

MEETING

ADULTS AND SAFEGUARDING COMMITTEE

DATE AND TIME

MONDAY 13TH MARCH, 2023

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	Humayune Khalick	Liron Woodcock-Velleman
Andrea Bilbow	Laithe Jajeh	Lucy Wakeley
Anne Clarke	Michael Mire	Sarah Wardle

Substitute Members

Alison Cornelius	Edith David	Caroline Stock
Dean Cohen	Gill Sargeant	Claire Farrier

In line with the Constitution's Public Participation and Engagement Rules, requests to submit public questions must be submitted by 10AM on the third working day before the date of the committee meeting. Therefore, the deadline for this meeting is Wednesday 8 March at 10AM. Requests must be submitted to Salar Rida - Salar.Rida@Barnet.gov.uk - 02083597113

**You are requested to attend the above meeting for which an agenda is attached.
Andrew Charlwood – Head of Governance**

Governance Service contact: Salar Rida - Salar.Rida@Barnet.gov.uk - 02083597113
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ORDER OF BUSINESS

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4.	Report of the Monitoring Officer (if any)	
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Decisions of the Adults and Safeguarding Committee

14 November 2022

Members Present:-

AGENDA ITEM 1

Councillor Paul Edwards (Chair)

Councillor Haylett (Vice-Chair)

Councillor Ernest Ambe

Councillor Andrea Bilbow OBE

Councillor Anne Clarke

Councillor Humayune Khalick

Councillor Michael Mire

Councillor Sarah Wardle

Also in attendance

Councillor Gill Sargeant (Substitute)

Councillor Caroline Stock (Substitute)

Apologies for Absence

Councillor Laithe Jajeh

Councillor Liron Velleman

Councillor Lucy Wakeley

1. MINUTES

Councillor Paul Edwards, Chair of the Adults and Safeguarding Committee welcomed all attendees to the meeting.

RESOLVED that the minutes of the previous meeting of the Adults and Safeguarding Committee held on 13 October 2022 be agreed as a correct record.

2. ABSENCE OF MEMBERS

Apologies were received from:

- Councillor Laithe Jajeh
- Councillor Liron Velleman, who was substituted by Councillor Gill Sargeant, and
- Councillor Lucy Wakeley, who was substituted by Councillor Caroline Stock.

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

None.

4. REPORT OF THE MONITORING OFFICER (IF ANY)

None.

5. MEMBERS' ITEMS (IF ANY)

None.

6. PUBLIC QUESTIONS AND COMMENTS (IF ANY)

The Committee noted the submitted Public Questions and Public Comment which were circulated prior to the meeting.

The Chair provided verbal responses to all Public Questions. Supplementary questions were raised by the speakers in relation to their submitted question and these were responded to verbally by the Chair and Officers.

7. ENGAGEMENT AND CO-PRODUCTION STRATEGY AND CHARTER FOR ADULT SOCIAL CARE

The Committee welcomed the report which sets out the Engagement and Co-production Strategy and Charter for adult social care for the Committee's approval. The Chair invited Ella Goschalk, Strategic Transformation and Engagement Manager to present and summarise the report.

Following a query from Members, the Committee also heard from Alan Kummer, resident member of the steering group who provided feedback to the Committee about the variety of engagement exercises undertaken.

In response to a query from the Committee about the engagement exercises and the number of people involvement with the engagement, it was agreed that Officers provide Members of the Committee with an update. (**Action**)

The Committee noted that an update report on the implementation of the action plan will be reported back to the Committee on an annual basis.

Councillor Wardle moved a motion which was seconded and agreed by the Committee to include an additional recommendation to read:

That the Adults and Safeguarding Committee agree to review the effectiveness of the Engagement and Co-Production Strategy and Charter.

It was therefore RESOLVED that:

- 1. The Adults and Safeguarding Committee approved the draft Engagement and Co-Production Strategy and Charter for adult social care.**
- 2. The Adults and Safeguarding Committee noted that an annual report on engagement and co-production will be presented to Committee each year.**
- 3. The Adults and Safeguarding Committee agreed to review the effectiveness of the Engagement and Co-Production Strategy and Charter.**

8. ADULT SOCIAL CARE ANNUAL COMPLAINTS REPORT - 2021/22

The Committee noted the annual report which provides an overview of the management of and performance in responding to adult social care complaints.

In reference to section 1.3 of the report, the Committee raised a query regarding lessons learnt and applied. The Executive Director for Adults and Health, Dawn Wakeling informed Members about the process for identifying improvements and reviewing feedback in order to make practical changes to policy and training where applicable.

It was RESOLVED that the Adults and Safeguarding Committee approved the Annual Complaints Report 2021-2022 for publication.

9. BUSINESS PLANNING 2023-2027

The Committee noted the Business Planning 2023-2027 report which sets out the revenue savings and proposals.

It was RESOLVED:

- 1. That the Adults and Safeguarding Committee considered the MTFS proposals that relate to the committee as set out in paragraph 1.2.6.3 and Appendix A after having considered the initial equalities impacts and referred these recommendations to Policy and Resources Committee for decision.**
- 2. That the Committee noted the risks associated with these savings proposals. These risks relate both to impact on services and residents and deliverability of savings.**
- 3. That the Committee agreed the proposals set out in paragraph 1.2.5.1.**
- 4. That the Committee agreed to delegate to the Executive Director Communities, Adults and Health in consultation with the Chair of the Adults and Safeguarding Committee, to make any amendments to the savings detailed in paragraph 1.2.6.3 and Appendix A before they are recommended to Policy & Resources Committee to form part of the overall MTFS.**

*Votes were recorded as follows:

For – 7

Against – 0

Abstained – 3

10. QUARTER 2 (Q2) 2022/23 PERFORMANCE REPORT

Dawn Wakeling, Executive Director for Adults & Health presented the report which provides an overview of performance for Q2 2022/23.

In response to a query about the variance of the revenue outturn for Leisure, it was noted that there were impacts due to the pandemic period during which leisure centres were closed.

It was RESOLVED that the Adults and Safeguarding Committee reviewed the progress, performance, finance and risk information for Q2 2022/23 and made any referrals to Policy and Resources Committee in accordance with the terms of reference of this Committee, as it decides appropriate.

11. COMMITTEE FORWARD WORK PROGRAMME

The Committee noted the standing item on the agenda which sets out the future items due to be reported to the Committee during 2022-23. The Committee agreed to include an update from Barnet Mencap to the Forward Work Programme at the meeting on 13 March 2023 and a report on the initiatives funded by the Administration's reserve funding commitment.

RESOLVED that the Committee noted the Forward Work Programme 2022-23.

12. ANY OTHER ITEMS THAT THE CHAIRMAN DECIDES ARE URGENT

None.

The meeting finished at 8.20 pm



Adults and Safeguarding Committee

AGENDA ITEM 8

13th March 2023

Title	Dementia Strategy 2023-2028
Report of	Cllr Paul Edwards, Chair - Adults and Safeguarding Committee
Wards	All
Status	Public
Urgent	No
Key	Yes
Enclosures	Appendix 1 - Dementia Strategy 2023 - 2028
Officer Contact Details	Jo Kamanu, Senior Commissioning Officer, Joint Commissioning Unit jo.kamanu@barnet.gov.uk Ellie Chesterman, Interim Head of Commissioning – Mental Health & Dementia ellie.chesterman@barnet.gov.uk

Summary

The Dementia Strategy 2023-2028 is Barnet's first dementia strategy, which builds on the progress already made in the borough to improve the lives of people living with dementia, their families, and their carers, and provides a framework for continuous action to ensure that people continue to live well.

The strategy has been developed by adult social care, working with people living with dementia and their carers, other key council teams such as Public Health and the Barnet Borough Partnership (integrated health, care and voluntary sector partnership).

This report seeks approval of the Dementia Strategy 2023-2028.

Officers Recommendations

1. That the Adults and Safeguarding Committee approve the Dementia Strategy 2023-2028.
2. That the Adults and Safeguarding Committee note that a review of the Dementia Strategy 2023-2028 is scheduled for 2025.

1. Why this report is needed

- 1.1 This report seeks Committee approval of the Dementia Strategy 2023-28.
- 1.2 The strategy sets out important context around the support offer for people living with dementia and their carers in Barnet and outlines priority areas for action; to ensure that the needs of our diverse population are met now and in the years ahead.
- 1.3 This strategy supports the visions and outcomes within the National Dementia Strategy 2009, whilst we await the publication of a new national 10-year plan to tackle dementia as announced by the Health Secretary in May 2022. It also considers key legislation and guidance, including the Care Act 2014 and National Institute for Health and Care Excellence (NICE) guidance¹. These key strategic documents all highlight the importance of ensuring that people with dementia and their carers can *access timely diagnosis, high-quality care, and support* and that there is an *increased awareness in our communities of dementia*.
- 1.4 This Strategy has been shaped by the NHS England Transformation Framework on Dementia, the 'Well Pathway for Dementia', to ensure that our progress aligns with the national NHS standards for each part of the Framework: *Preventing Well, Diagnosing Well, Supporting Well, Living Well and Dying Well*.
- 1.5 This strategy has been coproduced and developed in partnership with over 140 people living with dementia and their carers, as well as with professionals representing: Adult Social Care, Public Health, Family Services, North Central London Integrated Care Board (NCL ICB), Barnet Enfield and Haringey Mental Health Trust, commissioned and non-commissioned organisations and voluntary and community sector partners.

2. Reasons for recommendations

- 2.1 In Barnet, it is estimated that over 4,387 people are living with dementia, and this figure is expected to increase to 6,402 by 2035.
- 2.2 This strategy recognises that more can be done to improve the experience of people living with dementia and their carers. Following approval of the strategy, officers will develop a multi-agency action plan to build on the progress that has been made and address the gaps identified. This means not only focusing on strengthening our current dementia pathway, support offer and services, but also embedding more proactive dementia support, preventing avoidable crises, and promoting and maximising people's independence, health, and well-being
- 2.3 This strategy will inform the planning, provision, and commissioning of dementia-related services in Barnet. To deliver the associated action plan, we will work with people living with dementia and their carers, health and social care, partners across the council, the voluntary and community sector, providers of care and residents, to deliver our plans over the next five years.
- 2.4 Early intervention and effective prevention can positively impact an individual's health and well-being. By ensuring that people can access early and timely diagnosis for

¹ <https://www.nice.org.uk/>

dementia and have good co-ordination and care planning, people will enjoy an improved quality of life in Barnet.

- 2.5 Needs assessment data confirms Barnet has an aging population, which will result in increased numbers of people living with dementia in the years to come. A key driver in our approach to supporting people to live well is through providing prevention and early intervention support. To do this, we will develop plans which are more proactive and creative in approach and offer robust support for carers, alongside an increased awareness of dementia within communities.
- 2.6 The 2021 Census data also evidences Barnet's increasingly diverse population. In Barnet, people from ethnic minority backgrounds are under-represented in dementia services and tend to access services later. The dementia strategy and action plan offer an opportunity to focus efforts on prevention and early detection amongst under-represented communities, ensuring that support is available earlier and that services are culturally sensitive.
- 2.7 Through engagement and coproduction with over 140 people living with dementia and their carers to develop the strategy we gained much greater insight into the challenges residents face, including:
- Needing more information at the right time
 - A lack of coordination across services
 - Experiencing a gap in support after diagnosis
 - Needing more reasonable adjustments to support access to help and engagement in the community.

We also captured feedback from people about changes to services that they feel are needed. We recognise that some of these changes have already been made, such as improvements to the diagnostic pathway and community-based services available before and after diagnosis, which indicates that we need to review communication, awareness, and accessibility. Whereas other changes reflect gaps in our local system or inconsistencies, that we will aim to address, such as extended time in GP appointments and a robust information and advice offer.

- 2.8 The strategy sets out three coproduced priorities to guide our action planning:
1. Improved information and advice (Before diagnosis, at diagnosis, and after diagnosis) to ensure that people can make informed decisions about their health and care needs.
 2. Improved awareness and identification; early and timely diagnosis.
 3. Individualised and tailored support that promotes independence and well-being (At diagnosis and after diagnosis)

3. Alternative options considered and not recommended

- 3.1 This strategy sets out borough-wide multi-agency commitments to providing high-quality care and support for people with dementia and their carers. It provides a formal framework for improving the lives of people living with dementia and their carers in Barnet. Not having the strategy is therefore not recommended.

4. Post decision implementation

- 4.1 Following approval, the adult social care team will work with people living with dementia and their carers and other key partners to develop a dedicated action plan to implement the strategy over a two-year period.
- 4.2 Progress will be monitored by the Barnet Borough Partnership Board and reported to the relevant Council committee.
- 4.3 Through the Action Plan, the Board will identify interventions and expect to evidence:
- A reduced diagnostic gap, with a notable improvement in diagnosis amongst under-represented groups
 - People living with dementia and their carers reporting a positive experience of working in partnership with Health and Social Care
 - An increase in the number of people living with dementia and their carers who report they are aware of and can access appropriate information, advice and guidance before and after diagnosis.
- 4.4 A review of the strategy and progress to date will take place in March 2025.

5. Implications of decision

5.1 Corporate Priorities and Performance

- 5.1.1 The Dementia Strategy sets out the proposed approach to delivering the agenda set by the Corporate Plan, and supports the priority of caring for people, in particular, living well.

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

- 5.2.1 Delivery of the strategy and action plan will be met through existing service budgets. Should any future funding requirements arise, these will be considered through the Council's medium term financial planning process. Other partners involved in delivering the action plan, for example the NHS, will address resource implications through their own financial and budget processes.

5.3 Legal and Constitutional References

- 5.3.1 The Council's Constitution Article 7 sets out the terms of reference of the Adults and Safeguarding Committee includes the following responsibilities:
- Responsibility for all matters relating to vulnerable adults, adult social care and leisure services.
 - Working with partners on the Health and Well-being Board to ensure that social care interventions are effectively and seamlessly joined up with public health and healthcare, and promote the Health and Well-being Strategy and its associated sub strategies.
- 5.3.2 The Council has statutory duties to promote the wellbeing and health of its residents for example in the Care Act 2014 and Children & Families Act 2014.

5.4 Insight

5.4.1 The strategy has been developed based on insight from over 140 people living with dementia and their carers, and use of local, regional and national insight to inform the priorities outlined and outcomes identified.

5.5 Social Value

5.5.1 The Public Services (Social Value) Act 2012 requires people who commission public services to think about how they can also secure wider social, economic and environmental benefits. This is reflected in the council's social value policy.

5.5.2 The corporate plan supports the aims of this social value policy and the social values outcomes we are seeking to achieve. Any commissioning or transformational activity that is carried out as part of the implementation of the Dementia Strategy will be conducted in accordance with the social value policy.

5.6 Risk Management

5.6.1 Risk management considerations will be an integral part of the scoping and management of individual projects that are initiated to deliver the Dementia Strategy.

5.7 Equalities and Diversity

5.7.1 Equality and diversity issues are a mandatory consideration in the council's decision-making process. Decision makers should have due regard to the public-sector equality duty in making their decisions. The equalities duties are continuing duties they are not duties to secure a particular outcome. Consideration of the duties should precede the decision. It is important that the Committee has regard to the statutory grounds in the light of all available material such as consultation responses. The statutory grounds of the public-sector equality duty are found at section 149 of the Equality Act 2010.

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.

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

- (a) remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic.

- (b) take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it;

- (c) encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

5.7.3 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:
- (a) Tackle prejudice, and
 - (b) Promote understanding.
- 5.7.5 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
- 5.7.6 The public sector equality duty considerations and the council's commitments to tackling inequalities and disproportionality will be central to the development of the action plan that will deliver the Dementia Strategy. This will include giving focus to areas of known disproportionality, such as under-representation of people from ethnic minority backgrounds in our dementia services. As well as considering the needs of groups with specific needs, such as people with a learning disability and a diagnosis of dementia and people diagnosed with early onset dementia.

5.8 Corporate Parenting

- 5.8.1 In line with the Children and Social Work Act 2017, the council has a duty to consider Corporate Parenting Principles in decision-making across the council. The Dementia Strategy is not expected to have significant impact on looked after children or care experienced young people.

5.9 Consultation and Engagement

- 5.9.1 Extensive coproduction and stakeholder engagement has been undertaken to inform the development of the strategy with over 140 people living with dementia and their carers, health and social care professionals, commissioned and non-commissioned services, Barnet's Dementia Friendly Partnership and voluntary sector partners.
- 5.9.2 A formal consultation was also carried out via Engage Barnet with broad agreement of the priorities identified, support for further investigation into disproportionality relating to dementia diagnosis and support and the importance of recognising the role of carers. A number of comments received suggested actions that could be taken to implement the strategy, which have been collated and will be used to inform action planning. Feedback was also received that some of the graphics are hard to read. The document will be sent to our design agency following approval, to mitigate any issues.

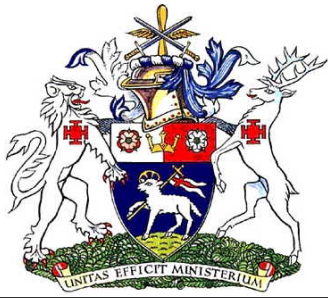
5.10 Environmental Impact

5.10.1 There are no direct environmental implications arising from approving this strategy. The impact of actions taken to deliver the Dementia Strategy will be assessed against the council's Sustainability Action Plan to ensure cohesion and alignment with targets.

6. Background papers

6.1 NHS England Transformation Framework on Dementia ' Dementia Well Pathway', <https://www.england.nhs.uk/mentalhealth/wp-content/uploads/sites/29/2016/03/dementia-well-pathway.pdf>

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Adults and Safeguarding Committee
 AGENDA ITEM 9
13th March 2023

Title	Carers and Young Carers Strategy 2023-2028
Report of	Cllr Paul Edwards, Chair - Adults and Safeguarding Committee
Wards	All
Status	Public
Urgent	No
Key	Yes
Enclosures	Appendix 1 - Carers and Young Carers Strategy 2023 - 2028
Officer Contact Details	Sameen Zafar, Health and Social Care Commissioner, Joint Commissioning Unit sameen.zafar@barnet.gov.uk Ellie Chesterman, Interim Head of Commissioning – Mental Health & Dementia ellie.chesterman@barnet.gov.uk

Summary

The new Carers and Young Carers Strategy 2023-28 focuses on the importance of the identification of individualised support for, and meaningful collaboration with, carers, for their benefit and for the benefit of the person they care for.

The priorities defined within this strategy and the outcomes the council and partners intend to achieve are a result of listening to the collective voice of carers (of all ages) and stakeholders.

The strategy aims to:

- help carers and young carers access relevant support early in their caring role.
- support carers to continue caring.
- support carers to balance their own needs with that of the person they care for
- ensure that the caring role is recognised and valued in Barnet.

This report seeks approval of the Carers and Young Carers Strategy 2023-2028.

Officers Recommendations

- 1. That the Adults and Safeguarding Committee approve the Carers and Young Carers Strategy 2023-2028.**
- 2. That the Adults and Safeguarding Committee note that a review of the Carers and Young Carers Strategy 2023-2028 is scheduled for 2025.**

1. Why this report is needed.

- 1.1 This report seeks Committee approval of the Carers and Young Carers 2023-28.
- 1.2 The Carers and Young Carers Strategy 2023-28 sets out important context around the support offer for carers and young carers support offer in Barnet and sets out key steps to improve this offer; to ensure that the needs of our diverse carer population are met now and, in the years, ahead.
- 1.3 This strategy has been shaped by the Adult Social Care Reform White Paper, which identifies unpaid carers as a priority area, the National Carers Action Plan (2018-2020), NHS Long Term Plan (2019), and takes into account The Care Act 2014, and The Children and Families Act 2014.
- 1.4 This strategy builds on the previous Barnet Carers Strategy and supports achieving the outcomes set within the Joint Health and Wellbeing Strategy 2021 – 2025, the Children and Young People’s Plan 2023-2027 and the Child and Family Early Help Strategy 2023-2027.
- 1.5 This strategy has been coproduced and developed in partnership with over 300 carers and young carers, and Barnet Carers Centre; as well as with professionals representing: Adult Social Care, Family Services, North Central London Integrated Care Board (NCL ICB), Barnet Enfield and Haringey Mental Health Trust, commissioned and non-commissioned organisations and voluntary and community sector partners.
- 1.6 As part of the governance protocol for Young Carers, this strategy will also be presented to the Children, Education and Safeguarding Committee for approval as per the Committee’s responsibilities.

2. Reasons for recommendations

- 2.1 Carers and young carers play a vital role in supporting people with health, care and support needs across the borough – delivering thousands of hours of care. This strategy will help the council to carry out its statutory duties to support carers in their caring role. This includes helping to prevent young carers from carrying out inappropriate caring and ensuring that carers of all ages can achieve the outcomes that they desire, whilst maximising their own health and wellbeing. It is important to consider the needs of carers at various times in their caring role, such as identifying carers at the start of their caring journey, supporting them to maintain their caring role, and support at the end of their caring role.

- 2.2 The 2021 Census data shows that Barnet has 28,808 carers, which makes up 7.9% of total Barnet population. This number exceeds the number of carers known to the council and our commissioned services, thus reinforcing the importance of proactive identification and raising awareness of the valuable role carers play in our society.
- 2.3 Barnet also has an aging population and a population that is increasingly diverse. Carer numbers will only increase as the support needs of our aging population increase, as will the importance of ensuring services are accessible to, and appropriate for, the diverse group of people who are carers.
- 2.4 Through engagement and coproduction with over 300 carers to develop the strategy we gained much greater insight into the challenges for carers in Barnet, including:
- Feeling undervalued
 - Needing more preventative support
 - The importance of breaks from the caring role
 - Financial concerns
 - Mental health struggles

We also captured feedback from carers about changes to services that they feel are needed. We recognise that some of these changes may already be a part of the current support offer, such as support for young carers in schools and support to take a break from caring, which indicates that we need to review communication, awareness, and accessibility. Whereas other changes reflect gaps or issues in our local system, such as access to mental health support and challenges with 'inconsistent care', that we will aim to address.

- 2.5 The strategy sets out four coproduced priorities to guide our action planning:
1. Proactive identification of carers and young carers
 2. Individualised support so that carers and young carers can get the support they need and are entitled to
 3. Involving carers to shape future services and support offer
 4. Raising the profile of carers and young carers

3. Alternative options considered and not recommended.

- 3.1 This strategy offers the only consolidated framework that has been co-produced with carers and council partners, to support the council in strengthening the carers and young carers support offer in Barnet. Not having the strategy is therefore not recommended.
- 3.2 If the strategy was not updated, it would remain out of date and not aligned to current legislation, policy, partnerships and best practice. A strategy update ensures alignment with our shared priorities and enables momentum to take the outcomes forward together.

4. Post decision implementation

- 4.1 Following approval, the adult social care team, working with key partners, will establish a new multi-agency Carers Partnership Board that will support development and delivery of a dedicated action plan to implement the strategy over a two-year period.
- 4.2 Progress will be reported to the relevant Council committee.
- 4.3 Through the two-year Action Plan, the Board will identify interventions and expect to evidence:
- An increase in the number of new carers who are identified at an early stage in their caring role, with a notable improvement in identifying under-represented groups.
 - Carers report a positive experience of working in partnership with Health and Social Care for their benefit and the benefit of the cared for person.
 - An increase in the number of Carers who report they are aware of and can access appropriate information, advice and guidance in relation to their caring role via the national and local Carers surveys.
- 4.4 A review of the strategy and progress to date will take place in March 2025.

5. Implications of decision

5.1 Corporate Priorities and Performance

- 5.1.1 The Carers and Young Carers Strategy sets out the proposed approach to delivering the agenda set by the Corporate Plan priorities of caring for people, in particular, living well.

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

- 5.2.1 Delivery of the strategy and action plan will be met through existing service budgets. Should any future funding requirements arise, these will be considered through the Council's medium term financial planning process. Other partners involved in delivering the action plan, for example the NHS, will address resource implications through their own financial and budget processes.

5.3 Legal and Constitutional References

- 5.3.1 The Council's Constitution Article 7 sets out the terms of reference of the Adults and Safeguarding Committee which includes the following responsibilities:
- Responsibility for all matters relating to vulnerable adults, adult social care and leisure services.
 - Working with partners on the Health and Well-being Board to ensure that social care interventions are effectively and seamlessly joined up with public health and healthcare and promote the Health and Well-being Strategy and its associated sub strategies.
- 5.3.2 The Council has statutory duties to promote the wellbeing and health of its residents for example in the Care Act 2014 and Children & Families Act 2014.

5.4 Insight

5.4.1 The strategy has been developed based on insight from over 300 carers and young carers, and use of local, regional and national insight to inform the priorities outlined and outcomes identified.

- Online surveys were sent to carers and young carers and shared via Engage Barnet.
- Six focus group discussions were held this Autumn by Barnet Carers Centre in person and remotely. Focus group sessions were held with young carers, young adult carers, parent carers and adults' carers including dementia carers.
- A further focus group was held with young carers in December to review and develop strategy outcomes and priorities.

5.5 Social Value

5.5.1 The Public Services (Social Value) Act 2012 requires people who commission public services to think about how they can also secure wider social, economic, and environmental benefits. This is reflected in the council's social value policy.

5.5.2 The corporate plan supports the aims of this social value policy and the social values outcomes we are seeking to achieve. Any commissioning or transformational activity that is carried out as part of the implementation of the Carers and Young Carers Strategy will be conducted in accordance with the social value policy.

5.6 Risk Management

5.6.1 Risk management considerations will be an integral part of the scoping and management of individual projects that are initiated to deliver the Carers and Young Carers Strategy.

5.7 Equalities and Diversity

5.7.1 Equality and diversity issues are a mandatory consideration in the council's decision-making process. Decision makers should have due regard to the public-sector equality duty in making their decisions. The equalities duties are continuing duties they are not duties to secure a particular outcome. Consideration of the duties should precede the decision. It is important that the Committee has regard to the statutory grounds in the light of all available material such as consultation responses. The statutory grounds of the public-sector equality duty are found at section 149 of the Equality Act 2010.

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.

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

(a) remove or minimise disadvantages suffered by persons who share a relevant

protected characteristic that are connected to that characteristic.

(b) take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it.

(c) encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

5.7.3 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:

- (a) Tackle prejudice, and
- (b) Promote understanding.

5.7.5 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

5.7.6 The public sector equality duty considerations and the council's commitments to tackling inequalities and disproportionality will be central to the development of the action plan that will deliver the Carers and Young Carers Strategy.

5.7.7 The current commissioned contract for Carers and Young Carers Support Services includes explicit requirements that cover the council's duties under equality legislation and the specification requires that carers from "hard to reach groups" are identified and proactively encouraged to access support appropriate to their needs.

5.8 Corporate Parenting

5.8.1 In line with the Children and Social Work Act 2017, the council has a duty to consider Corporate Parenting Principles in decision-making across the council. Through the implementation of the Carers and Young Carers Strategy, we aim to improve the support offer and experience of all young carers, including looked after children and care experienced people.

5.9 Consultation and Engagement

5.9.1 This strategy has been coproduced and developed in partnership with over 300 carers and young carers, as well as professionals representing: Adult Social Care, Family

Services North Central London Integrated Care Board (NCL ICB), Barnet Enfield and Haringey Mental Health Trust, commissioned and non-commissioned organisations and voluntary and community sector partners.

5.9.2 A formal consultation was also carried out via Engage Barnet with positive feedback received on the usefulness of the document and reinforcing the importance of statutory agencies working in partnership, to reduce the burden on carers. A number of comments received suggested actions that could be taken to implement the strategy, which have been collated and will be used to inform action planning.

5.10 Environmental Impact

5.10.1 There are no direct environmental implications arising from approving this strategy. The impact of actions taken to deliver the Carers and Young Carers Strategy will be assessed against the council's Sustainability Action Plan to ensure cohesion and alignment with targets.

6. Background papers

6.1 None.

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London Borough of Barnet

Carers and Young Carers Strategy

2023 - 2028

YOUR LIFE,
YOUR CARE,
YOUR CHOICE.

Directorate	Communities, Adults and Health Family Services
Approvers	Adults and Safeguarding Committee, Children Education and Safeguarding Committee
Approval Date	
Review Date	

Foreword

Foreword to be added prior to publication.

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1. Introduction

A Carer is a person over the age of five who provides unpaid care and support to a parent, partner, child, relative, friend, or neighbour who is unable to manage on their own because of a disability or impairment, poor health, frailty, or use of drugs or alcohol. This includes:

- Adult carers: an adult aged eighteen and over who is caring for another adult such as a spouse, parent, partner, friend, neighbour, relative or adult child.
- Parent Carers: A parent or guardian who provides care to their child (of any age) to a degree greater than would be normally expected in a parenting role.
- Carers of multiple people: Those who care for more than one person and include different generations.
- Young Carers: A person under eighteen who provides or intends to provide care for another person (of any age, except where that care is provided for payment, pursuant to a contract or as voluntary work).
- Young Adult Carers: An adult aged between 18 and 25 who is caring for another adult or child.

The framework for how we intend to support carers of all ages in our borough is outlined in this strategy, which is a declaration of our commitment to carers and young carers in Barnet.

Supporting carers and young carers has been defined as a priority for the council and the NHS, and supporting unpaid carers is one of the objectives included in the council's manifesto. This strategy supports the Barnet Joint Health and Wellbeing Strategy, Barnet's Children and Young People's Plan and Child and Family Early Help Strategy, and the Adult Social Care Reform priorities for unpaid carers. It has been developed with the direct involvement of over three hundred Barnet Carers through the co-production and engagement work led by our commissioned provider, Barnet Carers Centre, and in partnership with colleagues across the Council, Health, and the voluntary sector.

This strategy will help the council to carry out its duties to support carers in their caring role. This includes helping to prevent young carers from carrying out inappropriate caring and ensuring that carers of all ages can achieve the outcomes that they desire. Enabling carers helps to support and promote the independence of people with care and support needs. This means considering the needs of carers at various times in their caring role, such as providing support early on, support to maintain care, and support at the end of a caring role or, when moving from Family Services to Adult Social Care. By working closely across the Council and with the wider community we aim to achieve the outcomes defined within this strategy.

The next step is to translate this strategy into action so that it makes a real and lasting difference to the lives of carers of all ages.

Scope of this strategy

This strategy will:

- set out to carers how we will support them in carrying out their caring role.
- set out to young carers how we will support them and help to prevent them from carrying out caring activities that aren't appropriate for them as young people, sometimes called inappropriate caring.
- set in motion a governance structure and action plan for all organisations to work together to support carers and young carers within Barnet.

2. Context

The caring relationship can be rewarding but it can also be challenging with some carers experiencing stress, social isolation, financial hardship, ill health, and minimal time for themselves. Building resilience in carers relies on having informal and local support and knowing where to access help when needed.

The Care Act 2014 put into place a consolidated legal framework for carers and means that carers are recognised in law in the same way as those that they care for. The Children and Families Act 2014 introduced a 'whole family' approach to assessment and support. Local authorities must offer an assessment where it appears that a child is involved in providing care¹. This legislation is aligned with similar provision in the Care Act 2014² requiring local authorities to consider the needs of young carers if, during the assessment of an adult with care needs, or of an adult carer, it appears that a child is providing, or intends to provide, care. Both the Care Act and the Children and Families Act were designed to complement each other and promote a "whole family approach" and joined up working where needed, which avoids the need for multiple assessments. The legislation stresses the importance, of considering the outcomes that everyone may be seeking.

In Barnet, young carers assessments are undertaken via an Early Help Assessment. Assessments must consider whether the care being provided by a child is excessive or inappropriate; and how the child's caring responsibilities affects their wellbeing, education, and development. A local authority should consider how supporting the adult with needs for care and support can prevent the young carer from undertaking excessive or inappropriate care and support responsibilities.

This strategy builds on the previous Barnet Carers Strategy Action Plan and supports achieving the outcomes set within the Joint Health and Wellbeing Strategy 2021 – 2025, the Children and Young People's Plan 2023-2027 and the Child and Family Early Help Strategy 2023-2027. In addition to local documents, this strategy has been shaped by the Adult Social Care Reform White Paper, which identifies unpaid carers as a priority area, the National Carers Action Plan (2018-2020), NHS Long Term Plan (2019), and takes into account key legislation, as outlined above.

¹ Children Act 1989: section 17ZA 1(a) [inserted by section 96 Children and Families Act 2014]

² Care Act 2014: section 63(1).

Carers in Barnet

The 2021 Census advises that Barnet has 28,808 Carers, which makes up 7.9% of total Barnet population.³ This is a reduction from the 2011 census, which reported 32,256 Carers (9% of total population in 2011).

Further information around carer population is collected from our commissioner provider, Barnet Carers Centre, who report 3,703 Adults Carers, and 787 Young Carers known to them.

Although the Census provides useful information, it is widely acknowledged, both nationally and locally, that it is likely to underreport the number of carers, as many carers view their caring responsibilities as part of another role, such as that of a parent, partner, child, relative or friend. It is clear we need to identify and support carers earlier before there is a risk of carer breakdown, or carers are no longer able to care.

The Covid 19 pandemic has adversely impacted many carers and young carers in our communities. The Council recognizes the importance of working closely with its partners and the community and voluntary sector in responding to the needs of carers and young carers to ensure that we are appropriately supporting carers and young carers in our communities to maintain their health and wellbeing and achieve the outcomes that they desire.

Recognising the demographic changes in Barnet, we acknowledge the need to ensure that support and services are accessible to, and appropriate for, the diverse group of people who are carers. Some of the key demographic considerations that inform our action plan are as follows:

- We have an aging Carer population that presents with a myriad of physical health needs.
- The Covid 19 pandemic and the subsequent economic crisis has adversely impacted many carers and young carers in our communities, and there is a greater need around moderate to severe mental health challenges.
- Carers have long had concerns about their own mental health and the mental health of the people they care for. In a recent survey 46% of carers cited their mental health in their top two concerns for 2023. Almost 80% of those responding to the survey placed the mental health of the person they care for in their top two concerns for 2023.
- According to the latest census findings, proportionately more of Barnet's residents are now children and young people or older adults compared to 2011. The numbers of older adults in Barnet will continue to increase, putting increasing demand on adult social care and creating more caring roles.
- Barnet has the highest recorded prevalence of dementia across North Central London and as of 2020 has the largest population of all London boroughs.
- There has been a 9.3% decrease over the past 10 years of residents identifying as white although this group still represents over half of Barnet's population followed by those identifying as Asian representing 19.3% of Barnet's population. The ethnic group showing the highest level of growth over the last 10 years has been those who identify as Other Ethnic Groups now representing 9.8% of the population.
- Over a third of Barnet's population self-reported as Christian with those reporting as having no religion being the next most common consisting of 20.2% of Barnet's population. Overall, 14.5% of

³ [Unpaid care, England, and Wales - Office for National Statistics \(ons.gov.uk\)](https://ons.gov.uk)

Barnet's population self-reported as Jewish, however the Jewish population in Barnet represents 39% of London's Jewish population.

- The latest census finding has reported that Barnet has a growing number of migrants settling in the borough and staying for the longer term.

3. We listen

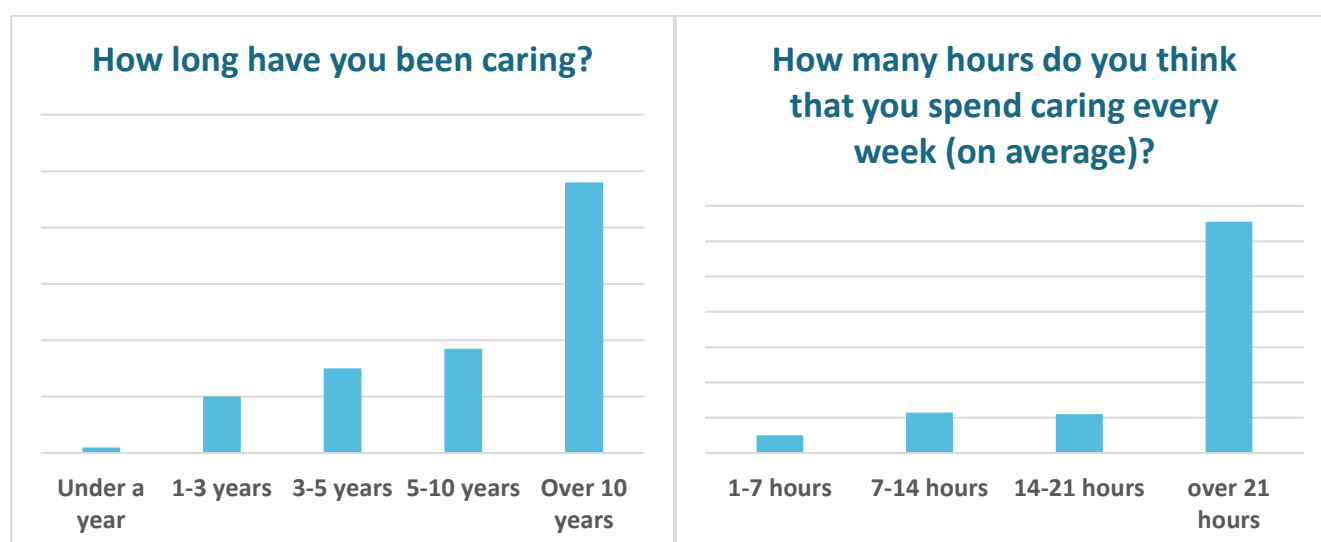
Barnet Council, and its key partners across health and social care, are committed to empowering carers to share their views and to work in partnership in the shaping and delivery of services.

This strategy, the priorities and the outcomes identified have been codesigned with young and adult carers across the borough. Over three hundred carers have been engaged via a combination of focus groups and online surveys. Six focus group discussions were delivered by Barnet Carers Centre and took place in person and remotely. An online survey was sent to all Adult Carers known to the Barnet Carers Centre; and promoted via the council's engagement and consultation website, Engage Barnet.

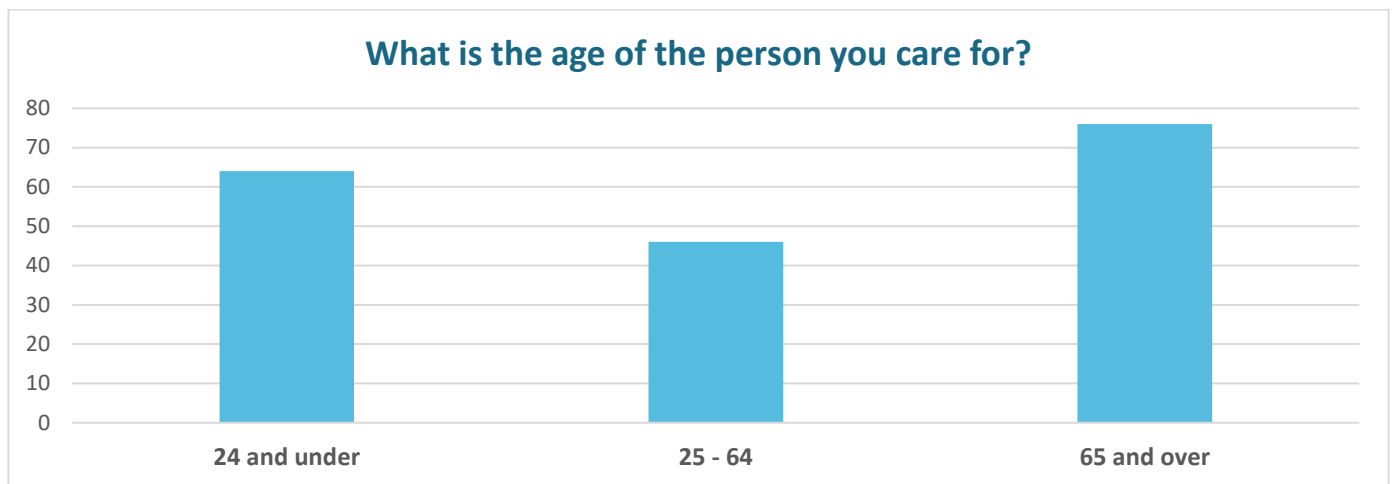
Furthermore, this strategy incorporates feedback collected from carers via the Survey of Adult Carers, conducted biannually by local authorities across the country, and makes important considerations of the hardships recorded as faced by carers during the Covid 19 Pandemic.

Some key findings from the engagement activity and feedback collated are as follows:

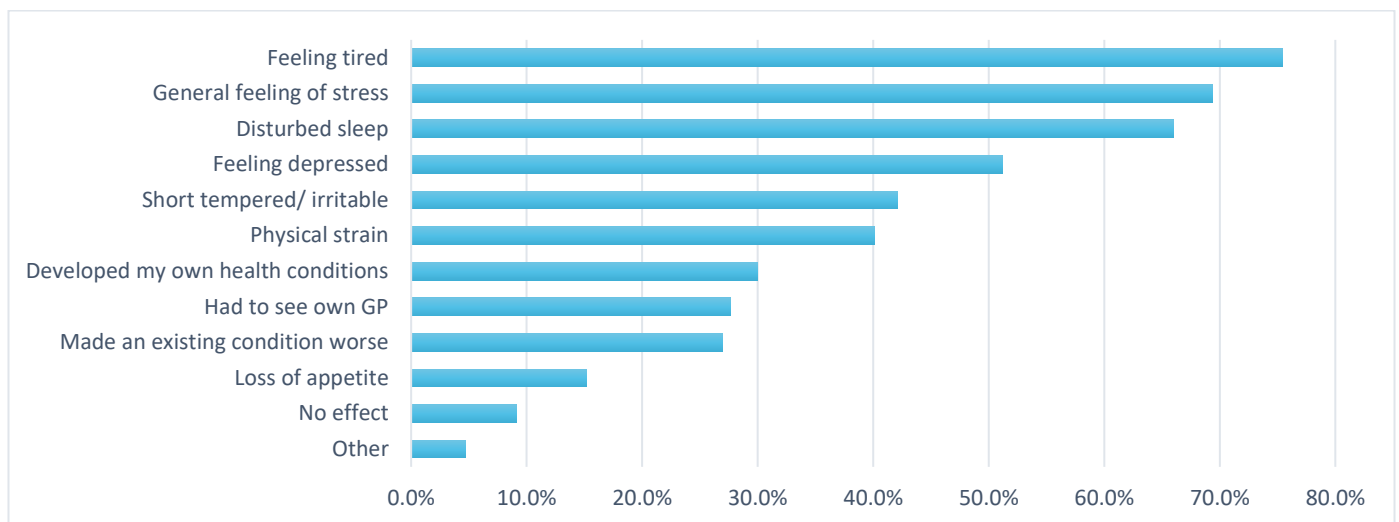
1. A majority of respondents to the survey specific to this strategy have been caring for over 10 years and spend over 21 hours on average in a week in their caring role (Carers Strategy Survey)



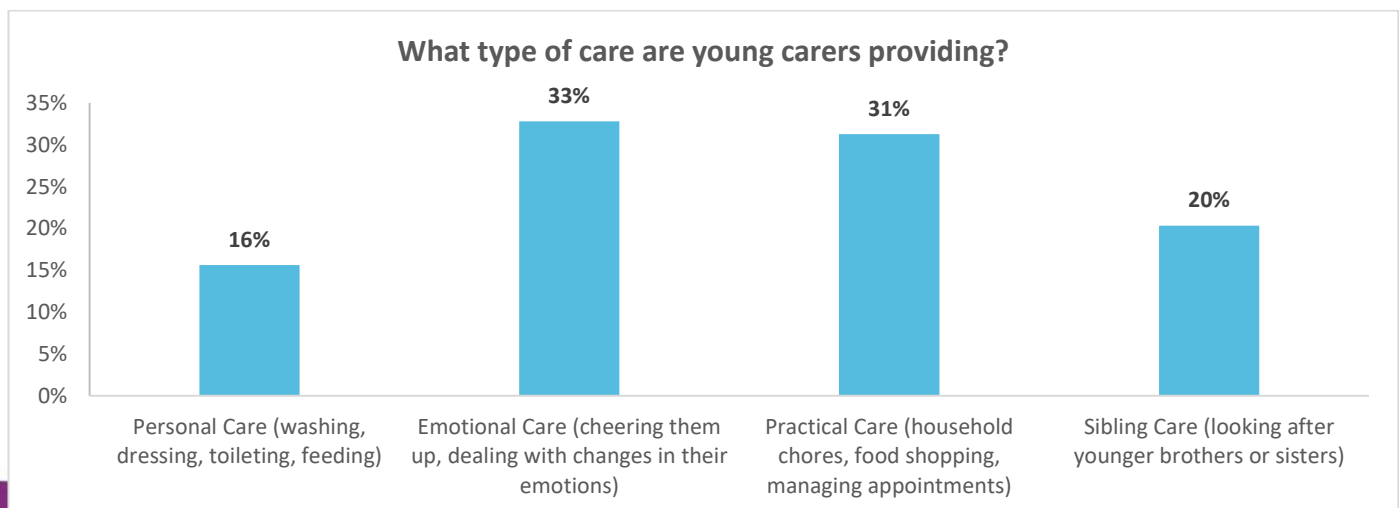
2. Parent carers have emerged as a prominent carers group through recent engagement and co-production discussions (Carers Strategy Survey and Focus Groups)



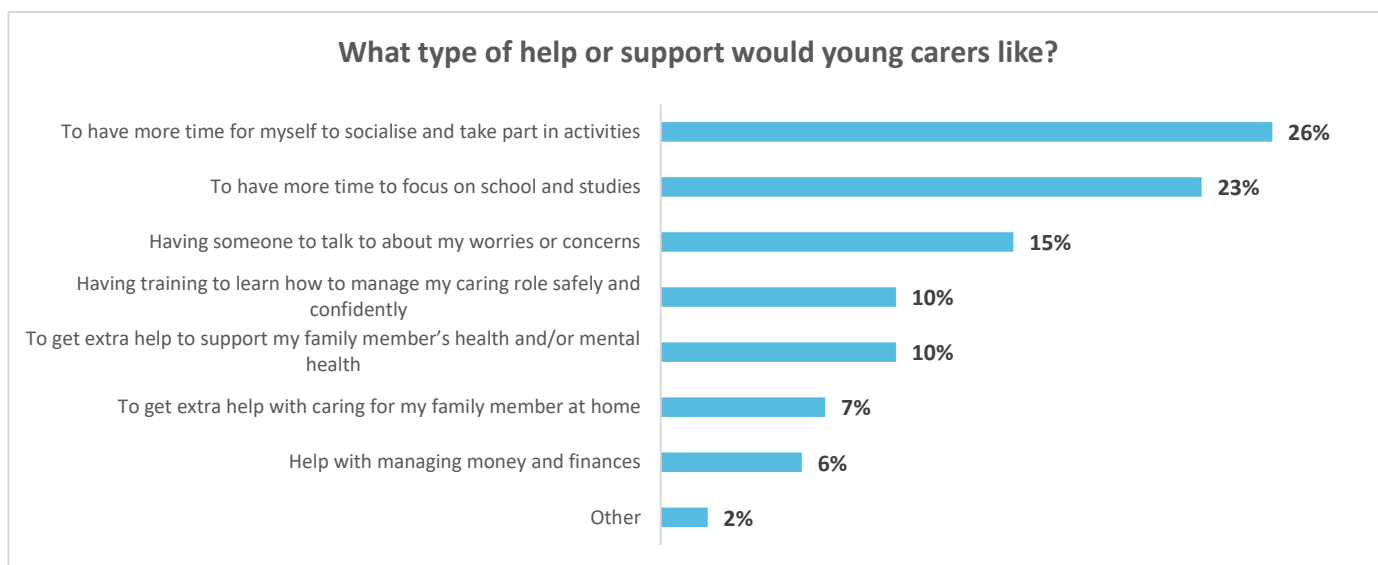
3. Over two thirds of carers reported that caring caused them general feelings of stress (Survey of Adult Carers, conducted biannually by local authorities)



4. Young carers are providing care for a wide range of things (Carers Strategy Young Carers Survey)



5. Young carers need support with a range of things including time to themselves and time to focus on school (Carers Strategy Young Carers Survey)



Engagement & Co-production



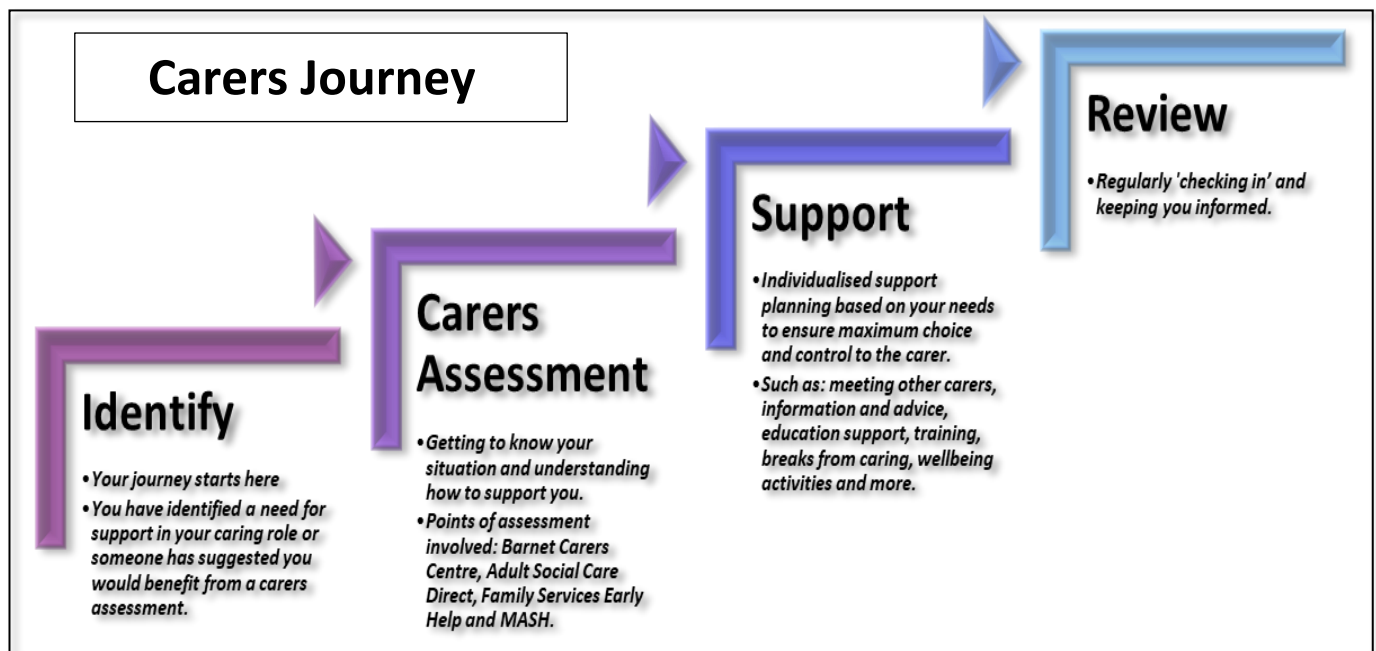
The engagement and co-production activity has been helpful in collecting a varied range of feedback and recommendations directly from carers. We recognise that some of this feedback may relate to pathways that already exist, changes that have been made, or changes that are planned, which indicates that we need to review communication, awareness, and accessibility. Whereas other feedback reflects gaps in our local system that we will aim to address through this strategy and its associated action plan.

During the engagement and co-production activity, carers advised us that:

- They feel there is a lack of awareness of the role Carers play in supporting the cared for person, by the Health and Social Care system and the wider community.
- They are only identified when they have reached crisis, which means it is too late for preventative support.

- They need more support with transport costs and entitlements such as free bus passes and access to discounted goods, products, and services to enable them to continue supporting themselves and the cared for person.
- They value a choice of activities that enable them to have regular breaks from their caring responsibilities to support balancing their caring roles with their own personal lives and interests.
- They would benefit from training sessions about the disabilities / conditions of the cared for person and the various Health and Social Care pathways that can be used to access support.
- They have struggled during the pandemic - often not being informed when there is a change to the care and support of the cared for person (e.g., plan for the reopening of day opportunities).
- They need regular respite, and they do not know what respite is available and how to access it.
- There is an issue around “inconsistent care” with different paid carers turning up to carry out care, which can be distressing for the cared-for person.
- Young Carers often take on huge amounts of responsibility and need support to balance competing responsibilities and demands. Priorities for young people included pursuing their education and to have time dedicated to their mental health and wellbeing support as well as time for themselves and socialising.
- Timely, accessible, and appropriate support is required to enable sustained improvement in mental health and wellbeing. Many of the young carers we spoke to mentioned difficulties around accessing effective mental health and wellbeing support, specifically citing waiting times or accessibility.
- Young carers raised concerns around the demands of their education, and a sense that not all teaching staff were aware of how their caring responsibilities impact the abilities of young carers to participate and achieve in the same ways as their fellow pupils.
- Young Carers spoke of a need for increased understanding on the part of teaching and pastoral staff around their attainment and school performance relative to their caring responsibilities.
- Some young carers were concerned about finances and young carers were not always aware of the financial support available.

4. Existing Offer and Services



Family Services, Adult Social Care and Health are committed to working together to ensure that carers and young carers are identified, offered assessments, and supported based on a whole family approach, whichever service they are identified through. This is in order to ensure that carers and young carers receive the support that they need in their caring role.

We actively promote carers using local resources and support networks in the community. For those needing more targeted support, we support them to access statutory support services where this is needed.

Carers Assessments are currently completed by a social care professional employed by the local authority, or by an appropriately trained professional working for Barnet Carers Centre. Associated care and support planning, where decisions are required around access to social care funding, are handed over to the local authority.

GPs are actively encouraged to identify carers when they access primary care services and record this on their care record. GPs are able to signpost to carer support and make onward referrals as needed, as well as making reasonable adjustments to ensure that carers are able to support their cared for in accessing the healthcare services that they need.

Support that is available to carers within the borough includes:

- Information and advice
- Respite vouchers (for use in residential or nursing homes)
- Training – including modules on practical support like safe Moving and Handling, supporting those living with dementia, or a mental health diagnosis.

- Service Provision to address the needs identified in the Assessment – delivered by a provider arranged by the local authority or funded via a Direct payment (these are cash payments, which can be used to purchase support, which you have been assessed as needing to support you in your caring role)
- Peer support and carer forums
- Counselling for carers
- Mental Health support (through Barnet, Enfield & Haringey Mental Health Trust) Working with key partners to provide whole family support where needed (e.g., health and Family Services)

Support offered through the commissioned lead provider, Barnet Carers Centre, includes: -

- Activities
- Information and advice
- Engagement with, and support within, schools
- Leisure pass scheme
- Wellbeing support
- Counselling for carers
- Carer specific training
- Referrals to local agencies and services
- Mentoring
- Educational support to young carers

In addition to the above, other statutory and voluntary sector organisations working across the borough also offer support to carers both formally and informally.

5. Delivering Change

The implementation of this strategy will be planned in consideration of good practice principles, to ensure the associated action plan is accessible, co-produced, timely and tailored to deliver meaningful outcomes to carers of all ages.

An important strand of our action plan will be addressing challenges relating to under-representation or disproportionality, following further interrogation of demographic data - notably census data that has recently become available.

To deliver the action plan we will work across the council and its partners from social care, health, education, housing, and the voluntary and community sector. We will also develop relationships across the wider council and community, including employment and business sectors as part of this approach, and will continue to put Carers at the heart of this process through their direct involvement in the Carers Partnership Board =, which will be set up as a priority action arising from this strategy. The Board will be multi-disciplinary, multi-organisation and include representation from carers of all ages in Barnet.

Priorities

We have coproduced the following four priorities to guide our action planning:

1. Proactive identification of carers and young carers.
2. Individualised support so that carers and young carers can get the support they need and are entitled to.
3. Involving carers to shape future services and support offer.
4. Raising the profile of carers and young carers.

Outcomes

The outcomes we will achieve through this strategy include:

1. Carers and young carers are identified at the start of their caring journey, and this enables them to access the support they need.
2. Carers are supported to fulfil their education, training, and employment potential, and have their own time for positive and recreational activities.
3. Young Carers are prevented from having to undertake inappropriate caring and provided with the support they need to learn, develop, thrive, and enjoy a positive childhood.
4. Carers are fully aware of resources available to them to help them in their caring role.
5. Carers are supported to access, financial information, and advice and as a result feel financially secure and not financially disadvantaged due to their caring role.
6. Carers see an improvement in their mental health and wellbeing.
7. Young carers feel supported in schools to enable a positive school experience.
8. The way we work across the system is informed by insight from carers' lived experience and valuable contribution.
9. Carers can actively participate in the care and support planning of the person they care for and are able to advocate for themselves and their loved ones when needed.

Review

We have captured feedback from carers about changes to services that they feel are needed and included them directly in this strategy. We recognise that some of this feedback may relate to pathways that already exist, changes that have been made, or changes that are planned, which indicates that we need to review communication, awareness, and accessibility. Whereas other feedback reflects gaps in our local system that we will aim to address through this strategy and its associated action plan.

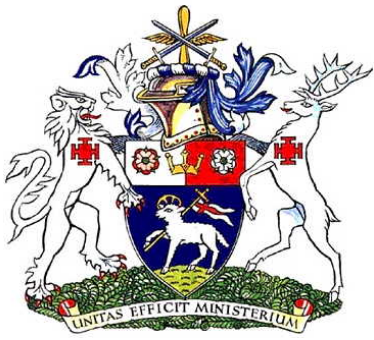
The dedicated action plan will be implemented to deliver on the priorities and outcomes outlined in this strategy over a two-year period. Oversight will be via a multi-disciplinary, multi-organisation Carers Partnership Board. There will be workstreams established, as needed, that will report into the Board. Progress towards the Action Plan will be monitored by the Board and reported to the Barnet Borough Partnership Board, the Health and Wellbeing Board and other boards/committees as requested.

Through the two-year Action Plan, the Board will identify interventions and expect to evidence:

- An increase in the number of new carers who are identified at an early stage in their caring role, with a notable improvement in identifying under-represented groups.
- Carers report a positive experience of working in partnership with Health and Social Care for their benefit and the benefit of the cared for person.
- An increase in the number of Carers who report they are aware of and are able to access appropriate information, advice, and guidance in relation to their caring role via the national and local Carers surveys.

6. Further reading

Adult Social Care Reform White Paper	https://www.gov.uk/government/publications/people-at-the-heart-of-care-adult-social-care-reform-white-paper
Barnet Joint Strategic Needs Assessment (JSNA) information	Joint Strategic Needs Assessment Barnet Open Data
Census 2021 Barnet information	Census Maps - Census 2021 data interactive, ONS
Barnet Council Labour Party Manifesto	Manifesto - Barnet Labour Party - Barnet Labour Party
Personal Social Services Survey of Adult Carers in England, 2021-22	Personal Social Services Survey of Adult Carers in England, 2021-22 - GOV.UK (www.gov.uk)



Adults & Safeguarding Committee AGENDA ITEM 11

Monday 13 March 2023

Title	Fit & Active Barnet 2022-23 update
Report of	Cllr Paul Edwards, Chair - Adults & Safeguarding Committee
Wards	All
Status	Public
Urgent	No
Key	No
Enclosures	Appendix A – Sport England Active Lives (adults aged 16+) demographic data Appendix B – Fit & Active Barnet campaign assets (examples)
Officer Contact Details	Cassie Bridger; Assistant Director – Greenspaces & Leisure cassie.bridger@barnet.gov.uk Courtney Warden; Service Manager – Sport & Physical Activity Courtney.warden@barnet.gov.uk

Summary

The Fit & Active Barnet Framework (2022-2026) sets out a vision to ‘create a more active and healthy borough’, achieved through three priority aims; People, Place and Partnerships.

The Fit & Active Barnet Partnership Board which includes a consortium of partners was established to drive forward this vision, the delivery of physical activity and wellbeing interventions and sporting infrastructure improvements that support increased participation levels across the borough.

This report sets out the progress in delivering the Fit & Active Barnet Implementation Plan (2022-2023) which has led to an increase in participation levels across the borough.

Some examples of positive collaboration include the delivery of the Fit & Active Barnet; ‘Get Active. Give it a Go!’ campaign, interventions that target the boroughs most ‘inactive’ residents, integration of physical activity within health and social care pathways, improving

accessibility of physical activity opportunities and spaces such as the achievement of Dementia Friendly accreditation and recognising the value and contribution of the borough's greenspaces through hosting physical activity opportunities and improvements to infrastructure.

The Fit & Active Barnet Partnership is currently scoping a refreshed Implementation Plan (2023-2024).

Officers Recommendations

1. That the Adults and Safeguarding Committee note the Fit & Active Barnet Framework update 2022-23.

1. Why this report is needed

- 1.1 The Adults and Safeguarding Committee approved the Fit & Active Barnet Framework (2022-2026) on 7th March 2022 together with an accompanying implementation plan, to be delivered from 1st April 2022.
- 1.2 The Greenspaces & Leisure service have been working collaboratively with partners across the Fit & Active Barnet Partnership to deliver commitments associated with the three priority aims of the Framework; Place, People and Partnerships guided by the principles below.

Fig 1: Fit & Active Barnet guiding principles



- 1.3 Partners represented amongst the Fit & Active Barnet Partnership include those from sport and physical activity, health, education and the voluntary, community and faith sectors. Organisations include Better, Saracens Foundation, Young Barnet Foundation, Barnet School Sports Partnership, Barnet Homes, Age UK Barnet, Barnet Mencap, Public Health, Inclusion Barnet, Sense and New Citizens Gateway.

- 1.4 Through effective collaboration, the FAB Partnership has maximised delivery of opportunities in the borough that support residents to lead more active lifestyles, whilst improving access to facilities and spaces that support this.

Physical Activity Levels

- 1.5 A national measurement of the number of people taking part in sport and physical activity is undertaken via the Sport England Active Lives Survey which focuses on people aged 16 and over. A separate survey, the Active Lives Children and Young People Survey looks at the activity levels of children aged 5-16 years.
- 1.6 Surveys are based on a random sample size of 500 residents and results are published bi-annually (typically in May and November each year).
- 1.7 At the time of approving the FAB Framework, approximately 61.6% of adults aged 16 and over in Barnet were active for at least 150 minutes per week¹as measured by the Sport England, Active Lives Survey).
- 1.8 The most recent release of the Active Lives dataset (Nov 21) indicates a 1% increase to 62.6% (equating to approximately 8,000 more people). Appendix A provides a further breakdown of participation by demographic groups.
- 1.9 When comparing this dataset amongst other London boroughs, Barnet has continued to maintain the highest increase in the number of adults aged 16+ active for at least 150 minutes per week since the Active Lives Survey commenced in November 2015/16.
- 1.10 The Active Lives Children and Young People Survey highlighted that 43.5% of 5–16-year-olds were active for an average of 60+ minutes a day (2018-19). Due to a limited sample size this is the latest dataset made available for this indicator.
- 1.11 Whilst the Active Lives Survey is a useful benchmark, it is a snapshot of the local picture, given the attributable sample size. The Council's Resident Perception Survey (RPS) is also used as further analysis to understand the local picture. The questions included in the RPS reflected those included in the Active Lives Survey.
- 1.12 The results of the RPS, based on a controlled sample of 2,000 participants, indicated that 51% of residents aged 18 and over were active for at least 150 minutes per week² and results from the children and young people survey demonstrated 44% are active for an average of 60+ minutes per day³.
- 1.13 Both sets of results further demonstrated that our targeted approach to engaging residents and community groups who are most disproportionately impacted in respect of their access to, and experience of physical activity opportunities and facilities has proven successful. These include; children and young people (particularly those from deprived communities), older people, Black, Asian and Minority Ethnic (BAME)

¹ [Sport England Active Lives Survey](#)

² [Barnet Resident Perception Survey \(2021/2022\)](#)

³ [Barnet Children & Young People Survey \(2022\)](#)

communities, disabled people and those living with long-term health conditions, and women and girls.

- 1.14 Throughout 2022, the Council and the Fit and Active Barnet Partnership has collaborated on a series of initiatives to promote and improve levels of physical activity. Most notable is the Fit & Active Barnet Campaign; 'Get Active. Give it a Go!' delivered in September 2022.
- 1.15 Co-designed with the Fit & Active Barnet Partnership, the campaign was delivered across a series of digital and print channels encouraging residents to get active during the month of September by trying something new or getting back to an old past time.
- 1.16 The campaign was accompanied by imagery and video footage of Barnet residents participating in activities, alongside their personal journey and experience (examples located in Appendix B).
- 1.17 Working with a range of partners and activity providers across the borough (including the VCS and sports clubs) over 40 free of charge or low cost activities were offered such as swimming, gym, netball, rugby, football, dance, cheerleading, walking etc.
- 1.18 Despite promotion being paused to respect the passing of Her Majesty the Queen Elizabeth II, the campaign performed well and is reported to be one of the most impactful campaigns delivered by the Council. Some of the headline results include:
 - Over 40,000 participants engaged in free and low-cost activities
 - 49% male participation and 51% female participation
 - 37% participation from BAME residents and 38% White
 - 74% participants aged 16 – 64 years, 23% aged 0-16 years and 3.5% 65+ years
 - 1,226 new Fit & Active Barnet Card memberships registered during September
 - 100 Give it a Go (free 3 month all-inclusive Better memberships) issued via a prize draw to participants that engaged in physical activity three or more times a week during September
 - 117,480 digital reach with 3,698 engaged – engagement rate 3% (based on industry standards, a good engagement rate is generally agreed to be between 1% to 5%)
- 1.15 The table below sets out further examples of outcomes and achievements realised against actions within the Fit & Active Barnet Implementation Plan (2022-2023) since April 2022. These achievements have been made possible via a collaborative effort amongst partners across the borough that represent the Fit & Active Barnet Partnership.

Fit & Active Barnet Implementation Plan (2022-2023) example achievements

#	Aim (priority in bold)	Commitment	Example Achievements
1	People	Continue delivery of targeted interventions that support residents to lead more active and healthier lifestyles.	<p>Alongside operation of the boroughs five leisure facilities, Better offer a varied physical activity and health programme that targets engagement amongst the most inactive groups in the borough (as per 1.13) by breaking down barriers to participation. Thus far in 2022-23, working collaboratively with the FAB Partnership, Better has delivered;</p> <ul style="list-style-type: none"> • 32 hub sessions across leisure centres and within community-based settings that have engaged c.696 participants e.g., chair-based exercise at Finchley United Synagogue, NHS neurological sessions at Barnet Copthall Leisure Centre, physical activity sessions delivered at Burnt Oak Leisure Centre in partnership with Barnet Mencap and parent and teacher physical activity sessions at Sunnyfields Primary School. • Healthwise (health intervention) pathway, supporting residents to improve health and well-being outcomes through physical activity; adult weight management (174 participants), XPLORE: children’s weight management (105 participants), physical activity on referral including diabetes referral and cancer rehabilitation (527 participants), and falls prevention (13 participants). <p>Parkrun events continue to be supported across Barnet parks and open spaces. Collectively (since commencing), participants have covered an impressive 500,773km.</p> <p>Examples of interventions delivered in respect of our target groups include;</p> <p><u>BAME</u></p> <p>Partners such as Better, Saracens Foundation and New Citizens Gateway have supported refugees and asylum seekers to access physical activity opportunities through free 6-month gym memberships (158), women only gym session (average of 18 participants per session) and physical activity sessions (85 participants).</p>

			<p>FAB partnered with Inclusion Barnet to deliver the Healthy Heart pilot in Grahame Park which was targeted at residents from BAME communities diagnosed (or at risk of) cardiovascular disease. See action 7 for more info.</p> <p><u>Disability & Inclusion</u></p> <p>A collaboration between Sense and Better has supported implementation of a sensory tennis session at Burnt Oak Leisure Centre which commenced in Q3.</p> <p>Barnet Mencap continue to deliver physical activity via their Community Opportunities Projects (COP's) which includes sessions within Better leisure centres and a partnership with Barnet Lawn Tennis Club (722 attendances within the COPs programme since April 2022).</p> <p>300+ young adults and children with disabilities supported via Saracens Foundation disability and inclusion programming, with a secondary impact on an parents and guardians through respite services.</p> <p><u>Children & Young People</u></p> <p>Over 450 young people represented Barnet in the London Youth Games and 33 in the London Mini Marathon, with one young person finishing first place in the U17 male race.</p> <p>5,533 under 8's swam for free since April 2022 and 32,806 8 – 15-year-olds swam for £1.</p> <p>Over 6,000 young people (with approximately 23,000 attendances) participated in physical activity opportunities across the borough supported by the Holiday Activities and Food Programme, commissioned via the boroughs 0-19 Early Help service and Young Barnet Foundation.</p> <p><u>Older People</u></p> <p>Age UK Barnet have continued to advocate the benefits of physical activity amongst the boroughs ageing population through promotion and delivery of physical activity interventions e.g., health walks and fitness classes. A collaboration between Barnet Homes and Age UK Barnet resulted in gentle seated exercise sessions delivered within four sheltered accommodation schemes across the borough – further info.</p>
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			<p><u>Women & Girls</u></p> <p>Better continue to provide a varied programme of women and girls only sessions across the borough's leisure centres. In partnership with New Citizens Gateway a women and girls gym session has been implemented at Burnt Oak Leisure Centre which have proved popular amongst mothers and daughters.</p> <p>See action 19 re: partnership between FAB, Argent Related and Women in Sport.</p>
2	<p>People</p> <p>Place</p> <p>Partnerships</p>	Undertake mapping of the sport and physical activity landscape/opportunities in the borough	Mapping of activities and opportunities is an on-going task, with providers and clubs encouraged to upload information on to the Get Active (activity finder). Information obtained through mapping is shared with FAB partners to support identify gaps in provision and service need. This has subsequently facilitated investment into physical activity (see examples in action 3 below).
3	<p>People</p> <p>Place</p> <p>Partnerships</p>	Optimise funding opportunities to support the commissioning of new interventions across a range of environments, particularly where activity levels are lowest, and inequalities exist	<p>£30,000 funding secured from the Barnet Prevention Fund to deliver Dance Barnet 2023-2024 – the first multi-agency pan-disability dance pathway for the borough.</p> <p>£50,000 donated to Saracens Foundation by Stay Belvedere Hotels Limited to deliver 'Sporting Roots' – a partnership physical activity project targeting refugee and asylum seekers.</p> <p>£1,174,716 secured from the Department for Education to deliver the Holiday Activities and Food Programme (via the 0-19 Early Help service and Young Barnet Foundation).</p> <p>School Superzones at Saracens High School and Edgware Primary School sponsored with £60,000 (£30,000 per scheme) via the Office for Health Improvement and Disparities and London Councils.</p> <p>£50,000 invested by Better into enhancing community physical activity opportunities that target the most inactive, and installation of a sensory lighting at New Barnet Leisure Centre that will support delivery of sensory swimming sessions.</p>
4	<p>People</p> <p>Partnerships</p>	Support the sector to live through and recover from the COVID-19 pandemic	Collaborative working across the partnership has supported interventions to recommence following the relaxation of COVID-19 restrictions e.g., Parkrun, London Youth Games, Mini Marathon and Better community-based interventions.

			As of Q3 there were 1,029,303 visits across Better operated leisure centres (on target to achieve 1,434,800 by Q4 end) and 9,677 memberships – operating at approximately 95% of pre-Covid-19 levels.
5	People Partnerships	Deliver a FAB campaign that encourages increased activity levels and improved outcomes for residents (e.g., health, wellbeing, community, environmental) through behaviour change	As per update in 1.15 – 1.19 As of Q3 42,600 residents registered for a FAB Card. 881 of residents with a FAB Card benefit from the FAB Carers pass with enhanced benefits for registered carers (including foster carers), looked after children and young people and those who are care experienced.
6	People Partnerships	Continually develop the FAB Hub ensuring that it provides a one stop resource for physical activity and wellbeing	The FAB Hub has continued to be developed to ensure that it is an informative and useful resource for residents, partners and health professionals to access / signpost towards physical activity and wellbeing opportunities and guidance. www.better.org.uk/fab-hub
7	People Partnerships	Utilise links with local services and pathways (e.g., GP's, pharmacies, social prescribing link workers, COVID-19 Health Champions, health and social care professionals, Make Every Contact Count) to promote the importance of physical activity and signpost to FAB	FAB continues to be incorporated within pathways across the borough, and in some cases North Central London (NCL). For example: <ul style="list-style-type: none"> - Social prescribing link workers are signposting patients to the FAB Hub and to register for a FAB Card - Presence of FAB literature amongst health platforms such as Bar Global and Emis to support GPs in signposting and making referrals – this has been accompanied by GP engagement. - Integrated within the NCL Healthy Living Hub – considering how health and wellbeing is centralised to support the patient/resident wellbeing pathway - Exploring the incorporation of FAB and physical activity into Learning Disability health checks with GP leads in the borough - Integrated within the Healthy Heart project that was piloted in Grahame Park as part of the wider Barnet Cardiovascular Disease (CVD) Prevention programme. In collaboration with Inclusion Barnet (lead delivery partner) residents diagnosed or at risk of CVD were supported with health and wellbeing taster sessions and guidance via the programme

			- Contributed to NCL whole systems approach obesity support mapping.
8	People Partnerships	Incorporate physical activity requirements within adult social care provider contracts / service specifications.	FAB has been incorporated into the March 2023 provider forum for Accommodation & Support services.
9	Place Partnerships	Support the delivery of physical activity related priorities/outcomes outlined within key infrastructure and environment policies and plans (as listed within the Framework document)	<p>West Hendon Playing Fields Master Plan – stage 2 design competition tenders have been evaluated with a preferred bidder selected subject to governance approvals.</p> <p>Clitterhouse Playing Fields – a planning application has been submitted which proposes new facilities, infrastructure and environmental enhancements. The application is pending determination.</p> <p>Parks improvement - the Greenspaces team have been developing a number of parks improvement schemes across the borough this includes the refurbishing of 10 playgrounds, construction of additional outdoor gym facilities and a portfolio wide tennis court refurbishment programme.</p> <p>In parallel to the tennis court refurb programme a new bookings and membership model will be rolled out over the course of 23/24. The scheme will introduce gating technology that will work alongside the online bookings portal to capture usage information more accurately and introduction of an affordable season ticket scheme that will be complemented by free to play sessions.</p> <p>Finchley Lido Leisure Centre – a public engagement exercise was undertaken from 13 December 2022 through to 6 February 2023 to seek views on a potential refurbishment, redevelopment or relocation possibility of the existing facility to North Finchley Town Centre. The feedback is currently being analysed and a future report will be presented to the relevant theme committee providing a summary of results.</p>
10	People Place Partnerships	Identify opportunities to secure investment through developer contributions (S106, CIL) to enhance/develop physical activity infrastructure and facilitate the delivery of interventions	Investment in Parks and Open Spaces is being delivered through the Councils Strategic CIL (£3.75m) programme however the service seeks to augment this delivery through Area Committee bids (Neighbourhood CIL), S106 contributions and grant monies (£675,000 from the Lawn Tennis Association).

11	People Place Partnerships	Pursue funding to install a 'Changing Places Facility' within Finchley Lido Leisure Centre – improving accessibility for people with a disability.	£37,610 secured from Department for Levelling Up, Housing and Communities to install a Changing Places Facility at Finchley Lido Leisure Centre. Installation dates for the facility is currently being reviewed.
12	People Place Partnerships	Work towards making leisure facilities Dementia Friendly.	Barnet Copthall Leisure Centre received Dementia Friendly accreditation in October 2022. Better are working with the Dementia Friendly Partnership to explore achievement of accreditation for other leisure centres across the borough in 23/24. Better leisure centres programmes provide dementia friendly sessions e.g., swimming and Barnet Copthall Leisure Centre hosts a Dementia Café in partnership with Dementia Club UK. Staff across Better leisure centres receive ongoing dementia awareness training.
13	People Place Partnerships	Encourage the integration of wellbeing and the importance of physical activity within workplaces across the borough	FAB is integrated within London Borough of Barnet Workplace Wellbeing and was pivotal to the delivery and success of the staff wellbeing event in October 2022. 59 organisations within Barnet are currently signed up to the Better corporate membership scheme, offering staff subsidised leisure memberships. The Active Practice Charter is promoted amongst GP's and health care professionals to encourage more active patients and workforce.
14	People Place Partnerships	Identify the requirement for the development/enhancement of networks (with work plans established) to support the delivery of targeted interventions.	The FAB Partnership continued to evolve and diversify throughout 2022 which welcomed new partners to help create a more active and healthy borough. To avoid duplication and maximise efficiencies, careful consideration has been given in developing sub-networks of the FAB Partnership Board to support the delivery of targeted interventions and engage the boroughs most 'inactive'. An exercise was undertaken to understand the landscape of networks and boards etc. within the borough with a view to avoid duplication and maximise existing platforms. Further to this exercise two sub-networks have been established; <ul style="list-style-type: none"> - Disability Physical Activity Network – first multi-agency meeting held in February 2023. A priority plan is being established which will contribute to the refreshed FAB implementation plan (2023-24) - Active Travel Network – a network for service areas within the council to share updates on workstreams pertaining to active travel (engagement and

			<p>infrastructure). Through collaboration the network delivered events to mark Clean Air Day (June 2022) and World Car Free Day (September 2022).</p> <p>In collaboration with Young Barnet Foundation, a multi-agency meeting is scheduled for March 2023 to establish the requirement and appetite for a designated children, young people and families physical activity network.</p>
15	<p>People</p> <p>Place</p>	<p>Enhance and develop digital platforms that support increased physical activity levels (improving accessibility and reducing barriers to participation)</p>	<p>The FAB Hub continues to evolve as a one stop resource for physical activity and wellbeing in the borough including an activity finder – including ‘active at home’ options, FAB Card registration and health and wellbeing guidance.</p> <p>In March 2023 Better will be launching a gamification application; Moves+, which will encourage increased physical activity in the form of active travel. The application adopts behaviour change theory, awarding participants with points for physical activity minutes completed, which can be redeemed against real life rewards.</p>
16	<p>People</p> <p>Place</p> <p>Partnerships</p>	<p>Identify strategic opportunities to ensure physical activity is engrained in local policy, plans and decision making</p>	<p>FAB has been incorporated in the Children and Young People Plan refresh, refresh of the Carers and Young Carers Strategy (2023-2028), Cardiovascular Disease Prevention Plan, and incorporated into the successful expression of interest applications for the two School Superzones at Edgware Primary and Saracens High School (both projects have a focus on active travel).</p> <p>FAB is in integral partner and aspect of the Barnet Health in Schools Partnership and features within other networks and partnerships across the borough e.g., Pan Barnet GP event, Learning Disability Partnership Board, Children’s Partnership Board and the Barnet Integrated Clinical Services meetings.</p>
17	<p>People</p> <p>Partnerships</p>	<p>Identify employment and volunteering opportunities and ensure that these are widely promoted</p>	<p>Better have continued to provide work experience (12 residents supported), apprentice (2 residents supported) and volunteering (22 residents supported) opportunities. Links have been made with BOOST and other local job opportunity initiatives to promote the offer and engage Barnet residents. Better has also established a partnership with Street League to support young people (aged 16-24) who are not in education, employment or training to access opportunities.</p> <p>Work experience placements will commence with Barnet Mencap service users during Q4.</p>
18	<p>People</p> <p>Place</p>	<p>Encourage the delivery of sport and physical activity events in Barnet’s parks and open spaces</p>	<p>FAB was integrated within Discover Barnet Presents to raise awareness of the importance of physical activity and opportunities available in the borough.</p>

			Parks and open spaces continue to host weekly sport and physical activity opportunities such as Parkrun and Our Parks.
19	People Place Partnerships	Support the design and delivery of sport, physical activity, and health interventions within the Brent Cross Town development	FAB has continued to work closely with Argent Related to ensure synergy and collaboration in respect of health/physical activity interventions and opportunities within the Brent Cross Town regeneration. An example is a collaborative project between LBB, Argent Related and Women in Sport which included a research project to understand barriers and motivations to physical activity in the locality. Findings were utilised to deliver a week-long series of activities for mother figures and daughters during the October half term which aligned with the Women in Sport wider campaign #timetogether. FAB are now exploring further collaborative working opportunities with Women in Sport within other parts of the borough.
20	People Place Partnerships	Embed physical activity within services delivered by Greenspaces & Leisure that promote everyday movement	<p>The value of parks and opens paces and their contribution to improving health and wellbeing outcomes has been valued across the FAB Partnership with several new innovations being introduced across the borough including a new outdoor gym installed at Victoria Recreation Ground, and Swing Fitness boxes installed in Hendon Park, Victoria Park and Montrose Playing Fields.</p> <p>Active Trails continue to be promoted, with a workstream underway to align promotional signage and install new active trails in Victoria Recreation Ground, Old Court House Recreation Ground and Riverside Walk.</p> <p>Working in partnership with The Senca Trust and Kompan Ltd, Greenspaces are currently engaging with residents on Fair Play Barnet – a project exploring the opportunity of bringing the first of its kind mixed ability, accessible and inclusive playgrounds for all ages to the borough (and to the UK).</p>

- 1.19 The updates and interventions highlighted in table above, provide a summary of the extensive work delivered across the Fit & Active Barnet Partnership since April 2022 to increase physical activity levels and subsequently improve health and wellbeing outcomes amongst residents. Further delivery has been planned and is underway during Q4 of 2022-2023 including a physical activity and wellbeing event at Burnt Oak Leisure Centre on 8th March to celebrate International Women's Day.
- 1.20 Reflecting on successes achieved to date, available insight and opportunities for further collaboration, work is now underway with the Fit & Active Barnet Partnership to scope and agree priorities for a refreshed implementation plan (2023-2024).

2. Reasons for recommendations

- 2.1 This report provides an update on Fit & Active Barnet achievements since April 2022 and requests for members to note.

3. Alternative options considered and not recommended

- 3.1 None

4. Post decision implementation

- 4.1 The Council and Fit & Active Barnet Partnership Board is currently scoping a refreshed implementation plan for delivery 2023–2024.

5. Implications of decision

5.1 Corporate Priorities and Performance

- 5.1.1 Delivery of priorities identified within the Fit & Active Barnet Framework (2022-2026) support the achievement of the council's corporate plan; Caring for people, our places and the planet (2023-2026) with clear synergy to the four strategic pillars; People, Place, Planet and Engaged and Effective Council.
- 5.1.2 Implementation of the Fit & Active Barnet Framework contributes to achievement of priorities detailed within other key policy documents such as the Barnet Joint Health & Wellbeing Strategy (2021-2025), Long-term Transport Strategy (2020–2041), Parks and Open Spaces Strategy (2016), and the Children and Young People Plan (2019 – 2023).

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

- 5.2.1 Achievements and outcomes delivered via the Fit & Active Barnet partnership since April

2022 have been possible through effective partnership working that has:

- Ensured strategic alignment
- Optimised funding opportunities
- Strived to avoid duplication of services
- Identified and addressed gaps
- Encouraged sharing of skills, knowledge, and resources to maximise efficiencies
- Promoted the value and benefit of physical activity

5.3 Legal and Constitutional References

5.3.1 In accordance with the Councils Constitution, Article 7 (Committees, Forums, Working Groups and Partnerships), Section 7.5 (Responsibility for Functions), the terms of reference of the Adults & Safeguarding Committee includes the following responsibilities;

- 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 Well Being Strategy and its associated sub strategies; and
- To receive reports on relevant performance information (including The Barnet Group Ltd, Your Choice Barnet performance) and risk on the services under the remit of the Committee.

5.4 Insight

5.4.1 Data and insight were carefully reviewed and considered in development of the Fit & Active Barnet Framework (2022-2026) and development of its accompanying implementation plan (2022-2023).

5.4.2 Data and insight have continued to be aligned with in delivery of interventions and actions within the implementation plan which includes considering outcomes of the Resident Perception Survey(s) and that shared amongst the Fit & Active Barnet Partnership and subsequent networks.

5.5 Social Value

5.5.1 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 economy⁴.

5.5.2 Better continue to utilise the social value calculator (developed by 4Global, Experian & Sheffield Hallam University) to measure social value based on regular participation within Better leisure facilities. Between April 2021 - March 2022, the leisure management contract indicated a social value of £6,443,604 (averaging £103 per

⁴ [Why investing in physical activity is great for our health – and our nation | Sport England](#)

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.

5.6.2 The FAB Partnership and the Greenspaces and Leisure service continue to ensure that appropriate risk management is in place to mitigate risks associated with delivery of interventions that support implementation of the Framework.

5.7 Equalities and Diversity

5.7.1 An Equalities Impact Assessment was conducted on the Fit & Active Barnet Framework (2022 -2026) and equalities, diversity and inclusion continues to be adopted in all forms of implementation.

5.7.2 Decision makers should have due regard to the public sector equality duty in making their decisions. The equalities duties are continuing duties they are not duties to secure a particular outcome. The equalities impact will be revisited on each of the proposals as they are developed. Consideration of the duties should precede the decision. It is important that Cabinet has regard to the statutory grounds in the light of all available material such as consultation responses. 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:

- 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.

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

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

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

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

- a) Tackle prejudice, and
- b) Promote understanding.

5.7.7 Compliance with the duties in this section may involve treating some persons more favourably than others; but that is not to be taken as permitting conduct that would otherwise be prohibited by or under this Act. The relevant protected characteristics are:

- a) Age
- b) Disability
- c) Gender reassignment
- d) Pregnancy and maternity
- e) Race
- f) Religion or belief
- g) Sex
- h) Sexual orientation
- i) Marriage and civil partnership

5.8 Corporate Parenting

5.8.1 Implementation of the FAB Framework has continued to support the councils Corporate Parenting Commitment through the delivery of interventions such as the FAB Card and its additional benefits to carers (including foster carers), looked after children, and those who are care experienced.

5.9 Consultation and Engagement

5.9.1 Extensive consultation and engagement was undertaken in the development of the Fit & Active Barnet Framework (2022-2026) and its supporting implementation plan (2022-2023) in the form of partner workshop, resident/community group focus groups and public consultation.

5.9.2 Findings and insights obtained via engagement and consultation continue to be aligned with in implementing the priority aims and commitments of the Framework. Opportunities have also been maximised in the form of information sharing with partners via networks such as the Fit & Active Barnet Partnership and forums that include residents with lived experience.

5.10 Environmental Impact

5.10.1 Delivery of the priority aims and commitments set out within the Fit & Active Barnet Framework (2022-2026) have demonstrated synergy and supported priorities identified within the Barnet Sustainability Strategy Framework and the Long-Term Transport Strategy (2020-2041) e.g., delivery of events making Clean Air Day (June 2022) and World Car Free (September 2022) and interventions that promote active forms of travel such as Health Walks, Healthy Heritage Walks and Active Trails.

6. Background papers

- 6.1 [Fit & Active Barnet Framework \(2022-2026\) – Adults and Safeguarding Committee – 19 September 2016](https://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=698&MId=8673&Ver=4)
- 6.2 [Fit & Active Barnet Framework \(2022-2026\) Equalities Impact Assessment](#)

Appendix A

Sport England Active Lives (adults aged 16+) demographic data

Demographic Heading	Survey Period		Movement
	May 20/21	Nov 20/21	
Male	62.7%	61.4%	1.3% decrease
Female	62.0%	63.0%	1.0% increase
Age 16 – 34	65.7%	63.4%	2.3% decrease
Age 35 - 54	60.1%	61.6%	1.5% increase
Age 55 – 74	66.5%	69.6%	3.1% increase
Age 75+	No data available due to sample size		
Disabled	48.1%	52.0%	3.9% increase
White	60.8%	67.7%	6.9% increase
White Other	59.2%	57.3%	1.9% decrease
Asian (excluding Chinese)	54.4%	58.7%	4.3% increase
BAME (including Black, Chinese, Mixed and Other ethnic group)	No data available due to sample size		

Note that the Active Lives Survey is conducted on a sample of 500 randomly selected participants. This may therefore impact the statistical significance of the increase/decrease in percentages between survey periods.

Appendix B – Fit & Active Barnet campaign assets (example)

Fab
FIT & ACTIVE BARNET

"I gave walking football a go after a major operation. It has helped me to recover and make new friends."

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Give it a go this September with FREE and discounted activities!

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Fab
FIT & ACTIVE BARNET

"I gave basketball a go because it helps me de-stress and build friendships, while I play the sport I adore."

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Fab
FIT & ACTIVE BARNET

"I gave water workout a go to help me reduce chronic pain and strengthen my muscles. The session is like a big family who motivate me to stay active."

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BARNET
LONDON BOROUGH

Fab
FIT & ACTIVE BARNET

"I gave rugby a go to try something new and improve my fitness. Now I'm hooked and look forward to it every week!"

GET ACTIVE. GIVE IT A GO!

Give it a go this September with FREE and discounted activities!

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LONDON BOROUGH

Fab
FIT & ACTIVE BARNET

"I gave rugby a go as I love getting fitter, being part of a team and making new friends."

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Give it a go this September with FREE and discounted activities!

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Fab
FIT & ACTIVE BARNET

"I gave dancing a go because it helps me be physically healthy, happy and I'm surrounded by friends."

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Fab
FIT & ACTIVE BARNET

"I gave Health Walks a go as I have always enjoyed walking but find it boring alone. Walking with a group keeps me going and has positively changed my life."

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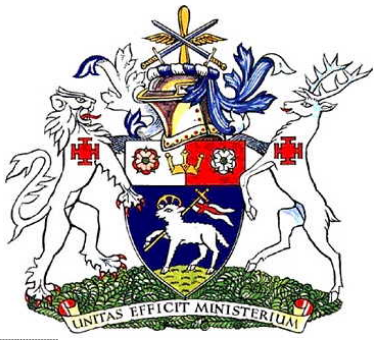
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www.better.org.uk/fab-hub

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Hover over and click on the four images above to access video clips.



Adults and Safeguarding Committee AGENDA ITEM 12

13 March 2023

Title	Quarter 3 (Q3) 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 Q3 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 Q3 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 Q3 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
 - Support local social care providers and the social care workforce, working with education providers & addressing recruitment & retention
 - Introduce a charter for social care and develop a new engagement strategy with people who draw on care and support
 - Maximise the use of technology and implement innovative technology to support independence
 - Prioritise independent living, putting people at the centre of their care
 - Being a dementia friendly borough
 - Introduce a Barnet Charter for Mental Health
 - Health inequalities – healthy living through physical activity
- 1.3 This service has also spent quarter three preparing for a peer review to be organised by the London branch of the Association of Directors of Adult Social Services. This is in part to be a tool to help with preparation for a future Care Quality Commission (CQC) inspection.
- 1.4 **To work with our NHS, the community and voluntary sectors**
- 1.4.1 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, Healthwatch and Voluntary and Community Sector (VCS) representatives. The goal of the partnership is to provide better health and care services to Barnet residents, so that they live healthier lives. The BBP is part of the North Central London Integrated Care System (NCL ICS), along with borough partnerships in the four other North Central London boroughs. In quarter three, the borough partnership continued delivery of key programmes such as support to people at risk of heart disease, improvements to mental health services, the development of neighbourhood-based health and care services, and specialist help for people with dementia and physical frailty. The dementia and frailty multi-disciplinary approach was in operation across the whole borough in quarter three, with around 100 referrals received to date. The multi-disciplinary team includes consultant doctors, speciality nurses for dementia and frailty and the VCS. The prevention and wellbeing team started a new project to map community assets for older people, to support the development of neighbourhood-based health and care.
- 1.4.2 Work continued with people with lived experience, the voluntary and community

sector and health and care services to develop two new strategies, the carers strategy and the dementia strategy, which are included for approval as separate items in the Committee agenda.

- 1.4.3 Further development of the programme to deliver the core offer for mental health services continued with agreement on what will happen at NCL and what will be led at borough level through place-based delivery. This will include IAPT (Improving Access to Psychological Therapies), early intervention and prevention, crisis houses and cafés and work with young adults. The dedicated project focusing on mental health and the needs of young Black men, led by Art against Knives, began work.

1.5 **Priorities supported by reserves investment to deliver manifesto commitments**

- 1.5.1 An additional £5m of reserve funding has been identified to support manifesto commitments. This funding is currently being utilised in the following priority areas.
- 1.5.2 **Support for Care Providers** - Adult social care represents approximately 14% of the Barnet economy with over 10,000 people employed in the sector. There are eighty registered care homes and approximately seventy registered home care agencies, along with supported living schemes, day services and other services, such as personal assistants. Additional funding of £400k has been allocated over a two-year period to support local SMEs especially with recruitment, retention and training of front-line staff, to provide assistance with cost of living for low paid workers and improve quality of care for residents. Outcomes we expect this funding to achieve include positive impacts on recruitment, reduced employee costs and improved retention of care workers. We will be evaluating impact fully in early 2023/24 to quantify the difference made.

Using some of the funding, parking permits have been issued for homecare workers for November – May 2023. This was done during the pandemic lockdowns and was found to improve service quality for residents and staff retention. This has supported retention for providers operating in borough, as well as reducing travel time for care workers.

The service successfully set up and ran recruitment events in early 2023 to support providers to find and recruit new care workers. The events were well attended with more than 20 care employers and over 200 jobseekers in attendance. We also have plans to create additional capacity through the recruitment of additional workforce and care quality advisor roles in the service. These roles will support providers with recruitment and retention, working closely alongside a soon to be established NCL Health and Care Academy to support entrants into ASC jobs, as well as enhancing our support and training offer to care providers, particularly SMEs.

The council's integrated care quality team 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.

LBB alongside other NCL boroughs were successful in securing 250k funding from the GLA to support a health and social care academy initiative to support recruitment into health and care roles. Work is on-going facilitated by the NCL ASC

Programme to engage residents, employers and relevant stakeholders in progressing this work. It aims to engage with 165 providers, provide 1650 residents with training and education and support 880 residents into work in the health and care sector.

The Council will be also administering a number of small grants via the NHS Discharge Fund announced as part of the Autumn Statement to support providers with expenses linked to recruitment and retention. This will be roughly equivalent to £100 per member of staff, and we expect the funding will be used to cover provider costs associated with retention incentives. Funding will be issued in quarter 4.

Engagement Strategy and Charter - The council has strong aspirations to develop and strengthen its engagement with people who draw on care & support, using co-production and engagement approaches. This is Supported by £365k of investment funding that will boost the capacity of the engagement team with a view to: embedding greater co-production as part of business as usual practice; Increase investment in the voluntary and community sector, including peer led organisations to engage people across Barnet's diverse communities; Invest in expertise and consultancy to broaden our own knowledge, expertise and impact of engagement and co-production; Step up our events, meetings and activities post-Covid, including ensuring these are accessible, inclusive and that people continue to be remunerated. Co-production and engagement, and the direct views of people who draw on care and support are a key part of the forthcoming Care Quality Commission assurance regime of local authority adult social care functions.

This funding has allowed the recruitment of 2 additional team members, including 1 with lived experience to support the delivery of these aims.

The team led the work on the engagement strategy and charter, which continued in Q3 and was signed off by Adults and Safeguarding Committee in November. During the quarter, we engaged with over 300 people across the community using a range of methods from small focus groups, events, surveys and via community groups. Following on from the strategy we have developed a work plan, priorities, and will be developing measures of success. We will producing an annual report to show progress, activity and impact from the strategy.

In Q3 we ran a number of working groups, including:

We completed one-to-one interviews with people who use wheelchair services. This helped us understand the service and will help shape the service going forward.

We ran a 'mystery shopping' exercise where residents called Social Care Direct with different scenarios. Generally, the feedback was very positive, with some specific action points which will be taken forward in training and ways of working.

We started work on reablement, including running a survey and focus group for people with recent experience of the service. There will be further engagement with residents and the feedback will be incorporated into training and guidance for staff.

A valuable part of the council's approach to working with residents is through the People's Voice Group. This is a list of over 200 people who have contacted us to express an interest in being part of the engagement programme and who choose to be involved as much or as little as they choose. We have introduced a new weekly

email to keep in touch with People's Voice Group and are working on a co-produced newsletter. The team regularly attend community groups and other events and have been recruiting new members. We have improved our approach to capturing demographic data which will help us ensure that engagement is representative.

The Adult Social Care Involvement Board is a group of residents with lived experience of social care and caring. Meetings of the Board take place quarterly and give views on strategic issues. During Q3, the Board focused on progress made in engagement activities and got valuable insight on how to keep building and improving these.

- 1.5.3 **Care Technology in LD** – 250k of investment has been identified to support a project to install assistive technology to support adults with a learning disability in a supported living setting has identified 28 people who would benefit from the service. Installations will be carried out by the end of March 2023 and the benefits will be closely monitored before further expansion of the work.

All the above projects will be reviewed and outcomes measured to support longer-term investment. Further investment proposals for the reserves funding will be developed through the council's business planning cycle.

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

- 1.6.1 The council continues to promote independent living and a strengths-based approach to service delivery, in line with national legislation and policy. The Adults and Safeguarding Committee has previously agreed the expansion of the Prevention and Wellbeing Team to increase opportunities for people to stay independent. During Q3, team completed individual work with 40 residents who achieved their goals to improve their wellbeing. They reported 62 goals achieved and 72 improvements in areas of wellbeing. 19 Drop-ins sessions were facilitated by the Prevention Team in 13 different wards across Barnet. The Drop-in sessions involve support for individuals through advice, signposting and community connections, as well as bringing different teams together to provide easy access to support for residents. As an example, in Chipping Barnet the Prevention Team runs the drop-in alongside the Library and BOOST to effectively support Barnet residents. The drop-ins offer comprehensive support, making every contact count and dealing with several issues at once. For example, recently a resident came to the Drop-in for guidance about their pension and left with this as well as advice about an adult relative with autism, information about digital support and was even taken over the road by the coordinator and introduced to a community group who were running their Tuesday social. The resident fed back: said "you are like angels! I never expected to get this amount of help today".
- 1.6.2 During Q3, the Council continued to develop new extra care schemes, which will provide 126 new flats for older people with care and support needs. The construction of Atholl House in Burnt Oak is scheduled for completion in Summer 2023. A mobilisation board has been convened between Your Choice Barnet (the care and support provider) and the council. It is anticipated that the first residents will move into the scheme end Q2 23/24. The mobilisation team are working through the agreed actions, including developing a communication and engagement

plan which will support both practitioners and potential residents in understanding the service offer.

- 1.6.3 The council operates with a Home First ethos. This can be seen in our work on discharging people needing care and support from hospital back to their own homes – where the majority of people return home with support and a very small proportion of residents (7% in Q3) need to move into residential or nursing care on leaving hospital. The council is expecting to support 3278 (2344 in 21/22) individuals with a package of home based reablement in 22/23 with approximately 65% requiring no further support after this service ends. This also applies in the community where social workers work hard to identify ways to keep someone in their own home, when it is in their best interests. The council has been working with Inclusion Barnet on the importance of these issues and the Home First approach and is clear on our commitment to this way of working.
- 1.6.4 The development of an employment action plan for disabled people progressed during Q3 with funding for a specialist Disability Employment Advisor role within BOOST agreed. Once the role is in post ASC and BOOST will continue to work closely to ensure outcomes are being achieved to support residents into sustained employment.
- 1.6.5 There was continued implementation of the Council's Autism Action Plan in Q3, based on the six priorities set out in the National Autism Strategy. We are supporting colleagues in Health to plan and implement the Oliver McGowan training for Health & Social Care staff. It is named after Oliver McGowan, whose death shone a light on the need for health and social care staff to have better training. It has been co-produced, trialled, independently evaluated and is the government's preferred and recommended training for health and social care staff.
- 1.6.6 A single point of access service for all types of advocacy has been specified to strengthen and simplify the offer to residents. Barnet are leading the procurement process for a joint contract across Barnet, Enfield and Haringey. The contract has been awarded to a provider with extensive experience of delivering this model in other places. Mobilisation will take place through early 2023, ready for contract start in Q1 23/24.
- 1.6.7 It will always be vitally important for adult social care to support the safety of vulnerable adults. In Q3 the social care team continued to lead multi-agency safeguarding work through the MASH team and the Barnet Safeguarding Adults Board (SAB) to ensure statutory agencies and VCS partners are working effectively together to improve outcomes and deliver in a personalised way. This work to promote excellent safeguarding practice has continued. The Adults Safeguarding Board has good representation from statutory and VCS partners, and many are involved in the work of the subgroups. The SAB has now introduced report templates to support the gathering and reporting of information from different works stream to demonstrate (from 2023) the SAB's compliance re quality assurance reporting. The safeguarding lunch and learns continue to run monthly and are well received by all staff and partners attending.

1.7 **Being a dementia friendly borough**

- 1.7.1 Barnet was formally recognised by the Alzheimer’s Society as working towards being a Dementia Friendly Community in October 2022. This recognition will last for 12 months and during this time the Dementia Friendly Partnership will continue to work on actions to embed dementia friendly practices across the borough. In October 2022 Barnet Copthall was successfully accredited as a Dementia-Friendly Leisure Centre.
- 1.7.2 In Q3 Dementia Club UK started running local ‘Understanding Dementia’ training sessions. This one-hour CPD certified training provides an in-depth understanding of the different types of dementia, medications available, what people living with dementia may experience, how you can support someone with dementia and ideas to improve the environment.

1.8 Introduce a Barnet Charter for Mental Health

- 1.8.1 Further work on the ways of delivering mental health services will be completed in 22/23. Working with health partners, we will continue to embed system wide approaches to mental health support, with clear pathways. This will include role clarity and embedding person-centred, strength-based practice across the system.
- 1.8.2 The Discharge to Assess (D2A) model is being tested for Mental Health in Barnet with Barnet, Enfield and Haringey Mental Health Trust. It is the first area in NCL to do so and is an approach designed to get people out of hospital and back to their own homes as quickly as possible when they are ready to do so.
- 1.8.3 The council has been successful in its bid to host another cohort of Think Ahead student social workers again in 23/24. This is a funded programme that trains graduates to become mental health social workers and has provided the council with a very high calibre of social workers in recent years.
- 1.8.4 In Q3, LBB Regeneration Team funding was approved for a 12-month pilot of the multi-agency Mental Health support offer for the residents of the Grahame Park estate - working to a neighbourhood model.
- 1.8.5 Drawing on feedback from VCS and LBB stakeholders, a framework for a Mental Health Charter for the borough was developed during Q3.

1.9 Health inequalities – healthy living through physical activity

- 1.9.1 Collaborative working opportunities continued to be maximised during Q3 with the FAB Partnership achievement numerous positive outcomes. Examples include:
- Partnership established between Inclusion Barnet, FAB and Better to deliver the Healthy Heart (cardiovascular prevention) project in Grahame Park.
 - New Citizens Gateway and Better working together to develop a gym membership scheme for refugees and asylum seekers, along with a women's only gym session at Burnt Oak Leisure Centre.
 - A partnership between Argent Related, Women in Sport and FAB concluded an insight project in Brent Cross Town (understand barriers and motivators to physical

activity) and culminated in a Time Together physical activity event in the October half term - aimed at mothers and carers and daughters.

- The Prevention Fund application was submitted requesting c.£30k to support delivery of the first of its kind, multi-agency pan disability physical activity pathway in Barnet. 'Dance Barnet' will bring the first pan disability dance pathway to Barnet which will consist of three inter-related strands; weekly community dance sessions, a dance celebration event and dance provider inclusion and accessibility training workshops. The funding request has since been approved and implementation will commence in 2023-2024.
- Saracens Foundation secured £50k to sustain their outreach project that engages refugees residing in Barnet in physical activity opportunities.

1.9.2 A full evaluation of the FAB campaign 'Get Active. Give it a Go' delivered in September demonstrated that:

- Over 4,000 participants engaged in 40+ different types of free and/or low-cost activities.
- 49% male participation and 51% female participation*
- 37% participation from BAME residents and 38% White*
- 74% participants aged 16 – 64 years, 23% aged 0-16 years and 3.5% 65+ years*
- 1,226 new FAB Card memberships during September
- 100 Give it a Go (free 3 month all-inclusive Better memberships) issued to participants who engaged in physical activity three or more times a week during September
- 117,480 digital reach with 3,698 engaged – engagement rate 3% (based on industry standards, a good engagement rate is generally agreed to be between 1% to 5%), showing that the campaign was one of the council's best performing campaigns**participation in free/low cost activities offered during the month of September*

1.9.3 At the end of Q3 GLL were reporting 9677 members. Memberships experienced a decrease since Q2, however this trend is typical during the winter months and Christmas break when programmed lessons and courses are paused.

1.9.4 Fit & Active Barnet (FAB) Card (pay and play) memberships in Q3 reached 42,601 (881 of whom have a FAB Carers Card which offers enhanced benefits including free swimming at all times).

1.9.5 There were 303,343 attendances across leisure centres in Q3. This figure presents an 18% decrease since Q2 however is not unusual for the time of year where leisure centre usage typically falls during the winter months and over the Christmas period.

1.9.6 Working in collaboration GLL have achieved:

- 32 new Hub activities have now been established by GLL in partnership with community stakeholders. Examples include chair-based exercise classes at Kinloss Finchley United Synagogue, physical activity sessions delivered in Grahame Park in partnership with the Barnet African Caribbean Association, leisure centre-based sessions in partnership with Barnet Mencap and golf taster sessions at care homes within the borough.
- Teacher and parent physical activity session delivered at Sunnyfields Primary

School, along with the commencement of junior girl's football sessions in partnership with BACE.

- Event held at Barnet Copthall Leisure Centre to celebrate Diwali (in partnership with the Barnet Asian Women's Association) which raised funds for Cancer Research UK and Great Ormand Street Hospital.

1.9.7 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

1.10 Your Choice Barnet (YCB)

1.10.1 YCB provides four day services, supported living, and respite services for adults with learning disabilities. YCB also provide a personal assistant service, PA Choices, and a Reablement service. For older people, YCB provides the Ansell Court extra care scheme, two Residential Care Homes and a day service. YCB supports almost 600 people and employs about 500 care and support staff.

YCB performance indicators - There are 11 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.

		Q3 2021/22	Q3 2022/23	Target (qtrly)
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	11	5	5
1.6	% Staff that are in date with YCB's staff training programme	94%	90%	95%
1.7	% Staff that are in date with their specialist accredited training programme	100%	100%	95%
		Q3 2021/22	Q3 2022/23	Target (yearly)
1.8	Number of Safeguarding Concerns reported	10	4	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%

1.11 Finance Summary

1.11.1 This report sets out the forecast outturn position for the 2022/23 financial year as of 31st December 2022 for the services which fall within the Adults and Safeguarding Committee.

1.11.2 At As at month 9, the forecast financial outturn is a £6.115mm overspend. The forecast net use of reserves is £8.034mm.

Table 1: Forecast Revenue Outturn at Month 9:

Adults and Health	2022-23 Budget	Month 9 (Forecast outturn before reserves)	Month 9 Variance	Reserves applied	Month 9 variance after reserves	Month 6 variance	In-Quarter change
	£'000	£'000	£'000	£'000	£'000	£'000	£'000
ASC Prevention Services	2,563	2,677	114	-90	24	-60	84
ASC Workforce	19,056	22,309	3,253	-2,613	640	272	368
Adults transformation programme	180	429	249	-428	-180	0	-180
Sub-total	21,799	25,415	3,616	-3,131	484	212	272
Integrated Care - LD	29,965	34,119	4,154	0	4,154	2,093	2,061
Integrated care - MH	9,363	10,578	1,215	-1,215	0	927	-927
Integrated Care - OA	43,121	45,913	2,792	-3,200	-408	-372	-36
Integrated Care - PD	10,640	12,496	1,857	0	1,857	2,479	-622
Sub-total	93,088	103,106	10,018	-4,415	5,603	5,127	476
Adult Social Care Total	114,887	128,521	13,634	-7,546	6,087	5,339	748
Leis, Sports and Phys Activity	-1,597	-1,082	515	-487	28	0	28
Grand Total	113,290	127,439	14,149	-8,034	6,115	5,339	776

1.11.3 Table 2 provides a breakdown of the variances as at Month 9 and underlying budget position.

Table 2: Month 3 variance detailed commentary

Service Areas	Month 9 variance after reserves	Commentary
	£'000	

ASC Prevention	24	Overspend re Deprivation of Liberty Safeguard demand (DOLS)
ASC Workforce (incl transformation)	484	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. However, there is still a reported overspend of £0.460m mainly relating to the cost of the increase in employers NI (c.£0.200m) the impact of which is not included in budget allocations plus the additional cost of agency staff in Q4 to support growing demand from hospital discharges.
ASC Placements	5,603	<p>The overspend position presenting in Adults Social Care primarily relates to the upward increase in activity and cost associated with care packages and placements..</p> <p>The Discharges from hospital are on track to exceed 2021/22 levels – for the year to date the council has supported over 160 residents per month to leave hospital with care and support, up from 147 per month last year. However, of those returning home via the reablement pathway, only 30% require an ongoing package of care.</p> <p>From data used to set this financial year’s placements budget the service have seen a 5% increase in activity and a 9% increase in average unit costs signifying an increase in packages becoming more complex in nature and the impact of the cost of living crisis on care providers Q3 represents a continued increase primarily in community-based packages and nursing home commitments in excess of previous adjustments for residents starting and stopping a service. This includes growing demand relating to discharge from hospital and specifically an increase in enablement provision which provides community support at the lower cost end which should lead to cost avoidance long term.</p> <p>Projections now rebase the estimated increase in activity for demand over this winter. Winter demand is estimated to increase by c.25% from last financial year. Month 9 also now includes additional funding re discharge which was announced in the Autumn statement.</p> <p>Recently, the council has seen average prices for care that are increasing at a faster rate than previous years. This may reflect providers factoring in the cost-of-living pressures when agreeing rates for new placements though this assumption will need testing in subsequent reporting periods. Scarcity of placement accommodation, in particular at the acute end of support, is also a driver for increased market rates. The service is working closely with the market to mitigate this impact.</p> <p>The service is attempting to mitigate any further rises in costs above current projections by;</p> <ul style="list-style-type: none"> i) Reviewing large packages of care that may be eligible for NHS funding ii) Robust negotiation with providers on rates iii) Further enhancement of the enablement offer <p>Pressures experienced by LBB reflect the position presenting across the London region as a whole, with neighbouring boroughs reporting overspends along similar percentage lines.</p>

Leisure	28	There continues to be a financial impact on the Councils Leisure contract as the service are still recovering from the pandemic. Work has been undertaken with GLL to restructure management fee income however this will still lead to a shortfall in 22/23 which will be mitigated by reserve funding.
Total	6,115	

1.11.4 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.

1.11.5 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.

1.11.6 This report sets out anticipated use of or top up of earmarked service reserves. The table below provides further detail.

Table 3 Use of or top-up of reserves at Month 9

Service Areas	Forecast (drawdown) / top up to reserves	Commentary
	£m	
ASC Prevention	-90	Age Uk Contract
ASC Workforce	-2,613	Covid recovery support workforce, Prevention Team, Reviewing officers
Adults	-428	Funding for the debt recovery team
Placements	-3,200	YCB Business Losses / reduction in health income for discharge
Placements	-1,215	MH & Social Isolation
Leisure	-487	Shortfall in management fee income from Councils Leisure contract
Total	-8,034	

1.11.7 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
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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)

1.11.8 Risks and opportunities - In preparing the report for month 9, 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.	The number of residents requiring care and support upon discharge from hospital has been very high in quarter 1 through to quarter 3. Current estimates also include a level of upward churn for this 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
Marker (provider inflation)	Qtr 3 estimates reflects realised 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. Quarter 3 has seen a continued increase in unit costs which suggests that current difficult financial market conditions faced by providers are starting to present in the cost of care packages.	Periodic review
YCB costs	A forecast for costs associated with the loss of income whilst the two care homes operated by Your Choice Barnet has been reported at £2.0m at quarter 3. There is a risk that losses could exceed this figure due to ongoing building works.	Service is working with YCB to mitigate the potential upward cost impact.
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

1.11.9 Capital Programme - The capital forecast outturn at month 9 for 2022/23 is £4.705m (£0.394m underspend)

Table 6 Current Financial Year Forecast Capital Outturn at Month 9

Program Description	2022-23 Revised Budget	2022-23 Forecast as at M9	Slippage/Acceleration
	£'000	£'000	£'000
Community Equip ans Assit Tech	1,474	1,000	-474
Disabled facilities Grants Program	3,465	3,465	0
Investing in IT	100	100	0
Sports and Physical Activity	60	140	80
Total	5,099	4,705	-394

1.11.10 **Community Equipment and Assistive technology** - as at Month 9, we are forecasting £1.00m expenditure in 2022/23 with the remaining balance to be slipped into 2023/24. The forecast is driven by variable activity levels and the client-split between health and social care.

1.11.11 **Disabled Facilities Grants Programme** – we are forecasting full utilisation of the DFG capital grant in 2022/23, which includes a brought forward balance from 2021/22. The service is currently addressing a backlog of cases following a period of reduced works being carried out during covid lockdown.

1.11.12 **Investing In IT** – there is no change in the forecast since Month 6 for the Mosaic system development project. £0.105m had previously been slipped into 2023/24 due to project delays.

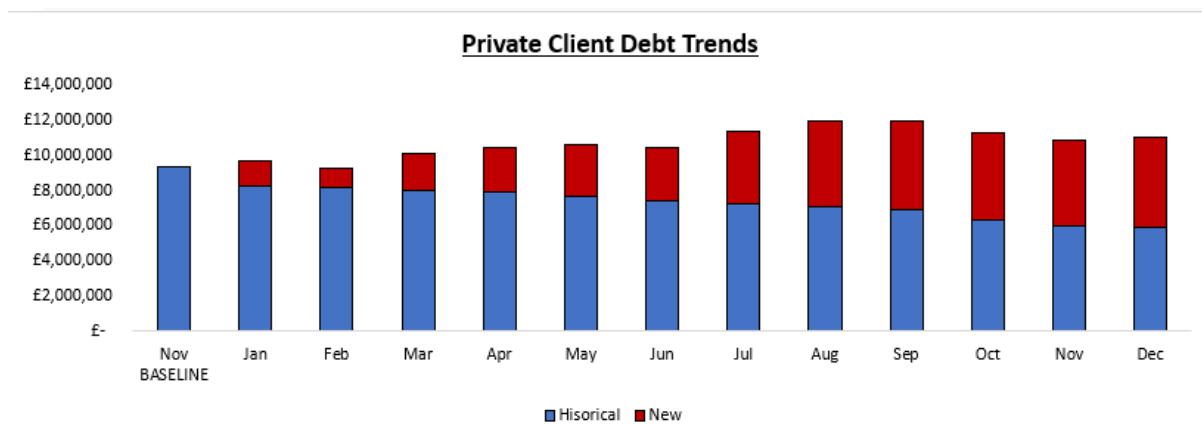
1.11.13 **Sports And Physical Activity** – the forecast has increased by £0.080m since Month 6, which is the result of new spend on swimming pool covers for energy efficiency purposes and to reduce utility consumption.. £0.346m is currently being slipped into 2023/24 due to delays to work on rugby pitches at the Cophall Leisure Centre.

1.12 Debt Recovery

1.12.1 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, collected monthly. On average, the Council receives between £13-14 million each year in financial contributions.

Figure 1 shows the debt trends from Nov 21 – Dec 22. The blue bar represents historical debt (all debt up to 31 Dec 2021 which is the focus of the project team) and the red bar; new & on-going debt (all debt from Jan 2022 onward and is the responsibility of the corporate accounts receivable team).

Figure 1



1.12.2 At the end of Q3 total private client debt was £11m, a reduction of 8% from Q2.

Historical debt was £5.9m at Q3, a 17% reduction from Q2. Of the debt:

- £306k is statute barred, or older than 6 years, and is in the process for being written off.
- £585k has been approved for write off. This is where all methods of debt recovery have been exhausted and any debts that remain is irrecoverable.
- £1.3m 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.

This leaves an actionable debt balance of £3.7m which is being actioned as follows:

Amount	Description/Action
£557k	Escalated to legal for advice/recovery action
£1.3m	£761k Deceased client debt over three years £599k Deceased client debt in the last two years 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.
£1.7m	Unsecured debt, the vast majority where unofficial representatives have been manging 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.

- 1.12.3 New and ongoing was £5.1m at the end of Q3, an increase of 2% from Q2. Just over £1.5m of this is secured via a DPA but the remaining is unsecured. We have recruited to a new post for the Accounts Receivable team to focus on new and ongoing Adults Social Care debt only. It is envisaged that 90% of the debt can be collected as these are less complex and recent.
- 1.12.4 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.
- 1.12.5 The project continues to perform well with a high return on investment, therefore, funding for the project team has been extended until March 2024. It is also recognised that a proposal for permanent resourcing will need to be made over the coming months, to ensure debt is well managed under business as usual.

2. Performance information – Local ASCOF Measures

- 2.1 The Adult Social Care Outcomes Framework (ASCOF), measures how well care and support services achieve the outcomes that matter most to people. The ASCOF is used both locally and nationally to set priorities for care and support, measure progress and strengthen transparency and accountability. More information and definitions can be found using the link below to the NHS Digital website.

[Measures from the Adult Social Care Outcomes Framework - NHS Digital](#)

The ASCOF indicator measures below are collected annually or biennially from local data recorded from case pathways submitted as part of our annual statutory returns and from health systems outside of the council's control. Where possible, measures are tracked throughout the year to review performance and provide interventions if required.

- 2.2 The benchmarking comparisons used below are from 2021/22 NHS Digital benchmarking data published in Autumn 2022. A Green RAG rating indicates performance compares favourably with at all the comparator groups (National, Regional, and CIPFA statistical comparators). A green/yellow RAG rating indicates performance compares unfavourably to one of the comparators. A yellow RAG rating indicates performance compares unfavourably with more than one of the comparators. A red RAG rating indicates performance compares unfavourably with the three comparator groups.
- 2.3 2021/22 Comparator Performance - In 7 out of the 13 ASCOF indicators the council is performing better than all three of the 19/20 statistical, regional, and national comparator group averages. In 1 of the indicators, it was performing better than two of either the 21/22 statistical, regional, and national comparator group averages. In 1 of the indicators, it was performing better than at least one of either the 21/22 statistical, regional, and national comparator group averages. For 4 of the indicators, it was performing below the 21/22 statistical, regional, and national comparator group averages.

- 2.4 2021/22 Quartile Performance – The Council is in the top quartile for 5 of the indicators, the second quartile for 4 of the indicators, the third quartile for 2 of the indicators and the bottom quartile for 2 of the indicators.
- 2.5 Current year Q3 performance - In 9 out of the 11 ASCOF indicators that allow in year reporting we are performing better than all three of the 19/20 statistical, regional, and national comparator group averages.
- 2.6 For the indicators where performance is lower than expected, work has commenced to understand the reasons for this including analysis of recording methods, calculation methods, collaboration with other authorities and proactive responses to improve performance. The impact of this work can be seen in improvements in performance within year.

ASCOF Indicators and comparator information

ASCOF Code	Description of Indicator	Source	Higher (H) or Lower (L) is better	End of Year Prediction based on Q3 Performance	2021-22 Outturn	2021-22 Benchmarking			
						Quartile	Statistical Neighbours comparator group (CIPFA)	Regional (London) comparator group	England Avg.
						2021-22			
2A (1)	Permanent admissions of younger adults (aged 18 to 64) to residential & nursing care homes, per 100k pop	Statutory Returns	L	11.9	11.0	Q2	10.4	9.5	13.9
2A (2)	Permanent admissions of older people (aged 65+) to residential and nursing care homes, per 100k pop	Statutory Returns	L	352.8	543.2	Q3	369.9	401.2	538.5
2B (1)	Proportion of older people (65+) still at home 91 days after discharge from hospital into reablement/rehab	Statutory Returns	H	Available Annually	77.4%	Q4	89.2%	85.1%	81.8%
2B (2)	Proportion of older people receiving reablement services following discharge from hospital	Statutory Returns	H	Available Annually	6.0%	Q1	3.9%	4.3%	2.8%
2D	Percentage receiving short term service during year & outcome was no ongoing support or support of a lower level	Statutory Returns	H	59.0%	54.5%	Q4	76.2%	73.1%	77.6%
1C (1a)	Percentage of clients (receiving long-term services) on Self Directed Support including Direct Payments	Statutory Returns	H	100%	100%	Q1	97.7%	95.9%	94.5%
1C (1b)	Percentage of carers (receiving long-term services) on Self Directed Support inc Direct Payments	Statutory Returns	H	100%	100%	Q1	87.50%	89.2%	89.3%
1C (2a)	Percentage of clients (receiving long-term services) on a Direct Payment	Statutory Returns	H	27.9%	29.6%	Q2	25.7%	25.0%	26.7%
1C (2b)	Percentage of carers (receiving long-term services) on a Direct Payment	Statutory Returns	H	100%	100%	Q1	82.6%	84.5%	77.6%
1E	Proportion of adults with learning disabilities in paid employment	Statutory Returns	H	8.4%	8.9%	Q1	5.9%	5.2%	4.8%
1G	Proportion of adults with learning disabilities who live in their own home or with their family	Statutory Returns	H	82.4%	82.4%	Q2	77.1%	77.5%	78.8%
1F	Proportion of adults in contact with secondary mental health services in paid employment*	Health	H	7.4%	5.0%	Q2	4.8%	4.0%	6.0%
1H	Proportion of adults in contact with secondary mental health services living independently, with or without support*	Health	H	19.7%	19.0%	Q3	27.0%	21.0%	26.0%

- Data provided by health based on Care Programme Approach (CPA) individuals

3. Reasons for recommendations

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

4. Alternative options considered and not recommended

- 4.1 None

5. Post decision implementation

- 5.1 None

6. Implications of decision

6.1 Corporate Priorities and Performance

- 6.1.1 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. Adult social care and leisure are key services support the council's aim of caring for people, in particular living well.

- 6.1.2 Relevant Council strategies and policies include the following:

- a) Barnet Corporate Plan
- b) Medium Term Financial Strategy
- c) Performance and Risk Management Frameworks

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

- 6.2.1 This report sets out the forecast outturn position for the 2022/23 financial year as of 31st December 2022 for the services which fall within the Adults and Safeguarding Committee.

- 6.2.2 At As at month 9, the forecast financial outturn is a £6.115mm overspend. The forecast net use of reserves is £8.034mm. The budget forecasts are included in the report.

6.3 Legal and Constitutional References

- 6.3.1 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.

6.3.2 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.

6.3.3 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.

6.3.4 The Councils Financial regulations can be found at:

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

6.4 **Insight**

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

6.5 **Social Value**

6.5.1 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

6.5.2 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]

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

6.5.3 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.

6.6 Risk Management

6.6.1 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.

7. Risk description	Risk Mitigations and Q3 Update
<p>AD001 Finances: Uncertainty about future demand for services, increasing complexity and cost of care packages, the availability of hospital discharge funding streams and support, legislative changes, 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 service continues to do all it can to manage the budget whilst meeting statutory duties. There is an increasingly pressured health and social care system and social care market. Actions include senior sign-off of all high-cost packages, the negotiation of rates (including block contracts), quick reviews of people following discharge from hospital to ensure a proportionate level of care as people recover, the use of equipment and technology wherever suitable and maximising the benefits of enablement services. As part of 23/24 business planning a review of 22/23 savings has been carried out and remains on track to deliver. 23/24 Business Planning Paper was agreed at Adults and Safeguarding Committee in November.</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>Market capacity remains under pressure due to home refurbishments, provider concerns and recent notices from two homes who took the decision to close. The Council have safely facilitated the decant of the two residential Care Homes. The Council’s Care Quality team have been working with providers to prepare for general increases in demand for care over winter, particularly from hospital. Additional residential and residential dementia block capacity across 3 homes has been secured (c10 beds) and standby homecare arrangements are also being commissioned to respond to urgent requests for care over the Christmas period. In addition, the team are also planning a range of activities to support the sector with recruitment and retention over the</p>

	period, including a job fair specifically for care providers in Barnet, which will take place in January.
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	Contract and schedule variations nearing conclusion with HBPL and GLL. Commercial assessment has been completed by the council.
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	Increased energy prices continue to be a risk presenting inflated service delivery costs. LBB in partnership with GLL continue to explore and implement interventions that seek to reduce energy consumption. This includes the installation of pool covers at New Barnet and Barnet Copthall Leisure Centres and installing technology that enables lighting to be controlled more efficiently.

7.1 Equalities and Diversity

7.1.1 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.

7.1.2 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.

7.1.3 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.

7.1.4 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>

7.2 Corporate Parenting

7.2.1 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.

7.2.2 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.

7.2.3 Care experienced adults may go on to develop care and support needs and draw on council adult social care support. The services and initiatives described in this report are relevant and accessible to care experienced adults.

7.3 Consultation and Engagement

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

7.4 Environmental Impact

7.4.1 There are no direct environmental implications from noting the recommendations

8. Background papers

8.1 None

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

Contact: salar.rida@barnet.gov.uk

Subject	Decision requested	Report Of
13 March 2023		
Age UK Presentation - Update	To note the presentation and update	Age UK
Dementia Strategy	For agreement as per recommendations	Director of Integrated Commissioning
Carers Strategy	For agreement as per recommendations	Director of Integrated Commissioning
Debt Policy	For agreement as per recommendations	Assistant Director Communities and Performance
Fit & Active Barnet Annual Report	The committee to note the Fit & Active Barnet (FAB) annual report.	Assistant Director Greenspaces & Leisure
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