of domestic abuse rose during the pandemic. There is still a considerable gap in our knowledge nationally and locally into the risk of domestic abuse faced by adults with care and support needs. We know we need to improve this and ensure easier access to support to safeguarding adults. In response to this BSAB and partners hosted awareness sessions and published a [7-minute briefing on Domestic Abuse](#).

For 2022-23 the BSAB has asked each partner agency to provide assurance on the steps it takes to support staff to recognise signs of domestic abuse; how to report domestic abuse and how to support carers in relation to domestic abuse. The partnership will consider what local data is available to demonstrate improvements to multi-agency practice when responding to domestic abuse against adults with care and support needs.

Throughout this period, despite pressures across health, social care and wider partner agencies posed by the pandemic, partners worked within BSAB subgroups to complete our work programme. A summary of the work completed by the Board and it's Sub Groups, and the impact this had, is given below.

3. The Case Review Group ['CRG']:

The CRG undertakes the statutory duties set out under Section 44 of the Care Act, namely, to review any case where an adult with care and support needs in Barnet has suffered serious harm or died as a result of abuse or neglect, and there is concern that partner agencies could have worked more effectively to protect the adult. The group considers all referrals to assess the opportunity for learning and reports quarterly to the BSAB with recommendations on the commissioning of safeguarding adults reviews (SARs). The CRG also monitors the recommendations and action plans of partners where a review has taken place, and co-ordinates multi-agency responses.

There were no SARs undertaken by the Board in 2021-22.

In last year's annual report we reported on the key findings of BSAB's thematic review in response to two cases involving adults with learning disabilities who experienced harm associated with hoarding and neglect. This was undertaken to explore opportunities for improved practice across safeguarding partners to prevent similar harm occurring in future. Through our bi-annual progress and challenge events, partner agencies were able to update the CRG on steps taken to implement recommendations from the review. The review of BSAB's Self-Neglect policy now enables practitioners to explore cases from different perspectives, promoting creative approaches for family support. If risk is not reduced, cases are escalated to the 'Multi-agency Risk panel'.

The new 'safeguarding champions' programme and more accessible training should also improve implementation and use of the safeguarding policies and the application of equality and mental capacity legal obligations. Similarly, safeguarding leads from all agencies are supportive of the impact the new BSAB escalation protocol and guidance for third sector groups on 'Making Safeguarding Personal' in practice. BSAB also ran lunch and learn sessions on the findings from the review for practitioners and published learning briefings with key messages for managers and practitioners.

During the year, partners were invited to take part in two 'challenge and progress' meetings to advise the BSAB on the steps they have taken to implement recommendations from SARs carried out in Barnet and reported in previous BSAB annual reports. Partners were asked to set out their key actions.

Barnet Carers reported:

- they have ensured carers have access to information relating to fire safety, including how to receive a LFB's Home safety fire visit and assessment.
- they ensure that carers are provided with information around emergency planning and that they issue emergency support cards [Barnet Carers](#), so that if a carer is taken into hospital or otherwise unable to provide necessary care, agencies are made aware and know what support is needed for their loved one.
- that carer needs are clearly identified within support plans and that any specific needs are supported and followed up.

Barnet Mencap reported:

- support staff have received training to ensure they recognise the fire risks, especially the increased risk from the use of emollient creams.
- fire risk assessments will be renewed for all tenants.
- a staff checklist and escalation policy will be used.

The Barnet Group (TBG) reported:

- all front-line staff and managers received a London Fire Brigade Vulnerable Adults training presentation.
- a Fire safety lead officer is in place and they have contributed to LBB's Hoarding strategy.
- there is a newly updated Safeguarding policy and procedure with designated safeguarding leads for both Barnet Homes and Your Choice Barnet, including dedicated safeguarding email inboxes.
- staff receive safeguarding training as part of induction and every two years after.
- fire safety works have been completed to all high-risk buildings under TBGs portfolio all people supported by TBG who have a support plan will have a risk assessment that reflects risks around fire safety.
- PEEPs are in place for all people who may need assistance to evacuate their homes or our buildings in the event of an emergency.
- all people with LD will be encouraged to uptake annual health checks, and attend pre-planned appointments with health professionals to help a greater uptake of annual health checks.

CLCH reported:

- that there has been improved practice that implementing a No Access, Not seen, and disengagement Policy has had on supporting adults with a learning disability to access healthcare and work with their carers or family to ensure reasonable adjustments are made.
- this policy has also been revised and formulated to provide CLCH staff a step-by-step guidance how to deal with no access to patient homes, disengagement and was not brought (face to face, virtual, phone).
- delivery of bespoke 'No access' training which was delivered to community nursing services, No access training is also delivered at Level 3 Safeguarding Adults at Risks training and has been added to the statutory mandatory training booklet.
- ran a campaign to launch revised No access Policy.

Royal Free Hospital reported:

- an individualised risk assessment is in place for every adult and proportionate escalation/mitigation plan for patients who did not attend or was not brought by monitoring via safeguarding process, supervision, and internal incident reporting system.
- power of attorneys/ deputyship is reviewed as part of any best interest meeting.

London Fire Brigade reported:

- an Adult Safeguarding Policy is available to all front-line staff and is the part of initial and ongoing maintenance of skills training.
- recent review of the policy has improved automated Safeguarding and Welfare concern reporting, with a new pathway created.
- a dedicated SAR Champion works across London to support local practice. They also manage the LFB's SAR library and provides support to officers who attend SABs.

Barnet Enfield Haringey Mental Health Trust reported:

- policies have been reviewed for adults who 'did not attend' and adjustments have been made to discharge practices if the adult is dependent on others to access medical treatment or necessary support services.
- Risk to self and others is on their standard risk assessment forms.
- The fire referral form is on the intranet, fire safety is now part of the induction and fire Safety Training is also covered in the level 3 safeguarding training for all professionals (BEH report 90 % compliant levels for staff against NHSE/I training targets).
- BEH safeguarding team audits 'making safeguarding personal' quarterly to ensure the adult at risk's voice is being heard.
- there is an expectation for all health care professionals to provide contingency plans to ensure an adult's care and treatment is provided without interruption.

4. Professional and Quality Assurance 'PQA' Group

Effective quality assurance drives continuous improvement and is recognised as a critical function of the BSAB. The PQA group provides assurance that local safeguarding arrangements are in place and work effectively, with risks and concerns escalated to the Independent Chair and BSAB. The Group meets quarterly to review safeguarding performance via an integrated monitoring report which reviews data and key performance indicators from across the partnership. The group also considers reports from partner agencies detailing their internal audits or in respect of audits conducted to ensure multi-agency protocols were being used effectively. Partners have demonstrated improved client satisfaction and closer adherence to MSP principles and active engagement of service users in line with the BSAB's priorities.

During the course of 2021-22, the group reviewed the data collected and agreed it was necessary to scale back data collected to ensure we could focus on what is priority for partners. People with expertise from partner agencies were asked to join the group. The Terms of Reference of the group and membership was reviewed and a New Chair and Vice Chair were appointed, the vice chair was drawn from VCFS organisations to reflect the parity of esteem and underline the crucial role such groups have in our partnership.

As a result of their quality assurance activity, the PQA subgroup is also well placed to identify gaps in workforce learning across the partnership or areas which requires increased public awareness. This information feeds directly into the Board's workplan by assisting us to identify topics to cover within our monthly 'Lunch and Learn' sessions.

Workforce development and safeguarding training:

An important function of BSAB is to monitor the implementation and impact of safeguarding training. Our PQA subgroup receives regular reports (as part of the BSAB quarterly monitoring dataset) from partners of

compliance with the National Competence Framework for Safeguarding Adults. The Council's adult social care workforce development team provides a comprehensive range of multiagency training for staff from within the council and from partner agencies. This is led by the Principal Social Worker who plays an important role in ensuring that the programme improves the quality of safeguarding practice across the partnership.

The following safeguarding training has been offered the BSAB partnership workforce mainly online.

1. Deprivation of Liberty Safeguards (DoLS)
2. Mental Capacity Act 2005
3. Safeguarding Adults - Level 1
4. Safeguarding Adults - Level 2

Attendance breakdown for 2021-22

| Course Name | | Total |
|---|--|------------|
| Fire Safety Internal (delivered by LFB) | | 69 |
| Fire Safety External “ “ | | 68 |
| Safeguarding Courses | Safeguarding Adults - Legal Literacy | 7 |
| | Safeguarding Adults- Working With Unpaid Carers | 16 |
| | Liberty Protection Safeguards | 56 |
| | Safeguarding Adults - Conducting Enquiries | 31 |
| | Safeguarding Adults - Policy and Procedures | 25 |
| | Safeguarding Adults - Legal Literacy | 24 |
| | Collating & Recording a Safeguarding Plan | 23 |
| | Safeguarding Adults - Enquiry Report Writing | 35 |
| | Managing and Chairing Safeguarding Meetings for Managers | 17 |
| | Safeguarding Adults - Live Themes | 13 |
| | Safeguarding Adults - Working with Outcomes: From Concern to Closure | 8 |
| Total | | 392 |

The Board also runs monthly lunch and learn sessions, which are bitesize webinars for practitioners across our partnership workforce, held on the last Tuesday of each month. Throughout the year, these sessions were well attended by 20 to 50 participants per session with at least 420 people engaging over the year. The following topics were covered in 2021-22:

- **April 2021:** The lessons arising from BSAB's published Safeguarding Adults Review in respect of 'Gabrielle'
- **May 2021:** The 'making safeguarding personal principles'
- **June 2021:** Professional curiosity and embedding the 'making safeguarding personal/ principles'
- **July 2021:** Impact of anti-Semitic and anti-Islamic abuse on those in our community with care and support needs
- **August 2021:** The lessons from a thematic review - responses when concerns are raised in respect of adults with learning disabilities
- **September 2021:** Principles of risk assessment and risk management tools
- **November 2021:** Financial abuse

This remains a key priority for the BSAB and further work is being undertaken in 2022-23 to improve our detection rates and responses to protect adults with care and support needs from financial abuse and economic coercion.

- **December 2021:** Safeguarding and Carers

- **January 2022:** 'Think family' and domestic abuse run jointly with the Barnet Safeguarding Children's Partnership (BSCP)
- **February 2022:** Adult with care needs and equal access to justice
- **March 2022:** Domestic abuse

5. The Access to Justice Group ['AtJ']

This group was set up in response to concerns that adults with care and support needs may need agencies to proactively change practice so that, if they experience abuse or neglect, they can get redress through the civil or criminal legal system. The Access to Justice Sub-group met every quarter and enjoys representation from some of the key stakeholders in Barnet. The group in 2021-22 were committed to identifying the barriers adults with care and support needs face in accessing justice. The group also seeks to improve the collaboration of agencies across social care, health, and criminal justice system, and reports its findings and proposals to the Barnet Safeguarding Adults Board and Barnet's Community Safety Partnership.

Hate Crime Reporting Project

- A Hate Crime Strategy for Barnet was approved by the Barnet Safeguarding Board and the Safer Communities Partnership Board. This has helped to coordinate the efforts to tackle hate crime and encourage residents to report it.
- There has been a record number of disability hate crimes reported this year (see table below), building on the training and workshops provided for professionals and people with lived experience across the borough. The Project reached two hundred residents at events during Hate Crime Week and signed up 50 Champions who will support residents in the community to report Hate Crime.
- The Hate Crime Reporting Coordinator has also developed the Safe Places scheme for adults with learning disabilities. The Project focuses on the interface between safeguarding, disability hate crime and, increasingly, violence against women and girls, to increase the understanding of what this means when keeping people safe.
- The table below sets out hate crime incidents recorded by the Metropolitan Police for the borough of Barnet

| Category of Hate Crime | Apr 2020 – Mar 2021 | Apr 2021 – Mar 2022 |
|------------------------|---------------------|---------------------|
| Race and Religion | 787 | 826 |
| Anti-Semitism | 128 | 154 |
| Islamophobic | 11 | 33 |
| Disability | 14 | 23 |
| Homophobic | 72 | 67 |
| Transgender | 5 | 13 |

Autism and Access to Justice

- The national Autism Strategy has been updated and highlights the importance of improving the support for autistic people in the youth and criminal justice system. The AtJ group has invited commissioners and Autism leads in the borough to explore how this can be done locally.
- Work is needed to identify autistic people who encounter the criminal justice system, to increase the understanding and acceptance of autism by criminal justice staff through training and briefings, to explore how to adapt custody procedures, alternatives to prosecution, and support for victims and witnesses. This work is also incorporated into Barnet's multi agency Autism Action Plan.

Restorative Justice

- Work to increase awareness of restorative justice models, how it can benefit people who have been abused, has increased this year.
- Four short films were made by Middlesex University and Why Me, these were launched in Barnet and won at the national Learning on Screen awards.

6. What partners said about the work of BSAB

North Central London Integrated Care Board:

- Partners collaborated and responded very quickly to the pandemic. For example, the VAWG partnership started weekly meetings to assure that steps were taken to support people at risk of an escalation in DVA; MARAC meetings also moved to weekly; MASH started weekly meetings with health partners to triage and respond to new referrals to the Prevent Channel.
- The team worked together to support some individuals who could have been negatively affected by the restrictions. The partners reported into the SAB via the subgroup reports.

Barnet Enfield Haringey Mental Health Trust:

- An example of where learning from SARs in other boroughs has driven change in BEH MH trust is the implementation of a sexual safety and domestic abuse coordinator. One of the main themes running through the SARs that we have been involved with, is the presence of domestic abuse and family violence.
- In a bid to improve our response and preventative measures in this area, we have created an additional role in the safeguarding team - Domestic abuse and sexual safety coordinator.
- As a mental health trust, we have also found that we work with a proportion of perpetrators and we need to push forward the agenda around this.

London Fire Brigade:

- Whilst some LFB community safety work was suspended or restricted during the pandemic the benefit of relationships developed via the SAB assisted in prioritising cases.
- Collaboration was still affected with the use of IT systems, however due to a change in LFB Borough management previous face to face relationships had not been made, which may have reduced the efficiency slightly.
- The total LFB adult safeguarding referrals for years 2018/19 (pre-covid) were 2,093 as opposed to 2021/22 which was 3,385.

Central London Community Health NHS Trust:

- BSAB has welcomed research by Michael Preston Shoot to influence the board's work and priorities. BSAB has utilised the SAR in Rapid Time model to support a more efficient and effective approach to identifying learning, improving information sharing and utilising legal options to protect vulnerable people.
- A number of multi-agency audits completed and themed approach to work (Adult A and Adult B) in progress to review how the system works to protect and represent learning disabled.
- Policies and procedures have been amended in light of the Board's work.
- BSAB Case Review group actively led by CLCH was well attended and includes feedback from local (neighbouring boroughs) and national SARs and research.

Barnet Mencap:

- The introduction of a new checklist should help the organisation to collect and reflect on what individuals say at the beginning of safeguarding enquires.
- Regarding the learning from SARS the BSAB has introduced training/briefing sessions and improved the website. However, more could be done to promote these two initiatives. People still don't always know what information is available or how to find it.
- The main learning from the SLIP Review has been the need to escalate concerns in an appropriate and timely way between statutory social work teams and the VCS.
- Safeguarding was specifically the focus of the MASH/VCS group and that needs to continue.
- It is a great forum for discussing case dilemmas, sharing lessons from reviews and providing updates on changes or new innovations relevant to safeguarding.

7. Attendance at the Safeguarding Adults Board meetings 2021-22

| Organisation | June 2021 | September 2021 | December 2021 | March 2022 |
|---|-----------|----------------|---------------|------------|
| Local Authority – Adults & Health | | | | |
| Local Authority – Community Safety | | | | |
| Local Authority – Public Health | | | | |
| Royal Free London NHS Trust | | | | |
| North Central London CCG | | | | |
| Central London Community Health NHS Trust. | | | | |
| Barnet Enfield Haringey Mental Health Trust | | | | |
| Barnet Safeguarding Children Partnership | | | | |
| London Fire Brigade | | | | |
| Barnet Group | | | | |
| Barnet Mencap | | | | |
| London Probation Service | | | | |
| Inclusion Barnet | | | | |
| CommUnity Barnet | | | | |
| Barnet Carer Centre | | | | |
| London Metropolitan Police Barnet | | | | |
| | | | | |

8. BSAB Partner financial contribution 2021-22

| Statutory Partner | Contribution |
|---|--------------|
| London Borough of Barnet | £60,000 |
| NCL Clinical Commissioning Group | £20,000 |
| Barnet Enfield Haringey Mental Health Trust | £5,000 |
| Metropolitan Police | £5,000 |
| Central London Community Health NHS Trust | £5,000 |
| Non-statutory Partner | Contribution |
| London Fire Brigade | £500 |
| | |

9. What should you do if you think someone is being abused?



Everybody can help adults with care and support needs to live free from harm and abuse.
You play an important part in preventing and identifying neglect and abuse.

If you or someone you know is being harmed in any way by another person, please do not ignore it.

Any information you provide to us will be treated in the strictest confidence.

Contact the Barnet Adult Multi Agency Safeguarding Hub (MASH)

Tel: 020 8359 5000 (9am- 5pm, Mon to Fri),

Or 020 8359 2000 (out of hours – emergency duty service)

Email: socialcaredirect@barnet.gov.uk

Or call the police on 101. In an emergency call 999.

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Adults & Safeguarding Committee 13th October 2022

| | |
|--------------------------------|--|
| Title | Update on the Barnet all age autism strategy and implementation of the action plan |
| Report of | Chair of the Adults and Safeguarding Committee |
| Wards | All |
| Status | Public |
| Urgent | No |
| Key | No |
| Enclosures | Appendix A. National Autism Strategy and related work through the Barnet Autism Strategy Action Plan Steering Group |
| Officer Contact Details | Sue Tomlin, Head of Joint Commissioning Learning Disabilities and Physical & Sensory Impairment Sue.tomlin@barnet.gov.uk Nazia Hussain, Health & Social Care Joint Commissioner, Learning Disabilities and Physical & Sensory Impairment Nazia.hussain@barnet.gov.uk |

Summary

This report provides an update on the local Barnet Autism Strategy and progress implementing the action plan.

Officers Recommendations

That the Committee note the update on the Barnet All Ages Autism strategy and implementation of the action plan.

1. Why this report is needed

- 1.1 This report is to give an overview of the Barnet Autism Strategy Action Plan (ASAP) and the work of the steering group to support the local priorities and activity and delivery

of the National Strategy for autistic children, young people and adults (2021 to 2026) The steering group has representatives from Family Services, Barnet Education & Learning Services, Adult Social Care and the north central London NHS Integrated Care Board. Other organisations collaborating on implementing the plan include the Leading Edge Autism Group (parents and professionals from education, social care and health who work together to focus on specific additional educational needs), Barnet Mencap and other voluntary sector organisations through Inclusion Barnet’s strategic partnership forum.

1.2 The Barnet Autism Strategy Action Plan aligns with the six priorities in the national strategy:



1.3 The national Autism Strategy aims to tackle the inequalities and barriers autistic people face so they can live independent and fulfilled lives. Our priorities in Barnet are well aligned with this vision and our joint plan reflects this. Our focus to date has been on key areas of employment, health and care inequalities, building community support, information and advice and increasing the range of accommodation and support.

1.4 There are many areas of crosscutting activity for example commissioning of employment and day opportunities and this is intentional to continue to build awareness, increase acceptance and understanding of autism. There have been many benefits of joint work including access to respective networks and training collaborations and shared understanding of challenges in delivering the strategy for example how we work jointly to address gaps in data and information.

1.5 The graphic at appendix A shows the key priorities and activities and section 2 of this report highlights achievements and work in progress. The members of these workstreams will continue to review progress, consider new issues and new data and adapt where necessary to deliver change within the 5-year length of the strategy.

2. Action Plan and National Priority themes

2.1 Supporting more autistic people into employment

2.1.1 The Autism Strategy recommendation was to ensure close working and co-production with the autistic community when reviewing and commissioning of employment support and day opportunities. Our plan is to increase the number and variety of opportunities for job roles, supported internships and work experience for autistic people. This links closely to the work on increasing understanding and acceptance of autism within society.

2.1.2 We have consulted and worked with autistic people to identify the types of roles young people would like to access and are now working to identify job roles across Education, Health, Care and the Voluntary Sector and supporting employers with training and advice. We have also worked with autistic adults to identify challenges they may face in entering or staying in employment, they want face to face local holistic support covering employment, welfare rights and housing and we are working with to address some of these challenges through increased awareness of duties under equalities legislation to make reasonable adjustments. This dialogue is ongoing and helping to shape our commissioning plan for employment and day opportunities.

2.1.3 A key deliverable has been the development of an Employment Advisor role within BOOST with the goal of increasing opportunities for autistic people (and others with support needs) and supporting employers to enable more and local sustainable employment. The Advisor will receive referrals and will work closely with other advisors within BOOST and a key part of their role will be working to champion the strengths and the benefits that many organisations have realised through positive employment practices.

2.1.4 The Employment Project Group continue to work with the Council's Welfare, Employment and Skills Programme to deliver a range of employment related workstreams which include supporting LBB to achieve the next level of Disability Confident status.

2.1.5 We are working with the West London Alliance supported internship programme. A grant application bid to fund specialist Employment Advisors working with autistic people has been made to the Department of Work and pensions through the Individual Placement and Support funding programme. The outcome should be known in October 2022.

2.1.6 We fund and work with Barnet Mencap who operate the Bright Futures Employment project which is a specialist programme supporting autistic people into employment. The support provided includes:

- Building pre-employment skills and personal development
- Support to increase confidence and motivation
- One-to-one in-work support via job coaching
- Opportunities, employment and training based on career goals

2.1.7 Bright Futures works alongside the Autism Advisors service funded by NHS North Central London ICB. This service provides a local autism screening (pre-diagnosis) and advice service.

2.1.8 We are modelling the opportunities from technology/digital to support access and sustainability of employment. We are also working with Greenspaces and Leisure to consider opportunities for supported employment.

2.2 Building the right support in the community

2.2.1 In our new accommodation and support commissioned services, we have included an increased focus on the support needs of autistic people to ensure people can live as independently as possible and to offer an alternative to residential or other more restrictive provision. These services are also a core component of the autism action plan theme of information and early support.

2.2.2 Whilst autistic appropriate service provision is a requirement throughout the accommodation and support specification four categories have been consulted on and developed to meet the needs of autistic people:

- **Neighbourhood Networks** support early intervention through peer support networks. Support that focuses on the strengths and assets of people as a group or network, enabling individuals to live as independently as possible.
- **Supported living for young adults** - accommodation, care and support for young people with health and social care needs transitioning to adult services.
- **Supported Living for people with complex disabilities and health needs** - well-coordinated social care and clinical support to maintain good and positive health as well as independence.
- **Crash Pad** – emergency respite to prevent and minimise the risk of crisis by providing either short term emergency accommodation (Crash Pad) or extra support within the person's home.

2.3 Training

2.3.1 Training is another key theme running through the various workstreams in the action plan, where possible the principle of training delivered by autistic trainers and those with lived experience is being adopted. Training opportunities are being shared across agencies to support culture change and team working.

2.3.2 New employee induction training on autism is being implemented across BELS with the aim to extend this across the council and partners. This will increase understanding of Autism. Barnet Mencap Autism Advisors have given training to adult social care services and we intend to build on this by extending the training to NHS staff.

2.3.3 NCL ICB will roll out of Oliver McGowan Mandatory Training in Learning Disability and Autism, where services will be trained in de-escalation approaches, strategies that focus on the reduction of stress, fear and frustration and prevention of aggression and crisis situations. We are also working on targeted training and support for carers of people with autism.

2.4 Mentally Healthy Autistic community

2.4.1 There is increasing demand from autistic people with mental health challenges. We are working with Resources for Autism, Mind (Enfield & Barnet) and Barnet Mencap to develop a project to respond to these needs that combines both intervention and prevention. The aim is to build community support to enable a Mentally Healthy autistic community. This will be achieved by improving mental health outcomes for adults with autism via provision of autism specific therapy, advocacy and advice, and case work. and change via training and capacity building. This has been co-produced with autistic people. Further work on the project is underway; the organisations involved are finalising their partnership model and we will jointly undertake further stakeholder engagement in the Autumn.

2.5 Tackling health and care inequalities for autistic people

2.5.1 Barnet has the largest population of diagnosed autistic people in North Central London. We are supporting the NCL LD and Autism plan and contributing to the development of an NCL-wide all-ages Autism strategy. The NCL plan includes a revised assessment recovery pathway, including local diagnostic services for adults, supporting the reduction of hospital admissions to mental health inpatient settings.

2.5.2 The plan also has a focus on physical and mental health and equality in access to services for patients with a learning disability and/or autism. Jointly, we aim to pilot a programme of Autism-specific Annual Health Checks. The council's joint commissioning team also leads on the Learning Disability Mortality Review (LeDeR) Programme, a national requirement for the NHS to review learning from deaths which now includes deaths of autistic people. The council and NHS working together developed bespoke and accessible vaccination programmes for autistic people and people with learning disabilities. These included carefully selected vaccination sites across the borough where reasonable adjustments were made for patients, mobile vaccination services, pop up clinics, support with needle phobia and vaccinations at home. We worked with Barnet Mencap to deliver a more personalised face to face workshop on Health and the importance of getting vaccinated.

2.6 Improving support within the criminal and youth justice systems

2.6.1 There is increasing information and evidence that autistic people and others with support needs are being failed by the criminal justice system¹. The local action plan includes design of inclusive training to increase autism awareness, acceptance and understanding; wider stakeholders including the Police and criminal justice system have participated and further analysis of training needs is underway.

2.6.2 Work was undertaken with Barnet Mencap, Adult Social Care and the Community Safety Team to inform the new Domestic Abuse Strategy to consider the reasonable adjustments professionals should adopt when supporting victims and or perpetrators who are autistic (or have Learning Disabilities). The plan includes identifying funding to commission the autistic community in the voluntary sector to produce tools for professionals to use in the Criminal Justice System.

¹ Equality and Human Rights Commission (EHRC) June 2020.

3. Reasons for recommendations

N/A. This report presents the progress in delivering the autism strategy to the committee.

4. Alternative options considered and not recommended

None in the context of this report.

5. Post decision implementation

5.1 The council and partners will continue to deliver the autism action plan.

5.2 Corporate Priorities and Performance

5.2.1 The work of the autism action plan supports the achievement of the council's social care priority of keeping people independent.

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

6.1 The work under the plan is being delivered within existing resources. Any requirement for additional investment to deliver the programme will be considered as detailed proposals are developed and then considered through the council's budget setting process.

7. Legal and Constitutional References

- Adults and Safeguarding Committee has responsibility for all matters relating to vulnerable adults, adult social care and leisure services.
- 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
- To promote the Health and Wellbeing Strategy and its associated sub strategies
- To receive reports on relevant performance information and risk on the services under the remit of the Committee

The National Strategy for Autistic Children, Young People and Adults 2021-2026 followed the introduction of the Autism Act 2009, and updated the national strategy.

8. Insight

8.1 An Autism Needs Assessment was completed by the councils Public Health service in 2019, there are many caveats on the prevalence and modelling used to predict demand. Improving data quality is included in the action plan and awareness raising is helping to increase the inclusion of autism in data collection. The NCL autism strategy will also be extremely important in establishing demand need and gaps.

9. Social Value

- 9.1 Commissioning of any new services or contracts (employment and day opportunities for example) will include how wider social, economic and environmental benefits can be achieved. Social Value was considered as part of the evaluation of accommodation and support bids with a method statement question dedicated to this. Bidders were required to demonstrate how they will deliver social value throughout service delivery including how supported housing should contribute to creation of healthier, safer and more resilient communities.

10. Risk Management

- 10.1 Projects and activity will be managed in accordance with the council's risk management framework and to meet national requirements and legislative requirements.

11. Equalities and Diversity

- 11.1 The aim of the action plan is to centres on reducing inequalities and improve opportunities for autistic people in Barnet. Equality Impact Assessments (EIAs) will be completed to support any new services or contracts (employment and day opportunities for example) or areas of activities where significant changes may be planned. The amount and quality of relevant data to understand the level and type of needs is challenging but improvement of data and understanding the experiences of autistic people through the action plan is a key priority and work across and with NCL will also ameliorate these gaps.
- 11.2 The greater range of accommodation support options and providers described in this report increases the person-centred support available for autistic people and those with disabilities and mental ill health to maximise their independence and achieve their goals. Contracts for the Accommodation and Support Services include explicit requirements fully covering the council's duties under equality legislation and the specification requires that hard to reach groups are to be identified and can access the services.

12. Corporate Parenting

- 12.1 The National Autism strategy is all ages, and the local plan and strategy is for all children including autistic children and their parents and carers. Adult social care services are provided to people who meet Care Act eligibility criteria and who may have been looked after by the council or are care experienced. Understanding of and planning for the needs of young autistic people moving into adults services is a key area of focus in the action plan. The council's leisure provider offers discounted and free access to people who are care experienced or looked after. We are also working with these services to increase employment opportunities for young people.

13. Consultation and Engagement

- 13.1 We undertook engagement through Microsoft Teams with residents with disabilities including autistic adults regarding employment in May. The feedback included wanting holistic support on employment, benefits and welfare rights, having support for these from a face-to-face source, wanting employers to be more aware of disability and disability related adjustments (mainly on the differences on what autistic people may need in terms of reasonable adjustments), being supported into employment of their choice, having 'space' to search for employment beyond Libraries, filling the 'digital inclusion' gaps.
- 13.2 In addition, the engagement team conduct regular engagement and involvement activities with people who draw on care and support and their carers including autistic people. The new engagement strategy and programme of work to engage with residents and people who draw on care also includes autistic people and carers. Adjustments will continue to be made to ensure that barriers to engagement with autistic people are removed and appropriate adjustments made.

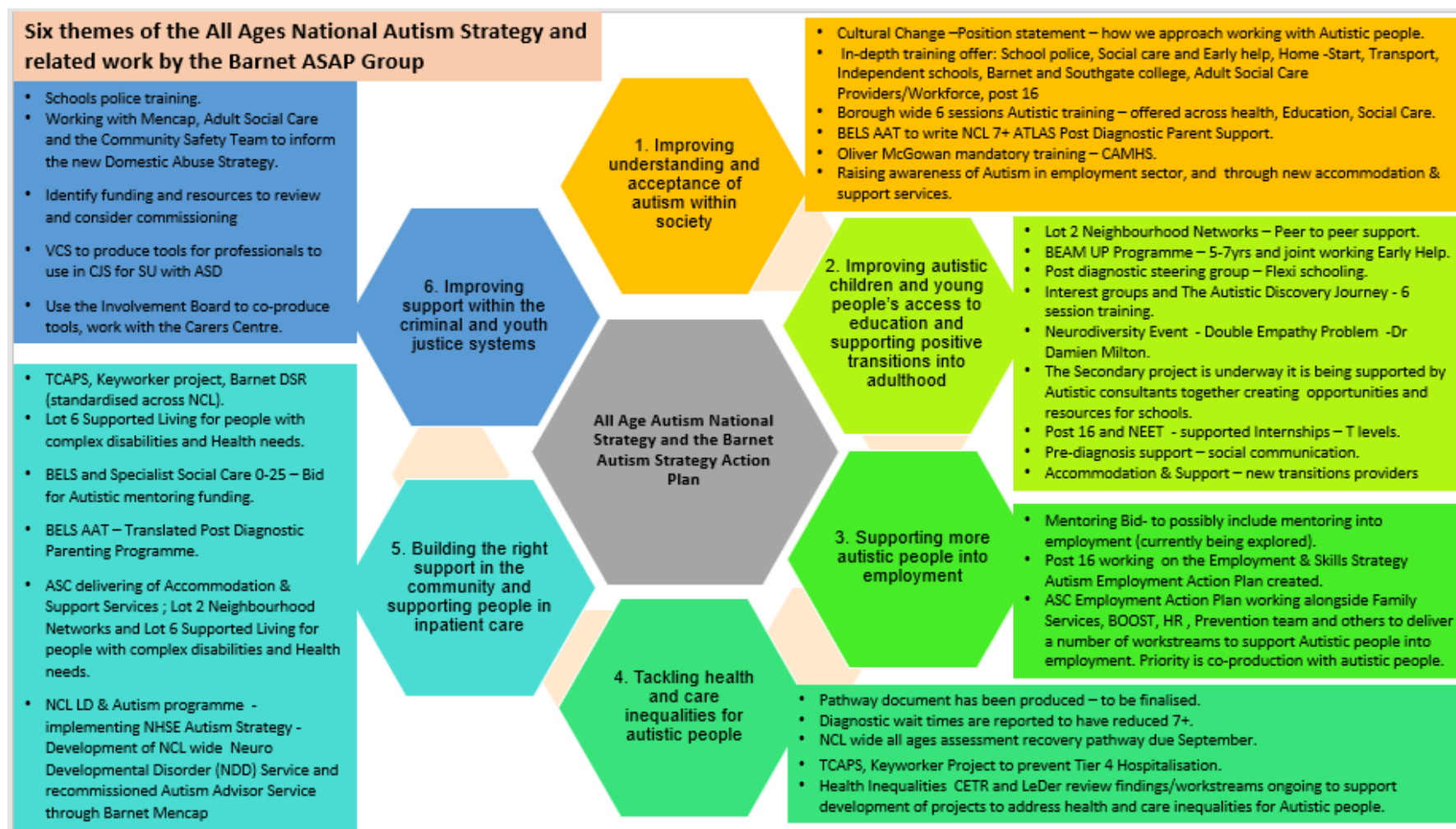
14. Environmental Impact

- 14.1 None in the context of this report.


15. Background papers

None.

Appendix A. National Autism Strategy and related work through the Barnet Autism Strategy Action Plan Steering Group



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| | |
|---|---|
|  | Adults and Safeguarding Committee |
| | 13th October 2022 |
| Title | Quarter 1 (Q1) 2022/23 Performance Report |
| Report of | Cllr Paul Edwards, Chair – Adults & Safeguarding Committee |
| Wards | All |
| Status | Public |
| Urgent | No |
| Key | Non-key |
| Enclosures | None |
| Officer Contact Details | Paul Kennedy, Head of Business Intelligence, Performance & Systems paul.kennedy@barnet.gov.uk Dean Langsdon, Head of Finance, dean.langsdon@barnet.gov.uk |

Summary

This report provides an overview of performance for Q1 2022/23, focussing on activities to deliver the council's priorities in the areas of adult social care, mental health and healthy lives which fall within the remit of the Adults and Safeguarding Committee.

Officers Recommendations

1. The Adults and Safeguarding Committee is asked to review the progress, performance, finance and risk information for Q1 2022/23 and make any referrals to Policy and Resources Committee in accordance with the terms of reference of this Committee, as it decides appropriate.

1. Why this report is needed

- 1.1 The Adults and Safeguarding Committee is responsible for all matters relating to adult social care and leisure and for working in partnership with the health and wellbeing board and NHS partners. This report provides an overview of performance for Q1 2022/23 focussing on activities to deliver the priorities which fall within the remit of the Adults and Safeguarding Committee.

1.2 This report sets out progress against the following priorities relevant to this committee:

- To work with our NHS, the community and voluntary sectors
- Introduce a charter for social care and develop a new engagement strategy with people who draw on care and support
- Prioritise independent living, putting people at the centre of their care
- Maximise the use of technology and implement innovative technology to support independence
- Support local social care providers and the social care workforce, working with education providers & addressing recruitment & retention
- Being a dementia friendly borough
- Introduce a Barnet Charter for Mental Health
- Health inequalities – healthy living through physical activity

1.3 **To work with our NHS, the community and voluntary sectors**

- 1.3.1 The council is playing a leading role in the Barnet Borough Partnership (BBP) which brings together all NHS organisations working in the borough, the council, Health Watch and Voluntary and Community Sector (VCS) representatives. The goal of the partnership is to provide better health and care to Barnet residents, so that they live healthier lives. The continued development of the borough partnership will continue to be a priority for the A&S committee. The BBP is a core part of the new north central London Integrated Care System (NCL ICS) which became a statutory entity in July 2022. The BBP delivery programme is chaired by the Executive Director - Communities, Adults & Health.
- 1.3.2 Recent achievements include the launch of the new borough wide multi-disciplinary team for frailty. This team is co-ordinated by Barnet's adult community health provider (Central London Community Health – CLCH) and includes consultants, the VCS and specialist nurses. The team will provide co-ordinated and proactive care for frail older people including those living with dementia. In addition, as part of the BBP's work on health inequalities, led by the council's deputy director of public health, a new peer support programme on heart health has started. Peer support workers employed from within our Asian and South Asian communities are providing culturally appropriate lived experience peer support to our residents living with hypertension, supported by public health training and support. In mental health care, a new collaboration between the Borough Partnership, Barnet Enfield and Haringey Mental Health Trust (BEHMH) and 'Art Against Knives' (AAK, a local VCS organisation), funded by the Borough Partnership is being launched. This will support young Black males to tackle the inequalities they experience, through peer support and provision of creative spaces and activities. Finally, a new project has commenced to develop more co-ordinated and integrated working between health, social care and the VCS at the level of neighbourhoods (typically populations of 30-50,000 people). The council has started mapping relevant community assets and services as part of this project.
- 1.3.3 The council has begun development of a new all age carers strategy working in partnership with local residents, the NHS and VCS, including Barnet Carers Centre. The

strategy will ensure that the voice of carers is heard in the review and future shaping of the support offer to informal and family carers in Barnet. Amongst other things, the strategy will address:

- Identification of informal carers
- Equity of access for minoritised communities
- Support for carers to look after their own health and wellbeing
- Social connectedness amongst carers

1.3.4 Work is also underway in partnership with the NCL Integrated Care board to develop an enhanced mental health support offer for residents in care homes. This will provide clinical in-reach from mental health nurses to support staff in care homes to provide targeted interventions for residents in need of this support. This work is being led by Barnet and it is anticipated that this will be in place later in the financial year.

1.4 Introduce a charter for social care and develop a new engagement strategy with people who draw on care and support

1.4.1 The Council has strong aspirations to develop and strengthen its engagement with people who draw on care & support, using co-production and engagement approaches. Work has begun in earnest on the new Adult Social Care engagement and co-production strategy and charter. We have established a steering group which includes residents with lived experience and strong representation from user groups and the voluntary sector. The strategy and charter were launched at Age UK Barnet, with press and social media coverage.

1.4.2 New branding for adult social care has been developed and there is new focus on promoting recruitment to the 200-strong People's Voice group and wider engagement opportunities. We are working with the national expert organisation on co-production, Think Local Act Personal, to bring in wider expertise. A programme of engagement activities has been planned to shape and co-produce the strategy, including working closely with voluntary and community groups to reach people who may not always be heard by the council.

1.4.3 The adult social care Involvement Board meetings take place quarterly. This is a group of residents with lived experience of social care and caring. We have made good progress on several co-production and engagement projects. These include:

- In-depth customer experience 1:1 interviews with residents with care and support needs, to help improve the experience of disabled and older people when contacting the council.
- People with lived experience have taken part in a working group on employment and support to shape the recommissioning of this service.
- We have recruited a resident with lived experience to help with choosing a new advocacy provider.
- We are currently gathering people's experiences of the care technology service.

- Co-production is also a core part of the development of the council's new dementia strategy, with over 100 people living with dementia engaged so far.

1.5 Prioritise independent living, putting people at the centre of their care

- 1.5.1 The council continues to promote independent living and a strengths-based approach to service delivery, in line with national legislation and policy. The Committee has previously agreed the expansion of the Prevention and Wellbeing Team to increase opportunities for people to stay independent. All posts within the expanded Prevention and Wellbeing Team have now been filled, which has supported the increase in referrals seen (17% increase in referrals to Adult Social Care from 20/21 to 21/22). The team have started local drop ins and set up local community events to support residents. The aim of these is to offer information and advice and support people to access the help they need. It also helps the team identify opportunities for new community groups and activities. Five events were held in the last quarter. These included a joint event with Barnet Carers Centre, flower bank (a Barnet based start-up that aims to reduce waste in the flower market by working with retailers, florists and suppliers to turn end of shelf-life flowers into beautiful arrangements), and others in the Spires Shopping Centre in High Barnet.
- 1.5.2 Work continues on two extra care schemes, providing 126 new flats for older people with care and support needs. The construction of Atholl House in Burnt Oak is due to be completed in January 2023 and the care and support service will be delivered by Your Choice Barnet. A mobilisation steering group will oversee the programme to fill the fifty-one flats at Atholl House throughout 2023. Construction on the final extra care service in the current capital programme, Cheshir House in Hendon, is on track to be completed in early 2024.
- 1.5.3 A working in a "Strengths Based Way" relaunch is planned for November 2022 to refresh and revitalise this already embedded practice. In addition to this there has been further promotion of the work of the Prevention and Wellbeing Team, including partnership work with social work teams in supporting people to stay as independent as possible exploring assets available to them to meet their identified outcomes. Regular quality assurance activities continue to ensure practice supports our approach.
- 1.5.4 Work is continuing with development of an employment action plan for disabled people. A task and finish group has been established with representatives from Adult Social Care, Education and Skills, Barnet Homes and Family Services. Resident engagement has been undertaken to understand challenges and needs around employment and employment-based support with further surveys due to go out in Q2. A part time Disability Advisor post in BOOST post has been established and is in place to support disabled residents.
- 1.5.5 Preparatory work is underway to implement the new Liberty Protection Safeguards (LPS) requirements and a detailed implementation plan will be developed once the implementation timescale is confirmed nationally. Lead Practitioners are attending regional and sub-regional forums to keep apprised of developments taking place in other areas. A local steering group is meeting every other month and this group will oversee the implementation of LPS.

1.5.6 There is continued implementation of the council's Autism Action Plan with activities in Q1 including:

- In-depth training offer, co-produced with autistic consultants, occupational therapists and educational psychologists being delivered for staff in health, education and social care
- Continued work to raise awareness of autism in the employment sector, and through new accommodation & support services.
- Adult Social Care and Mencap Autism Advisors have delivered awareness training to staff and organisations including instructors at Better (GLL) Equality Housing and the Westminster Drug Project.
- New accommodation & support services have been mobilised including services for autistic people.
- Commissioned providers / and their staff are required to undertake autism related training.
- We began a review of our register of people with learning disabilities and autism, established under transforming care reforms to ensure monitoring the needs of people who need additional support and care and treatment reviews with health. This includes working 0-25 Specialist Autism Team and mental health teams to increase awareness.
- Led on planning to support vaccination for Autistic people through specialist workshops, webinars and clinics, including Mencap Project 300.
- Established links to the Fit & Active Barnet Programme.

1.5.7 A single point of access service for all types of advocacy has been specified in order to strengthen and simplify the offer to residents. Barnet are leading the procurement process for a joint contract across Barnet, Enfield and Haringey. The tender was published and evaluated within Q1. Unfortunately, only one bid was received and was not compliant. The tender will be re-published in the autumn with some revisions to improve attractiveness whilst still delivering the strengthened and simplified offer.

1.5.8 The council's bid to the Department for Levelling Up, Housing & Communities for Changing Places Toilets (CPTs) was successful and grant funding of £180,670 has been confirmed. This will provide 4 CPTs in the borough with the aim to complete 2 CPTs in 22/23 and 2 in 23/24. The location of the CPTs will be:

- Headroom Café Golders Green High Street NW11 – Childs Hill
- Finchley Lido Leisure Centre N12 – Woodhouse
- Barnet Mencap / Age UK Station Road Hendon NW4 - Hendon
- Childs Hill Library NW2 – Childs Hill

1.6 **Maximise the use of technology and implement innovative technology to support independence**

1.6.1 Care technology enables residents to maintain their independence and stay safe and connected in their homes and out in the community. The contract with the council's current care technology provider is due to end in March 2023. A competitive procurement process has been initiated and is scheduled to conclude at the end of Q3 2022

- 1.6.2 The new service specification has been designed to reflect the increasing use of care technology equipment in Barnet, further developing the technology-first culture in Barnet to enable residents to maintain and maximise their health, wellbeing and independence and prevent crises.

1.7 Support local social care providers and the social care workforce, working with education providers & addressing recruitment & retention

- 1.7.1 The Council continues to work with the North Central London (NCL) Integrated Care System (ICS) to secure workforce funding and training opportunities for care staff and will continue to provide support through the Care Quality Team through a range of activities including:

- With the four other north central London councils, we have submitted a bid for funding to the Mayor of London for an Adult Social Care Academy, which is two-year initiative to support Londoners affected by Covid-19 into work within Adult Social Care (ASC).
- Working with a job broker from the Princes Trust to support linking long-term unemployed young people into work with ASC providers.
- Recruiting a 'workforce lead' within Care Quality in Q2/3 21/22 to lead on a programme of recruitment support to the sector, including a development programme for registered managers and recruitment fairs.

The council's integrated care quality team have held two large-scale provider events to focus on the legacy of covid-19 on the care market, as well as a further series of local peer-led forums for different groups of providers.

1.8 Being a dementia friendly borough

- 1.8.1 Being a dementia friendly borough is an ambition whereby people affected by dementia are empowered, understood, included in community life, and supported to live well. Work is progressing at pace, led by Barnet's Public Health team towards Barnet becoming a dementia friendly borough. An application to the Alzheimer's Society being submitted in Q2 this will provide recognition of the borough working towards becoming a dementia friendly borough with an assessment over a period of 12 months as set out in the application
- 1.8.2 The RAF Museum has received dementia friendly venue charter accreditation and Colindale Communities Trust and Barnet libraries have registered and are working towards accreditation.
- 1.8.3 The Council's leisure management provider, GLL recently received funding from Swim England for a Dementia Swimming project at Finchley Lido Leisure Centre.
- 1.8.4 PayPal are participating in an engagement session about the dementia workstream of the Healthier High Streets project.
- 1.8.5 Work has begun to coproduce a borough-wide dementia strategy that looks at improving the holistic support offer to people living with dementia and their carers.

1.9 Introduce a Barnet Charter for Mental Health

- 1.9.1 The and the Mental Health Wellbeing Steering Group met during Q1. Both groups are attended by stakeholders from across the system including the council, Community Barnet, Inclusion Barnet, Young Barnet Foundation, Meridian Wellbeing, Mind, and New Citizens Gateway. Invites are also extended to all stakeholders involved in supporting mental wellbeing and are often attended by the mental health trust, the council's commissioned substance misuse provider, the mental health trust, Age UK, Mencap, Listening Places, Public Health, and other VCS partners. The meetings are used to discuss key themes and challenges and identify how partners can work together to improve mental health outcomes for residents. The Mental Health Strategic Partnership is working with the council on the development of the mental health charter where high level objectives have been identified, including the need for it to be truly coproduced.

1.10 Health inequalities – healthy living through physical activity

- 1.10.1 The Fit & Active Barnet Partnership have worked collaboratively during Q1 to support residents to lead more active and healthy lifestyles. Examples include:
- Development of a cross council active travel working group that delivered a successful event and comms activity to mark Clean Air Day on 16 June with a focus on active travel and health benefits.
 - Relationship established between the Council's leisure management provider GLL, Saracens Foundation and New Citizens Gateway which has seen 85 refugees and asylum seekers benefit from a free three-month leisure membership and 100+ participants of all ages and abilities attend a weekly multi-sport session hosted by Saracens Foundation.
 - Fit & Active Barnet integrated within the borough's Cardiovascular Disease Prevention Programme and successful School Super Zone expression of interest applications (Saracens High School and Edgware Primary).
 - Worked collaboratively with Argent Related and Women in Sport to undertake a research project in the Brent Cross Town regeneration to understand motivations and barriers to women and girls being physically active. Data collated from survey responses and focus group interviews will be used to deliver a #TimeTogether campaign in October (encouraging women and girls to enjoy being active together) and inform future delivery requirements.
 - Launch of new community based physical activity opportunities; Victoria Park Our Parks Bootcamp, Swing Fitness boxes installed within Montrose Park, Victoria Park and Hendon Park, and StreetTT (outdoor table tennis) - in addition to supporting the continued delivery and promotion of existing opportunities such as Parkrun events, GoodGym, free swimming for under 8's, 8-15 year olds swim for £1, free swimming for carers (including foster carers), looked after and care experienced children and young people
- 1.10.2 At the end of Q1 GLL were reporting 9886 members – equivalent to 91% of pre-Covid levels (10,968 March 20) and a 50% growth since leisure centres were permitted to open post lockdown (6,570 April 21).

1.10.3 The demographic breakdown of the 9886 members is as follows

| | |
|-----------------------|---------------|
| Female | 4,630 (46.8%) |
| Male | 5,200 (52.6%) |
| Unknown/Not Specified | 56 (0.60%) |
| 0-15 years | 911 (9%) |
| 16 – 24 years | 1,067 (11%) |
| 25 – 44 years | 3,818 (39%) |
| 45 – 54 years | 1,697 (17%) |
| 55 – 64 years | 1,255 (13%) |
| 65+ | 1,138 (12%) |
| White | 3,599 (37%) |
| BAME | 2,421 (25%) |
| Unknown/Not Specified | 3,866 (40%) |
| Disabled | 531 (4%) |
| Non-Disabled | 6,991 (71%) |
| Unknown/Not Specified | 2,364 (24%) |

1.10.4 Fit & Active Barnet Card (pay and play) membership in Q1 reached 39,861 - 819 of whom have a Fit & Active Barnet Carers Card which offers enhanced benefits including free swimming at all times. This is a total increase of 768 new Fit & Active Barnet Card members since Q4 2021/22.

1.10.5 There were 379,065 attendances across leisure centres in Q1.

1.10.6 GLL have continued to invest in facilities including CCTV upgrades and a much-needed facelift to the entrance area at Hendon Leisure Centre (including the installation of new flooring, redecoration and installation of an entry system - providing extra security and accessibility support). PoolPods are now available across all pools in the borough which assist service users with accessibility difficulties to access swimming. Upgrade to dry side changing cubicles and school changing facilities at Finchley Lido Leisure Centre.

1.10.7 In Q1, GLL worked with VCS partners on the following:

- Dementia Cafe relaunched in Q1 in partnership with Dementia Club UK - delivered alongside dementia friendly swimming and multisport sessions.
- Launched of a visual impairment physical activity session in partnership with Middlesex Association for the Blind
- Delivery of fifteen community-based sessions with a focus on; older people, people with a disability, carers and the cared for, low participation groups, schools and early years.

1.10.8 GLL continue to work collaboratively with the Council and partners across the borough to deliver health interventions including:

- Xplore child weight management, Activate Schools and Afterschool Clubs
- Adult Weight Management - now available for self-referral (in addition to GP referral)
- Physical Activity on Referral
- Cancer Rehabilitation
- Diabetes Referral
- Falls Prevention

1.11 Your Choice Barnet (YCB)

1.11.1 In 2012, the London Borough of Barnet transferred its four Day Services, Supported Living, and the Respite Service for adults with disabilities into the newly formed Barnet Group, becoming Your Choice (Barnet) Ltd. YCB is the sister company to Barnet Homes and provides services to adults who have care & support needs. In the 10 years since then, the organisation has expanded to include a personal assistant service, PA Choices, in 2016 and a Reablement service in 2017, which supports discharge from hospital by providing up to six-weeks of support for people to regain lost skills. In 2019, the new Extra Care scheme Ansell Court in Mill Hill was opened, three Residential Care Homes and two Day Centres for older people also transferred into YCB the same year. Today YCB supports almost 600 people and employs about 500 care and support staff to carry out this vital work.

1.11.2 There are five people supported by YCB who have retained their employment during Q1, which is below the target of seven, however this has been consistent over the past 12 months.

1.11.3 No supported living tenancies have broken down during the period.

1.11.4 All service users at the respite service have plans in place.

1.11.5 Five people in Q1 have increased their independent living skills, leading to reductions in the level of support that they have.

1.11.6 79% of YCB staff have completed mandatory training and their refresher training is in date. 1 April saw the transfer of all eLearning to a new IT platform and there have been some issues to resolve with that. L&D will continue to work with managers to ensure that all training is completed and Q2 will see an improvement.

1.11.7 100% of YCB staff have completed their required specialist training.

1.11.8 There are six YCB Care Quality Commission registered services and the current ratings are as follows:

| | |
|------------------|-------------|
| Supported Living | Outstanding |
| Valley Way | Good |
| Enablement | Good |
| Meadowside | Good |
| Dell Field Court | Good |
| Ansell Court | Good |

1.11.9 There were no unresolved complaints at the end of Q4

1.11.10 Overall customer satisfaction has increased from 83.2% up to 92.4%

1.11.11 There are 11 YCB indicators, 10 of which are rated Red, Amber or Green. Of the 10, seven (70%) are rated Green with two (20%) Amber and one (10%) Red.

| | | Q1 2021/22 | Q1 2022/23 | Target |
|------|--|---------------|---------------|------------------------|
| 1.1 | No. of additional service users in employment for 2 hours or more | 2 | 2 | 8 |
| 1.2 | Number of service users supported to retain employment | 5 | 5 | 7 |
| 1.3 | % of supported living tenancies that breakdown during reporting period | 0% | 0% | 0% |
| 1.4 | % of service users in respite with a return to home plan and service end date. | 100% | 100% | 99% |
| 1.5 | Service Users moved on from a service level to a lower service level | 3 | 5 | 5 |
| 1.6 | % Staff that are in date with YCB's staff training programme | 100% | 79% | 95% |
| 1.7 | % Staff that are in date with their specialist accredited training programme | 100% | 100% | 95% |
| 1.8 | Number of Safeguarding Concerns reported | 2 | 1 | Tracking |
| 1.9 | % of services rated good or outstanding by the Care Quality Commission at the most recent inspection | 71% | 100% | 100% |
| 1.10 | Number of unresolved complaints | 0 | 0 | 0 |
| 1.11 | Customer satisfaction | 83.2% | 92.4% | 80% (Annual survey) |

1.12 Finance Summary

1.12.1 This report sets out the forecast outturn position for the 2022/23 financial year as of

30th June 2022 for the services which fall within the Adults and Safeguarding Committee.

1.12.2 At month three, the forecast financial outturn is:

- Overall forecast overspend of £4.622m (4.2%)
- Forecast a net use of reserves of £3.512m;

Table 1: Forecast Revenue Outturn at Month 3

| Service Area | 22/23 Budget | Projected Outturn | Variance (under)/over | | Reserves (applied)/contributed | Revised Variance (under)/over | |
|---------------------------------|----------------|-------------------|-----------------------|--------------|--------------------------------|-------------------------------|-------------|
| | £'000 | £'000 | £'000 | % | £'000 | £'000 | % |
| Adults transformation programme | 0 | 350 | 350 | 0.0% | (350) | 0 | 0.0% |
| ASC Prevention Services | 2,709 | 2,726 | 18 | 0.7% | (90) | (72) | -2.7% |
| ASC Workforce | 17,995 | 20,253 | 2,258 | 14.4% | (1,987) | 271 | 3.3% |
| Sub-total | 20,703 | 23,329 | 2,626 | 12.7% | (2,427) | 199 | 1.0% |
| Placements Budget | | | | | | | |
| Integrated Care - LD | 30,782 | 32,335 | 1,553 | 5.0% | | 1,553 | 5.0% |
| Integrated care - MH | 10,399 | 11,879 | 1,481 | 14.2% | | 1,481 | 0.4% |
| Integrated Care - OA | 39,382 | 39,332 | (50) | -0.1% | (600) | (650) | -1.7% |
| Integrated Care - PD | 9,837 | 11,877 | 2,040 | 20.7% | | 2,040 | 20.7% |
| Sub-total | 90,400 | 95,423 | 5,023 | 5.6% | (600) | 4,423 | 4.9% |
| | | | | | | | |
| Adults Social Care Total | 111,103 | 118,752 | 7,649 | 6.9% | (3,027) | 4,622 | 4.2% |
| | | | | | | | |
| Leisure | -1,572 | -1,087 | 485 | -31% | (485) | 0 | 0 |
| | | | | | | | |
| Grand Total | 109,531 | 117,665 | 8,134 | 7.4% | (3,512) | 4,622 | 4.2% |

1.12.3 Table 2 provides a breakdown of the variances as at Month 3 and underlying budget position.

Table 2: Month 3 variance detailed commentary

| Service Areas | Month 3 variance after reserves | Commentary |
|----------------|---------------------------------|---|
| | £'000 | |
| ASC Prevention | (72) | Slight contract reduced forecast spend |
| ASC Workforce | 271 | The service is utilising one-off funding streams and assessing the longer-term impact on service delivery. However, there is still a reported overspend of £0.270m mainly relating to the cost of the increase in employers NI (c.£0.200m) the impact of which is not included in budget allocations. |

| | | |
|----------------|--------------|---|
| ASC Placements | 4,423 | <ul style="list-style-type: none"> - Current forecasts reflect a level of increase in annual activity and unit cost which exceeds estimates used for setting this year's budget. When reviewing activity at P3 an average increase of 5% is presenting above fy 2021/22 total activity levels, of which 1% is 'covered' by the application of growth funding. Unit costs are also reporting significant increases across all settings but mainly in both residential and nursing c7%, reflecting packages becoming more complex and market conditions with constrained supply and high demand. - There are plans to part-mitigate these increases, which include utilising a number of 'one-off' funding streams and accessing additional income from health. - Current estimates also include a level of upward churn for this financial year which will be reviewed during monitoring periods. . The number of residents requiring care and support upon discharge from hospital has been very high in quarter 1. - P3 estimates include an assumption on care provider rate inflationary uplifts which reflect the 'budgeted' offer to providers in Barnet and across NCL. Current cost of living pressures, including utility volatility, put pressure on providers to maintain uplifts on offer – this is under constant review. |
| Leisure | 0 | There continues to be a financial impact on the Councils Leisure contract as the service are still recovering from the pandemic, and pressures are being exacerbated by increasing energy costs. Work has been undertaken with GLL to restructure management fee income and actions are being taken to support energy efficiencies. Despite these measures, original income targets will still not be achieved by GLL leading to a shortfall in 22/23 which will be mitigated by reserve funding. |
| Total | 4,622 | |

1.12.4 Application of reserves - The council holds reserves to deal with future pressures where the value or the timing of the pressure is uncertain, or where the funding can only be spent on specific objectives (e.g., grant funding). Reserves are divided into 'earmarked' reserves, where the spending objective is known with some clarity, and 'general' reserves, intended to mitigate the impact of wholly unforeseeable costs. The levels of reserves are set out under Section 25 of the Local Government Act and prudent levels are determined by the CFO. Earmarked reserves are usually held by specific services, while general reserves are held corporately.

1.12.5 The use of reserves is not intended to replace savings or income generation opportunities as part of the MTFS. Reserves can only be used once and then they are gone. Any use of reserves to replace savings or income generation opportunities is a delaying action, storing up pressures into future years. This could be part of investing in transformational service delivery and is the ultimate last resort during budget setting when a gap cannot be bridged despite best efforts.

1.12.6 This report sets out anticipated use of or top up of earmarked service reserves

within the financial year. The table below provides further detail.

Table 3 Use of or top-up of reserves at Month 3

| Service Areas | Forecast (drawdown) / top up to reserves | Commentary |
|-------------------------|---|---|
| | £'000 | |
| ASC Prevention Services | (90) | Age UK contract |
| ASC Workforce | (1,987) | Covid recovery support workforce, Prevention Team, Reviewing Officers |
| Adults Transformation | (350) | Funding for the debt recovery team |
| ASC Placements | (600) | YCB business losses |
| Leisure | (485) | Shortfall in management fee income from the council's leisure contract. |
| Total | (3,512) | |

1.12.7 Savings - The committee's budget for 2022/23 includes planned savings of £1.430m; all of which is currently on track for delivery.

Table 4 Savings Delivery 2022/23

| Line Ref | Theme Committee | Title | 2022/23 £'000 | Forecast Achievable £'000 |
|----------|-------------------------|--|------------------|------------------------------|
| A&S13 | Adults and Safeguarding | Extra-Care Housing 2 (Stagg house) | (30) | (30) |
| A&S21 | Adults and Safeguarding | Strengths-based provision for older adults and people with physical disabilities | (200) | (200) |
| A&S22 | Adults and Safeguarding | Progression for people with a learning disability | (225) | (225) |
| | Adults and Safeguarding | LD Progression Reviews | (275) | (275) |
| A&S27 | Adults and Safeguarding | Increasing independence through reablement | (200) | (200) |
| A&S32 | Adults and Safeguarding | Increasing independence in Mental Health | (250) | (250) |
| A&S33 | Adults and Safeguarding | Homecare costs | (150) | (150) |
| A&S34 | Adults and Safeguarding | Residential / nursing care costs | (100) | (100) |
| | | | (1,430) | (1,430) |

1.12.8 Risks and Opportunities - In preparing the report for month 3, a number of overall (corporate) and service-specific risks have been identified. These are set out below.

Table 5 Risks 2022/23

| Risk | Description of Risk | Mitigating actions |
|---|---|---|
| Placement Activity – demand in excess of current budget planning. | Overall Barnet is currently projecting a 5.2% increase from 2021-22 to the current financial year based on those residents currently active. The number of residents requiring care and support upon discharge from hospital has been very high in quarter 1. Current estimates also include a level of upward activity (2%) for the remaining part of the financial year which will be reviewed during monitoring periods. | There are plans to mitigate these increases, which include utilising several 'one-off' funding streams and accessing additional income from health. |
| Market (provider inflation) | Qtr 1 estimates include an assumption on care provider rate inflationary uplifts which reflect the 'budgeted' offer to providers in Barnet and across NCL. Current cost of living pressures, including utility volatility, put pressure on providers to maintain uplifts on offer this is under constant review. | Periodic review |
| YCB costs (c£1m) | A forecast for costs associated with the loss of income whilst the two care homes operated by Your Choice Barnet is already included in qtr. 1 monitor, however this is likely to increase due to ongoing building works. | Service is working with YCB to mitigate the potential upward cost impact. |
| Health Income (c£1.9m) | There is currently a risk around the level of income that has been forecast for funding from the CCG for care and support for the first 4 weeks after discharge. | This is being worked through with partners across NCL. |
| Workforce Pressure | The previous two financial years have seen a significant impact on demand which has led to pressures in the workforce. This situation has continued into 2022/23. | The service is utilising one-off funding streams and assessing the longer-term impact on service delivery. |

1.12.9 Capital Programme - The capital forecast outturn at month 3 for 2022/23 is £5.630m (nil budget variance)

Table 7 Current Financial Year Forecast Capital Outturn at Month 3

| Adults & Safeguarding Committee | 2022/23 Budget | 2022/23 Forecast | 2022/23 Variance |
|--|----------------|------------------|------------------|
| | £m | £m | £m |
| Community Equipment and Assistive Technology | 1.474 | 1.474 | 0.000 |
| Disabled Facilities Grant Programme | 3.465 | 3.465 | 0.000 |
| Investing in IT | 0.205 | 0.205 | 0.000 |
| Sport and Physical Activities | 0.486 | 0.486 | 0.000 |
| Total Adults and Safeguarding Committee | 5.630 | 5.630 | 0.000 |

1.12.10 Community and Assistive Technology - Community Equipment spend is incurred in revenue initially, current levels indicate that relevant spend is line with previous years. Spend continues to be monitored.

1.12.11 Disabled Facilities Grant – forecast to budget spend being reviewed. Slippage from 2021/22 has been profiled over the next two financial years. Awaiting news on any potential DFG grant change later this year.

1.12.12 Investing in IT - Mosaic 'Investing in IT' budget will fund the continuation of phase

2 and is expected to be fully spent.

1.12.13 Sport & Physical Activities - The leisure centres project is almost complete; budget reflects sums held for retention and final payments. Budget expected to be fully utilised by year end.

1.13 Debt Recovery

1.13.1 Private Client Debt relating to Adult Social Care residential placements and community care packages arises when individuals who are financially assessed as being able to contribute to the costs of their care and support fail to pay their contributions. Most individuals or financial representatives do pay their contributions with approximately 70% of the invoices that are raised, monthly, collected and, on average, the Council receives between £13-14 million each year in financial contributions.

1.13.2 The council has initiated a dedicated project to reduce the level of historic debt, improve the active management of debt and prevent future debt. We have identified a range of reasons for the build-up of debt, but a fundamental issue is that cases can be very complex, especially when there is no formal arrangement for the management of an individual's financial affairs.

1.13.3 At the end of Q1 total private client debt was £11.6m. This can be further broken down into historical debt (all debt up to 31 Dec 2021 which is the focus of the project team) and new & on-going debt (all debt from Jan 2022 onward and is the responsibility of the corporate accounts receivable team).

1.13.4 Historical debt is £7.217m at Q1, a 12.5% reduction from Q4. Of the debt:

- £304k is statute barred, or older than 6 years, and is in the process for being written off.
- £484k has been approved for write off. This is where all methods of debt recovery have been exhausted and any debts that remain is irrecoverable.
- £1.5m of the debt is secured via a deferred payment agreement (DPA). A DPA is an arrangement with the council that enables people to use the value of their homes to help pay care home costs after their deaths. This process is referred to HBPL to secure the debt via a charge with land registry and issue the DPA. The team is working to confirm debts are secured and improve the timely processing and tracking of these arrangements.

1.13.5 This leaves an actionable debt balance of just under £5m which is being actioned as follows:

| Amount | Description/Action |
|--------|---|
| £639k | Escalated to legal for advice/recovery action |

| | |
|--------|--|
| £1.89m | <p>£967k Deceased client debt over three years</p> <p>£890 Deceased client debt in the last two years</p> <p>Deceased client debt over a certain period can be difficult to collect. The project team are working through these cases and exploring, alongside accounts receivable and legal colleagues, recovery option with consideration of cost/benefit and appropriateness.</p> |
| £2.4m | <p>Unsecured debt, where unofficial representatives have been managing individuals' financial affairs and have failed to make regular payments. The Debt project is working through these cases to bring them to a satisfactory conclusion.</p> |

1.13.6 New and ongoing was £4.4m at the end of Q1. Just over £1m of this is secured via a DPA, but the remaining is unsecured. An additional resource has been funded for the Accounts Receivable team to focus on Adults Social Care debt only. It is envisaged that 90% of the debt can be collected as these are less complex and recent.

1.13.7 Although we have a duty to collect all social care charges, we also recognise that some customers will have financial and other difficulties, particularly with the cost-of-living crisis. The debt recovery team are versed in this conversation and offer information, advice and support as appropriate.

1.13.8 The table below shows the financial benefit of the debt project to date. The team is currently funded through the end of the financial year and will be making proposals for the on-going capacity and reporting requirements to ensure debt is well managed going forward.

| Financial Benefit | Amount |
|------------------------------------|-------------------|
| Individual Debt Repaid | £1,138,368 |
| Debt Recharged to Health | £66,464 |
| Credits (Invoices Adjusted) | £421,756 |
| Write Off | £210,316 |
| Deferred Payment Agreement Secured | £648,998 |
| Total Financial Benefit | £2,485,902 |

2. Reasons for recommendations

- 2.1 These recommendations are to provide the Committee with relevant budget, performance and risk information in relation to the corporate and committee priorities.

3. Alternative options considered and not recommended

3.1 None

4. Post decision implementation

4.1 None

5. Implications of decision

5.1 Corporate Priorities and Performance

5.1.1 Robust budget, performance and risk monitoring are essential to ensure there are adequate and appropriately directed resources to support delivery and achievement of corporate and committee priorities.

5.1.2 Relevant Council strategies and policies include the following:

- a) Medium Term Financial Strategy
- b) Performance and Risk Management Frameworks

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

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

5.3 Legal and Constitutional References

5.3.1 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.

5.3.2 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.

5.3.3 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.

5.3.4 The Councils Financial regulations can be found at:

<http://barnet.moderngov.co.uk/documents/s46515/17FinancialRegulations.doc.pdf>

5.4 Insight

5.4.1 There are no insight implications in relation to the recommendations of this report.

5.5 Social Value

5.5.1 The Public Services (Social Value) Act 2013 requires people who commission public services to think about how they can also secure wider social, economic and environmental benefits. There are no social value implications in relation to the recommendations in this report

5.5.2 A report by the Sport Industry Research at Sheffield Hallam University concluded that every £1 spent on community sport and physical activity generates nearly £4 for the English economy. The report concluded that investment into physical activity creates a return across health and social care, improves wellbeing, builds stronger communities, and develops skills in the economy^[1]

5.5.3 GLL utilise a social value calculator (developed by 4Global, Experian & Sheffield Hallam University) to measure social value based on regular participation within leisure facilities. Between April 2021 – March 2022, Barnet's leisure management contract indicated a social value of £6,443,604 (averaging £103 per participant). This is measured across a range of outcomes including improved health, improved subjective wellbeing, increased educational attainment, and reduced crime.

5.6 Risk Management

5.6.1 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.

^[1] <https://www.sportengland.org/news/why-investing-physical-activity-great-our-health-and-our-nation>

| Risk description | Risk Mitigations and Q3 Update |
|---|--|
| <p>AD001 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: 20</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>The MTFS to 2024 is set and adult social care will continue to undertake initiatives focused on reducing and managing future demand.</p> <p>The council will also liaise with Health to submit Covid-19 returns, understand when funding will cease, the transition process and any communication activities required.</p> |
| <p>AD004 Failure of care provider: A care provider suddenly being unable to deliver services could lead to a Health and Safety Executive (HSE) breach or harm to individuals resulting in a violation of statutory duty and financial consequences. Risk Rating 16</p> | <p>Through the Covid-19 pandemic we have continued to keep in place controls and mitigations to reduce the risk of provider failure within the borough. Actions we're taking to mitigate risk of provider failure through Covid-19 are:</p> <p>Regular collection of information (PPE, Covid-19 cases, staffing levels, hospital admissions) to target support where it is needed most.</p> <p>The Council has developed a new One Care Home approach, working with health colleagues to provide clinical support to care homes.</p> <p>The service also continue to ensure all new contracted services have due diligence undertaken at the start of each contract to ensure quality and sustainability of providers. If issues are identified then there is a clear provider concerns process, to access risk to individuals and support improvement. There is also a clear provider failure/closure approach to manage closure of homes and safe transition of individuals if required.</p> <p>Work continues to monitor the sustainability of the sector and explore best use of council resources to support this (including the awarding of inflationary uplifts).</p> <p>The service 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>The Integrated Care Quality team has recently established a 'markets, sustainability and</p> |

| | |
|---|--|
| | <p>contracts' function to review risks of provider failure across ASC markets.</p> <p>The council is working across North Central London region to have a co-ordinated approach, share best practice and support care providers across the region.</p> |
| <p>AD016 Leisure management contract - annual payment: Financial performance impacted by Covid-19 and leisure centre closures in 2020/21 could lead to the agreed contract commercial position not being achieved resulting in negative impacts to the agreed Annual Payment Profile with the operator and Medium-Term Financial Strategy (MTFS) savings targets. Risk Rating 15</p> | <p>Performance and Commercial Meetings in place with operator which includes representation from LBB finance and a third-party consultant (FMG consulting).</p> <p>Information shared with Director of Resources and Executive Director, Adults & Health to aid decision making processes.</p> |
| <p>AD018 Leisure management contract - annual payment - energy costs: Increasing cost of energy and failing to explore/implement mitigations could lead to financial pressures for the operator and the agreed contract commercial position not being achieved, resulting in negative impacts to the agreed Annual Payment Profile with the operator and Medium-Term Financial Strategy (MTFS) savings targets. Risk Rating 15</p> | <p>Performance and Commercial meetings take place with the leisure operator to monitor the financial and business continuity risks and identify solutions. Meetings include representation from LBB finance and a third-party consultant (FMG Consulting).</p> |

5.7 Equalities and Diversity

5.7.1 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.

5.7.2 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.

5.7.3 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.

5.7.4 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>

5.8 Corporate Parenting

5.8.1 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. There are no implications for Corporate Parenting in relation to the recommendations in this report.

5.8.2 The Fit & Active Barnet Card offers carers (including foster carers), children and young people that are looked after, and those that are care experienced enhanced benefits, including free swimming at any time across the borough's pools operated by GLL.

5.9 Consultation and Engagement

5.9.1 There are no consultation and engagement implications in relation to the recommendations in this report.

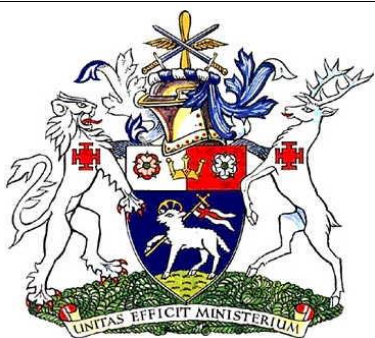
5.10 Environmental Impact

5.10.1 There are no direct environmental implications from noting the recommendations

6. Background papers

6.1 None

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Adults and Safeguarding Committee AGENDA ITEM 11

13 October 2022

| | |
|--------------------------------|---|
| Title | Fees and Charges |
| Report of | Chair of the Adults and Safeguarding Committee |
| Wards | All |
| Status | Public |
| Urgent | No |
| Key | No |
| Enclosures | Appendix A – Adult Social Care Fees and Charges Appendix B – Leisure Fees and Charges |
| Officer Contact Details | Dawn Wakeling, Executive Director – Communities, Adults and Health Dawn.Wakeling@barnet.gov.uk |

Summary

A Business Planning Report was received by Policy and Resources Committee on 19 July 2022 outlining the council's updated Medium-Term Financial Strategy (MTFS) to 2026/27 and the future financial risks and challenges facing the council.

In line with the Administration's priorities, the 19 July report outlined a project to maximise cost recovery for the council, through administration of fees and charges, where the majority of revised fees and charges will be effective from January 2023. Previously fees and charges were effective from April each year. Moving the uplift, for the majority of revised fees and charges, forward to January will support the council's financial need to maximise cost recovery. The general principle outlined in that report was that all revised fees and charges should be at full cost recovery, however consideration is to be given for those driven by inflation, or statute. It should be noted that adult social care charges are governed by national statutory guidance which determine both the levels of contributions that individuals make and the timing of uplifts to charges.

This report asks the Committee to approve the Fees and Charges for services reporting to this Committee, for onward referral and approval.

The outcomes of all theme committee discussions will go forward as recommendations to Policy and Resources Committee in December 2022. The budget will be formally agreed each year, after appropriate consultation and equality impact assessments, as part of Council budget setting, and therefore could be subject to change.

Officers Recommendations

1. That the Adults and Safeguarding Committee notes the changes to Fees and Charges for 2022-23 and 2023-24 as set out in Appendices A and B, which were included in the budget proposals submitted to the Policy and Resources Committee on 29 September 2022.

1. Why this report is needed

- 1.1 This report is required as part of the council's annual business planning process. Following the approval of council Fees and Charges at Policy and Resources Committee on 29 September 2022, this report asks the Committee to note the changes to Fees and Charges within its remit for implementation from 1 January 2023. However, some fees and charges must be implemented from 1 April 2023 as they are governed by national guidance. These are the core fees and charges for Adult Social Care Services which are reviewed by the Department for Health and Social Care (DHSC) each year, at the same time as changes to Department of Work and Pension (DWP) benefits / allowances. These are normally published around January / February each year.

Adult Social Care

- 1.2 Core Adult Social Care fees and charges are set annually, around January/February, by the Department of Health and Social Care (DHSC). This includes the minimum income guarantee (in effect, the minimum amount of money DHSC determines an individual or a couple need to live in the community) and details of benefits and disability related expenditure which Councils should take into account in determining how much residents should contribute to care. In response to the cost of living crisis, additional announcements have been made regarding cost of living, energy payments, pensioner and disability costs. These are disregarded in the financial assessment process. The council reviews a person's ability to meet the cost of any charges annually, or sooner if requested by the individual or if a change in circumstances becomes known to us.
- 1.3 From April 2023, the Council will increase the Fairer Contributions Charge Rate for homecare by 2.6%. This is to reflect the increase in the average hourly rate the council pays for homecare, from £18.76 to £19.25. If an individual were to receive a homecare service which cost the Council less than £19.25, they will only be charged the actual cost the Council pays for care. It should be noted that the council commissions over forty home care providers, each of which sets the rate they charge the council for homecare. Council contracts with homecare providers include uplifts each year.

Leisure

- 1.4 From 01 January 2023, the fees and charges associated with casual swimming will increase by 10.1%, in line with other council fees and charges uplifts. The rationale for this is a result of increased energy prices and subsequent operational costs to operate pools across the borough's leisure portfolio. Racket sports and hire of a sports hall, pitch and multi-use

games area are also increased up to 10.1%. These facilities are typically used by two to fourteen players (activity dependant), therefore an increase of up to 10.1% will subsequently result in a share of any price inflation, thus keeping access to leisure services affordable.

- 1.5 The proposed fees and charges have been carefully assessed and a 6.6% increase has been applied across all other leisure services fees and charges. However, it has been agreed with GLL that there may be some pricing points that will be reduced beneath this percentage in order to ensure that groups (particularly those with protected characteristics) can continue to access leisure services. Fees and charges have been benchmarked across neighbouring boroughs, and in some instances across other facilities and operators in borough. The proposed fees and charges remain in alignment with market values. The Fit & Active Barnet Card (free for Barnet residents) provides further subsidy to promote access to leisure services.
- 1.6 The introduction of car park charges is proposed for all Barnet leisure facilities, excluding Finchley Lido which falls under a separate parking management operation. The fees proposed have been assessed in partnership with GLL alongside the completion of benchmarking exercise. An equalities impact assessment has been completed in consideration of the charging model.

2. Reasons for recommendations

- 2.1 All changes to fees and charges for clients who receive or access a chargeable service 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 Appendices A and B to this paper, and those where a change is proposed have been marked as such.

3. Alternative options considered and not recommended

- 3.1 The alternative option is not to endorse the fees and charges increase. By law, the council is required to set a balanced budget. These fees and charges proposals meet financial requirements, while delivering the council's outcomes and ambitions for Barnet residents.

4. Post decision implementation

- 4.1 Once the budget is approved by full Council the fees and charges will be posted on the Council's website and, where a statutory duty requires it, advertised in the approved publication, and appropriate location. New fees and charges will be implemented from 1 January 2023, or from 1 April 2023, where national guidance requires it.

5. Implications of decision

5.1 Corporate Priorities and Performance

5.1.1 Uplifts to fees and charges, alongside central government funding, council tax and business rates income, enable the council to continue to provide essential services to the residents of the borough. The approach outlined in this report supports the council's priorities of promoting independent living and healthier lifestyles.

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

- 5.2.1 Adjusting fees and charges will ensure effective cost recovery for delivering the service; prices listed do not include VAT, which will only be charged where indicated. The Constitution requires that all changes to fees and charges should be included in the budget proposals submitted by theme Committees to the Policy & Resources Committee.
- 5.2.2 In line with the Administration's priorities, the 19 July Policy and Resources Committee report outlined the council's focus on maximising income from Fees and Charges.
- 5.2.3 Council officers have revised fees and charges through the application of a full cost recovery model, the indexation of fees and charges to the level of inflation at around 10.1%, statutory prescription, or other means by which officers have benchmarked with other authorities to ensure the council is maximising cost recovery.
- 5.2.4 The outcomes of all Theme Committee discussions will go forward as recommendations to Full council in November 2022.
- 5.2.5 Revised fees and charges will be effective from January 2023, with further implementation to take effect from 1 April 2023
- 5.2.6 The council is required by law to set a balanced budget for each financial year. It is also good financial management to set a Medium-Term Financial Strategy (MTFS) for a further 3-5 year period. The proposals in this report will support the council in its legal obligations in setting a balanced budget through increasing income receipts to finance revenue expenditure.
- 5.2.7 Where costs recovered do not meet expected and planned resources, officers will seek to align with the overall financial envelope within the remit of this Committee, through appropriate mitigation plans. The Financial Regulations, part of the council's Constitution, are clear Chief Officers have no authority to overspend revenue budgets, or under-recover income budgets under their control.

5.5 Legal and Constitutional References

- 5.3.1 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.
- 5.3.2 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.
- 5.3.3 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 can be found here: <https://barnet.moderngov.co.uk/mgCommitteeDetails.aspx?ID=698> 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.

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

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.

5.3.5 The legal basis for each fee and charge is set out in the appendices of this report.

5.6 Insight

5.4.1 Insight data has been used to inform decisions about future use and demand for services across Communities, Adults and Health.

5.7 Social Value

5.7.1 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.

5.7.2 A report by the Sport Industry Research at Sheffield Hallam University concluded that every £1 spent on community sport and physical activity generates nearly £4 for the English economy. The report concluded that investment into physical activity creates a return across health and social care, improves wellbeing, builds stronger communities, and develops skills in the economy¹

5.7.3 GLL utilise a social value calculator (developed by 4Global, Experian & Sheffield Hallam University) to measure social value based on regular participation within leisure facilities.

¹ <https://www.sportengland.org/news/why-investing-physical-activity-great-our-health-and-our-nation>

Between April 2021 – March 2022, Barnet's leisure management contract indicated a social value of £6,443,604 (averaging £103 per participant). This is measured across a range of outcomes including improved health, improved subjective wellbeing, increased educational attainment, and reduced crime.

5.8 Risk Management

- 5.8.1 If the council did not review its fees and charges annually, then there is a risk that services could become unsustainable and/or the services received by residents could become poorer in their quality.

5.9 Equalities and Diversity

- 5.9.1 Decision makers should have due regard to the public sector equality duty in making decisions. The statutory grounds of the public sector equality duty are found at section 149 of the Equality Act 2010 and are as follows: A public authority must, in the exercise of its functions, have due regard to the need to: a) Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act; b) Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; c) Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- 5.9.2 Local authorities are permitted under section 14 of the Care Act 2014 (the Act) to charge for the cost they incur in meeting social care and support needs under the Act. The fairer contribution rate for community services is applied objectively based on people's ability to pay and following a financial assessment and therefore will only impact on those with the ability to pay. It also sets out when not to make a charge and that a financial assessment of the person's resources must be undertaken to determine what they can afford to contribute towards the cost of their care. Client contributions will be reviewed on an annual basis and will be uplifted in line with the cost of care paid by the Council. The Council's approach to charging for care and support needs is underpinned by the following key principles, these principles are also set out in the statutory guidance: It is fair and equitable to all residents by ensuring there is a consistent approach to financial assessments; eligibility determinations and charging so those with similar needs or services are treated the same and anomalies between different care settings are minimised; and it ensures that people are not charged more than is reasonably practicable for them to pay.
- 5.9.3 An Equality Impact Assessment has been completed in relation to leisure fees and charges. The assessment demonstrates that the application of hybrid approach (6.6% up to 10.1%) to increasing fees and charges in consideration of operational costs (e.g., swimming) and the demographic profile of the borough (e.g., residents with protected characteristics) will safeguard continued use of leisure centres and activities. Any negative impact is minimised by the Fit & Active Barnet Card which offers subsidised prices.

5.10 Corporate Parenting

- 5.10.1 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 Barnet Plan 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. Services referenced in this report are relevant to care experienced adults with care and support needs including eligible needs under the Care

Act 2014. This includes those with special educational needs and disabilities, those with caring responsibilities and those requiring access to mental health services.

5.10.2 The Fit & Active Barnet Card offers carers (including foster carers), children and young people that are looked after, and those that are care experienced enhanced benefits, including free swimming at any time across the borough's pools operated by GLL.

5.11 Consultation and Engagement

5.11.1 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.

5.11.2 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.

5.12 Environmental Impact

5.12.1 There are no direct environmental implications from noting the recommendations. Implementing the recommendations in the report will lead to a positive impact on the Council's carbon and ecology impact, or at least it is neutral.

6 Background papers

6.1 None.

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| Reference/ Area | Fee/Charge Title | Area | Description | Unit of Measure | Charges 2022/23 | Charges 2023/24 | Change from prior year (actual) | Change from prior year (%) | Comments | Statutory Basis for Charging (i.e. the legislation that permits you to charge for this service / product) | Additional detail for new charges / above inflation |
|-------------------|---|---------------------|--|-----------------|-----------------|-----------------|---------------------------------|----------------------------|---|---|--|
| Adult Social Care | Residential and Nursing Care (1) * | Social Care | Standard Charge persons aged 60+ | Weekly | 156.95 | 156.95 | 0 | 0 | Are set at the same time as contribution/allowance updates, Jan/Feb each year (for implementation in April) | s 14 The Care Act 2014 | (This will be subject to s15 cap on care costs when it is implemented) |
| Adult Social Care | Residential and Nursing Care (1) * | Social Care | Standard Charge persons aged 25-59 | Weekly | 87.55 | 87.55 | 0 | 0 | Are set at the same time as contribution/allowance updates, Jan/Feb each year (for implementation in April) | s 14 The Care Act 2014 | (This will be subject to s15 cap on care costs when it is implemented) |
| Adult Social Care | Residential and Nursing Care (1) * | Social Care | Standard Charge persons aged 18-25 | Weekly | 71.60 | 71.60 | 0 | 0 | Are set at the same time as contribution/allowance updates, Jan/Feb each year (for implementation in April) | s 14 The Care Act 2014 | (This will be subject to s15 cap on care costs when it is implemented) |
| Adult Social Care | Respite Care (All client groups) (2) | Social Care | Residential Respite (per week) | Weekly | 116.20 | 116.20 | 0 | 0 | Are set at the same time as contribution/allowance updates, Jan/Feb each year (for implementation in April) | s 14 The Care Act 2014 | (This will be subject to s15 cap on care costs when it is implemented) |
| Adult Social Care | Fairer Contributions charge rate | Community Services | The rate charged for Community Services | Hourly | 18.76 | 19.25 | 0 | 2.61% | Increase in the maximum charge rate for community services to reflect the higher hourly rate the Council pays for delivery of homecare. | s 14 The Care Act 2014 | From April 2023, the only proposed increase to adult social care charges is an increase of 2.61% to the Fairer Contributions Charge Rate for homecare. This is to reflect the increase in average hourly rate the council pays for homecare, to £19.25. |
| Adult Social Care | Charges for arranging care for people above the capital/savings threshold | All Placement Areas | One-off arrangement fee for new care packages / placements | One-off charge | £300.00 | £300.00 | £0.00 | 0.00% | Charges for arranging care for people above the capital/savings threshold | s 14 The Care Act 2014 | This was agreed in Feb 2020 - https://barnet.moderngov.co.uk/documents/s58014/Fees%20and%20Charges%20-%20Changes%20to%20Fairer%20Contribution%20Policy.pdf Committee paper sets out stat guidance, calc based on full cost recovery and benchmarking with neighbors on cost. Our internal costs will not have changed in this period but more importantly it is not yet clear whether we will be able to charge for this under the new system. Clarification on this has been requested. |
| Adult Social Care | Charges for Universal Deferred Payments | Social Care | Standard hourly administrative and processing charge | | £18.82 | £18.82 | £0.00 | 0.00% | The interest rate for deferred payments was set at 1% from 1 April 2016. It is proposed that the interest rate charges will be reviewed every three months by Adults and Communities. The power to vary and change interest rates for deferred payments will be delegated to the Council's section 151 officer. | s35 The Care Act 2014 and the Care and Support (Deferred Payment) Regulations 2014 | These are all aspects of the deferred payment agreement process. We currently charge £680 and our internal costs will not have changed. The primary cost here is legal however the process also involves administration charges, land registry fees and property valuation fees.. Also (as above re:£300) there are significant changes to charging that may impact this area. Currently, there are only about 30 DPA a year and most are rolled into the DPA not paid as a one-off up front. |
| Adult Social Care | Charges for Universal Deferred Payments | Social Care | Standard legal hourly charge | | £52.29 | £52.29 | £0.00 | 0.00% | | s35 The Care Act 2014 and the Care and Support (Deferred Payment) Regulations 2014 | |
| Adult Social Care | Charges for Universal Deferred Payments | Social Care | Non- standard legal hourly charge e.g. debt recovery | | £71.59 | £71.59 | £0.00 | 0.00% | | s35 The Care Act 2014 and the Care and Support (Deferred Payment) Regulations 2014 | |
| Adult Social Care | Charges for Universal Deferred Payments | Social Care | Land Registry Fees | | £26.00 | £26.00 | £0.00 | 0.00% | | s35 The Care Act 2014 and the Care and Support (Deferred Payment) Regulations 2014 | |

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|-------------------------|---|----------------|----------------------------|--|---------|---------|-------|-------|--|--|
| Adult Social Care | Charges for Universal Deferred Payments | Social Care | Property Valuation Fees | | £250.00 | £250.00 | £0.00 | 0.00% | | s35 The Care Act 2014 and the Care and Support (Deferred Payment) Regulations 2014 |
|-------------------------|---|----------------|----------------------------|--|---------|---------|-------|-------|--|--|

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**London Borough of Barnet
Adults and Safeguarding
Committee Forward Work
Programme
2022 / 2023**

Contact: salar.rida@barnet.gov.uk

| Subject | Decision requested | Report Of |
|--|--|---|
| 13 October 2022 | | |
| Engagement strategy and charter progress report | As per recommendations | Executive Director, Adults and Health |
| Barnet Multi-Agency Safeguarding Adults Board Annual Report 2021-22 | The Committee to receive an update on how the agencies in Barnet whose services impact adults in need of care and support have cooperated to keep the vulnerable safe and promote their wellbeing. | Independent Chair, Barnet Safeguarding Adults Board |
| Autism strategy and implementation of the action plan | As per recommendations | Director of Integrated Commissioning |
| Quarter 1 (Q1) 2022/23 Delivery Plan Performance (and financial performance update) Report | As per recommendations | Assistant Director, Communities and Performance, Head of Programmes, Performance, Risk Growth and Corporate Services |
| Fees and Charges | As per recommendations | Assistant Director Finance |
| 14 November 2022 | | |
| Quarter 2 (Q2) 2022/23 Delivery Plan Performance Report | Regular performance report. | Assistant Director, Communities and Performance, Head of Programmes, Performance, Risk Growth and Corporate Services |
| Adult Social Care Annual Complaints Report - 2021/22 | To note information contained within the statutory Annual Complaints Report 2020/21 | Assistant Director Communities and Performance |
| Business Planning 2023-27 | To agree the medium-term financial strategy proposals for recommendation to Policy and Resources Committee | Executive Director, Adults and Health |
| Dementia Strategy | For agreement | Director of Integrated Commissioning |
| Carers Strategy | As per recommendations | Executive Director, Adults and Health |
| Financial Performance update report | As per report recommendations | Head of Finance Executive Director Finance |
| Engagement strategy and charter for adult social care | For agreement | Executive Director, Adults and Health |
| Social care reform update | For noting | Executive Director, Adults and Health |

| Subject | Decision requested | Report Of |
|---|--|---|
| Physical & Sensory Impairment Strategy | For agreement | Director of Integrated Commissioning |
| 13 March 2023 | | |
| Quarter 3 (Q3) 2022/23 Delivery Plan Performance Report | Regular performance report. | Assistant Director, Communities and Performance, Head of Programmes, Performance, Risk Growth and Corporate Services |
| Prevent Annual Progress Report | For noting – annual update. | Prevent Coordinator |
| Financial Performance update report | As per report recommendations | Head of Finance Executive Director Finance |
| Fit & Active Barnet Annual Report | The committee to note the Fit & Active Barnet (FAB) annual report. | Assistant Director Greenspaces & Leisure |
| Carers Strategy | For agreement | Director of Integrated Commissioning |
| Engagement and co-production strategy | For agreement | Director of Integrated Commissioning |
| To be allocated | | |
| <i>Deliver of the administration's adult social care commitment</i> | | Executive Director, Adults and Health |
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