

**MEETING**

**ADULTS AND SAFEGUARDING COMMITTEE**

**DATE AND TIME**

**TUESDAY 14TH JULY, 2015**

**AT 7.00 PM**

**VENUE**

**HENDON TOWN HALL, THE BURROUGHS, LONDON NW4 4BQ**

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

Chairman: Sachin Rajput  
Vice Chairman: Tom Davey

Barry Rawlings	Pauline Coakley Webb	Reema Patel
Philip Cohen	Helena Hart	Reuben Thompstone
	David Longstaff	

**Substitute Members**

Anthony Finn	Brian Gordon	Daniel Thomas
Anne Hutton	Arjun Mitra	Jim Tierney

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

**Andrew Charlwood – Head of Governance**

Governance Service contact: Salar Rida 020 8359 7113 [salar.rida@barnet.gov.uk](mailto:salar.rida@barnet.gov.uk)

Media Relations contact: Sue Cocker 020 8359 7039

**ASSURANCE GROUP**

## ORDER OF BUSINESS

Item No	Title of Report	Pages
1.	Minutes	1 - 8
2.	Absence of Members	
3.	Declarations of Members Disclosable Pecuniary Interests and Non-Pecuniary Interests	
4.	Report of the Monitoring Officer (if any)	
5.	Public Questions and Comments (if any)	
6.	Members' Items (if any)	
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# Decisions of the Adults and Safeguarding Committee

8 June 2015

Members Present:-

AGENDA ITEM 1

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

Councillor Barry Rawlings  
Councillor Philip Cohen  
Councillor  
Pauline Coakley Webb  
Councillor Helena Hart

Councillor David Longstaff  
Councillor Reema Patel  
Councillor Reuben Thompstone

## 1. MINUTES

Councillor Reema Patel requested that the minutes be amended to include the following at Agenda Item 3 (Declarations of Members Disclosable Pecuniary Interests and Non-Pecuniary Interests) :-

*“Councillor Reema Patel declared a non-pecuniary interest in relation to Agenda Items 7 and 8 by virtue of being a member of Unison”*

Subject to the inclusion of the above amendment, the minutes were agreed as a correct record.

**RESOLVED that the minutes of the meeting of 23 April 2015 are agreed as a correct record.**

## 2. ABSENCE OF MEMBERS

There were none.

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

Councillor Barry Rawlings declared a non-pecuniary interest in relation to Agenda Item 11 (Mental Health Social Work: Community Support Model) by virtue of being a member of Unison.

Councillor Reema Patel declared a non-pecuniary interest in relation to Agenda Item 11 (Mental Health Social Work: Community Support Model) by virtue of being a member of Unison.

## 4. REPORT OF THE MONITORING OFFICER (IF ANY)

There were none.

## 5. PUBLIC QUESTIONS AND COMMENTS (IF ANY)

The Committee noted the details of the submitted public questions and the public answers which were provided with the agenda papers for the meeting. Responses to the supplementary public questions were given at the meeting.

There were no public comments.

## 6. MEMBERS' ITEMS (IF ANY)

### (a) MEMBER'S ITEM - COUNCILLOR BARRY RAWLINGS

At the invitation of the Chairman, Councillor Barry Rawlings introduced the Member's Item in his name, which requested that the Committee be provided with a report containing the following:

*"A forecast of the number of service users for Adults Services the council expects to have over the next 10 years.*

*Please could a breakdown be provided ie. those with physical disabilities, learning disabilities, expected increase in number of service users with mental health issues, and those that will need to transition to the service on turning 18 etc."*

Following discussion by Members, Councillor Rawlings requested that the forecast also included service users who are transitioning and are 18 years old.

The Community and Well-being Assistant Director undertook to provide the Committee with a briefing note outlining national projections for growth over the next ten years. The briefing would include data from The Care Act model, and project the number of future service users based on assumptions.

In addition to this briefing, the Committee also requested that further information on this matter is also provided in the "Adults and Safeguarding Annual Performance Report including the Adult Social Care Local Account" item which will be considered by the Committee at their July meeting.

**RESOLVED that the Committee give their instructions to Officers as set out above.**

### (b) MEMBER'S ITEM - COUNCILLOR REEMA PATEL

At the invitation of the Chairman, Councillor Reema Patel introduced the Member's Item in her name which requested the following:

**1.1** *To ask the Adults & Safeguarding Committee to take up the Mental Health Challenge which sets out ten actions that will enable councils to promote mental health across all of their business. Those ten actions are:*

1. *Appoint an elected member as ‘mental health champion’ across the council*
2. *Identify a lead officer for mental health to link in with colleagues across the council*
3. *Follow the implementation framework for the mental health strategy where it is relevant to the council’s work and local needs*
4. *Work to reduce inequalities in mental health in our community*
5. *Work with the NHS to integrate health and social care support*
6. *Promote wellbeing and initiate and support action on public mental health for example through our joint health and wellbeing strategy*
7. *Tackle discrimination on the grounds of mental health in our community*
8. *Encourage positive mental health in our schools, colleges and workplaces*
9. *Proactively engage and listen to people of all ages and backgrounds about what they need for better mental health*
10. *Sign up to the Time to Change pledge.*

*Please could officers provide a briefing to the committee setting out what the council is currently doing towards each of these actions.*

Responding to a question from a Member, Dawn Wakeling, the Adults and Health Commissioning Director advised Members of the following points:

- That whilst overall responsibility for Mental Health came under the portfolio of the Adults and Health Commissioning Director, every day responsibility for mental health matters at the Council came under the portfolio of the Head of Joint Commissioning and Caldicott Guardian.
- That at their meeting on 4 June 2015, the Barnet Health and Wellbeing Board had considered the agenda item titled “Progress Report on Mental Health Provision” which responded to a number of points raised within the Member’s Item.
- That Barnet was part of a trail blazer with other West London Boroughs who were working together to encourage people with Mental Health conditions into employment where appropriate.

Following discussion, Councillor Patel MOVED that the Committee

receive a further in depth report addressing the issues set out within the Member's Item. Votes were recorded as followed:

For	4
Against	5
Abstentions	0

The motion was lost.

**RESOLVED that the Committee give their instruction on the Member's Item as set out above.**

## 7. YOUR CHOICE BARNET LTD VARIATION

The Chairman introduced the report, which requested authority to authorise variations to the contract with The Barnet Group Ltd for Your Choice Barnet in order to change the pricing and service delivery model for transport escort services and unplanned non-attendance at high dependency Day Centres, and included a clause that all employees and agency staff are to have their Right to Work status confirmed.

A Member asked for confirmation that the recommendations contained within the report concerned finance and administration, and that there would be no impact on service users. Matthew Kendall, the Adults and Communities Director confirmed that the proposals would not impact on service quality or safety.

The Chairman MOVED the following amendment to the Recommendation:

**That the Adults and Safeguarding Committee agree to authorise variations to the contract with The Barnet Group Ltd for Your Choice Barnet in order to:**

- i) Change the pricing and service delivery model for transport escort services and unplanned non-attendance at high dependency Day Centres.**
- ii) Include a clause that all employees and agency staff to have their Right to Work status confirmed.**

Votes were recorded as follows:

For	9
Against	0
Abstentions	0

The Motion was carried and became the substantive motion.

The Chairman moved to the vote. Votes were recorded as follows:

For	5
Against	4
Abstentions	0

The motion was carried.



**RESOLVED that:**

**That the Adults and Safeguarding Committee agree to authorise variations to the contract with The Barnet Group Ltd for Your Choice Barnet in order to:**

- i) Change the pricing and service delivery model for transport escort services and unplanned non-attendance at high dependency Day Centres.**
- ii) Include a clause that all employees and agency staff have their Right to Work status confirmed.**

**8. ENABLEMENT CONTRACT EXTENSION**

The Chairman introduced the report, which requested the acceptance of a variation of the contract with Housing and Care 21 for Short-term Enablement Homecare Service to meet increasing demand for the service and to extend for a further year as provided for in the contract.

The Committee noted that the extension would be funded from a move from the domiciliary budget to the enablement care budget.

The Chairman moved to the vote on the recommendations as set in the report. Votes were recorded as follows:

For	9
Against	0
Abstentions	0

**RESOLVED that:**

- 1. That the Adults and Safeguarding Committee approve a one year extension to the contract until the 5<sup>th</sup> September 2016.**
- 2. That the Adults and Safeguarding Committee approve a variation of the contract to purchase an additional 300 hours per week from 15<sup>th</sup> June 2015 until contract end.**

**9. THE CARE ACT 2014: IMPLEMENTATION OF PART 1 AND PREPARATION FOR PART 2 IN APRIL 2016**

The Chairman introduced the report, which a provided the Committee with a briefing on the progress being made towards meeting the second wave of statutory requirements of the Care Act 2014 due to come into force on 1 April 2016, and outlined the future policy decisions that will be required.

The Committee noted the progress made on the first wave of the legislation since it went on 1 April 2015.

The Chairman moved to the vote on the recommendations as set out in the report. Votes were recorded as follows:

For	9
Against	0
Abstentions	0

**RESOLVED that:**

- 1. That the Committee agree to the proposed approach for the implementation of the second wave of Care Act reforms.**
- 2. That the Committee agree to the proposed timetable for sign-off of essential policy changes as contained within this paper.**

**10. LONDON BOROUGH OF BARNET'S APPROACH TO CONCERNS WITH PROVIDERS IN THE REGULATED CARE MARKET**

The Chairman introduced the report, which set out the Council's approach to responding to concerns with providers in the regulated care market. The Chairman noted the Care Quality Commission's inspection regime had changed last year.

James Mass, Assistant Director for Adults Social Care informed the Committee that the Council's priority was the safety and wellbeing of residents. The Committee noted that the London Directors of Adult Social Services have commissioned a review of the London Multi-Agency Policy and Procedures to Safeguard Adults from Abuse, and that Barnet was working closely with the Local Authorities involved with this piece of work.

The Committee noted the approach was to ensure that the highest risk areas would have resources focused on them first.

Ms. Wakeling commented that The Care Act 2014 placed a legal responsibility on Local Authorities to have a good and sustainable care market.

The Committee requested that they be provided with a report on concerns with providers within the regulated care market every six months.

The Chairman moved to the vote on the recommendations as set out in the report. Votes were recorded as follows:

For	9
Against	0
Abstentions	0

**RESOLVED that the Adults and Safeguarding Committee agree the approach to responding to concerns with providers in the regulated care market.**

**11. MENTAL HEALTH SOCIAL WORK: COMMUNITY SUPPORT MODEL**

The Chairman introduced the report, which set out the progress made in delivering the commissioning intentions for working age adults with mental health needs, which had

been agreed by the Committee in March 2015 as part of the Five Year Commissioning Plan.

Ms. Wakeling advised the Committee that the specification would change the way that social workers are deployed, and that social workers would form part of the enablement pathway.

Responding to a question from a Member about the success of an employment initiative provided by Twining Enterprise, Ms. Wakeling advised the Committee that the pilot scheme had shown a high success rate.

The Chairman moved to the vote on the recommendations as set out in the report.

Votes were recorded as follows:

For	9
Against	0
Abstentions	0

**RESOLVED that:-**

- 1. The committee approve the Mental Health Service Specification and agree to receive a Full Business Case in September 2015.**
- 2. The committee note the main milestones of the implementation plan and the required steps to take this forward.**
- 3. The committee approve the renewal of the Section 75 Partnership Agreement between London Borough of Barnet and Barnet, Enfield, and Haringey Mental Health Trust to deliver integrated social care for two years, to enable a safe transition to the new service model.**

**12. COMMITTEE FORWARD WORK PROGRAMME**

The Chairman introduced the Committee's Forward Work Programme, as set out in the report.

The Chairman noted that the Committee had requested to receive a report on a six month basis on the approach to concerns within the regulated care market, and suggested that the report be considered at the Committee's November meeting.

Following a request from a Member, Matthew Kendall undertook to provide the Committee with a briefing on upcoming commissioning and tender arrangements for this year.

**RESOLVED that the Committee note the Forward Work Programme.**

**13. ANY OTHER ITEMS THAT THE CHAIRMAN DECIDES ARE URGENT**

There were none.

The meeting finished at 9:14 pm

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	AGENDA ITEM 7
	<b>Adults and Safeguarding Committee</b> <b>14 July 2015</b>
<b>Title</b>	<b>Healthwatch Barnet Enter and View Summary Report</b>
<b>Report of</b>	James Mass, Community and Wellbeing Assistant Director
<b>Wards</b>	All
<b>Status</b>	Public
<b>Enclosures</b>	Appendix 1A - Summary Report of Enter and View visits from Healthwatch Barnet
<b>Officer Contact Details</b>	Sarah Perrin, Prevention and Wellbeing Service Manager, Email: <a href="mailto:sarah.perrin@barnet.gov.uk">sarah.perrin@barnet.gov.uk</a> Tel:- 020-8359-3487

**Summary**

This report provides a summary of the findings of the Enter and View visits carried out by Healthwatch Barnet during 2014/15 and what the local authority has done as a result.

Members are requested to consider the information contained within this report and the report summary of Enter and View visits received from Healthwatch Barnet attached as Appendix A to this report. Representatives from Healthwatch Barnet will attend the meeting to respond to questions.

**Recommendations**

**1. That the Committee note and comment on information regarding Enter and View visits carried out by Healthwatch Barnet during 2014/15.**

## **1. WHY THIS REPORT IS NEEDED**

- 1.1 The Consideration of Enter and View reports provides the committee with an oversight of the quality, care and safety in residential and health care settings from the view of a lay-person.

## **2. REASONS FOR RECOMMENDATIONS**

- 2.1 Healthwatch Barnet is the consumer champion voice for health and social care users in Barnet and ensures that their voices and concerns are heard. Healthwatch Barnet are statutory members of the Barnet Health and Well-Being Board and have a responsibility to ensure that user views are represented in and considered by the Health and Well-Being Board work programme, and the Health and Well-Being Strategy. Healthwatch Barnet works in partnership with the council and the achievements, activities and outcomes evidenced throughout their first and second year of operation demonstrate that they have successfully established themselves and are meeting their contractual obligations.
- 2.2 During 2014/15, Healthwatch Barnet carried out a total of 30 Enter and View visits to different health and social care settings including 3 re-visits. Enter and View visits are conducted by a small group of trained volunteers who visit health and social care settings to observe and assess the service being provided. The Healthwatch Barnet Enter and View team have a legal right to conduct these visits.
- 2.3 Enter and View visits are intended to add value by providing an additional level of scrutiny in health and social care settings and by working in collaboration with service providers, residents, relatives, carers and those commissioning services.
- 2.4 Following each visit, Enter and View volunteers produce a group report which outlines the details of the visit and provides suggestions for improvement. The reports are sent to the care provider to check for factual accuracy and to respond to any recommendations made. The reports are reviewed and authorised at each stage by Healthwatch Barnet staff, and once finalised are uploaded to the [Healthwatch Barnet website](#). The reports are then sent to the Care Quality Commission and a number of individuals within the Adults and Communities Delivery Unit including; the Safeguarding Team, the Integrated Quality in Care Homes Team, the Quality and Purchasing Team, the Director for Adults and Communities and the Healthwatch Contract Manager.
- 2.5 If Healthwatch Barnet has safeguarding concerns when undertaking an Enter and View visit they raise these concerns directly and as soon as possible with the Safeguarding Team.
- 2.6 Healthwatch Barnet and Adults and Communities work together to ensure that information received from Enter and View Reports can be considered effectively by the Delivery Unit to inform the work that we are carrying out.

Where concerns are raised over the quality of social care provision appropriate action is taken.

- 2.7 Healthwatch Barnet meets on a quarterly basis with the Integrated Quality in Care Homes Team and Care Quality Commission (CQC) representatives. These meetings provide a forum for information sharing and collaborative working to improve the quality of care provision within the borough. Healthwatch Barnet do not undertake visits to homes that are undergoing the Care Quality Commission Inspection process or who are already actively involved with Provider concerns. Enter and View reports received by the Integrated Quality in Care Homes Team are sent to the relevant Quality in Care Advisor who pick up any identified risks raised in a residential home setting and are discussed with the relevant home.
- 2.8 Where Healthwatch Barnet identify that a residential home is not in contact with the Adults and Communities Integrated Quality in Care Home Team Healthwatch Barnet provide contact details to the home or directly contact the Integrated Quality in Care Home Team to provide relevant information.
- 2.9 Healthwatch Enter and View volunteers also attend relevant Care Home Practice Forums. The Integrated Quality in Care Home Team has begun to consider how to strengthen work with Healthwatch in relation to workforce development for example, in developing the work being undertaken by the Community Education Provider Network (CEPN). The aim of CEPN is to arrange and manage the training for local groups of healthcare professionals such as GP's, community pharmacies, community dentists and community service providers.

### **3 ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED**

- 3.1 Not applicable.

### **4 POST DECISION IMPLEMENTATION**

- 4.1 Any recommendations made by the Committee will be followed up by Adults and Communities with Healthwatch Barnet with any requests for information being disseminated as appropriate.

### **5 IMPLICATIONS OF DECISION**

#### **5.1 Corporate Priorities and Performance**

- 5.1.1 Healthwatch is the primary (and statutory) vehicle through which users of health and care in the Borough have their say and recommend improvements in health and social care services. These should lead to improved, more customer focused outcomes for the objectives in the Health and Wellbeing Strategy 2012-15 and support the Corporate Plan strategic objectives 2015-20 specifically that; the council, working with local, regional and national partners, will strive to ensure that Barnet is the place:-

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

- Where services are delivered efficiently to get value for money for the tax payer.

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

5.2.1 The Healthwatch Contract was awarded by Cabinet Resources Committee on 25 February 2013 to CommUNITY Barnet. The Healthwatch contract value is £197,361 per annum. The contract commenced on 1 April 2013 and expires on 31 March 2016. The contract provides for a further extension of up to two years which, if implemented, would give a total contract value of £986,805.

5.2.2 There are no direct resource implications arising from this report.

## **5.3 Legal and Constitutional References**

5.3.1 Sections 221 to 227 of the Local Government and Public Involvement in Health Act 2007, as amended by Sections 182-187 of the Health and Social Care Act 2012, and regulations subsequently issued under these sections, govern the establishment of Healthwatch, its functions and the responsibility of local authorities to commission local Healthwatch.

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

- Promoting the best possible Adult Social Care services.

5.3.3 The Adults and Safeguarding Committee is responsible for the following:

- 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.
- Ensuring that the local authority's safeguarding responsibilities are taken into account.

## **5.4 Risk Management**

5.4.1 Healthwatch Barnet has a group of Authorised Representatives. The Representatives are selected through a recruitment and interview process. Reference checks are undertaken. All representatives must complete a Disclosure and Barring Service check. All Authorised Representatives are required to undergo Enter and View and safeguarding training prior to participating in the programme.

5.4.2 Ceasing to carry out Enter and View visits removes the opportunity for an



additional level of scrutiny to assure the quality of service provision.

## **5.5 Equalities and Diversity**

5.5.1 In addition to the Terms of Reference of the committee, and in so far as relating to matters within its remit, the committee should consider:

- The Council's leadership role in relation to diversity and inclusiveness; and
- The fulfilment of the Council's duties as employer including recruitment and retention, personnel, pensions and payroll services, staff development, equalities and health and safety.

5.5.2 The Council is required to give due regard to its public sector equality duties as set out in the Equality Act 2010 and as public bodies, health Partners are also subject to equalities duties contained within legislation, most notably s149 of the Equality Act 2010; consideration of equalities issues should therefore form part of their reports.

## **5.6 Consultation and Engagement**

5.6.1 N/A.

## **6 BACKGROUND PAPERS**

6.1 None

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## **Appendix 1A – Summary of Healthwatch Barnet Enter and View Visits 2014/15**

The Enter and View team have continued to work across a number of areas in the Borough and have carried out 30 visits in 2014/15. The team has taken on 8 new volunteers and now have a pool of 25 Authorised Representatives. They have undertaken visits in a number of different areas which are outlined below and the details are contained in the table at the end of this report.

### **Care Home Visits**

The Enter and View team have continued with their programme of visits to care homes for older people in Barnet and have been to 15 different homes across the Borough. The planning group (which is made up of 7 volunteers and a staff member) meets regularly and decide on the homes that they feel should be visited. These decisions are based on information from the public, discussions with the CQC, IQICH and the Quality and Purchasing Team at Barnet. Over the period, the teams saw some very good care homes offering very appropriate and compassionate care to residents. Many had good meaningful activities on offer and residents and their relatives were very happy with the care received. Some were not at as good standard and several recommendations were made in these cases.

The main areas where recommendations were made were:

- Lack of meaningful activities;
- Food and menus (often not displayed or residents not involved in food planning);
- Engagement ( residents and relatives not involved in meetings or not aware of meetings);
- Complaints (policies not easily available);
- Staff levels (low levels of staff meaning not enough engagement with residents).

During the year we introduced questionnaires for relatives/friends of residents to tell us about their experiences of care at their care home. These are distributed to relatives/friends by the home manager and are returned directly to Healthwatch. This has been very helpful and has enabled us to reach a much wider range of opinions and feedback about services.

### **Hospital Mealtime Visits**

A team of Enter and View volunteers undertook a series of visits to Barnet Hospital to observe the food and mealtime support. We visited 6 wards on two separate occasions, each at different times of the day and week. The wards and times of each visit were not known to the staff. The visits took place in April/May 2014. We liaised with Barnet Hospital about our findings and they have developed a Mealtimes Matter Action Plan which our findings fed into. Several changes such as changing the time of lunch, introducing nutrition nurses on each ward, more closely managed mealtimes and the introduction of hand wipes have resulted. Many patients /relatives that we spoke to were happy with the food and support given, but this varied between wards. Some of the other suggestions made were around reinforcing the protected mealtime principles; exploring a wider range of options for breakfast; improve the quality of kosher and halal food; and more support for patients not able to use the menu/ordering system.

During June 2015 the team has returned to Barnet Hospital and are undertaking 12 more visits to see how the food and support is now being delivered and will report back on this when the visits are completed.

### **Joint Mental Health Visits with Healthwatch Enfield**

As some mental health services provided by Barnet Enfield and Haringey Mental Health Trust cover all three Boroughs we worked jointly with our neighbouring Healthwatch's to visit some wards. Healthwatch Barnet led a visit to The Oaks ward at Chase Farm which is for older adults with mental health conditions. This has been published and we are currently working on a report from another joint visit led by Healthwatch Enfield to Suffolk Ward which supports female adults with mental health conditions. Our colleagues at Enfield and Haringey also visited Downhills ward at St Ann's Hospital in Haringey.

### **Mental Health Care Homes**

We undertook a final revisit to Woodfield House which is a care home for a small number of adults being supported back into the community after a hospital stay for a mental health condition. We also visited Oakleigh House which has a similar remit and were very impressed by the care and support provided there.

### **Mental Health Ward Visit**

We undertook a re-visit to Thames Ward at Edgware Community Hospital (run by Barnet, Enfield and Haringey Mental Health Trust) We found some aspects had improved and we were reassured that recommendations we made would be followed up by via the Action Plan produced by the ward, particularly about discharge support, complaints procedures and quality of food

The team are continuing to develop their skills and the way they undertake visits and are planning more observations in a number of areas in the coming year.

### **List of Enter and View Visits undertaken by Healthwatch Barnet in 2014/15 follows:**

<b>Hospital Visits</b>	
14 April 2014	Willow Ward, Barnet Hospital (lunch)
14 April 2014	Spruce Ward, Barnet Hospital (lunch)
22 April 2014	Spruce Ward, Barnet Hospital (evening)
22 April 2014	Walnut Ward, Barnet Hospital (lunch)
08 May 2014	Olive Ward, Barnet Hospital (breakfast)
13 May 2014	Willow Ward, Barnet Hospital (evening)
14 May 2014	Walnut Ward, Barnet Hospital (evening)
17 May 2014	Juniper Ward, Barnet Hospital (lunch)

<b>Care Home Visits</b>	
29 April 2014	Clovelly House, (follow-up visit with manager who was not able to be present at original visit)
21 May 2014	Rosa Freedman
21 May 2014	Hadley Lawns Nursing Home
31 May 2014	Athenaeum Care Home
28 August 2014	Paulmay Dementia Care Home
04 September 2014	Cedars Care Centre, Richmond Road.
30 September 2014	Friary Lodge
14 October 2014	Elmhurst Residential Home
14 October 2014	Meadowside 1 (large home – two teams of volunteers attended)
14 October 2014	Meadowside 2 (large home – two teams of volunteers attended)
25 November 2014	Seaforth Lodge
26 November 2014	Roseview Care Home
27 January 2015	Baxendale
04 February 2015	Hilton Lodge
30 January 2015	Hadley Lawns (unannounced revisit)
24 February 2015	Clara Nehab House
9 April 2015	Eastside House
<b>Joint Visits with Enfield Healthwatch to Mental Health Wards</b>	
2 December 2015	The Oaks Ward, BEHMHT, Chase Farm Hospital
17 March 2015	Suffolk Ward, BEHMHT, Chase Farm Hospital
<b>Mental Health Care Homes</b>	
19 January 2015	Woodfield House (unannounced revisit)
18 March 2015	Oakleigh House

<b>Mental Health Ward Revisit</b>	
02 October 2014	Thames Ward, BEHMHT, Edgware Community Hospital (unannounced revisit)

	<p style="text-align: center;"><b>Adults and Safeguarding Committee 14 July 2015</b></p>
<p style="text-align: center;"><b>Title</b></p>	<p style="text-align: center;"><b>Adults and Communities Annual Complaints Report</b></p>
<p style="text-align: center;"><b>Report of</b></p>	<p>James Mass – Assistant Director Community and Wellbeing</p>
<p style="text-align: center;"><b>Wards</b></p>	<p>ALL</p>
<p style="text-align: center;"><b>Status</b></p>	<p>Public</p>
<p style="text-align: center;"><b>Enclosures</b></p>	<p>Appendix 1 – Adults and Communities Annual Complaints Report 2014-15</p>
<p style="text-align: center;"><b>Officer Contact Details</b></p>	<p>Emily Bowler, <a href="mailto:emily.bowler@barnet.gov.uk">emily.bowler@barnet.gov.uk</a>, 020 8359 4463</p>
<b>Summary</b>	
<p>The production of an annual complaints report is a statutory requirement for adult social care that provides an overview of the management and performance in responding to complaints. Effective complaint management is an important element of maintaining the council’s reputation. Complaints are also a valuable tool in helping to understand resident and customer expectations of service delivery and learning from them is an essential part of service improvement.</p> <p>The number of complaints received in 2014-15 is in line with the numbers received in previous years. As well as providing a meaningful response to all complainants the outcomes of investigations are used to generate lessons learnt so that the service we provide is continuously improving and will result in a better customer experience</p>	
<b>Recommendations</b>	
<p>The Adults and Safeguarding Committee to note the information contained within the Adults and Communities Annual Complaints Report 2014-15 and approves the draft report for final publishing.</p>	

## 1. WHY THIS REPORT IS NEEDED

- 1.1 This report is produced in accordance to the requirements of The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009.

It is a valuable tool in helping to understand resident's and customer's expectations of service delivery and should be an essential part in identifying service improvements in Adults and Communities and across the council.

## 2. REASONS FOR RECOMMENDATIONS

- 2.1 The publication of this report is a statutory duty. In addition, review and reflection of complaints is a useful tool to identify areas for improvement.
- 2.2 This report provides information on complaints and representations for Barnet Adults and Communities for the period 1 April 2014 to 31 March 2015. Adults and Communities is the Council's Delivery Unit which provides statutory social care services along with a range of preventative services. Social Care Direct acts as the front door for new Adult Social Care enquiries, and is operated by the Council's Customer Support Group.

*\*NB: Prevention services became a statutory duty from 1st April 2015 in compliance with the Care Act.*

- 2.3 The report considers complaints dealt with through both the statutory adult social care and corporate complaints procedures. Barnet Council is required under statutory regulations, to report annually to the relevant Council committee on adult social care complaints. The Council is required to operate a separate statutory complaints and representations procedure, in accordance with the Local Authority Social Services and National Health Services Complaints (England) Regulations 2009 and the Local Authority Social Services and National Health Service Complaints (England) (Amendment) Regulations 2009 (hereby referred to as 'the Regulations'). Any complaint which does not fall under these requirements is considered under the Council's corporate complaints procedure.
- 2.4 Between 1 April 2014 and 31 March 2015 the Adults and Communities Social Care Direct Team received **44,389** requests. Of which:
- 62.25% resulted in information and advice being provided
  - 12.5% were resolved by SCD and did not need a social care service
  - 9.25% were signposted to another organisation for advice and support
  - 16% were referred for assessment by our social work teams.
- 2.5 In the same period the following complaints, compliments and representations were received from service users, carers and/or their representatives:
- 69 compliments
  - 5 representations (number received regarding same issue)
  - 106 complaints
  - 4 Local Government Ombudsman complaints (total 12 complaints and enquiries).



- 2.6 Common themes which accounted for 68% (71 complaints) of the new complaints are:
- Timeliness or quality of communication, service, referral (30 complaints)
  - Communication or attitude/behaviour of care worker or other provider staff (15 complaints)
  - Formal or financial assessment process / decisions (14 complaints)
  - Barnet Council staff attitude and behaviour (12 complaints).
- 2.7 Of the 106 complaints, 77 resulted in an outcome and 6 were withdrawn.
- 30 were not upheld (28 statutory complaints and 2 corporate)
  - 30 were upheld
  - 17 were partially upheld
  - 23 were resolved prior to the determination of a formal outcome.
- 2.8 Customers expect their interaction with the department to be professional and positive, and in the vast majority of instances this is the case. When things go wrong they expect swift action to be taken to resolve the matters causing concern.
- 2.9 Lessons have been learnt from the complaints received throughout 2014-2015 and this learning is used as a stimulus to ensure high standards of customer care are sustained by the department and some of our care providers to improve on customer care. This is being addressed through the council wide 'Think Customer' initiative, allowing more involvement from the service users and their carers/representatives and improving the communication processes in place to enable this to happen.

### **3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED**

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

### **4. POST DECISION IMPLEMENTATION**

- 4.1 The Adults and Communities Annual Complaints Report 2014-15 is a public document and will available through the Council website and staff intranet.
- 4.2 The Complaints Report includes a number of lessons learnt, which are actions for improvement for the delivery unit. These actions will be implemented in 2015-16. For example, in response to the relatively high proportion of complaints regarding communication, Adults and Communities will commission training to develop staff communication skills and revise the Adults and Communities case file audit tool to ensure that scrutiny of case records identifies any communication issues, to ensure that appropriate remedial action can be taken if required.

## **5. IMPLICATIONS OF DECISION**

### **5.1 Corporate Priorities and Performance**

#### **5.1.1 Corporate Plan 2015 - 2020**

This report supports the Corporate Plan 2015 – 2020 specially that:

“The council, working with local, regional and national partners, will strive to ensure that Barnet is a place:

- of opportunity, where people can further their quality of life...
- where responsibility is shared, fairly...
- where services are delivered efficiently to get value for money for the taxpayer.”

#### **5.1.2 Health and Wellbeing Strategy**

Effective complaints management supports the Health and Wellbeing Strategy’s priority of “care when needed - providing appropriate care and support to facilitate good outcomes and improve the customer experience”.

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

As Adults and Communities continues to make changes to how services are managed and delivered at time of financial austerity and implements the next phase of the Care Act, which comes into force in April 2016, it is possible that more complaints could be received from our customers. It is anticipated that any work carried out in responding to these complaints will be contained within the current staffing establishment and budget.

### **5.3 Legal and Constitutional References**

5.3.1 The Adults and Communities Annual Complaints Report 2014 – 2015 complies with the statutory requirement to produce an annual report of Adult Social Care complaints in accordance with the Local Authority Social Services and National Health Services Complaints (England) Regulations 2009, and the Local Authority Social Services and National Health Service Complaints (England) (Amendment) Regulations 2009 (the Regulations).

5.3.2 The Regulations identified in 5.3.1 above also require the Council to operate a statutory complaints procedure which complies with the provisions.

5.3.3 The Council Constitution, Responsibility for Functions, Annex A states that the Adults and Safeguarding Committee is responsible for those powers, duties and functions of the Council in relation to Adults and Communities including the following specific functions:

- Promoting the best possible Adult Social Care services
- To ensure that the Council’s safeguarding responsibilities are taken into account.

## **5.4 Risk Management**

- 5.4.1 Because the publication of the report is a statutory requirement, the impact of not publishing it would be a breach of the Regulations.
- 5.4.2 Complaints are an essential means by which the Council assures the quality of Adult Social Care provision, and compliance with statutory duties. By listening to complaints and taking improvement action the Council minimises the risk of non-compliance, and ensures improved customer satisfaction.
- 5.4.3 Where complaints are received and highlight any safeguarding issues, they are dealt with under the agreed Pan-London Multi-Agency Adult Safeguarding Policy and Procedures.
- 5.4.4 Adult Social Care does not work in isolation. As with all other aspects of work the complaints process operates in conjunction with partners in the NHS, the Care Quality Commission, Healthwatch, the Police and other Public services. This ensures that issues raised by complainants are dealt with effectively, with minimal risk.

## **5.5 Equalities and Diversity**

- 5.5.1 The Complaints Report supports the Council's strategic Equalities Objective which states that "Our commitment is that citizens will be treated equally, with understanding and respect; have equal opportunity with other citizens; and receive quality services provided to Best Value principles".
- 5.5.2 Adults and Communities help people who are not able to make representations and complaints in their own right to do so through the use of advocacy services. This support could be accessed through Barnet Centre for Independent Living and its subcontractors Mind in Barnet and Barnet Voice for Mental Health until June 2015. Barnet Citizens Advice Bureau is now commissioned to provide advocacy support services working with its subcontract partners of Advocacy in Barnet and Mind in Barnet.
- 5.5.3 Learning from complaints also assists the Council in fulfilling its statutory duty under s149 of the Equality Act.

## **5.6 Consultation and Engagement**

- 5.6.1 The report will assist the Council in identifying any improvements that need to be made to the service or to policy and procedure. Any changes will be subject to appropriate consultation with relevant groups.

## **6. BACKGROUND PAPERS**

None.

# Adults and Communities

## Annual Complaints Report 2014-2015

**DRAFT**



Freedom of Information Act Protective Marking Information	
Protective marking	NOT RESTRICTED
Suitable for publication scheme	Yes
Title and version	Annual Complaints Report 2014-2015
Purpose	Managerial action
Relevant to	Adults and Communities
Author	Neha Shah
Summary	Annual Complaints Report (Statutory requirement)
Department	Adults and Communities
Date created / last reviewed	Final.

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## 1. Introduction

This report provides information on complaints and representations for Barnet Adults and Communities for the period 1 April 2014 to 31 March 2015.

Adults and Communities is the Council's Delivery Unit which provides statutory social care services along with a range of preventative services. Social Care Direct acts as the front door for new Adult Social Care enquiries, and is operated by the Council's Customer Support Group.

The report considers complaints dealt with through both the statutory adult social care and corporate complaints procedures.

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

The Council is required to operate a separate statutory complaints and representations procedure, in accordance with the Local Authority Social Services and National Health Services Complaints (England) Regulations 2009 and the Local Authority Social Services and National Health Service Complaints (England) (Amendment) Regulations 2009 (hereby referred to as 'the Regulations'). Any complaint which does not fall under these requirements is considered under the Council's corporate complaints procedure.

## 2. Adult social care statutory complaints procedure

Since 1 April 2009 complaints have been assessed in terms of their seriousness and how likely the issue is to recur, so that appropriate and proportionate action can be taken in response. This is in line with the Department of Health's Guidance 'Listening, Responding, Improving', where complaints are considered as low, moderate or high risk. Barnet Adult and Communities then assigns low and moderate risk complaints as 'Straightforward' and high risk complaints as 'Serious and/or Complex'. A complaint can be re-assigned if new information arises during the investigation process.

### **Straightforward complaints (Low or Moderate risk) - local resolution**

When a complaint is assessed as straightforward, it is dealt with by a member of staff and/or line manager in the team providing the services, within 20 working days with the aim of achieving resolution. Where possible, the response is provided within 10 working days.

The complainant is invited to comment on the response. Where there is disagreement, a meeting is offered to discuss the concerns with a manager and the Complaints and Representations Manager. A final decision on the complaint is then provided by the Head of Service.

## Serious and/or Complex complaints (High risk) - Independent investigation

If the complaint is especially serious and/or complex an independent investigation will be arranged that produces a report. Adjudication with remedy is then provided within 25 working days (extendable to 65 working days) from the date the complaint is agreed.

The complainant is invited to comment on the response and if there is disagreement, a meeting is arranged to discuss the concerns with a senior manager and the Complaints and Representations Lead. A final decision on the complaint is then provided by the senior manager.

## Local Government Ombudsman

The Local Government Ombudsman (LGO) is an independent organisation to investigate complaints where the Council's own investigations have not resolved the issues raised.

The person making the complaint retains the right to approach the Local Government Ombudsman at any time. However, the Local Government Ombudsman's policy is to allow the local authority to consider the complaint and will refer the complaint back to the Council unless exceptional criteria are met.

## 3. Accessing the complaints procedure

The council is committed to and continually seeks ways to improve communication with service users and carers.

Currently our complaints process can be accessed via the following means:

- The Comments, Compliments and Complaints booklets are widely distributed to public offices in the borough, including voluntary organisations and to Black and Minority Ethnic (BME) community groups.
- The Easy Read version of the booklet 'Comments, Compliments and Complaints' is also widely distributed. This is aimed at people with learning disabilities and people whose first language is not English.
- Information about making a comment, compliment or complaint in relation to Adult and Communities has been refreshed and available on the new Council website at [www.barnet.gov.uk/adults-complaints](http://www.barnet.gov.uk/adults-complaints).
- Public information on making a complaint about Adult and Communities is also available at public events. We held several public events including Barnet Seniors' Assembly, Autism Workshop, Falls Event hosted by Age UK Barnet and Home Instead and Partnership Board Summit in November 2014. These events were attended by a wide range of our service users and carers including older adults and people with learning disabilities and their carers.
- Information about representations and complaints was shared at various meetings with key stakeholders representing various disability groups, including the Barnet Experts by Experience Group and the Clinical Commissioning Group including the Dementia Event for healthcare professionals in November 2014.



- Information about representations and complaints is shared with the management and staff to improve practice.
- Managers are asked to feature compliments, representations and complaints as a standing item in their team meetings and briefing sessions. Compliments are shared with staff and promoted internally through the staff newsletter, notice boards, TV screens and staff awards. Staff and managers are also reminded and encouraged to utilise the support services provided by the Complaints and Representations Team.

All staff are also advised to promote the use of advocates for vulnerable people where appropriate, and advocacy support is available to complainants if they wish to help them to make their complaint. This support could be accessed through Barnet Centre for Independent Living and its subcontractors Mind in Barnet and Barnet Voice for Mental Health until June 2015. Barnet Citizens Advice Bureau is now commissioned to provide advocacy support services working with its subcontract partners of Advocacy in Barnet and Mind in Barnet. They will work closely with other partners who provide a range of advocacy services e.g. statutory advocacy and independent health advocacy. All public information booklets promote the use of advocates.

We will review the complaints process and how service users and carers access the complaints procedure during 2015-16. The review will consider how well the complaints process is working and what we can do to improve the customer experience.

## 4. Overview

Between 1 April 2014 and 31 March 2015 the Adults and Communities Social Care Direct Team received **44,389** requests.

Of which:

- 62.25% resulted in information and advice being provided
- 12.5% were resolved by SCD and did not need a social care service
- 9.25% were signposted to another organisation for advice and support
- 16% were referred for assessment by our social work teams.

In the same period the following complaints, compliments and representations were received from service users, carers and/or their representatives:

- 69 compliments
- 5 representations (number received regarding same issue)
- 106 complaints
- 4 Local Government Ombudsman complaints (a total 12 complaints and enquiries received).

Common themes which accounted for 68% (71) of the new complaints are:

- Timeliness or quality of communication, service, referral (30 complaints)
- Communication or attitude/behaviour of care worker or other provider staff (15 complaints)
- Formal or financial assessment process / decisions (14 complaints)
- Barnet Council staff attitude and behaviour (12 complaints).

Of the **106** complaints, **77** resulted in an outcome and **6** were withdrawn.

- 30 were not upheld (28 statutory complaints and 2 corporate)
- 30 were upheld
- 17 were partially upheld
- 23 were resolved prior to the determination of a formal outcome.

Customers expect their interaction with the department to be professional and positive, and in the vast majority of instances this is the case. When things go wrong they expect swift action to be taken to resolve the matters causing concern.

Lessons have been learnt from the complaints received throughout 2014-15 and this learning is used as a stimulus to ensure high standards of customer care are sustained by the department and some of our care providers to improve on customer care. This is being addressed through the council wide 'Think Customer' initiative, allowing more involvement from the service users and their carers/representatives and improving the communication processes in place to enable this to happen.

Overall, the data and analysis in this report confirms that:

- We respond to all evidence about the impact of our work on service users, carers and residents effectively and efficiently. This ensures that we improve individuals' experience and promote wider improvement.
- The low level of complaints that are escalated to further investigation within the Council or to the Local Government Ombudsman indicates that complainants were largely satisfied with the outcome they received, even though we did not uphold 30 complaints. This suggests the investigations being undertaken are clear and transparent and whilst individuals may not achieve their desired outcome they now understand the reason why and choose not to pursue the complaint.
- A moderate number of compliments were received and this indicates that service users and carers overall have a positive experience with Adults and Communities.

## 5. Compliments

The table below shows the total number of compliments recorded in Adults and Communities from 1 April 2014 to 31 March 2015 compared to the previous two years.

	2012-2013	2013-2014	2014-2015
Compliments	112	106	69

There is a notable decrease in the number of compliments received between 2014-2015. This could be due to a number of factors including:

- Lack of knowledge about the compliments recording process by new members of staff. In 2014-15 there was a larger increase in staff turnover than in previous years.
- Staff changes within the Complaints Team and systems changes could mean that this information has not been recorded properly.
- Lack of internal and external promotion of recording and collating compliments within the delivery unit.

However, the compliments we have received indicate that good practice is happening across the department and our service users are grateful and satisfied with aspects of the service provided.

The compliments received were varied and ranged from individual messages of gratitude to specific members of staff, for example, support staff, social workers, care coordinators and managers, to thank you cards to whole teams for the work they had done for the service user and their carer. Below are some examples of the compliments received in 2014-15:

- *“My wife and I cannot adequately express our most sincere thanks and appreciation which we will always feel towards you personally, the social worker and all members of the team for your personal interest, involvement and efforts in ensuring A's successful placement”.*
- *“I would like to express my endless thank to you for your help and efforts for what you have done in the past few months! I wish you everything good and nice!”*
- *“Please can I thank you sincerely on behalf of the family for the support and work you did with my mother and us during her recent stay in Barnet hospital.*

*I am sure that providing a service to a woman in her 90s with her personal and professional history and with myself also a SW, presented additional challenges, all of which you handled with skill and professionalism. When home (and feeling safer) Mum told me she had found the nursing staff "without humanity" but felt very happy and reassured by your presence. Mum really did listen to what you told her and what you and the OT assessed her needs to be. Your caring yet clear approach was very helpful and supportive to her and for my brother and myself”.*

- *"I have attended many case reviews during my 10 years of service at Provider B. Your professionalism and the way you conducted the meeting was outstanding. Well done!"*
- *"Thank you very much for the wonderful help and advice I have received from one of your very helpful and kind Occupational Therapist. She could not have been more kind, caring and knowledgeable; she gave me so much support and left me with appliances that help me with my day to day life. Not to mention referring me to all the right services. I can't speak more highly of her, and would like to thank the Borough of Barnet along with the NHS and all their support. It is extremely nice to know that NHS and the Borough of Barnet is there to help and support us. My sincere thanks and gratitude".*

The table below shows the total number of compliments recorded in Adult and Communities from 1 April 2014 to 31 March 2015 by service area and gives a comparison to the previous year.

Service Area	2013/2014	2014-2015
Older people / physical disabilities	71	34
Learning disabilities	16	24
Customer and Financial Affairs	2	4
Social Care Direct	1	1
Non specified teams / functions	16	6
<b>Total</b>	<b>106</b>	<b>69</b>

### Improving compliments in 2015-16

We recognise that the number of compliments in Adults and Communities has dropped considerably in 2014-15 due to a range of factors. Thus, a decision was made to move Complaints from the Care Quality Team into the Customer Care Team as this team plays a key role in helping shape and improve customer experiences through both internal and external communications and engagement with the Council.

In 2015-16 we also aim to:

- Closely monitor the number of compliments each quarter and ensure these are filed and recorded properly
- Create and implement new ways of sharing compliments in the delivery unit
- Promote and share the good work carried out by staff in Adults and Communities via staff awards, newsletters and Senior Management Team briefings.

## 6. Representations

Service users may make representations about the contact they have had with Adults and Communities or the service they have received without necessarily making a complaint under the formal procedure.

A representation may be regarded as a comment, enquiry or statement of a formal nature regarding matters such as the availability, delivery or nature of services. They will not necessarily be critical. They can be taken into account when assessing the quality of a service provided, but are not usually viewed as a complaint. They may be critical but the service user does not wish to go through the complaints procedure.

The following shows the total number of representations recorded in Adult and Communities from 1 April 2014 to 31 March 2015 and gives a comparison to the previous two years.

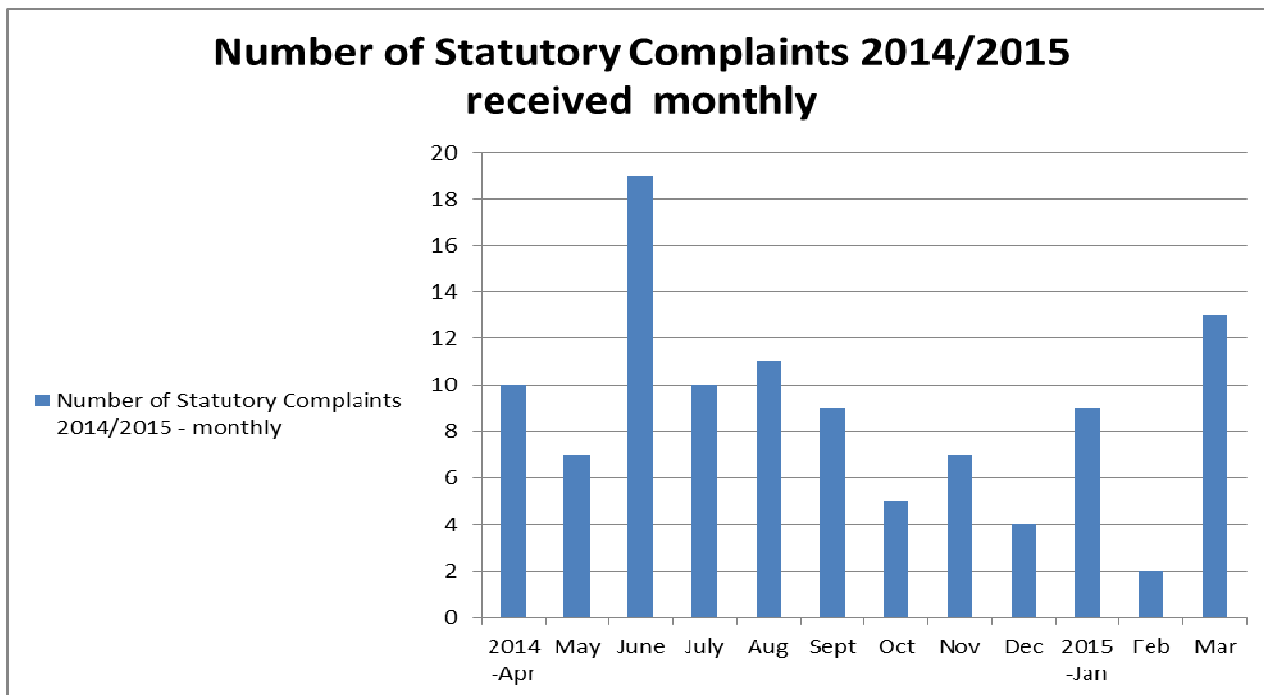
	<b>2012/2013</b>	<b>2013/2014</b>	<b>2014/2015</b>
Representations	31	4	5

## 7. Complaints

### 7.1 Number of Statutory and Corporate Complaints received

In 2014-15 a total of 106 complaints were received by Adults and Communities. This is a slight increase compared to the previous year.

Of the 106 complaints only 2 corporate complaints were received during 2014/15. One in Quarter 1 for Older Persons/Physical Disabilities Team North and the second received for Learning Disability Team in Quarter 3.



Month	Statutory Complaints by Month 2014-15
2014 – April	10
May	7
June	19
July	10
August	11
September	9
October	5
November	7
December	4
2015 – January	9
February	2
March	13
	<b>106</b>

## 7.2 Complaints by Stage

Key	Category	2012-2013	2013-2014	2014-2015
	Statutory Straightforward (Low/Moderate risk)	80	95	98
	Statutory Serious and/or Complex (High risk)	1	2	0
	Withdrawn			6
	<b>Total Statutory</b>	<b>81</b>	<b>97</b>	<b>104</b>
	Corporate Stage 1	4	8	2
	Corporate Stage 2	1	0	0
	Corporate Stage 3	0	0	0
	<b>Total Corporate</b>	<b>5</b>	<b>8</b>	<b>2</b>
	<b>Total complaints - all</b>	<b>86</b>	<b>105</b>	<b>106</b>

A total of 106 complaints were recorded as received between 1 April 2014 and 31 March 2015 and all of these complaints were dealt with under the statutory social care complaints procedure and 2 were dealt with under the corporate complaints procedure. There were no serious or complex complaints received in this year.

Of the 104 statutory social care complaints received:

- 98 were considered as straightforward
- 0 considered as serious and/or complex complaints
- 6 were withdrawn.

Of the 2 corporate complaints received, both were resolved at Stage 1 of the process. There were no Stage 2 or 3 complaint investigations.

## 7.3 Type by outcome

Category	No	%
<b>Statutory</b>	<b>104</b>	<b>100%</b>
Not Upheld	28	27%
Partially Upheld	17	16%
Upheld	30	29%
<b>Total statutory complaints with an outcome</b>	<b>75</b>	<b>72%</b>
Withdrawn	6	6%
Not applicable/no response	23	22%
Not yet resolved	0	-
<b>Corporate Stage 1</b>	<b>2</b>	<b>100%</b>
Not Upheld	2	100%
Partially Upheld	0	-
Upheld	0	-
<b>Total Corporate Stage 1 complaints with an outcome</b>	<b>2</b>	<b>100%</b>
<b>Total Statutory and Corporate Complaints</b>		<b>106</b>

## 7.4 Complaints by service area

Service Area	No of Statutory Complaints	No of Corporate Complaints	Total
Older people / physical disabilities	41	1	45
Customer Financial Affairs	5	0	7
Learning Disabilities	27	1	34
Prevention and Wellbeing	7	0	7
Social Care Direct	4	0	4
Mental Health	5	0	5
Care Quality and Category Management	5	0	3
Practice Governance	1	0	1
No defined team/function	9	0	1
<b>Total</b>	<b>111</b>	<b>2</b>	<b>106</b>



## 7.5 Subjects of complaints

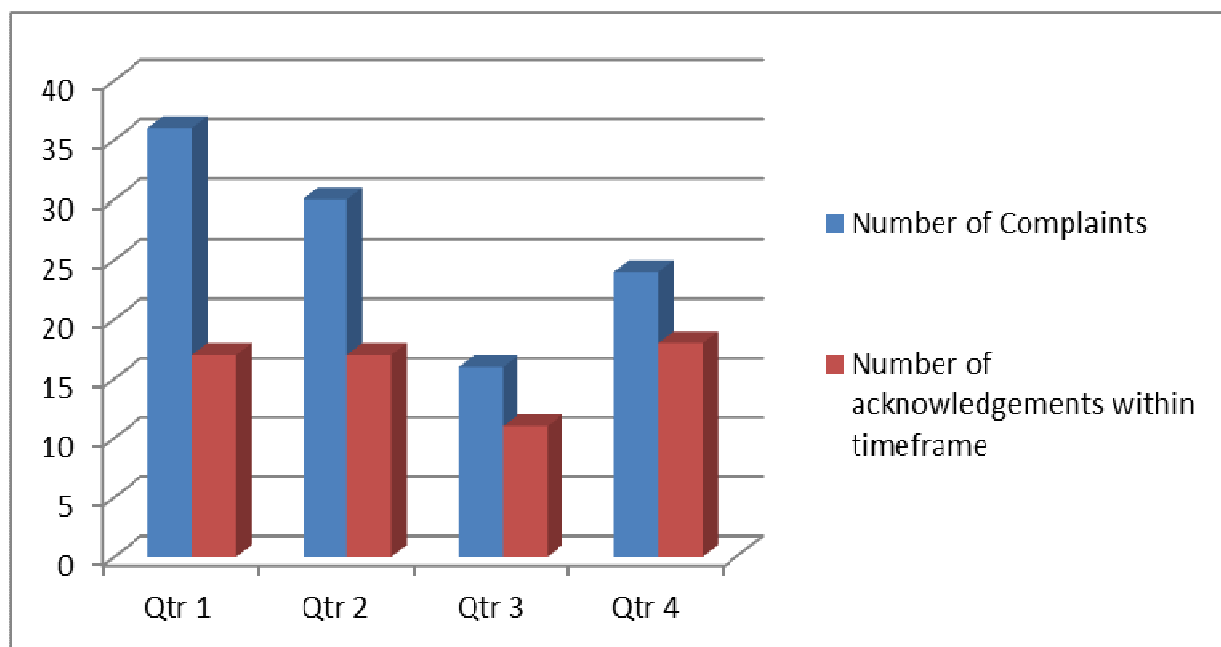
Category	2014-2015	Upheld	Partially upheld
<b>Statutory Straightforward (Low/moderate risk)</b>			
Timeliness of referral or assessment	7	3	1
Formal process or decision (e.g. eligibility assessment, support plan)	8	2	1
Financial assessment process or decision	6	3	1
Timeliness of provision of service	8	3	2
Barnet Council staff behaviour/attitude	12	1	2
Timeliness or quality of communication between Barnet Council staff and service user or carer	15	6	1
Compliance/non-compliance of delivered service with support plan	1	0	1
Data Protection	1	1	0
Communication	1	0	0
Multiple complex issues relating to a resident, service user or carer	9	4	2
Communication or attitude/behaviour of care worker or other provider staff	15	5	1
Complaint about another Council Delivery Unit or Barnet Homes - passed to them to deal	1	1	0
Complaint about Mental Health Trust	2	n/a	n/a
Complaint from a service provider about Barnet Council	2	1	1
Finance matter (not related to financial assessment)	4	0	0
General Enquiry	6	0	2
Query or concern from a resident about Barnet Council action regarding a service user	1	0	0
No Summary given	5	0	2
<b>Total Straightforward (Low/moderate risk)</b>	<b>104</b>	<b>30</b>	<b>17</b>
<b>Corporate Stage 1</b>			
Timeliness or quality of communication between Barnet Council staff and service user or carer	1	0	0
Adults and Communities decision that is not related to a service user or carer	1	0	0
<b>Total corporate (Low/moderate risk)</b>	<b>2</b>	<b>0</b>	<b>0</b>
<b>Total of all complaints</b>	<b>106</b>	<b>30</b>	<b>17</b>

The table above shows the number of complaints by subject that were upheld or partially upheld by Adults and Communities, below are some key highlights:

- Communication or attitude/behaviour of care worker or other provider staff (15 complaints, of which 6 were upheld or partially upheld)
- Timeliness or quality of communication between Barnet Council staff and service user or carer (15 complaints, of which 6 were upheld or partially upheld)
- Financial assessment process or decision (6 complaints, of which 4 were upheld or partially upheld)
- Barnet Council staff behaviour/attitude (12 complaints, of which 3 were upheld or partially upheld). Although the number is not high, such complaints are taken very seriously.

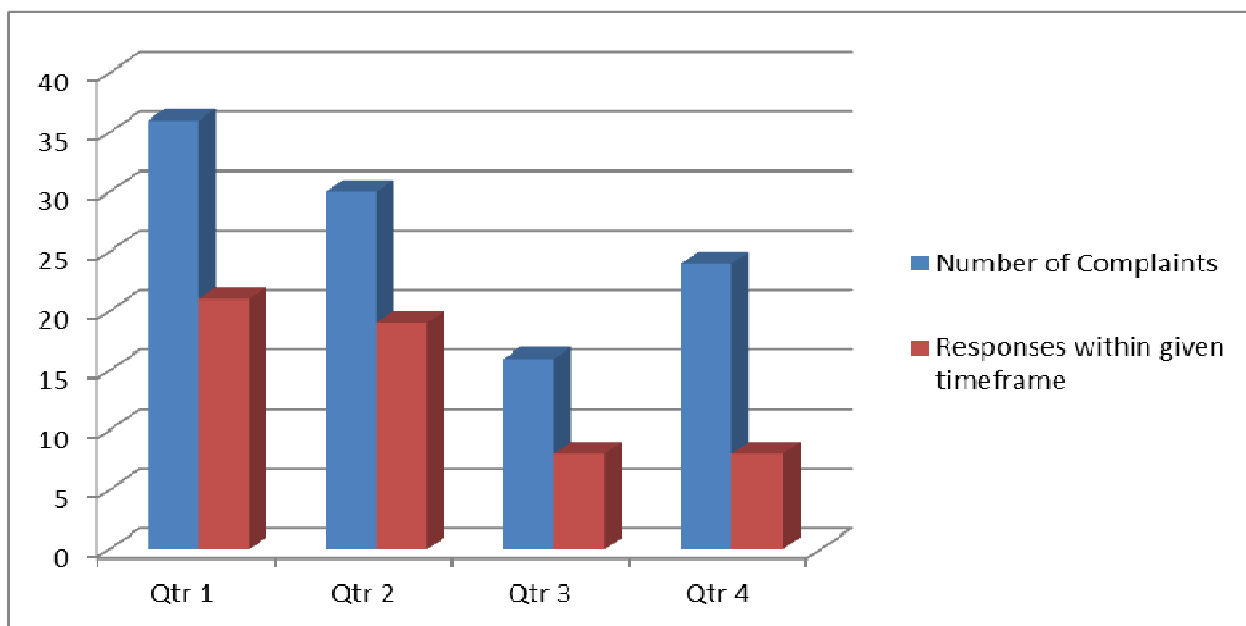
## 7.6 Timeliness of response to complaints

Performance relating to timeliness of acknowledgements is below:



Quarter	Number of Complaints	Number of acknowledgements within timeframe	Percentage %
1	36	17	47
2	30	17	57
3	16	11	69
4	24	18	75

**Performance relating to timeliness of responses is below:**



Quarter	Number of Complaints	Number of responses within target	Percentage %
1	36	21	58
2	30	19	63
3	16	8	50
4	24	8	33

The speed of acknowledgement and response in 2014/15 was not good enough. Though acknowledgement speed improved to at least 75% of complaints being acknowledged within 3 working days of receipt in the second half of the year the speed of response significantly deteriorated. This needs to improve further and the process review discussed earlier will ensure this does happen.

Responding to complaints within timescales has been escalated as a priority for all managers within Adults and Communities and this will be reflected in their annual objectives/ appraisals.

## 8. Learning's from representations and complaints

The complaints process provides the Adults and Communities delivery unit with an additional means of monitoring performance and improving service quality, and provides an important opportunity to learn from complaints.

There is an established system in place to capture a range of complaints information including the nature of the complaint, the action taken, the outcome of each complaint and whether there was compliance with the time periods specified in the Regulations. The information captured from this monitoring is used in a number of ways including:

- The provision of feedback and the dissemination of the information to managers, to improve systems and procedures
- A quarterly update report to the senior management team
- Where services are purchased under contract, informing the appropriate service Commissioners and Supply Management Team who monitor each contract to ensure issues are responded to through appropriate channels.

The following provides a summary of some of the lessons learnt in relation to the common themes that account for a large proportion of the complaints received between 1 April 2014 and 31 March 2015:

- The importance of giving a named contact to complainants so that they have to only tell their story once and complaints are dealt in an efficient and timely manner
- When procuring services, the importance of engaging with service users from the start. This is to ensure service users and residents in Barnet are aware of the changes to services and can have their say
- The approach to joint, multi-disciplinary eligibility assessments has been refined. If on receipt of the assessment result the individual or their representative disputes the findings, an 'appeals' process is available whereby any new factual information that is provided is evaluated. This, on two occasions, resulted in a service being provided where previously it would not have been
- Care assessments are conducted with all those people present who are important to the individual being assessed
- The Financial Assessments Team have introduced processes to eliminate delays in responses to complaints by putting letters into staff diaries to ensure these are dealt with by the right member of staff
- The team is also quality assuring the financial figures on letters regarding cost of care to ensure the correct figures are communicated with service users and reduce the number of enquires in relation to this.

## 9. Local Government Ombudsman (LGO)

The Local Government Ombudsman (LGO) is an external body that looks at complaints relating to local authorities. The LGO is able to investigate matters where there is an alleged or apparent 'maladministration' or service failure. During an investigation the LGO will consider whether a member of the public has suffered injustice and whether that injustice arose as a result of a fault by the Council.

A complainant has the right to raise a complaint with the LGO at any time. Under the 'Council First' procedure the LGO in summary, requires all complainants to go through all stages of their local authority's own complaints procedure before the Ombudsman will consider the complaint.

### 9.1 Complaints and enquiries dealt with by the LGO 2014/2015

Table below shows the total number of new LGO enquiries and complaints received in Adult and Communities from 1 April 2014 to 31 March 2015, compared to the previous three years. Figures for the previous three are shown to demonstrate that there can be relatively significant variations between years. There is no discernible trend.

	2011-12	2012-13	2013-2014	2014-2015
Complaints and enquiries received	21	4	15	12

The LGO Annual Report 2014-15 highlights 12 complaints and enquires for Barnet adult social care, only 4 of these resulted in a full investigation with a formal outcome. The remaining 8 were preliminary enquiries which went no further.

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

We are also responsible for making sure our contracted providers meet the high standards we have set them.

We require all external providers of care and support services to operate a complaints procedure. For services regulated by the Care Quality Commission under the Care Standards Act 2000 (Homecare, Residential Care and Supported Living), this is a statutory requirement. For services that are not regulated, there is not such a statutory requirement but all new contracts for services commissioned by the Council include a requirement to have a complaints procedure.

Where a service user or their representatives raises a concern about the quality of an external provider with the Council, our Care Quality Team logs the matter and passes it to the provider to investigate, in line with their complaints procedure. If the outcome of their investigation is not satisfactory to the complainant or to our Quality and Purchasing Team, Adults and Communities may take further action, through the complaints process if appropriate.

We take complaints very seriously, both to ensure individual service users and their carers receive high quality services and to learn lessons and make improvements more widely where necessary.

If we find that a provider, which is regulated by the Care Quality Commission (CQC), does not meet the CQC's Fundamental Standards, we will inform the Commission, take action first and foremost to ensure the safety of individuals and work with the provider to improve their standards.

### 10.1 Monitoring Care Quality

Quality of care and support services is monitored by the Care Quality Team through a range of contract compliance mechanisms, which include:

- Contract monitoring visits, which include a review of complaints managed by the provider
- Quality Alerts which are written/telephone/electronic communications alerting us to a shortcoming in the delivery of a service
- Working with the Care Quality Commission when one or more of the Essential Standards of Quality or Safety are not met when appropriate
- Responding to any other events, including safeguarding incidents which indicate that the provider is not fully complying with contractual requirements
- We also work closely with providers to support their continuous improvement and learning.

The table below shows a breakdown of concerns about quality that were passed to providers to investigate and those that were managed within Adults and Communities in the past three years.

	2012 - 2013	2013 - 2014	2014 - 2015
Complaints and quality alerts	119	193	177
Complaints managed within Adults and Communities	20	25	8
Total	139	218	185

The number of complaints and quality alerts managed through the Care Quality Team has declined to 177 in 2014-15. Analysis of these events shows that:

- 60 concerned the non-delivery of service
- 68 were about the quality of service provided
- 14 serious misconduct of staff
- 11 provider communication standards
- 24 other complaint from a service user or member of the public.

The vast majority (158) of the complaints and quality alerts were in relation to homecare. Issues about non-delivery of service and quality of service provided by homecare agencies accounted for the majority of both complaints and quality alerts managed by providers, and complaints about providers managed with Adults and Communities. This pattern is similar to that found in previous years.

## 10.2 Improving Care Quality

- The contracting and quality improvement service within Adults and Communities has been redesigned, building on the work piloted by the Integrated Quality in Care Homes (IQICH) team last year to work with providers of services to share good practice and support improvement
- The new Care Quality service has three teams, each working with specific services:
  - care homes and supported living providers
  - services in the community, and
  - equipment and services delivered by the voluntary sector.

The teams include staff from a range of different disciplines, including social work professionals, the Care Quality Commission and a nurse to work with providers in partnership to deliver high quality services

- Nearly 70 care home managers attended our leadership programme covering topics such as managing staff, creating positive cultures in care homes and managing conflict
- The delivery unit provided dementia, safeguarding, autism awareness, emergency first aid and mental health awareness training for staff working in private and voluntary care settings
- The delivery unit delivered a comprehensive training programme including the Care Act changes to policy and procedures, for our adult social care staff.



	<p>AGENDA ITEM 9</p> <p><b>Adults and Safeguarding Committee</b></p> <p><b>14 July 2015</b></p>
<p style="text-align: right;"><b>Title</b></p>	<p><b>Adults and Safeguarding Annual Performance Report including the Adult Social Care Local Account</b></p>
<p style="text-align: right;"><b>Report of</b></p>	<p>Dawn Wakeling – Commissioning Director Adults and Health Mathew Kendall – Adults and Communities Director</p>
<p style="text-align: right;"><b>Wards</b></p>	<p>All</p>
<p style="text-align: right;"><b>Status</b></p>	<p>Public</p>
<p style="text-align: right;"><b>Enclosures</b></p>	<p>Appendix A – London Borough of Barnet Local Account Appendix B: Projected client demand up to 2025</p>
<p style="text-align: right;"><b>Officer Contact Details</b></p>	<p>Zoë Garbett – Commissioning Lead Health and Wellbeing <a href="mailto:zoe.garbett@barnet.gov.uk">zoe.garbett@barnet.gov.uk</a></p>

<h2>Summary</h2>
<p>Each Theme Committee is to receive an annual report against progress made in 2014/15. These reports are to provide theme committees with an annual update of the work that has been undertaken to meet the committee’s commissioning intentions, as outlined in the agreed commissioning plan for each committee. This report reviews the performance between April 2014 to March 2015 for the Adults and Safeguarding Committee.</p> <p>Performance of the council is monitored each quarter by the Performance and Contract Management Committee. Any in-year concerns will be raised through a referral to the relevant theme committee.</p> <p>This reports presents performance and financial data from March 2014 to April 2015, highlighting progress made against the Corporate Plan and the Adults and Safeguarding Committee’s work in assisting in the achievement of meeting the fiscal challenge up to 2020.</p> <p>Following a review of 2014/15, priorities and areas of potential challenge 2015/20 have been considered and are outlined in this report in line with the Adults and Safeguarding Committee Commissioning plan 2015 – 2020 approved by this committee on 19 March 2015.</p>

The report also presents Barnet Council's annual Local Account. Every year the Council produces a local account to provide information about the adult social care department. The local account explains our work against local and national priorities, how we developed services during the year and areas we are working on, the challenges we face and how we are tackling them, what some of our customers and carers think about their experiences of adult social care services.

## Recommendations

- 1. That the Committee note the progress made during 2014/15 and agree to use the information provided to help in future decision making.**
- 2. That committee notes the information contained within the Adult Social Care Local Account 2014-15 and approves the version of the report attached at Appendix A for publishing as final on the Council website.**

### 1. WHY THIS REPORT IS NEEDED

- 1.1 Each Theme Committee is to receive an annual report against progress made in 2014/15. These reports are to provide theme committees with an annual refresh of the work that has been undertaken.

### 2. REVIEW OF 2014/15

#### Corporate Plan priorities

- 2.1 Adults and Safeguarding services lead the delivery of the Corporate Plan priority outcome to promote a healthy, active, independent and informed over 55 population in the borough so that Barnet is a place that encourages and supports residents to age well and contribute to the other five priority outcomes, in particular, to promote family and community well-being and encourage engaged, cohesive and safe communities.
- 2.2 The performance outturn for 2014/15 (table 1 below) shows the borough's progress against two of the three Corporate Plan objectives which the Adult and Safeguarding Committee contribute to. The most recent outturn for the seven relevant corporate plan indicators (CPIs) performance is summarised as:
  - 29% (2 out of 7) were Green
  - 14% (1 out of 7) were Green Amber
  - None were Red Amber
  - 29% (2 out of 7) were Red
  - 29% (2 out of 7) were not reported in the last year – these were bi-annual surveys.

2.3 With regards to the priority to support families and individuals that need it, promoting independence, learning and wellbeing, the borough increased the percentage of eligible adult social care customers receiving self-directed support and increased the number of carers who receive support services. Less progress was made in the areas of younger adults in residential and nursing care and eligible adults receiving direct payments (this is a local measure).

Table 1: Progress against relevant areas of the Corporate Plan 2013/16

Objective	Indicator	Latest Outturn	Previous Outturn
Support families and individuals that need it, promoting independence, learning and well-being	Increase the percentage of eligible adult social care customers receiving self-directed support	99.3% (March 2015)	2013/14 is not comparable due to methodology change
	Increase the percentage (and number) of eligible adult social care customers receiving direct payments to 30%	29.4% (April 2014 – March 2015)	30.1% (2013/14)
	Increase the number of carers who receive support services	39.2% (April 2014 – March 2015)	31% (2013/14)
	Reduce the number of younger adults in residential and nursing care	316 (March 2015)	315 (2013/14)
	Increase the percentage of older people (65 and over) who were still at home 91 days after discharge from hospital into re-enablement/rehabilitation services	71.9% (2013/14)  2014/15 will be available mid-July	83.9% (2012/13)
Improve the satisfaction of residents and businesses with the London Borough of Barnet as a place to live, work, and study	Increase the overall satisfaction of people who use adult social care services with care and support	61.8% (2013/14)  2014/15 will be available mid-July	64.5% (2012/13)
	Increase percentage of adult social care service users who say their services have made them feel safe and secure	65.2% (2013/14)  2014/15 will be available mid-July	70.9% (2012/13)

Table 2: Benchmarked indicators

Corporate Plan Indicators

Bottom London boroughs (excl. City)			Top London boroughs (excl. City)
-------------------------------------	--	--	----------------------------------

	Barnet	London	England
Percentage of eligible adult social care customers receiving self-directed support	99.3%	90.6% <sup>1</sup>	^
Percentage of eligible adult social care customers receiving direct payments <sup>2</sup>	29.4%	N/A	N/A
Percentage of people using community-based services receive their self-directed support as a direct payment (ASCOF 1C(2))	20.5% (2013-14)	22.6% (2013-14)	19.1% (2013-14)
Increasing the number of carers who receive support services	39.2%	N/A	N/A
Permanent admission of younger adults (aged 18-64) to residential and nursing care homes per 100,000 population (Per 100,000 population) (ASCOF 2A(1))	13.4 (2013-14)	10.2 (2013-14)	14.4 (2013-14)
Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement/rehabilitation services (effectiveness of the service) <sup>3</sup> (ASCOF 2B(1))	71.9% (2013-14)	88.1% (2013-14)	82.5% (2013-14)
Overall satisfaction of people who use adult social care services with their care and support (ASCOF 3A)	61.8% (2013-14)	60.3% (2013-14)	64.8% (2013-14)
Proportion of adult social care service users who say their services have made them feel safe and secure (ASCOF 4B)	71.3% (2013-14)	76.8% (2013-14)	79.1% (2013-14)

^ This indicator has had a change of methodology so previous years are not suitable comparisons. Provisional 2014/15 data will be available in early July.

\* Biannual survey

<sup>1</sup> Median of 20 London Local Authorities

<sup>2</sup> This is not comparable to the ASCOF indicator

<sup>3</sup> This indicator is a shared responsibility between the NHS and Social Care

Please note: due to the time lag in reporting of Adults Social Care Outcomes (ASCOF) results, the latest data currently available is for 2013-14. The 2014-15 data will be circulated to the committee as soon as possible. Provisional data is expected in late July.

2.4 In addition to the Corporate Plan priority areas, each Delivery Unit monitors additional indicators to monitor progress against commissioning priorities and key service delivery indicators, these are outlined in tables 3 and 4.



- Built the new national eligibility criteria for support into assessment processes for both adults with care needs and carers
  - Revised the process and tools to calculate peoples personal budgets ensuring that it is transparent and robust
  - Developed a service to support self-funders to arrange and manage their community care. This service is available, for a fee to cover costs, to anyone who asks us to help them.
  - Put in place continuity plans to ensure no one (whether self-funder or someone who receives council-paid support) would go without care if their provider, for example, a home care agency, goes out of business
  - Revised the Market Position Statement for 2015-2020. This will promote the efficient and effective operation of a sustainable market in services for meeting care and support needs for the whole population of Barnet and not just those whom we directly support
  - Trained all staff to deliver on the new duties. Staffing has also been reviewed to ensure that there are sufficient people in place to meet an increase in demand
  - Reorganised Social Care Direct first point of contact service to ensure people who contact LBB receive a faster, more streamlined response and access to high quality information and support
  - Publicised the changes with provider partners, current service users and residents, amending the information provided on the website and in publications.
- Improved the dementia care pathway add more detail, this is a good news story and reached the national diagnosis target of 67%
  - Improved outreach for people with learning disabilities
  - Developed Health and Social Care integration model including our plans for the Better Care Fund which was reported to the Health and Well-Being Board in January 2015. Early outcomes of the BCF plans are positive specify including the impact of Barnet's Local Integrated Team (BILT), a risk stratification tool, Community Navigators and the development of Health Living Pharmacies
  - Improved the Care Quality team to extend the success of working with residential care providers to other sectors of the care market.
  - Developed a screening tool for and raised the awareness of pressure ulcers, improved information about Deprivation of Liberty Safeguarding and the Mental Capacity Act which help keep people safe
  - Supporting mental health and employability side by side - Public health grant has been invested in two projects to support people with mental health problems into work. This support is co-located with community mental health teams, JobCentre Plus and Barnet's multi agency teams for offenders and those impacted by welfare reforms

2.7 Resident satisfaction with the relevant services for Adults and Safeguarding Committee in the Autumn 2014 were:

- Satisfaction with *social services for adults* is 28%, significantly higher than the London average, but satisfaction has declined since the spring 2014 survey.
- Residents are concerned about quality of health services and that there is *not enough done for elderly people* – ranked 5<sup>th</sup> and 8<sup>th</sup> in respondents' top concerns.

### 3. PRIORITIES 2015 – 2020

3.1 The Corporate Plan 2015 – 2020 states our vision for health and social to be personalised and integrated, with more people supported to live longer in their own home.

3.2 Meeting Corporate Plan principles -

<b>Fairness</b>	<ul style="list-style-type: none"> <li>• Improved advice and advocacy services</li> <li>• Greater support to enable carers to continue in their caring role</li> </ul>
<b>Responsibility</b>	<ul style="list-style-type: none"> <li>• Explore alternative ways to deliver services, in partnership with other organisations and residents</li> <li>• Better support for individuals to regain their independence, employment if appropriate and suitable housing that supports their well-being.</li> </ul>
<b>Opportunity</b>	<ul style="list-style-type: none"> <li>• Going further with personalisation – developing more creative approaches to meeting care needs</li> <li>• Join up with Public Health, the wider NHS and other partners to help people better self-manage and plan to age well.</li> </ul>

3.3 The Adult and Safeguarding Commissioning plan (2015 – 2020), approved by the Committee 19 March 2015, set out the priorities, outcomes and commissioning intentions.

3.4 By 2020, social care services for adults will be remodelled to focus on managing demand and promoting independence, with a greater emphasis on early intervention. This approach, working with housing and health services, will enable more people to stay independent and live for longer in their own homes, helping people with their whole life, not simply providing a diagnosis.

3.5 The adults and safeguarding committee agreed to receive the forecast projections of service users over the next 10 years. This information is attached at appendix B and has been based on the modelling published by the Institute of Public Care and Oxford Brookes University in 'Projecting Adult Needs and Service Information' (PANSI1) and 'Projecting Older People Population Information' (POPPI2). These tools were originally established by

<sup>1</sup> <http://www.pansi.org.uk/>

<sup>2</sup> <http://www.poppi.org.uk/>

the Department of Health and are the most commonly used datasets for social care projections.

3.6 The following outlines the key activities being delivered in 2015/16 to take forward our vision for adult health and social care for all adults with disabilities (learning disabilities; physical disabilities; sensory impairments; mental health needs; complex needs) -

- Implement the second phase of Care Act reforms including the Care Account, Care Cap and appeals process.
- To establish a new 0-25 disabilities service model to improve service quality and to promote increased independence of young adults with reduced costs to adult social care
- To increase the supply and take-up of supported living and independent housing opportunities supporting more people to live in a home of their own with support and not in residential care
- To increase opportunities for people to gain and remain in employment, training or volunteering placements (depending on their circumstances)
- To develop a new model of social work for people with mental health problems with closer integration with housing and employment services.
- To commission a carers support service jointly with Family Services to meet the needs of all carers including young carers.
- To increase social networks and community cohesion including overseeing the Local Infrastructure Organisation contracts
- To focus on providing personalised, integrated care with more residents supported to live in their own home
- To implement new contracts place for homecare and enablement
- To increase access to leisure facilities and sports clubs and participation of all residents in physical activity with a particular focus on older people, carers and people from Black, Asian and minority ethnic communities
- To consult on and progress the sports and physical activity project, to modernise and improve leisure centres (by 2018/2019)
- To develop the specification for new leisure management contract with an increased focus on public health outcomes (by 2017)
- To deliver plans to achieve the savings required in the Medium Term Financial Strategy
- To continue to develop our approaches to safeguarding and care quality

#### **Performance monitoring**

3.7 Performance across the Council is monitored by the Performance and Contract Management Committee. This committee receive quarterly reports on progress and spend for each 3 month period of the year. Where performance is considered a concern and relevant to the work of a thematic committee a referral will be made.

3.8 This committee will receive annual reports to ensure members are informed on performance as part of their decision making.



### **Financial performance**

3.9 The Adults and Communities Delivery Unit is the main Delivery Unit for the services commissioned by the Adults and Safeguarding Committee. During 2014-15 the Delivery Unit overspent by £2.472m, a variation of 2.7% of budget. The variation from budget is summarised by:

- Learning Disability and Mental Health = £1.866m overspend. Causes include: new Ordinary Residence clients (22 at a cost of £797k last year alone) and an increase in transition clients from Children's services over the last four years, e.g. £843k pressure last year alone. Transition users are not covered in demographic pressures funding.
- Older People and Disabled People = £2.550m overspend. Causes include: clients who were self-funders whose funds have depleted and are now the responsibility of the Council. e.g. 19 more self-funders at a cost of £445k in 2014/15. Increase in demand from hospitals (a 35% increase in referrals to hospital social work teams in 2 years).
- The above overspends were partly offset by under spends within Community Safety amounting to £0.288m due to vacancies during the year within the newly implemented contract for the provision of CCTV and within Community Well-Being amounting to £0.348m as a result of one-off additional funding received for Care Act implementation within the year.
- There is also an under spend within Prevention and Well-Being amounting to £1.296m as a consequence of the early achievement of savings on Housing related support contracts over and above the MTFS target for 2014/15 (this is being used to partially offset MTFS savings pressures within Social Care); and
- Additional Public Health funding secured in relation to the provision of Leisure Services.

3.10 There will be some significant challenges in delivering within budget in 15/16. The underlying demand pressures described above will be sustained along with further pressures. The 15/16 MTFS savings will be challenging and some may need to be re-profiled. In addition, the financial impact of the Care Act is still unknown and there are growing pressures from the health system.

## **4. REASONS FOR RECOMMENDATIONS**

4.1 The Commissioning Plan was developed following consultation and agreed in March 2015. This report highlights performance and priorities which should be noted and taken forward where appropriate.

## 5. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

5.1 None

## 6. POST DECISION IMPLEMENTATION

6.1 Commissioning plans will be reviewed in Autumn 2015 to contribute to business planning for the council for 2016/20.

## 7. IMPLICATIONS OF DECISION

### 7.1 Corporate Priorities and Performance

7.1..1 As outlined in section 1 of this report, the work of this committee directly impacts on the previous 2013/16 Corporate Plan and the new 2015/20 Corporate Plan.

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

7.2..1 The Adults and Safeguarding Committee accounted for 31.3% of the Council's budget in 2014-15, this will reduce to 29.9% in 2015-16 due to savings.

Table 5: Overview of budget

	<b>2014-15 net</b> (£000s)	<b>2015-16 net</b> (£000s)	<b>% difference</b>
Adults and Safeguarding	<b>89,662</b>  (31.3% of council budget)	<b>82,593</b>  (29.9% of council budget)	-7.9%
Total Council Expenditure	<b>286,412</b>	<b>276,465</b>	-3.5%

7.2..2 The below table sets out the Medium Term Financial Strategy for the Adults and Safeguarding Budget up to 2020.

Table 6: Overview of the Adults and Safeguarding related budget and savings

Net budget	<b>2014-15</b> (£000s)	<b>2015-16</b> (£000s)	<b>2016-17</b> (£000s)	<b>2017-18</b> (£000s)	<b>2018-19</b> (£000s)	<b>2019-20</b> (£000s)
Adults and Safeguarding Budget	89,662	82,583	81,616	80,120	78,935	78,072
Planned savings		(8,424)	(2,656)	(3,514)	(3,199)	(3,238)
Actual	92,283					

### 7.3 Legal and Constitutional Reference

7.3..1 The Council's Constitution, in Part 15 Annex A, Responsibility for Functions, states in Annex A the functions of the Adults and Safeguarding Committee including:

- To be responsible for those powers, duties and functions of the Council in relation to Adults and Communities including the following specific functions:
    - Promoting the best possible Adult Social Care Services
  - To make recommendations to Policy and Resources Committee on issues relating to the budget for the Committee, including fees and charges proposals and virements of underspends and overspends on the budget. No decision which results in the amendments to the agreed budget may be made by the Committee unless and until the amendment has been agreed by Policy and Resources Committee.
- 7.3..2 The Council's Constitution, in Part 15 Annex A, Responsibility for Functions, states in Annex A the functions of the Performance and Contract Management Committee including:
- Monitoring of performance against targets by Delivery Units and Support Groups, including Adults and Communities.
  - To make recommendation to Policy and Resources and Theme Committees on the relevant policy and commissioning implications arising from the scrutiny of performance of Delivery Units and External Providers.
  - Whilst the Council can delegate some of its functions it cannot delegate its duties, this includes the public sector equality duty and statutory duties to provide care to meet eligible needs. The Performance and Contracts Management Committee has a vital role in ensuring that providers fulfil their contractual requirements and do not cause the Council to be in breach of its statutory duties

#### **7.4 Risk Management**

- 7.4..1 Risks are managed on a continual basis and reported as part of the Council Quarterly Performance regime and considered as part of the Performance and Contract Management Committee quarterly monitoring report.

#### **7.5 Equalities and Diversity**

- 7.5..1 The 2010 Equality Act outlines the provisions of the Public Sector Equalities Duty which requires Public Bodies to have due regard to the need to:
- eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010
  - advance equality of opportunity between people from different groups
  - foster good relations between people from different groups

- 7.5..2 Relevant protected characteristics are – age; disability; gender reassignment; pregnancy and maternity; race; religion or belief; sex; sexual orientation.

#### **7.6 Consultation and Engagement**

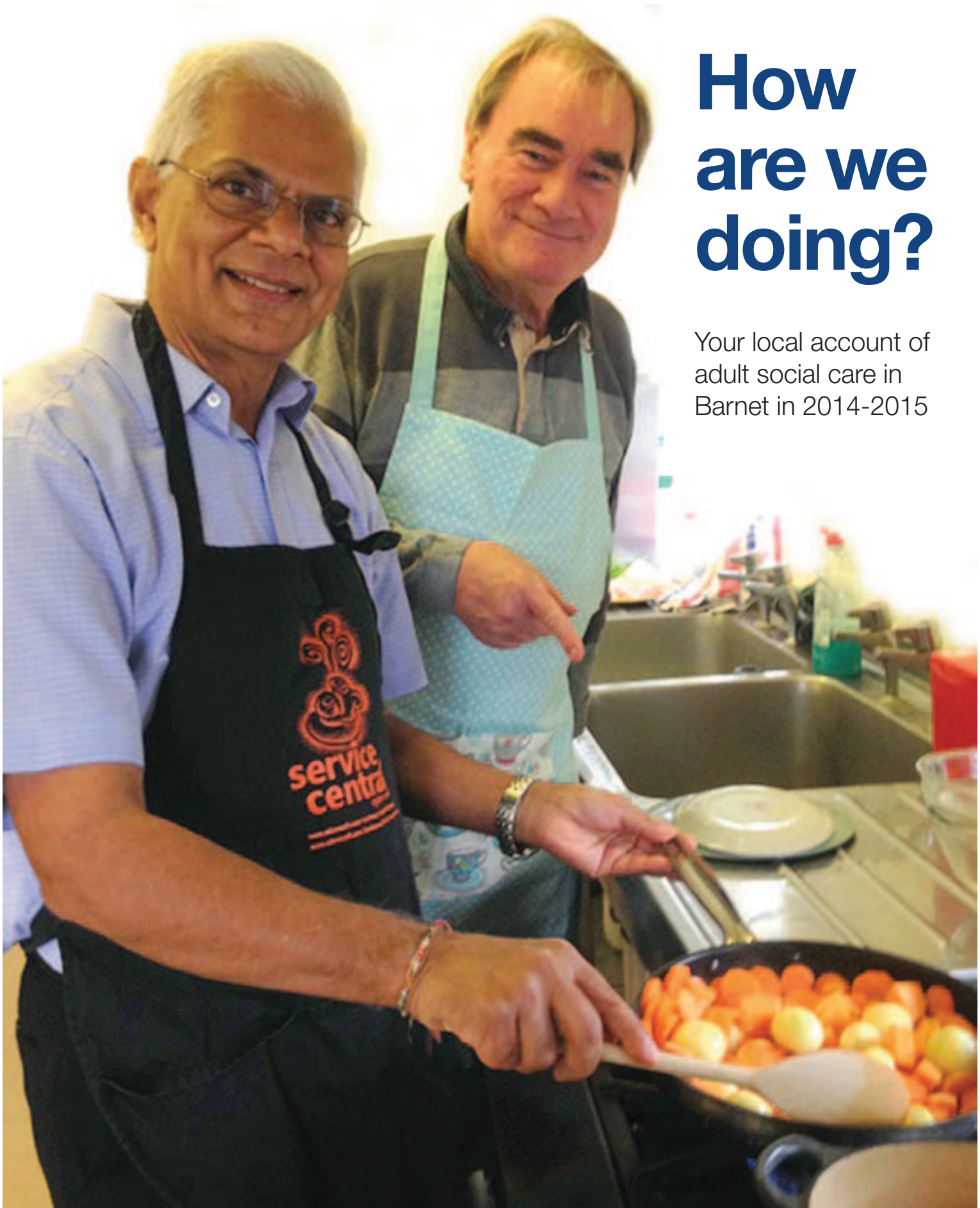
- 7.6..1 A large consultation and engagement exercise took place to develop the commissioning plan. Specific consultation and engagement programmes will take place for each programme as necessary.

## **8. BACKGROUND PAPERS**

- 8.1 Better Care Fund, Health and Well-Being Board January 29 2015, item 6:  
<https://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=177&MId=7784&Ver=4>
- 8.2 Adult and Safeguarding Commissioning Plan, Adults and Safeguarding Committee March 19 2015, item 8:  
<https://barnet.moderngov.co.uk/ieListDocuments.aspx?CId=698&MId=7933&Ver=4>
- 8.3 London Borough of Barnet's Corporate Plan 2015 – 2020:  
<https://www.barnet.gov.uk/citizen-home/council-and-democracy/policy-and-performance/corporate-plan-and-performance.html>

# How are we doing?

Your local account of  
adult social care in  
Barnet in 2014-2015



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Front cover image shows two participants enjoying Cookery Classes for Men, one of Age UK Barnet's wide range of Neighbourhood Services activities for older adults.

# Introduction

from Councillor Sachin Rajput, Chairman, Adults and Safeguarding Committee

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## Welcome to Barnet Council's annual Local Account - our report on adult social care services for the financial year 2014-2015.

The Local Account provides you with information on:

- our work against local and national priorities
- how we developed services during the year and areas we are working on
- the challenges we face and how we are tackling them
- what some of our customers and carers think about their experiences of adult social care services.

We are committed to providing high quality, modern and flexible services, which meet people's individual needs.

We are addressing the same challenges facing adult social care services nationally of greater demand for social and healthcare services as the population ages (The Greater London Authority predicts an 8% increase in Barnet's 65+ population by 2020) against a backdrop of public sector financial austerity.

In 2014-2015 the Adults and Communities budget was £90.7 million - a reduction of £8.4 million on the previous year. In 2015/16 we will be required to reduce the budget by a further £8.4 million.

We are responding to these challenges by redesigning our services to ensure they are cost-effective and ensuring providers offer value for money and meet the highest standards of care and safeguarding.

We have also led a drive to support and promote prevention and wellbeing services in the community to help people stay healthy and independent for as long as possible.

This year has also been a particularly busy year for us in preparation for the first phase of the Care Act, which came into force on 1 April 2015. It has introduced fundamental changes to how we deliver social care services (for full details see Chapter 3). We have worked hard behind the scenes to further develop our Social Care Direct call centre and our case management approach so we can respond more quickly and effectively to people's individual needs.

We are now working towards delivery of the second phase of the Care Act, which is due to go live in 2016.

Our plans for 2016 contain further challenging objectives; some of the key priorities are included in the 'work in progress' sections in this report.

I hope that you find this Local Account interesting and informative.

A handwritten signature in black ink that reads "Sachin Rajput". The signature is written in a cursive style with a long horizontal line extending from the end.

**Councillor Sachin Rajput**  
**Chairman, Adults and Safeguarding Committee**

# 1. What we do

---

**We aim to provide social care services, which support people's independence, safety and wellbeing.**

Barnet Council's Adults and Communities Delivery Unit ('Adults and Communities') supports adults, young people with disabilities aged 18-24, people with physical or sensory disabilities, people with learning disabilities, people with mental health problems and people who care for family members or friends.

We have a statutory responsibility to:

- provide information and advice to people with social care needs
- assess people's social care needs
- help people plan their support if they meet national eligibility criteria
- support family carers
- keep adults at risk safe from abuse.

By working in a more seamless, integrated way with our partners and colleagues in the NHS, voluntary and private sector organisations we want service users to feel increasingly that they are dealing with *one* care organisation.

In addition to legislation including the Care Act 2014, our priorities and ambitions for the year were derived from the following strategic plans:

- Barnet Council Corporate Plan
- Adults and Safeguarding Committee Business Commissioning Plan
- Joint Strategic Needs Assessment
- Barnet Health and Well-being Strategy.

## Our commitments to you

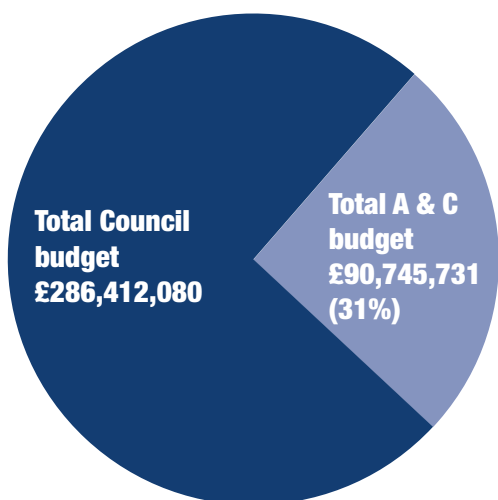
1. Information and advice about staying independent and how to plan for future care and support needs is available for all residents.
2. We will work with you to enable you and your family to maintain your independence.
3. You have the right to control your own care and support. Adult social care will aim to join up services, whoever provides them, around your eligible needs.
4. Family carers will be recognised as partners in care and be supported to continue in their caring role.
5. To respond quickly to keep vulnerable adults safe from harm when we receive concerns.
6. Your Personal Budget is based on your eligible needs and will only change as your needs change.
7. Financial contributions towards meeting the costs of care will always be based on an individual's ability to pay with a clear breakdown of how your contribution has been calculated.
8. Our staff will be professional in their approach, appropriately trained and caring.

**For more information about all our services and publications, visit [www.barnet.gov.uk/adultsocialcare](http://www.barnet.gov.uk/adultsocialcare)**



## 2. Our headline performance

### Expenditure 2014-2015



**Barnet Council**  
Actual expenditure **£287,491,000**

**Adults and Communities**  
Actual expenditure **£93,218,070**

The budget for 2013/14 was £97,080,156 (actual spend was £97,462,350). This was reduced to £90,745,731 for 2014/15 due to savings required as part of the council's Medium Term Financial Strategy and business planning process. There was a £2.4m overspend in 2014/15 because of demographic growth and the resulting pressure on services.

### Population in Barnet

**367,265**

Of which:  
Aged 18-64  
**229,329**

Of which:  
Aged 65+  
**51,576**

Older adults currently make up 14% of the total Barnet population.

### New contacts to Social Care Direct



Social Care Direct is our first point of contact for most adult social care enquiries.

In 2014/15 Social Care Direct received **44,389** requests.

Of which:

9% were signposted to another organisation for advice and support

62.25% were provided with information and advice

12.5% were resolved by Social Care Direct and did not need a social care service

16.25% were referred to our social work teams for assessment

### Adult social care service users\*

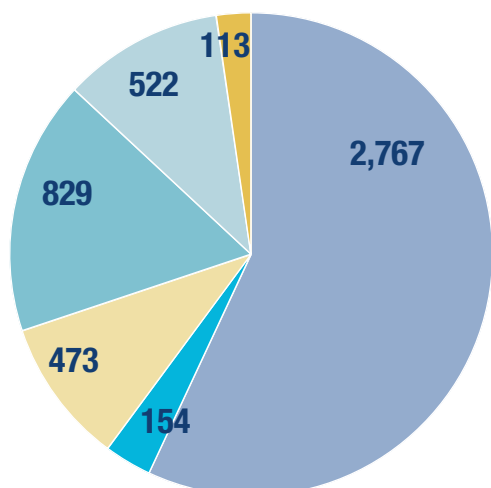
**4,858**

Of which:  
Aged 18-64  
**1,573**

Of which:  
Aged 65+  
**3,285**

\* This excludes people receiving short-term services such as respite, enablement, equipment and adaptations.

## Number of people given different types of support



- Personal care, access and mobility support
- Support for sensory impairments
- Support with memory and cognition
- Learning disability support
- Mental health support
- Social support, e.g. for alcohol or substance misuse

Source of categories listed above: EQ-CL Framework, Health and Social Care Information Centre, June 2014

## Service users receiving different types of support

	2012/13	2013/14	2014/15
Enablement	1,460	1,434	<b>1,530</b>
Community based care, including home care, equipment, telecare, supported living	6,310	6,278	<b>7,190</b>
Residential care	1,076	1,009	<b>1,037</b>
Nursing care	387	358	<b>386</b>

## Expenditure by type of service provided

Type of service	2013/14 £m	2014/15 £m
Social work and safeguarding	10.6	<b>9.1</b>
Direct payments	8.7	<b>10.4</b>
Preventative	3.8	<b>3.9</b>
Registered care homes	37.5	<b>38.0</b>
Support in the home	19.0	<b>23.4</b>
Day services	11.2	<b>12.3</b>
Total	90.7	<b>97.1</b>

## Assessments and reviews



2012/13  
**7,128**

2013/14  
**7,848**

2014/15  
**7,366**

We conducted assessments of new clients and reviews of clients already receiving services to ensure the right support plans are in place to meet service users' needs, which may change over time.

## Direct Payments

2012/13  
**1,204**

2013/14  
**1,396**

2014/15  
**1,460**

We have continued to encourage service users to take up Direct Payments to give them greater control and choice over how and when their services are delivered.

## Carers

32,320



The number of people in Barnet who stated that they “give help or support to family members, friends, neighbours or others because of problems related to old age or long-term physical or mental ill-health or disability.”

Source: ONS Census of England and Wales 2011.

## Carers' assessments

2012/13  
1,304

2013/14  
1,948

2014/15  
1,364



These figures are for assessments carried out by Adults and Communities. Many family carers contact the Barnet Carers Centre or other community organisations for advice or support and so may not choose to ask for a formal assessment of their needs.

## Carers' feedback



I am quite/ very/ extremely satisfied with support or services the person I care for and I have received from social services in the last 12 months **68%**

I find it easy or fairly easy to find information and advice to help me in Barnet **62%**

I feel I am always or usually involved as much as I want to be in discussions about the support or services provided to the person I care for **63%**

Source: Department of Health Adult Carer Survey 2014/15

## Safeguarding

### Alerts received

2012/13  
612

2013/14  
565

2014/15  
764

### Investigations completed

2012/13  
409

2013/14  
381

2014/15  
428

### Requests for DoLS authorisation

2012/13  
35

2013/14  
65

2014/15  
653

### DoLS assessments carried out

2012/13  
29

2013/14  
52

2014/15  
558

The 35% increase in alerts received in the past year may be due to work carried out with care homes, voluntary sector organisations and the public to raise awareness of how to report alleged abuse.

There was a change in the law in March 2014, which has led to the steep increase in requests for DoLS authorisation.

Further data on safeguarding is available in the Safeguarding Adults Board Annual Report, published on the Barnet Council website.

## Complaints and compliments



### Formal complaints received



### Of these, which were upheld



### Written compliments received



## Service users' feedback



### 2014-2015

I am satisfied with services **88.8%** (87.6%)

I am very or extremely satisfied with services  
**62.5%** (60.4%)

I find it easy to find information on social care provision in Barnet  
**72%** (72%)

I have adequate control over my life  
**71.1%** (69.8%)

Source: Annual Department of Health Adult Social Care Survey. Figures for 2013/14 shown in brackets.

For further details of the Adult Social Care accounts, please refer to the London Borough of Barnet Draft Statement of Accounts for the year ended 31 March 2015, published on the Barnet Council website [www.barnet.gov.uk](http://www.barnet.gov.uk)

# 3. Preparing for the Care Act

The Care Act 2014 is the biggest change in adult social care for over 60 years.

In addition to our ongoing services, we were very busy working ‘behind the scenes’ during the last year to ensure we fully meet the new legal duties placed on us by the Care Act to:

- promote physical and mental wellbeing
- prevent or delay people needing social care services
- put people at the heart of the system
- focus more on the outcomes people want to achieve in their lives rather than just meeting practical needs.

The Care Act has introduced significant changes to the way that social care services in Barnet are delivered. Some elements came into effect in April 2015 and others will come into effect in April 2016.

## Meeting the new duties from April 2015

Not only do the changes place new legal duties on us but they are also intended to offer an improved service to anyone who needs social care in Barnet.

In preparation, we:

- **collaborated** with the Department of Health and all the other London borough councils to shape how the Care Act works in practice
- ran **two public consultations** with residents in Barnet to seek their views on how we should deliver the care and support reforms
- launched a **new deferred payments scheme**, which means that people will not have to sell their homes in their lifetime to cover the cost of residential care
- developed our **carers support services** to meet the new legal right of carers to ask for an assessment of their own needs
- provided **prevention services**, promoting wellbeing and focusing on delaying or preventing the need for social care services
- improved our **information and advice services**, enabling people, carers and families to take control of, and make well-informed choices about, their care and support and how to fund it



Care and support in Barnet is changing for the better

**BARNET**  
LONDON BOROUGH

care and support & you

- built the **new national eligibility criteria** for support into our assessment processes for adults with care needs and carers
- developed a **service to support self funders** (people who pay for all their own care and support) to arrange and manage their social care. This service is available, for a fee to cover costs, to anyone who asks us to help them. Our expert knowledge of the local social care market can be very helpful to people who may not know how to find services to meet their individual needs.
- put in place **continuity plans** to ensure no one (whether self funder or someone who receives council-paid support) would go without care if their provider, for example, a home care agency, goes out of business
- revised our **Market Position Statement** for 2015-2020. This will enable us to promote the efficient and effective operation of a sustainable market in services for meeting care and support needs for the whole population of Barnet and not just those whom we directly support

- **trained all our staff** to deliver on the new duties. We have also reviewed our staffing and ensured there are sufficient people in place to meet an increase in demand
- reorganised our **Social Care Direct** helpline services to ensure people who contact us receive a faster, more streamlined response and access to high quality information and support
- **publicised the changes** with our provider partners, current service users and residents, amending the information we provide on our website and publications.

You can find more details about different aspects of this work in the following chapters of this report.

## Meeting the new duties starting in April 2016

We are already working on the Care Act changes that come into effect in April 2016. The two key changes will be a care cap and a new appeals system.

Whilst the national guidance for these changes has yet to be finalised, we are envisaging a £72,000 care cap towards care over a lifetime for people whose social care needs develop after the age of 25. The council will be liable for care costs after the cap has been reached.

There may also be an increase in the capital limits from £23,250 to £118,000 for people with eligible care needs who qualify for council support.

The new appeals system would enable us to resolve disputes people may raise, for example, about decisions on eligibility, personal budgets or support plans, quickly and fairly and offer access to review by an impartial, independent third party.

We plan to run some public engagement activity later in 2015 after the final guidance is published by the Department of Health. This will inform residents on the reforms and seek their views on how we best implement the cap on care costs and the appeals procedure in Barnet.

## 4. Support for carers

**We value carers and recognise the vital role they play in supporting vulnerable people. Supporting carers is a primary aim of our Health and Well-Being Strategy.**

The Care Act is a major milestone in the national recognition of the contribution unpaid family or informal carers make to society. For the first time, carers have a legal entitlement to ask for an assessment of their own needs, even if the person they are caring for does not receive social care services. There are new national eligibility criteria for carers, and carers can access support in their own right. The Act also promotes a 'whole family' approach, so that there is an holistic way to supporting carers and their families.

Our major focus in the past twelve months was to ensure that we are able to meet our new statutory duties so that carers can:

- have access to information, advice and signposting
- have assessments and appropriate support
- be more satisfied with the services and support they receive from the council and from organisations, which provide support to carers
- feel supported to have a life of their own.

### Carers worked with us on the Care Act

To prepare for the Care Act we set up a working group with local carers. The group met once a month and helped shape the new Carers Policy, the Carers Strategy, our emergency planning scheme, the Carers Support Offer (services available to carers in Barnet) and the new carers assessment forms.

Angela, who cares for her elderly mother and a disabled sibling, said: "As a frontline carer, I found it hugely encouraging that my views and experiences have been heard, acknowledged and incorporated into the delivery of practical solutions that I believe will help both current and future carers."



### What we did in 2014-15

We helped raise awareness of the changes arising from the Care Act with carers and other partners through training, workshops throughout the year and during Carers Week.

We worked with Family Services to create new referral pathways for carers and young carers and trained staff on the key duties for carers and young carers with respect to the Care Act and the Children and Families Act.

We refreshed the Carers in Barnet pages on the Barnet Council website to make it easier for carers to access useful information and contacts.

We rolled out new programme of training for staff in Adults and Communities.

We refreshed our Emergency Card Scheme to make it easier for people to register.

### Work in progress

For the first time, we will be commissioning carers support services jointly with Family Services to be in place from April 2016. Carers will be involved throughout the tender process. We aim to deliver a new holistic approach to supporting young carers, carers in transition and adult carers.

We are looking at how we can put in additional support for carers who look after people with dementia.

We are designing a new training programme for social care and health care staff, to help identify carers earlier. Carers will help shape this programme.

We will continue to update the information about local services available for carers on Social Care Connect, and link with other information directories.

**For more information on support available for carers in Barnet, please visit [www.barnet.gov.uk/carers](http://www.barnet.gov.uk/carers)**

# 5. Supporting you

## We want to support people to help them live well, age well and stay well.

We aim to help people maintain their independence and physical and mental wellbeing for as long as possible. This means helping people to access the right type of support when they need it and making sure it is tailored to meet their needs.

We want to ensure residents have access to good quality information, advice and advocacy so they can make informed decisions to help them avoid ill-health or slow down deterioration (see Chapter 9). This might be information on where to obtain equipment or mobility aids or signposting to local keep fit classes, falls awareness advice, specialist support or interest groups provided by community organisations such as Age UK Barnet, Alzheimer's Society Barnet, Barnet Mencap and many others.

If someone does become ill or need intensive health and social care interventions, we want to help them recover quickly to regain their independence. They may be helped in this by the use of short-term enablement support or aids in the home.

We are also developing integrated health and social care services, working with our NHS healthcare partners, Public Health, voluntary sector and private sector service providers, in order to share professional expertise, streamline services and find cost-effective solutions to deliver better outcomes for residents. A key example of this work in practice is the Barnet Integrated Locality Team pilot (see page 13).

### What we did in 2014-15

The following examples illustrate work done to improve services for older adults, people with mental health problems, people with learning disabilities and people living with dementia.

- More than 4,500 older adults took part in Neighbourhood Services run by Age UK Barnet and other local voluntary sector organisations. The services include exercise classes, Tai Chi, yoga, IT classes and cookery clubs, which help reduce social isolation and boost wellbeing.
- Age UK Barnet's Later Life Planning Service, which provides information and advice on issues such as welfare and benefits, housing and keeping healthy and active, helped over 1,000 older people in its first year. The Handyman Service completed jobs ranging from changing

light bulbs to putting up grab rails or fitting key safes, to help keep some 750 older people safe and secure at home.

- Working with Barnet Clinical Commissioning Group, Barnet, Enfield and Haringey Mental Health Trust and Alzheimer's Society Barnet we developed the Barnet Dementia Care Pathway. This aims to provide a seamless service for people living with dementia and their families from initial diagnosis, through assessment to ongoing information, advice and support. Barnet is now one of only 14 boroughs in London to have exceeded the NHS England dementia diagnosis target of 67%.
- Our multi-disciplinary Barnet Learning Disabilities Service set up Community Nurse Links with GP practices to help make reasonable adjustments for people with learning disabilities, for example, by enabling double appointments if a person needs more time with the doctor and support to develop their Health Action Plans.



### Table Tennis Tuesdays

Neil (far right) has been going to play table tennis through the East Finchley Altogether Better initiative almost every Tuesday over the past year - here's what he has to say:

"I really enjoy it...I'm deaf but I want to communicate with hearing people. At the same time, table tennis keeps me active at my age. It's good for me to get out of the house during the week other than doing my shopping. The table tennis is a great ice-breaker for active mature people to meet and get to know each other."



- We extended our outreach service to people with learning disabilities and complex health needs to help them increase their mobility and prevent falls.
- We asked residents and providers for their views to help us develop our Prevention Strategy 2015-18 and Information, Advice and Advocacy Strategy.
- We trained our social work teams to understand and use Prevention and Wellbeing principles as a standard part of their support for customers, for example, by signposting people to local organisations or developing personalised support plans.
- We started work with providers and service users to co-design a new model for community homecare services. By 2018 we want service providers to have moved from 'time and task' personal care support delivered in the home to a more creative approach based on helping the person achieve the outcomes they want.
- We continued support for the Altogether Better project, which brings individuals, local

businesses, community and faith groups together to plan, run and take part in projects to make their neighbourhood a better place in which to live and work. This has led to a wide range of initiatives such as intergenerational IT skills training, wellbeing cafes, a Silver Service lunch deal for elderly people at 11 restaurants in Edgware and East Finchley and a Men's Shed project with around 50 men attending each week. These projects have proved very useful in building community and reducing social isolation, especially for older people.

- In our support for people with mental health problems we have focussed on building enablement as the key strand running through all the services to help people recover, stay well and gain more self-reliance to manage their condition.
- With Public Health, we commissioned employment support workers to help people with mental health problems get into or back into employment. This is important as there are very high levels of unemployment among people with long-term mental health problems.

## Joined up working to improve patient outcomes

As part of a national drive to bring health and social care services together, we have been piloting a new multi-disciplinary way of providing care.

The pilot Barnet Integrated Locality Team (BILT), set up in August 2014, includes health and social care professionals (social workers, occupational therapists and district nurses) who work closely together on cases.

The team is currently working with seven GP practices in Burnt Oak, Colindale, Edgware and Mill Hill, focussing on elderly or disabled patients who have complex medical and social care needs.

BILT has supported a number people, liaising with these patients and their families to agree a coordinated support plan to cover both their health and social care needs.

The key benefits of this model of care are that:

- people, who otherwise may end up in hospital, are helped to stay well and as independent as possible in their own homes
- patients only have to 'tell their story' once as, with the patient's permission, the BILT members and GPs will share records to get a comprehensive picture of their needs.



The team also encourages people to do social activities and connect with the community to avoid loneliness and offers support to carers through carers' assessments and signposting to relevant services.

BILT has received positive feedback from GPs and patients, one of whom said, "It's been so good to talk to somebody – it's a one in a million service."

We are currently reviewing lessons learnt from this pilot in order to inform how we can provide integrated health and social care more widely in the borough.

- We introduced opportunities for people with mental health conditions to move from supported living into private rented accommodation to enable them to gain more independence.
- We introduced seven day a week social care services at Barnet, Chase Farm and Royal Free Hospitals. Our social workers can now work with health colleagues in Accident & Emergency, Clinical Decisions Unit, the wards and discharge coordinators to arrange hospital discharges over the weekend while ensuring the people returning home have good enablement and care packages in place.
- We commissioned Age UK Barnet to run a pilot 'Home Not Hospital' scheme from February to May 2015. This aimed to reduce delays in discharge if there is no medical need for the person to stay in hospital, help them regain their independence at home and reduce the need for unnecessary admissions to hospital. Staff or volunteers from Age UK Barnet were available to give 'that little bit of help' that can make all the difference to a person's wellbeing in the first few days after coming home. This included escorting people home from hospital, preparing light meals, doing shopping, helping the person with their mobility and offering advice and information on other sources of help.

## Work in progress

We are collating all prevention and wellbeing work across the council and monitoring trends and outcomes, including people's feedback on their experience of the various services. This data will inform how our next steps to further develop the prevention and wellbeing initiative.

The Barnet Learning Disabilities Service is improving the care pathway for people with learning disabilities with respiratory conditions, for example, by extending access to assisted coughing machines for people with recurrent chest infection. It will also be running respiratory care awareness training for support workers and carers later this year.

Following the Health and Well-being Board's support for a Barnet Dementia Manifesto, we will be working with partners such as the Older Adults Partnership Board, GP leads, Alzheimer's Society and other local providers to take this forward.

We will be working with Barnet CCG to further improve Barnet's dementia diagnosis rate to achieve a new target of 75% by 2017.

We will continue to review and develop mental health services to reflect the needs of local residents. For example, we have started work with Barnet CCG, people with lived experience of mental ill-health and partner organisations on a 'Reimagining Mental Health' project to co-design a range of initiatives including a Charter for Mental Health and building closer links with schools and Child and Adolescent Mental Health Services (CAMHS).

## Helping people take the stabilizers off

The Network, which is co-funded by Barnet Council and Barnet, Enfield and Haringey Mental Health Trust, provides support for people who are struggling with their mental wellbeing.

The team shows what can be achieved by working in a multi-disciplinary way focussed on enabling and empowering clients.

It works with individuals to help them identify their own recovery goals, with a support plan based on what they want to achieve. This can be for up to nine months in some cases. It's both broad and very centred around the person's particular road to recovery.

One client likens the service to riding a bicycle, as she said:



"It's like taking the stabilizers off. They don't tell you that you need a new bike; they explain you can work with what you've got. That the anxiety associated with falling off is normal, that you can do it for yourself. They show you how to stretch yourself and, yes, it feels uncomfortable but, with the right small steps, it's achievable. My stabilisers have loosened now; I can navigate my bike without falling off. The ride is still bumpy but I'm in control now."

## 6. Improving quality

**We aim to ensure that all adult social care services in Barnet are safe, caring, effective, responsive to people's needs and well-led.**

Our drive for quality covers all the voluntary, private and statutory organisations with whom we contract to deliver services to residents. These include day care, supported living, home care and residential care. The aim is to ensure people are supported and treated well, and kept safe from harm.

We do this in the Adults and Communities Care Quality service through rigorous procurement and quality assurance procedures. We also work closely with providers to support their continuous improvement and learning.

We are also responsible for making sure our contracted providers meet the high standards we have set them. We take complaints very seriously, both to ensure individual service users receive high quality services and to learn lessons and make improvements more widely where necessary.

If we find that a provider, which is regulated by the Care Quality Commission, does not meet the CQC's Fundamental Standards, we will inform the Commission, take action first and foremost to ensure the safety of individuals and work with the provider to improve their standards.

### What we did in 2014-15

We redesigned the contracting and quality improvement service within Adults and Communities. This builds on the work piloted by the Integrated Quality in Care Homes (IQICH) team last year to work with providers of services to share good practice and support improvement.

Our new Care Quality service has three teams, each working with specific services:

- care homes and supported living providers
- services in the community, and
- equipment and services delivered by the voluntary sector.

The teams include staff from a range of different disciplines, including social work professionals, the Care Quality Commission and a nurse to work with providers in partnership to deliver high quality services.

We are pleased to report that the Integrated Quality in Care Homes team were finalists in the national Skills for Care Accolades in the category for 'Most

effective approach to integration and innovation'.

Nearly 70 care home managers attended our leadership programme covering topics such as managing staff, creating positive cultures in care homes and managing conflict.

We also provided dementia, safeguarding, autism awareness, emergency first aid and mental health awareness training for staff working in private and voluntary care settings.

### Work in progress

While the IQICH team continues working with providers of residential and nursing care, we will be developing work with providers of other services.

We will deliver a training programme to improve the quality of social care providers in Barnet.

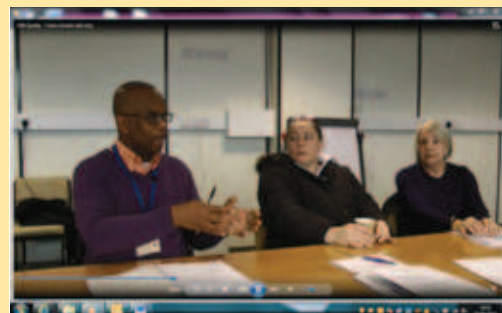
We are strengthening our complaints service to ensure we provide more support to people if they want to make complaints to their provider, and we can advocate on their behalf if they are not happy with the outcome.

### What does quality mean to you?

In 2014 we updated our Quality Assurance Framework to ensure quality runs through all aspects of our frontline and back office functions to improve customer experience.

As part of this project, we asked the Experts by Experience group and carers for their definitions of quality. They felt quality meant feeling safe, being treated with respect and, especially, "having confidence in the professionals I deal with".

We filmed the meeting and showed it to staff as part of their training programme.



# 7. Keeping people safe

## We are legally responsible for protecting vulnerable adults who may be at risk from abuse or neglect.

Abuse can take the form of mistreatment or lack of care that leads to injury or harm. It may be the result of deliberate intent, negligence or ignorance. Abuse can be physical, sexual, psychological, financial or neglect, or a combination of these.

It can happen to anyone regardless - or indeed because of - their age, gender, race or ability. Older people make up the largest number of people at risk in Barnet.

We encourage people who use services, carers and professionals in social or health to tell us if they have a safeguarding concern by contacting Social Care Direct, telephone 020 8359 5000 or email [socialcaredirect@barnet.gov.uk](mailto:socialcaredirect@barnet.gov.uk) We then take action to investigate the issue as appropriate.

We also have legal responsibilities under the Deprivation of Liberty Safeguards (DoLS) in the Mental Capacity Act 2005. These aim to protect people in care homes and hospitals from being unlawfully deprived of their liberty. The care home or hospital must apply to their local authority to authorise any deprivation of liberty, in order to ensure it is in the person's best interests.

A Supreme Court judgment ruling in March 2014 means that DoLS now applies to many more people. This year we received 653 requests for authorisation compared with 52 requests the previous year.

Barnet has a Safeguarding Adults Board, a multi-agency partnership which determines local safeguarding policy, shares best practice and training, monitors and reviews progress in preventing abuse and responding to it when it happens. Our work is determined by the Board's annual priorities (see box).

We also facilitate a Safeguarding Adults Service User Forum, comprising service users and carers, to ensure that their voice remains central to our safeguarding work.

### Barnet Safeguarding Adults Board priorities 2014-16



1. Improve the standards of care to support the dignity and quality of life of vulnerable people in receipt of health and social care, including effective management of pressure ulcers
2. Improve access to justice for vulnerable adults
3. Increase understanding of what may constitute as abuse
4. Improve service providers' understanding of Mental Capacity Act and Deprivation of Liberty Safeguards.

Keeping adults safe in Barnet

## Say NO to abuse

Physical • Emotional • Sexual • Discriminatory • Financial • Neglect

Call Barnet Council's Social Care Direct  
**0208 359 5000**  
Email: [socialcaredirect@barnet.gov.uk](mailto:socialcaredirect@barnet.gov.uk)

Or call the Police on 101  
In an emergency always call 999

**Tell us – we are here to help**

## What we did in 2014-15

We developed a screening tool to help nurses identify where pressure ulcers are a sign of neglect.

We worked with care workers and health care assistants to raise awareness of pressure ulcers.

We improved information sharing and joint working about safeguarding alerts with the police.

We provided training to ensure Adults and Communities staff are familiar with the Mental Capacity Act and DoLS legislation and practice.

We revised and updated our information on what abuse is and how to report it, and produced a new factsheet about the Mental Capacity Act.

We attended community events and awareness days to talk to people about safeguarding.

We worked with Barnet Borough Watch to email safeguarding messages to 800 Neighbourhood Watch coordinators.

The Safeguarding Users Form held 'challenge sessions' to ask the representatives from Barnet, Enfield and Haringey Mental Health Trust, the Royal Free Hospital, the Metropolitan Police and Central London Community Healthcare how they are safeguarding their vulnerable people.

We know that this work is having an impact because the number of safeguarding alerts has increased, showing that more people have identified the risks of abuse and have reported it to us.

## Work in progress

In addition to continuing our work to support the Board's four priorities, we plan to:

- ensure our Safeguarding Adults Board is compliant with the Care Act and implement a new Safeguarding Adults policy and procedures in line with the Care Act
- work towards implementing the national Making Safeguarding Personal guidance to ensure our safeguarding work is person-centred and outcomes focused
- continue work with Barnet Clinical Commissioning Group and NHS partners to raise awareness among social work practitioners, carers, people at risk and the general public of what pressure ulcers are and how to prevent them
- encourage new members to join the Safeguarding Users Forum.

### Say no to abuse: spreading the word

We took part in a borough-wide community safety day on 25 September, organised by the police and the Barnet Safer Communities Partnership.

We ran an information stand in North Finchley and encouraged people to call our helpline Social Care Direct on 020 8359 5000 if they were concerned about abuse against vulnerable adults.



For more information on keeping adults safe in Barnet, visit: [www.barnet.gov.uk/safeguarding](http://www.barnet.gov.uk/safeguarding)

## 8. Listening to you

**We want to ensure that the views of people who use social care services and carers inform how we deliver and develop services.**

In order to make sure adult social care services meet the needs of people in Barnet, we run a busy schedule of engagement and outreach activity.

We invite service users, carers and provider organisations to get involved with us in a number of ways, depending on their experience and interests, to help co-design proposed services.

This could be by:

- responding to consultations and surveys
- joining our People Bank, Experts by Experience Group or Direct Payments Users' Forum
- taking part in workshops, planning meetings, focus groups and tender panels
- joining one of the five Health and Well-Being Partnership Boards. These have a strategic and advisory role in steering services which impact on carers, older adults, people with mental health problems, people with physical or sensory impairment and people with learning disabilities.

Some of these activities are one-off or may seek views on a particular issue. Some, like the Partnership Boards, meet regularly to hear presentations on policy areas, discuss the issues and contribute to work in development.

### What we did in 2014-15

We ran two public consultations to seek views on how we should deliver the Care Act changes and an expansion of the Deferred Payments scheme. We also conducted a targeted consultation with people likely to be affected by changes to the Independent Living Fund.

We coordinated the Department of Health Carers Survey and User Survey to a random sample of nearly 3,000 Barnet residents.

Several service users with mental health difficulties and learning disabilities took part on the panel to recruit the new Adults and Communities Head of Integrated Care. Service users and carers also took part in tenders to select providers of specialist information, advocacy and advice, mental health voluntary services and the learning disabilities support service.

We invited service users to meet with Andrew Travers, Barnet Council Chief Executive Officer. They discussed issues such as difficulties getting through to Social Care Direct, public transport to Finchley Memorial Hospital, support for people with autism and the work of Healthwatch Barnet.

Following service user requests, we reinstated a Direct Payments Users' Forum to offer more ongoing support for people using Direct Payments to pay for their support and personal assistants.



### Join the People Bank

We are growing our People Bank network of local people who want to be informed about services or get involved in meetings, events or consultations about health and social care in Barnet.

Residents can choose the topics that interest them and decide how they want to get involved.

For more information, visit [www.barnet.gov.uk/people-bank](http://www.barnet.gov.uk/people-bank)

We asked the Experts by Experience co-production group for their first-hand experience to help us inform policy making on topics such as enablement, home and community support, the dementia care pathway and the Care Act.

The Partnership Boards, which bring together service users, carers, statutory and voluntary sector providers, addressed a wide range of health and social care issues including hospital discharge, suicide prevention, wheelchair services, social isolation, access to leisure activities, specialist support for people with learning disabilities in primary healthcare and the Carers Emergency Care card.

In January 2015 we co-hosted a well-attended public event with Healthwatch Barnet as part of the consultation implementing the Care Act in the borough.

Adults and Communities Director Mathew Kendall responded to questions raised on the financial implications of the Act, the importance of integration with care homes, safeguarding and ensuring there is adequate information, advice and advocacy available. We also continued support for Healthwatch Barnet's ongoing range of activity to engage with residents about the health and social care issues that matter to them.

## Work in progress

We want to improve outreach to seldom heard people and widen the membership of our engagement groups to reflect the demographic profile of Barnet.

We will be reporting back to everyone who took part in the Department of Health surveys with the results.

We are developing peer support workshops for Direct Payment users to share their experiences of using direct payments and employing personal assistants with potential users.

We will be working with the Partnership Boards and other stakeholders to improve how we engage proactively with service users, carers and providers to ensure we listen and act on their views to influence service development.

## Making your voice heard

Over 100 members of the Partnership Boards and the Barnet Health and Well-Being Board came together at two summits, held in June and November, to review progress and share ideas to improve health and well-being in the borough.



**For information about how you can get involved to help shape and improve adult social care services, visit: [www.barnet.gov.uk/get-involved](http://www.barnet.gov.uk/get-involved)**

# 9. Keeping you informed

We need to provide clear and accessible information and advice to support service users and carers to live how they want and make best use of the services available.

We provide information in a number of ways, including the face to face contact service users have with their social workers and other care professionals, by telephone, on the website and through publications.

The Care Act also requires local authorities to provide information and advice so that people know what support is available and how to access advocacy services.

## What we did in 2014-15

We worked closely with the Department of Health and other councils on the development of a coordinated national marketing approach to ensure current and potential service users and carers were fully informed about the changes brought in by the Care Act on 1 April 2015.

We produced a Care Act information page on our website, gave presentations to the Health and Wellbeing Partnership Boards, voluntary sector organisations and other delivery partners and distributed leaflets and posters to public libraries, GP surgeries and community centres.

As part of a major refresh of the council's website, we updated the adult social care pages to make it easier for residents to find the information or forms they need.

We also reviewed the content and search functionality of our Social Care Connect online directory. This provides details of our lead service providers such as Barnet Citizens Advice Bureau, Age UK Barnet, Barnet Centre for Independent Living, the Barnet Carers Centre and a wide range of other local organisations offering advice and support in the community. You can see the directory at [www.barnet.gov.uk/socialcareconnect](http://www.barnet.gov.uk/socialcareconnect)

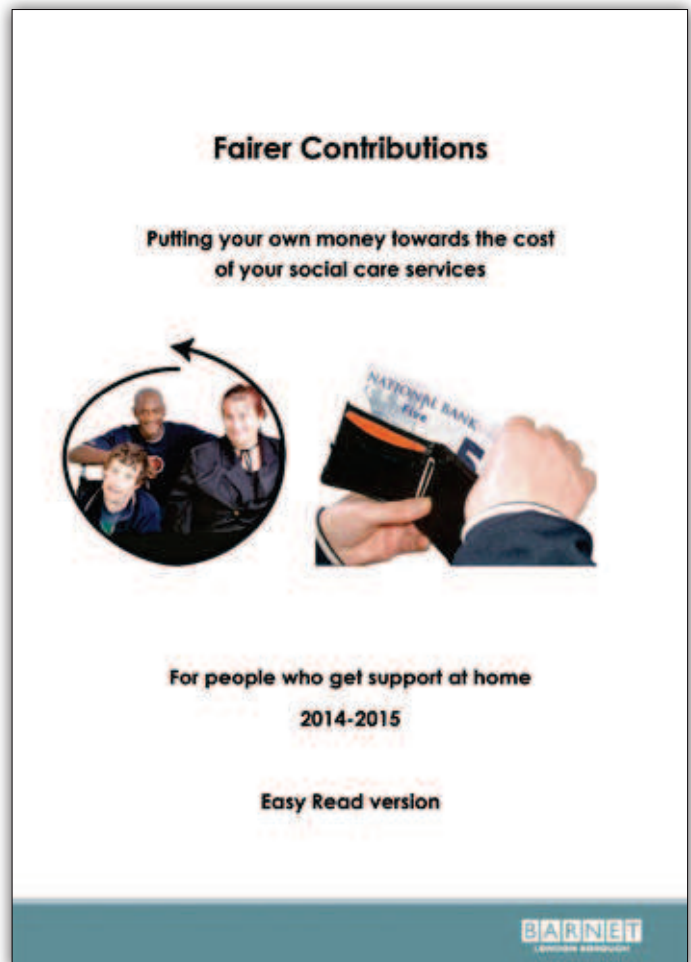
We know that many service users and carers may not have or wish to use digital communications so we ensured that information is also available in print, including easy read publications for people with learning difficulties (see example).

## Work in progress

For the first time, we are starting to collate data on the type of information and advice given. This will help us analyse where people are signposted and how useful it was for them.

We will be maintaining and updating Social Care Connect to ensure it is accurate and up to date.

From July 2015 Barnet Citizens Advice Bureau will be delivering Community Advice Services to provide information, advice and advocacy to help people with their adult social care options.





# Useful contacts

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Provides free confidential, impartial advice to help people decide on their adult social care options, and guidance on advocacy.  
Tel: 0300 456 8365 [www.barnetcab.org.uk](http://www.barnetcab.org.uk)

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Provides information, advice and support for people aged 55+  
Tel: 020 8203 5040 [www.ageukbarnet.org.uk](http://www.ageukbarnet.org.uk)

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Provides peer-led advice and support for people with any form of disability  
Tel: 020 8359 2444 Email: [info@barnetcil.org.uk](mailto:info@barnetcil.org.uk) [www.barnetcil.org.uk](http://www.barnetcil.org.uk)

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Provides advice and support for family carers  
Tel: 020 8343 9698 Email: [admin@barnetcarers.org](mailto:admin@barnetcarers.org) [www.barnetcarers.org](http://www.barnetcarers.org)

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Provides information, advice and support people with their mental wellbeing  
Tel: 020 8359 4999 [www.eclipsebarnet.org.uk](http://www.eclipsebarnet.org.uk)

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Provides support and opportunities for people with autism or a learning disabilities  
Tel: 020 8349 3842 or 020 8343 8897 [www.barnetmencap.org.uk](http://www.barnetmencap.org.uk)

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For a full list of organisations which provide information, advice or support about adult social care services in Barnet, visit the council's Social Care Connect online directory: [www.barnet.gov.uk/socialcareconnect](http://www.barnet.gov.uk/socialcareconnect)

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If you would like to read more about the work of Adults and Communities, please visit the Barnet Council website [www.barnet.gov.uk/adultsocialcare](http://www.barnet.gov.uk/adultsocialcare)

We welcome your feedback about this Local Account. To tell us what you liked or disliked and what you would like to see in next year's edition, please contact:

Adults and Communities Communications Team

Tel: 020 8359 7150

Email: [comms.adults@barnet.gov.uk](mailto:comms.adults@barnet.gov.uk)

If you would like a copy of this Local Account in an alternative format such as audio, Easy Read, CD or in large print, please contact:

Adults and Communities Communications Team

Tel: 020 8359 7150

Email: [comms.adults@barnet.gov.uk](mailto:comms.adults@barnet.gov.uk)



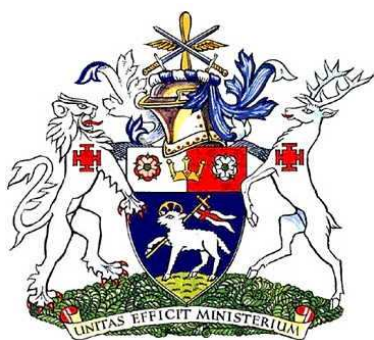
Produced by Adults and Communities  
London Borough of Barnet  
June 2015

Appendix B: Projected client demand up to 2025

<b>Primary Client Type:</b>	<b>Total of Clients</b>	Projected number 2016	Projected number 2017	Projected number 2018	Projected number 2019	Projected number 2020	Projected number 2021	Projected number 2022	Projected number 2023	Projected number 2024	Projected number 2025
<b>Physical disability, frailty and sensory impairment (total)</b>	576	587	599	611	623	635	646	657	667	678	689
<b>Mental health (total)</b>	593	601	609	617	623	630	636	642	648	655	661
<b>Learning disability (total)</b>	757	776	785	802	811	820	825	830	836	841	846
<b>Total younger adults</b>	<b>1,926</b>	<b>1,964</b>	<b>1,993</b>	<b>2,030</b>	<b>2,057</b>	<b>2,085</b>	<b>2,107</b>	<b>2,130</b>	<b>2,152</b>	<b>2,174</b>	<b>2,196</b>
<b>Total Older Adults</b>	<b>3,033</b>	<b>3,101</b>	<b>3,175</b>	<b>3,243</b>	<b>3,320</b>	<b>3,397</b>	<b>3,489</b>	<b>3,582</b>	<b>3,675</b>	<b>3,768</b>	<b>3,861</b>
<b>Of which: Dementia</b>	360	369	380	392	405	418	433	448	463	478	493
<b>Of which have a Learning disability</b>	106	109	111	114	117	120	123	126	129	133	136

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AGENDA ITEM 10



**Adults & Safeguarding Committee**

**14 July 2015**

<b>Title</b>	<b>Adults &amp; Safeguarding Committee Work Programme</b>
<b>Report of</b>	Dawn Wakeling – Commissioning Director, Adults and Health
<b>Wards</b>	All
<b>Status</b>	Public
<b>Enclosures</b>	Appendix A - Committee Work Programme - June 2015- May 2016
<b>Officer Contact Details</b>	Anita Vukomanovic, Governance Service Email: <a href="mailto:anita.vukomanovic@barnet.gov.uk">anita.vukomanovic@barnet.gov.uk</a> Tel: 020 8359 7034

**Summary**

The Committee is requested to consider and comment on the items included in the 2014/15 work programme

**Recommendations**

1. That the Committee consider and comment on the items included in the 2014/15 work programme

## **1. WHY THIS REPORT IS NEEDED**

- 1.1 The Adults & Safeguarding Committee Work Programme 2015/16 indicates forthcoming items of business.
- 1.2 The work programme of this Committee is intended to be a responsive tool, which will be updated on a rolling basis following each meeting, for the inclusion of areas which may arise through the course of the year.
- 1.3 The Committee is empowered to agree its priorities and determine its own schedule of work within the programme.

## **2. REASONS FOR RECOMMENDATIONS**

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

## **3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED**

- 3.1 N/A

## **4. POST DECISION IMPLEMENTATION**

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

## **5. IMPLICATIONS OF DECISION**

### **5.1 Corporate Priorities and Performance**

- 5.1.1 The Committee Work Programme is of the Council's principles and strategic objectives set out in the Corporate Plan 2015 – 2020.

- 5.1.2 The strategic objectives set out in the 2015 – 2020 Corporate Plan are: –

The Council, working with local, regional and national partners, will strive to ensure that Barnet is the place:

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



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

5.2.1 None in the context of this report.

**5.3 Legal and Constitutional References**

5.3.1 The Terms of Reference of the Policy and Resources Committee is included in the Constitution, Responsibility for Functions, Annex A.

**5.4 Risk Management**

5.4.1 None in the context of this report.

**5.5 Equalities and Diversity**

5.5.1 None in the context of this report.

**5.6 Consultation and Engagement**

5.6.1 None in the context of this report.

**6. BACKGROUND PAPERS**

6.1 None.

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**London Borough of Barnet  
Adults and Safeguarding  
Committee Forward Work  
Programme  
July 2015 - May 2016**

Contact: Anita Vukomanovic 020 8359 7034 [anita.vukomanovic@barnet.gov.uk](mailto:anita.vukomanovic@barnet.gov.uk)

Subject	Decision requested	Report Of	Contributing Officer(s)
<b>14 July 2015</b>			
Adults and Safeguarding Annual Performance Report including the Adult Social Care Local Account.	Committee to receive the Annual Performance Report and the Adult Social Care Local Account.	Adults and Communities Director	
Adults and Communities Delivery Unit Annual Complaints Report 2014/15	Committee to receive the Adults and Communities Delivery Unit Annual Complaints Report 2014/15.	Assistant Director Community Wellbeing	
Healthwatch Barnet Enter & View Summary Report 2014/15	Committee to receive a Healthwatch Barnet Enter & View Summary Report 2014/15.	Community Well-being Assistant Director	
<b>16 September 2015</b>			
Barnet Multi-Agency Safeguarding Adults Board Annual Report 2014/15	Committee to receive the Barnet Multi-Agency Safeguarding Adults Board Annual Report 2014/15.	Adults and Communities Director Commissioning Director (Adults and Health) Chris Miller – Independent Chair, Safeguarding Board	
Mental Health Community Model Full Business Case	Committee to receive the Mental Health Community Model Full Business Case.		

Subject	Decision requested	Report Of	Contributing Officer(s)
<b>12 November 2015</b>			
Report on Adult Social Care ADM project - consultation and early findings/SOC	Committee to receive a report on Adult Social Care ADM project, including consultation and early findings/SOC.		
Approach to Concerns Within the Regulated Care Market - Update Report	At their meeting on 8 June 2015, the Committee received a report on the London Borough of Barnet's approach to concerns with providers in the regulated care market. The Committee requested to be provided with an update report in six months' time.		
<b>19 January 2016</b>			
Report on Adult Social Care ADM project Outline Business Case	Committee to receive a report on Adult Social Care ADM project OBC.		
Implementing the Care Act: Implementation of Carers Support	Committee to receive a report on implementing the Care Act: Implementation of Carers Support		
<b>7 March 2016</b>			
Implementing the Care Act: Adult Social Care and Support Contributions Policy	Committee to receive a report on implementing the Care Act: Adult Social Care and Support Contributions Policy		

Subject	Decision requested	Report Of	Contributing Officer(s)
Implementing the Care Act: Cap on Care Costs Policy	Committee to receive a report on implementing the Care Act: Cap on Care Costs Policy.		
Implementing the Care Act: Appeals Policy	Committee to receive a report on implementing the Care Act: Appeals Policy.		
To be Allocated			
Commissioning strategy for enablement	Committee to receive a commissioning strategy for enablement		
Home care commissioning - outcomes based approach	Committee to receive a report on home care commissioning - outcomes based approach.		
Commissioning strategy for supported living	Committee to receive a commissioning strategy for supported living.		
Implementation of Better Care Fund: development of integrated locality teams	Implementation of Better Care Fund: development of integrated locality teams.		

<b>Subject</b>	<b>Decision requested</b>	<b>Report Of</b>	<b>Contributing Officer(s)</b>
Care Act implementation: market sustainability and oversight	Committee to receive a report on Care Act implementation: market sustainability and oversight		

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