

MEETING

ADULTS AND SAFEGUARDING COMMITTEE

DATE AND TIME

WEDNESDAY 13TH JULY, 2016

AT 7.00 PM

VENUE

COMMITTEE ROOM 1, HENDON TOWN HALL, THE BURROUGHS, LONDON NW4 4BQ

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

Chairman: Councillor Sachin Rajput

Vice Chairman: Councillor Tom Davey

Councillor Paul Edwards

Councillor Claire Farrier

Councillor Helena Hart

Councillor Dr Devra Kay

Councillor David Longstaff

Councillor Reema Patel

Councillor Reuben Thompstone

Councillor Reema Patel

Substitute Members

Councillor Anthony Finn

Councillor Daniel Thomas

Councillor Anne Hutton

Councillor Jim Tierney

Councillor Brian Gordon

Councillor Jess Brayne

In line with the Constitution's Public Participation and Engagement Rules, requests to submit public questions or comments must be submitted by 10AM on the third working day before the date of the committee meeting. Therefore, the deadline for this meeting is Friday 8th July at 10AM. Requests must be submitted to Anita O'Malley 020 8359 7034 anita.vukomanovic@barnet.gov.uk

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

Andrew Charlwood – Head of Governance

Governance Service: Anita O'Malley 020 8359 7034 anita.vukomanovic@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 - 6
2.	Absence of Members	
3.	Declarations of Members Disclosable Pecuniary Interests and Non-Pecuniary Interests	
4.	Report of the Monitoring Officer (if any)	
5.	Members' Items (if any)	
6.	Public Questions and Comments (if any)	
7.	Adults and Safeguarding Performance Report and Local Account	7 - 52
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10.	Any other items that the Chairman decides are urgent	

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Decisions of the Adults and Safeguarding Committee

16 June 2016

Members Present:-

AGENDA ITEM 1

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

Councillor Claire Farrier
Councillor Helena Hart
Councillor Dr Devra Kay

Councillor David Longstaff
Councillor Reema Patel
Councillor Reuben Thompstone

Apologies for Absence

Councillor Paul Edwards

1. MINUTES

The Chairman of the Adults and Safeguarding Committee, Councillor Sachin Rajput welcomed all the attendants to the meeting.

It was **RESOLVED** that the minutes of the previous meeting held on 7 March 2016 be agreed as a correct record.

2. ABSENCE OF MEMBERS

Apologies received from Councillor Paul Edwards who was substituted by Councillor Jess Brayne.

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

Councillor Reema Patel declared a non-pecuniary interest in relation to Agenda Item 7 (Your Choice Barnet Agreement) by virtue of being a member of Unison.

4. REPORT OF THE MONITORING OFFICER (IF ANY)

None.

5. PUBLIC QUESTIONS AND COMMENTS (IF ANY)

None were received.

6. MEMBERS' ITEMS (IF ANY)

Two Members' items were submitted as set out under agenda item 6a and 6b.

(a) MEMBER'S ITEM - COUNCILLOR PATEL

Councillor Patel introduced the Members' item in her name. The Commissioning Director for Adults and Health, Dawn Wakeling, suggested that the item could be included within the annual performance report, which is on the agenda for the July meeting of the Adults and Safeguarding Committee.

The Committee provided the following instructions in relation to this Members' item which was unanimously **RESOLVED**

- 1. That an officer report with analysis of the performance and benchmarking data intended to deliver the Committee's Commissioning Plan, included in the annual performance report at the next meeting of the Adults and Safeguarding Committee.**

(b) MEMBER'S ITEM - COUNCILLOR FARRIER

Councillor Farrier introduced the Members' item in her name.

The Chairman of the Health and Wellbeing Board, Councillor Hart and Commissioning Director for Adults and Health, Dawn Wakeling noted that an update report about the Better Care Fund will be reported to the next meeting of the Health and Wellbeing Board in July.

Following discussion, Councillor Farrier moved a motion which was seconded:

That an update report from the Commissioning Director for Adults and Health is brought to the next Adults and Safeguarding Committee with information about the decisions of the Health and Wellbeing Board which relate to Adult Social Care.

Having been put to the vote, the motion was declared lost.

Votes were recorded as follows:

For	4
Against	5
Abstentions	0

7. REVIEW OF THE YOUR CHOICE BARNET CONTRACT

The Chairman introduced the report which set out proposals for the future of the Your Choice Barnet Ltd agreement with the Council from February 2017. The Chairman invited Dawn Wakeling, Commissioning Director for Adults and Health, Julie Riley, Director of Care and Support The Barnet Group and Troy Henshall, Chief Executive of The Barnet Group to present the item.

Following a query about staffing, officers provided a response and noted that appropriate staffing arrangements are in place to ensure that employment issues are handled effectively.

Councillor Longstaff moved a motion to amend the wording of the first recommendation to read ‘for five years *and two months*’ which was seconded. Following agreement by the Committee, the motion was declared carried and became the substantive motion.

It was **RESOLVED** that:

1. That the Committee agreed that the Council enter into a contract with Your Choice (Barnet) Ltd (YCB) for five years and two months, from the 1st February 2017 to 31st March 2022, with an extension period of 2 years and a break clause at year three.
2. That the Committee agreed the proposals to continue all current YCB services whilst increasing support to service users to move towards more independent living and to participate in the workplace, subject to consultation.
3. That the Committee agreed to a period of public consultation on the proposals for a new agreement, to take place from July 2016 for a period of 12 weeks.
4. That the Committee noted that a report will be brought to a future Adults and Safeguarding Committee setting out the consultation findings.

Votes for recommendations 1, 2 and 3 were recorded as follows:

For	5
Against	0
Abstentions	4

Recommendation 4 was unanimously carried.

8. OPPOSITION MOTION IN THE NAME OF COUNCILLOR PATEL

Councillor Patel introduced the item in her name which had been referred to the Adults and Safeguarding Committee in accordance with the Council Procedure Rule 23.5 which states that if a Member’s Motion is not dealt with by the end of a Full Council meeting, it will be referred to the appropriate committee for consideration and any necessary action.

Councillor Patel moved the following motion which was seconded:

That the wording as set out in section 1.2 of the report (p.16-17 agenda report) and subject to replacement of ‘Council’ to ‘the Adults and Safeguarding Committee’ at each of the paragraphs except for one instance where the word Council remains unchanged, be noted by the Committee.

Having been put to the vote, the motion was declared lost.

Votes were declared as follows:

For	4
Against	5
Abstentions	0

9. TELECARE ENHANCEMENT

The Chairman introduced the report and invited the Community and Well-being Assistant Director, James Mass to join the meeting. Mr Mass presented the item and briefed the Committee about the telecare service and the benefits it delivers in helping people live independently.

In relation to a query from the Committee about safeguarding, Mr Mass stated that telecare services should be viewed as part of the solution, in combination with existing care package arrangements.

The Chairman thanked the Committee for the discussion. It was unanimously **RESOLVED:**

- 1. That the Committee approved the procurement of a new telecare provider to expand the scale and ambition of the service in order to increase independence and social connection for current and future adult social care users and their carers.**
- 2. That the Committee approved the extension of the current contract with Barnet Assist, awarded in August 2014 to Barnet Assist under Teckal exemption, from 31 July 2016 to 31 March 2017. There is a clause in the current contract to allow for an extension of up to three years.**

10. BARNET MULTI-AGENCY SAFEGUARDING ADULTS BOARD BUSINESS PLAN 2016-18

The Chairman introduced the report which set out the new Safeguarding Adults Board Business Plan for 2016-18 and invited Chris Miller, Independent Chair, Safeguarding Adults Board and Emma Coles, Safeguarding Adults Board Project and Policy Officer to join the table.

Mr Miller noted that for each financial year, the Safeguarding Adults Board must publish a strategic plan in accordance with the provisions of the Care Act 2014 and that the discussions at the Board have informed and developed the new priorities and business plan 2016-2018. Mr Miller also noted the importance of the input from GPs and the voluntary sector and the continued partnership working with the Board.

Following a comment from the Committee, a motion was moved by Councillor Longstaff and seconded to add the wording '*Fire Brigade*' to the recommendation. Having been agreed, the motion was declared carried.

It was unanimously **RESOLVED:**

That the Committee noted the new Safeguarding Adults Board Business Plan for 2016-18, which is intended to ensure a continued, robust multi-agency approach to safeguarding adults in Barnet, with involvement from the Council, NHS Barnet, Clinical Commissioning Group (CCG), NHS Trusts, the Police, Fire Brigade and the Voluntary Sector.

11. IMPACT OF THE CARE ACT

The Adults and Communities Director, Mathew Kendall presented the report to the Committee which provided an update on the impact of the first phase of the Care Act 2014 in Barnet during 2015/16.

It was unanimously **RESOLVED:**

That the Adults and Safeguarding Committee noted the impact of the Care Act 2014 as described in this report.

12. COMMITTEE FORWARD WORK PROGRAMME

The Chairman introduced the standing item on the agenda informing the Committee of the items on the Forward Work Programme for 2016/17.

The Chairman noted that changes were made by way of additions to the Forward Work Programme during this meeting:

- Under Agenda Item 6a, recommendation 1: That an officer report with analysis of the performance and benchmarking data intended to deliver the Committee's Commissioning Plan is included in the annual performance report at the meeting of the Adults and Safeguarding Committee.
- Under Agenda Item 7, recommendation 4: That the Committee noted that a report will be brought to a future Adults and Safeguarding Committee setting out the consultation findings.

It was therefore **RESOLVED:**

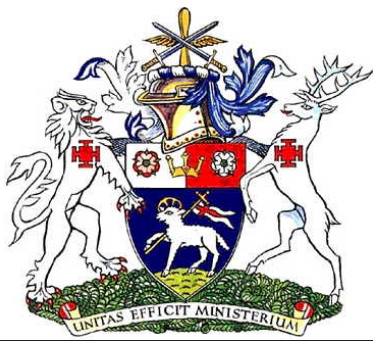
That the Committee considered and commented as above on the items included in the 2016/17 work programme.

13. ANY OTHER ITEMS THAT THE CHAIRMAN DECIDES ARE URGENT

There were none.

The meeting finished at 8.53 pm

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Adults and Safeguarding Committee

13 July 2016

Title	Annual Performance Report and the Local Account – 2015/16
Report of	Commissioning Director, Adults and Health & Director, Adults & Communities
Wards	All
Status	Public
Urgent	No
Key	No
Enclosures	Appendix A: Adults and Safeguarding Committee Commissioning Plan - Annual Performance Report 2015/16 Appendix B: Adults & Communities – Detailed performance summary 2015/16 Appendix C: Draft Local Account – Adult Social Care (<i>to be published as supplement</i>)
Officer Contact Details	Kirstie Haines – Strategic Lead, Adults and Health Tel: 0208 359 2781. Email: Kirstie.Haines@Barnet.gov.uk James Mass – Assistant Director, Community & Wellbeing Tel: 0208 359 4610. Email: james.mass@barnet.gov.uk

Summary

In March 2015, the Adults and Safeguarding Committee approved a five-year Commissioning Plan for the period 2015-20, which set out the Committee’s priorities and outcome measures for the following service areas – Adults with Learning Disabilities, Working Age Adults with Mental Health Needs, Disabled Working Age Adults with Physical Disabilities or Sensory Impairments, Older People: Feeling Well, Enjoying Life, Older People: Social Care Services, Carers, Leisure Services and Cross-cutting Issues. All Theme Committees agreed a five-year Commissioning Plan.

This report provides a review of the Adults and Safeguarding Committee Commissioning Plan for 2015/16 (Appendix A), against the commissioning intentions and outcome measures. The report includes benchmarking information and performance analysis, in

response to the resolution made by the Adults and Safeguarding Committee at its June meeting.

Local Accounts are annual reports intended for local residents, service users and their carers, which set out the work and achievements of the local authority's adult social care service. Barnet's Local Account is submitted to the Adults and Safeguarding Committee for approval, prior to publication.

Recommendations

1. That the Committee notes and comments on progress against the Adults and Safeguarding Committee Commissioning Plan in 2015/16 (Appendix A).
2. That the Committee approves the annual Local Account for publication on the Council's website.

1. WHY THIS REPORT IS NEEDED

1.1 The **Adults and Safeguarding Committee Commissioning Plan 2015-20** was approved in June 2015. It sets strategic priorities and outcome measures for the following service areas – Adults with Learning Disabilities, Working Age Adults with Mental Health Needs, Disabled Working Age Adults with Physical Disabilities or Sensory Impairments, Older People: Feeling Well, Enjoying Life, Older People: Social Care Services, Carers, Cross-cutting Issues and Leisure Services – with targets to be refreshed annually. The strategic priorities are:

a) Alternative ways to deliver services, in partnership with other organisations and residents

- Integration of care and health services where this delivers the best outcomes.
- Develop a 0-25 disabilities service to bring together health, care and education and support the development of more effective relationships of trust with families.
- Better support for individuals with mental health issues to retain or regain employment and suitable housing that supports their well-being.
- Stronger integration with customer services and public health to help people better self-manage and plan to age well.

b) Implementing the Care Act 2014

- Re-modelling the approach to assessment and support planning to meet the increase in demand predicted to arise from the new cap on care costs¹.
- Improved advice and advocacy services with a greater availability of helpful information to support ageing well.
- Greater support to enable carers to continue in their caring role.

¹ The cap on *care costs* was due to be introduced in April 2016, but has now been *delayed* to April 2020

c) Going further with personalisation – developing more creative approaches to meeting care needs

- More creative and personalised support plans.
- Increased use of new support and enabling technologies.
- A shift from specialist segregated services to community settings.
- Support to remain at home for longer.

d) Focus on efficiency, effectiveness, and impact

- Challenge all services we commission, our own workforce and our partners to evidence the impact they have.
- Explore alternative delivery models for adult social care to maximise the Council's ability to achieve the above.

Review of Commissioning Plan for 2015/16

1.2 Appendix A provides a review of the Commissioning Plan for 2015/16, against each of the commissioning intentions and outcome measures.

- **38** commissioning intentions are included in the Commissioning Plan. **58% (22)** are Green, **39% (15)** are Green Amber, and **3% (1)** is Red.
- Adults and Communities Delivery Unit reported against a total of **42** 'delivery' outcome measures (indicators) to Performance & Contracts Management Committee each quarter in 2015/16. **26** of these are included in the Commissioning Plan, as well as **three** indicators relating to sport and physical activity and which delivered by the Sports and Physical Activity Team in the Commissioning Group.
- Of the 29 indicators included in the Commissioning Plan, **25** received a RAG rating at the end of the year. **40% (10)** were "on or above target" and **60% (15)** were "off target". **24** indicators were given a 'direction of travel' (DOT) status. **54% (13)** have an "improved or maintained" DOT; **38% (9)** have a "worsened" DOT and **8% (2)** have stayed the same.

1.3 Appendix B summarises Adults & Communities' performance against all 42 'delivery' indicators to give Members a full picture of performance in 2015/16.

1.4 This summary includes the results of a benchmarking exercise carried out against comparable local authorities and the London and national average results for all indicators where this data is available. The Council will use this data to identify and learn from best practice in those local authorities who perform strongly against relevant indicators. For example, work has already been carried out to investigate the reasons for LBs Bexley and Hounslow's strong performance in getting people with learning disabilities into employment and some of the findings from this work are included in the detailed commentary against each 2015/16 performance indicator set out in section 3 of Appendix B.

1.5 Analysis of the benchmarking data and Barnet's comparator group indicate that there is not a single authority which performs strongly across all indicators. However, there are a range of authorities which perform better in indicators relevant to our commissioning plans and from which Barnet could

learn. Officers will review practice in other councils to ascertain what other actions Barnet could take. Areas of focus will include: mental health employment; independent living; integrated care outcomes; survey outcomes.

1.6 Appendix C contains Barnet's annual Local Account for 2015/16. The Local Account covers some of the same material as this report and Appendices A and B but is intended primarily for service users, carers and local residents. The Local Account describes:

- the Council's work against local and national priorities
- how services were developed during the year and areas the Council is working to improve
- challenges faced, and how these are being addressed
- feedback from service users and carers on their experience of Adult Social Care services.

1.7 The Local Account includes sections covering support to individuals and to carers, how the Council works with partners to keep people safe, the approach to improving the quality of social care services and how the Council listens to people and keeps them informed.

Adults with Learning Disabilities

1.8 Work has been undertaken with employers and providers to improve the supported employment pathway for people with learning disabilities. Through Challenge Sessions with the council, Your Choice Barnet (YCB) agreed to redesign their current day care model to focus on enablement and employment. People have been supported in to employment with companies such as Tesco, Marks and Spencers, Zara and Barnet Hospital. The council commissioned National Development Team for Inclusion (NDTI) to review the current employment offer, engaging with local employment support providers and day care providers to help identify areas for improvement and development. The council currently commissions Barnet Mencap to provide employment support to people with low level learning disabilities and/or autism, as part of the Bright Futures Service, however there are on-going challenges in meeting the target for adults with learning disabilities, who are care act eligible, in paid employment.

- The intention of the employment programme is to redesign the supported employment offer for service users with learning disabilities or mental health issues to improve its effectiveness and developing the market to increase and diversify the range of employment services available. Frontline practitioners will receive information about these services and training on referrals by December 2016. A major part of this is the development of the Your Choice Barnet enablement and employment service, which will be developed and piloted in 2016, prior to the new contract in 2017.
- In addition, the Council is using its purchasing power to secure employment opportunities with its suppliers for adults with learning disabilities, mental health issues, or physical or sensory needs, with additional requirements and

performance measures around employing people with additional needs incorporated into appropriate contracts by April 2017. Barnet will also aim to lead by example by successfully recruiting and retaining people from the above groups, revising its HR policies and procedures and rolling out training and support to managers in or before October 2016.

- The target for adults with learning disabilities living in stable accommodation has been met. The council has taken a lead on the West London Alliance (WLA) collaborative commissioning for supported living and residential care; and a new accommodation strategy for vulnerable adults is in development. Market shaping work has been taking place to facilitate market engagement in the new accommodation offer, including direct engagement with private landlords.
- Work has been progressing to develop a Social Impact Bond (SIB). A technical support provider (Social Finance Ltd.) has been appointed to help establish a full feasibility position, including the financial business case, target cohort and interventions to deliver the SIB.
- The Council has been working with LB Harrow to implement a Shared Lives scheme in Barnet, which aims to support adults with care needs to remain in their local community, living with host carers in a family environment. Shared Lives carers are ordinary people in the community who host an adult in their own home, for long or short periods of time. The people they support may be older or working age, have a physical or learning disability, mental health problem or other need. Carers are vetted, trained and carefully matched with a suitable adult(s). Many of the people who use the service would otherwise live in residential settings and instead are able to live within a family and community setting.
- The Council appointed Barnet Group, following a competitive procurement exercise, to develop a Personal Assistants (PA) service. The service will recruit, vet and train PAs then match them with individuals looking for a service. The team will then support the PA to ensure a sustained match.
- Significant amounts of work have been done with the cohort of 13 adults subject to the Winterbourne View Concordat. The Winterbourne View Steering Group meets monthly to monitor progress and the action plan is being reviewed to include identifying patients at risk of admission, care pathways and how services work with people before crisis. Four individuals are currently very close to planned discharge. The action plan includes work to investigate and stimulate this section of the market, working closely with health colleagues and Barnet has just succeeded in a bid to NHS England for funding for a 'Crisis crash pad', being awarded £300k.

1.9 Working Age Adults with Mental Health Needs

- There have been on-going challenges in meeting the target for adults with mental health needs in paid employment. This indicator follows a national definition which enables the Council to compare its performance against other boroughs. The cohort included in the indicator is made up of a number of people with whom the Council does not work directly but who are clients of the mental health trust. This group is all people supported through the Care Programme Approach, including those whose needs that require inpatient care. [include numbers of CPA totals and social care total]

- Two community employment support services (MAPS and IPS) have been running since 2014 and between them have supported 129 service users into employment in 2015/16. Both services have recently been positively evaluated against a range of outcomes by the National Development Team for Inclusion. The Council's 'Network' mental health service supported a further 51 service users with support needs into employment over the course of the year.
- IPS is the mental health employment support service which works with people who use secondary mental health services. It has workers co-located with frontline mental health teams and an exercise is being undertaken in 2016/17 to map and track referrals into the service, to ensure social care service users are being referred in at the expected rate.
- As outlined in paragraph 1.3 above, a project to implement a new supported employment offer for the Borough for adults with mental health needs and for those with learning disabilities.
- The target for adults with mental health needs living in stable accommodation has been met. As outlined in paragraph 1.3 above, a new accommodation strategy for vulnerable adults is in development; and work to undertake a collaborative approach with NCL and CCGs has commenced.
- The Shared Lives and Personal Assistants schemes, described above in paragraph 1.3, provide a wider range of support options for people with mental health needs.
- The Network, is a multi-disciplinary team focussed on enabling and empowering people who are struggling with their mental wellbeing. It is co-funded by Barnet Council and Barnet, Enfield and Haringey Mental Health Trust and 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.
- The Barnet Network Model is the core strength based foundation for the Barnet Enablement Pathway Transformation project. The ethos of the Barnet Network is to reduce dependence on care services, resulting in staff and service users becoming experts in setting standards for care and support in the field of mental health across Barnet. The Network model specifically delivers strength based practice, improving self-management by placing the individual at the centre of support plans, evidenced by the use of person centred support tools such as the single page profile and the recovery star tool which concentrates on how a person can achieve their personal goals.
- The success of the model relies on placing value on individual service users achieving individual outcomes. The outcomes will very much depend on the individual goals which may include employment, accessing the community, improving relationships with family or becoming more self-reliant and managing their conditions. Relationships between the service users and staff at the Barnet Network are built on a culture of dignity, empathy and compassion, evidenced by the consistent clients, staff and professional's feedback and stringent monitoring systems.
- To enable the person centred models to be used more broadly by staff within the community teams, monthly practice forums have been established for Mental Health Social Work staff. These have looked at strength based practice as well as improving practice relating to statutory duties. Joint training

between the Trust and social care on the enablement model has been rolled out over the last year.

1.10 Disabled Working Age Adults with Physical Disabilities or Sensory Impairments

- The Council's 0-25 disability service went live in its first phase in October 2015. This brought together the Transitions Service (previously based in Adults and Communities) with the Disabled Children's Team (in Family Services) to provide greater continuity of support to young people and their families. The working processes and procedures between Family Services and Adults and Communities on the 0-25 disabilities service have been developed to better bring health, care and education services together for this group. Further service development to ensure that the full benefits of the new ways of working are realised is being carried out.
- New specialist home support services have been developed through a retendering process. The personal assistants (PAs) service is also available for this group.
- The Council is working in partnership with the Barnet Group to improve the range of accommodation suitable for wheelchair users. 32 units of accommodation are being developed over the next four years, which will be used by people with a range of needs, including young disabled people. The developments in the YCB contract to be piloted later in 2016 will provide an enablement and employment service for working age disabled people who use the Independent Living Service.

1.11 Older People: Feeling Well and Enjoying Life

- Barnet will experience one of the largest increases in elderly residents out of all London Boroughs over the next five to ten years. This is because the life expectancy of our residents is growing due to the general good health of our population. The Commissioning Plan focuses on keeping older people healthy and well for longer by providing access to advice, interesting activities and opportunities for working or volunteering.
- To support the development of opportunities for older people to continue working or offer mentoring, the Council's Local Infrastructure Organisation contract was mobilised in early 2015. Within this, Groundwork London were appointed to support implementation of the Volunteering Strategy, helping older people develop their social networks and community connections.
- In 2015/16, through our prevention and wellbeing tiers of our Health and Social Care Integration Model we:
 - Trained over 25 pharmacies to become Healthy Living Pharmacies
 - Began engagement with GP practices to deliver Community Centred Practice initiative
 - Participated in a five borough pilot, Visbuzz, bringing video calling to isolated older people (will continue in 2016/17)
 - Developed our vision for social prescribing and MECC in Barnet (to be delivered in 2016/17)

- A key element of our prevention offer, detailed in our Better Care Fund plans, is our community development programme, Ageing Well. The Ageing Well neighbourhood programme works with residents in identified localities to develop sustainable local activities and services to support people to remain independent and increase wellbeing, stimulating the increased use of social capital through effective use of volunteers and encouragement of peer support and also through encouraging and supporting local leadership. Services are targeted to prevent people required support from health and social care services. Examples of activities include computer clubs, table tennis, wellbeing cafes, men in shed projects and Silver Service (discounted meals at local food outlets). In 2015/16 over 6000 people engaged in activities across the 4 neighbourhoods, in 2016-17, the programme will be extended to 6 neighbourhoods.
- The Neighbourhood Model of Services for Older People provides a wide range of activities that help older people stay healthy, get home from hospital quickly and make sure that older people, and their carers, do not become socially isolated. Services include lunch clubs, support to people with dementia and their carers, befriending, later life planning and activities to reduce the risk of falls. These services are designed and managed by older people and this helps us to make sure that we are providing services they will use. In 2015-2016 5,600 older people used these services provided by 13 different voluntary sector organisations.
- Telecare is a service that uses a combination of alarms, sensors and other equipment to help people live independently. This is done by monitoring activity changes over time and will raise a call for help in emergency situations, such as a fall, fire or a flood. Telecare therefore combines monitoring equipment with a monitoring service. A telecare user may activate their own alarm if they use a pendant. In 2015/16 479 privately funding individuals had a new telecare installation to support their independence and well-being.
- In 2016/17, Adults & Communities is implementing a 'strengths-based working' approach which aims to support individuals to consider the assets and resources already available to them within their homes or communities to meet their needs, as well as those which could be provided through a funded service. Public health literature argues that such approaches can help to promote individual independence and resilience and increase health and wellbeing.

1.12 Older People: Social Care Services

- Barnet's Health and Wellbeing Strategy sets out the Borough's ambition to make Barnet 'a place in which all people can age well'.
- The Council's integrated care model for older people and those with long term conditions continues to provide support to those with the highest levels of need. The Barnet Integrated Locality Team (BILT) expanded in 2015/16 to cover a third of the borough and work took place during 2015/16 to commission the service borough wide. The other elements of the integrated care model: community point of access; rapid response team; multi-disciplinary case conferences, risk stratification and care navigation,

continued to work throughout the year. In 2016/17, BILT will cover the entire Borough from quarter two. .

- The rate of permanent admissions to residential and nursing care homes (age 65 plus) is reducing; and the proportion of older people accessing enablement is increasing along with the proportion who leave enablement without a long-term care package.
- To help ensure a range of suitable housing options are available for older people, work has been undertaken to develop extra care housing at Moreton Close with Barnet Homes. The intention is to build two further extra care schemes.
- Continuing work across all aspects of the Disabled Facilities Grant (DFG) process has led to year on year growth in the number of adaptations in Barnet of 16% from 2014/15 to 2016/17. In addition to continually increasing the overall numbers of DFG adaptations undertaken, significant work is being undertaken to ensure DFGs are recommended for those recipients that will experience the greatest benefits in terms of enablement and independence.
- Dementia community services, such as the dementia cafes, the dementia advisors team, and the memory assessment services, continued to operate. In addition, the Council began work with partners to become a 'dementia friendly' borough.
- Adult Social Care maintained its focus on hospital discharges, with performance remaining consistent despite growing demand from hospitals. . Delayed discharges grew nationally. There are on-going challenges in relation to a greater number of referrals, from acute care, of older, frailer people with more complex need, matched by a lack of capacity in the homecare market. Measures have been put in place to ensure that patients are not delayed waiting for a social care assessment, through a new 'discharge to assess' scheme and that discharge notifications are triaged to prioritise cases which require immediate action from social care teams.

1.13 Carers

- The Care Act 2014 brought with it new duties of assessment and support for carers.
- There are on-going challenges in meeting targets for carers. Satisfaction with social services and reported quality of life among carers are both below target; and the number of carers assessments resulting in information, advice and services has fallen on the previous year. This has been affected by staffing issues in Adults and Communities, which have reduced capacity to carry out carers' assessments alongside other priority activities such as reviews. In addition, some carers choose to attend the Barnet Carers Centre, where they can also get information, advice and support, instead of coming to the council.
- Staff education sessions have been held, led by with carers' service providers, to improve practitioners' knowledge of carers' needs and the resources available to support them. The carers' assessment forms have been improved.
- The new carers' strategy was agreed by Policy and Resources and a new carers' service provider has been commissioned, to be launched in October

2016. A specialist service for carers of people with dementia has already been launched and is identifying its initial cohort.

- The Council is also focusing on improving carers' employment, with an employer engagement programme planned and work underway to improve the Council's own role as a carers' employer.

1.14 Leisure Services

- The Council owns five leisure centres at Burnt Oak, Hendon, Finchley, Cophall and Church Farm with their management sub-contracted out to Greenwich Leisure Limited (GLL) under their 'Better' brand (a charitable trust). The contract for their management of the leisure centres runs until December 2017 when it will be re-commissioned.
- A new Sport and Community Development Plan has been published.
- Leisure Centre usage increased to 516,236 in January – May 2016, a 15.2% increase on the same period last year
- The SHAPE programme (delivered in Burnt Oak and Colindale, targeting 14 – 19 year olds) has been recognised by the National Lottery with the project being shortlisted from 600 national applications to the final 14 via their annual award programme.
- Policy & Resources Committee Approval of sport and physical activity paper on 15th December 2015, outlining approval of core facilities mix at Barnet Cophall and the selected location of Victoria Recreation Ground.
- Two resident engagement sessions were facilitated in March 2016, outlining initial concept presentations of Barnet Cophall Leisure Centre and New Barnet Leisure Centre.
- The Council has worked with GLL to produce a Performance Management Framework in addition to introducing a Community Sport Delivery Plan for 2016. The strategic documents have been shaped to ensure that there is key alignment to the Health & Wellbeing Strategy 2015-2020.
- The Council is currently preparing for procurement of the leisure centres contract with stakeholder and partner workshops running throughout May and June and resident engagement planned for July 2016.

Cross-cutting Issues

1.15 Engagement

- Service users and carers continue to have a voice and contribute to the design and delivery of services
- A new service user engagement model was launched in April 2016.
- Older people have been involved in the expansion of the Altogether Better project and design of the refreshed Neighbourhood Offer; and carers have been actively engaged in helping to develop the new Dementia Carer Project and Carers and Employment work programmes referred to above.
- Consultation has commenced for the ADM and New Operating Model.

1.16 Deprivation of Liberty Safeguards

The number of Deprivation of Liberty Safeguards (DoLS) applications has vastly exceeded that seen in previous years (1,357 against 674 in 2014/15). Comparator exercises suggest other boroughs are also seeing huge increases in the numbers of applications but not at the same level. The higher increases in Barnet may be due to the fact that Barnet has the largest number of register care beds for older people in London. Along with other Councils, adult social care faces challenges in sourcing sufficient Best Interest and psychiatric assessors to meet this level of demand and process applications within the statutory timeframes. The Council is exploring potential measures to manage this demand more effectively. Other local authorities are reducing the seniority level required for authorisation of an application and/or prioritising cases. The Law Commission is in the process of finalising its review of the DoLS regime, as it is recognised as not being fit for purpose. Replacement legislation is planned to come before Parliament later in 2016.

2 REASONS FOR RECOMMENDATIONS

- 2.1 A key element of effective strategic and financial management is for the council to have comprehensive business plans in place that ensure there is a clear strategy for addressing future challenges, particularly in the context of continuing budget and demand pressures (resulting from demographic and legislative changes), delivering local priorities and allocating resources effectively.

3 ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

- 3.1 There is no statutory duty to publish Committee Commissioning Plans but it is considered to be good practice to have comprehensive business plans in place for each Committee – which set out priorities and how progress will be measured – to ensure that the council’s vision for the future is clearly set out and transparent.

4 POST DECISION IMPLEMENTATION

- 4.1 Any revisions to the Commissioning Plan will be communicated internally and with key stakeholders.

5 IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

- 5.1.1 This report invites Members to note progress on the Commissioning Plan in 2015/16.

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

5.2.1 In addition to continuing budget reductions, demographic change and the resulting pressure on services pose a significant challenge to the council. The organisation is facing significant budget reductions at the same time as the population is increasing, particularly in the young and very old population groups.

5.2.2 The Commissioning Plan has been informed by the council's Medium Term Financial Strategy, which sets out the need to make savings of £81m from 2015-20.

5.3 Social Value

5.3.1 The Public Services (Social Value) Act 2013 requires people who commission public services to think about how they can also secure wider social, economic and environmental benefits. Before commencing a procurement process, commissioners should think about whether the services they are going to buy, or the way they are going to buy them, could secure these benefits for their area or stakeholders.

5.4 Legal and Constitutional References

5.4.1 All proposals emerging from the business planning process must be considered in terms of the council's legal powers and obligations, including its overarching statutory duties such as the Public Sector Equality Duty.

5.4.2 The [council's Constitution, in Part 15 Annex A, Responsibility for Functions, states](#) the functions of the Adults and Safeguarding Committee, including:

(12) To receive reports on relevant performance information on Delivery Units providing services under the remit of the Committee.

5.5 Risk Management

5.5.1 The council has an established approach to risk management. Key corporate risks are assessed regularly and reported to Performance and Contract Management Committee on a quarterly basis.

5.6 Equalities and Diversity

5.6.1 The general duty on public bodies is set out in section 149 of the Equality Act 2010.

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

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

- c) Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.
- 5.6.3 Having due regard to the need to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, to the need to:
- a) Remove or minimise disadvantages suffered by persons who share a relevant protected characteristic that are connected to that characteristic;
 - b) Take steps to meet the needs of persons who share a relevant protected characteristic that are different from the needs of persons who do not share it;
 - c) Encourage persons who share a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.
- 5.6.4 The steps involved in meeting the needs of disabled persons that are different from the needs of persons who are not disabled include, in particular, steps to take account of disabled persons' disabilities.
- 5.6.5 Having due regard to the need to foster good relations between persons who share a relevant protected characteristic and persons who do not share it involves having due regard, in particular, the need to tackle prejudice; and promote understanding.
- 5.6.6 Compliance with the duties in this section may involve treating some persons more favourably than others but that is not to be taken as permitting conduct that would otherwise be prohibited by or under this Act.
- 5.6.7 The relevant protected characteristics are age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex, and sexual orientation.
- 5.6.8 It also covers marriage and civil partnership with regard to eliminating discrimination.
- 5.6.9 In agreeing the Corporate Plan, the council is setting an updated strategic equalities objective and reiterating our commitment to delivering this. The strategic equalities objective is as follows:
- Citizens will be treated equally, with understanding and respect, and will have equal access to quality services which provide value to the tax payer.

5.7 Consultation and Engagement

- 5.7.1 The original Corporate Plan and Commissioning Plans were informed by extensive consultation through the Budget and Business Planning report to Council (3 March 2015).
- 5.7.2 The consultation aimed to set a new approach to business planning and engagement by consulting on the combined package of the Corporate Plan, Commissioning Plans, and budget. In particular it aimed to:

- Create a stronger link between strategy, priorities and resources
- Place a stronger emphasis on commissioning as a driver of the business planning process.
- Focus on how the Council will use its resources to achieve its Commissioning Plans.

5.7.3 Consultation on the Council's plans for 2016/17 was undertaken following the decision by Policy and Resources Committee to proceed to consultation on the 2016/17 Budget, on 16 December 2015.

6 BACKGROUND PAPERS

6.1 Adults and Safeguarding Committee Commissioning Plan 2015-20.

Appendix A: Adults & Safeguarding Committee Commissioning Plan - Annual Performance Report 2015/16

The tables below provide a review of the Adults & Safeguarding Committee Commissioning Plan for 2015/16 against each of the Commissioning Intentions and outcome measures for the following service areas:

- Adults with Learning Disabilities
- Working Age Adults with Mental Health Needs
- Disabled Working Age Adults with Physical Disabilities or Sensory Impairments
- Older People: Feeling Well, Enjoying Life
- Older People: Social Care Services
- Carers
- Leisure Services
- Cross-cutting Issues

Adults with Learning Disabilities			
Commissioning Intention	RAG	Commentary	Service
Implement a 0-25 disabilities service that better brings together health, care and education to enable young people with disabilities to fulfil their potential to be an active citizen and improves relationships between families and the local authority.	Green Amber	<p>A service level agreement (SLA) specifying the working processes and procedures between Family Services and Adults and Communities on the 0-25 disabilities service is now in place. Phase one is now closed with a final closure report being drafted. Phase 2 of the project will be delivered by Family Services to continue to embed the new ways of working.</p> <p>The work to agree the 0-25 disabilities service budget is being updated in readiness to transfer the agreed service funding from Adults and Communities to Family Services Delivery Unit.</p> <p>The Social Impact Bond (SIB) development work is underway. A technical support provider (Social Finance Ltd.) with extensive experience in developing SIBs has been procured successfully and work is underway to establish the full SIB feasibility position, in particular the financial business case, the target cohort and the interventions to deliver the SIB.</p>	Commissioning Group

Commissioning Intention	RAG	Commentary	Service
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.	Green Amber	The Accommodation Strategy for vulnerable adults is in development. Projected need across client groups has been produced. Barnet is leading West London Alliance (WLA) collaborative commissioning for supported living and residential care. Market shaping work will be scheduled in Q1 2016/17 to facilitate market engagement in a new accommodation offer.	Commissioning Group
Develop a more creative and cost effective review and support planning process. Ensure that this considers how technology can enable people with learning disabilities to live more independently.	Green Amber	A pilot has now commenced and the Adults and Safeguarding Committee has authorised a procurement of a new managed telecare service to help rapidly transform the service in 16/17.	Commissioning Group
<p>Improve the carers' offer and support planning process to ensure carers feel able to continue to support an individual for as long as they can.</p> <p>This should enable a reduction in the number of carer breakdowns and improved family satisfaction from sustaining the family environment.</p>	Green Amber	The new carers' strategy has been launched. Staff education sessions have been run with carers' providers in April, May and June 2016 to promote awareness of support options on offer. Carers' assessment forms are being redesigned to be more user-friendly and support an increase in the numbers of assessments undertaken	Adults & Communities
Stimulate the market to encourage providers who can effectively focus on enablement and personal development.	Green	Adults & Communities' Care Quality Team is working to commission enablement services.	Commissioning Group
Develop the employment support offer for adults with learning disabilities and ensure there are sufficient employment opportunities available in the Borough. Raise employment aspirations as a key component of the review and support planning process and increase the proportion of adults with learning disabilities in employment.	Green Amber	In 2015/16, the Council worked with employers and providers to implement a supported employment pathway for people with autism/learning disabilities. The provider (Barnet Mencap) has worked with a wide range of employers to secure opportunities and help employers support these individuals.	Commissioning Group

Ref		Indicator	Period covered	2014/15 Result	2015/16 Target	2015/16 Result	Direction of Travel	Benchmarking	Service
CPI	AC/S4	Proportion of adults with learning disabilities in paid employment	As at 31 March	9.4%	10.6%	9.2% (R)	Worsening	Comparator group 9.4% (2014/15, ASCOF)	Adults & Communities
CPI	AC/S3	Proportion of adults with learning disabilities who live in stable accommodation	As at 31 March	59.5%	60.0%	63.6% (G)	Improving	Comparator group 68.3% (2014/15, ASCOF)	Adults & Communities

Working Age Adults with Mental Health Needs			
Commissioning Intention	RAG	Commentary	Service
<p>The re-focusing of social care on recovery, social inclusion and enablement. This will require a redefining of the integrated services model with the mental health trust to enable both parties to focus on core competencies and develop effective partnership practice.</p> <p>A smaller number of social workers would be based within the Mental Health Trust to support effective crisis resolution and effective management of people subject to community treatment orders and section 117.</p>	Green	Work underway to implement the new operating model in 2016/17.	Adults & Communities

Commissioning Intention	RAG	Commentary	Service
<p>Review delivery models to ensure that the social work service for working age people with mental health issues can best focus on the quality of services and strengthen the voice of both workers and service users. We will have a model for social work which is commissioned to promote recovery, maximise inclusion and reduce long term care costs. This will require working co-productively and innovatively with local communities, primary care and housing providers to support community capacity, personal and family resilience, earlier intervention and active citizenship.</p>	<p>Green</p>	<p>A new employment project has been put in place from 1st April 2016. Work with NDTi has commenced to assess provider lead models. Review of daycare contracts has commenced.</p>	<p>Commissioning Group</p>
<p>Introduce a 'Consultant Social Worker' role to work with acute mental health services and children's social care. The role will provide independent review and challenge to support plans and proposed changes to ensure all appropriate support opportunities are explored and provided in situations characterised by high levels of social, family and interpersonal complexity, risk and ambiguity.</p>	<p>Green</p>	<p>Work underway to implement the new operating model in 2016/17</p>	<p>Adults & Communities</p>
<p>Align social work delivery model with community development, whole family approaches and wider wellbeing, particularly focusing on tackling social exclusion and worklessness.</p>	<p>Green</p>	<p>Work underway to implement the new operating model in 2016/17</p>	<p>Adults & Communities</p>

Commissioning Intention	RAG	Commentary	Service
<p>Increase the range of sustainable accommodation options for people with mental health problems in conjunction with the NHS. There is a compelling evidence base that where we live has a significant impact on our mental health. For the NHS, inadequate access to housing increases costs and demand for acute services.</p> <p>Supported housing for people with a mental illness could benefit the NHS year in and year out to a suggested annualised return of investment of 7% when compared to inpatient care or residential provision.</p>	Green Amber	<p>The Accommodation Strategy is at draft stage – consultation with providers and clients has commenced. Work to undertake a collaborative approach with NCL and CCGs has commenced.</p> <p>The Shared Lives scheme has been launched, in partnership with LB Harrow..</p>	Commissioning Group
Promoting mental well-being and reducing stigma through establishing joint commissioning of social care with public mental health provision..	Green Amber	A new mental health enablement model is now in operation, with a clear focus on employment and accommodation. Joint work with the CCG on services to help mental health users remain in the community is progressing.	Commissioning Group

Ref	Indicator	Period covered	2014/15 Result	2015/16 Target	2015/16 Result	Direction of Travel	Benchmarking	Service
CPI AC/S5	Percentage of adults with mental health needs in paid employment	As at 31 March	5.7%	7.0%	4.8% (R)	Worsening	Comparator group 7.0% (2014/15, ASCOF)	Adults & Communities
CPI AC/S6	Percentage of adults with mental health needs who live in stable accommodation	As at 31 March	70.9%	75.0%	81.0% (G)	Improving	Comparator group 79.6% (2014/15, ASCOF)	Adults & Communities

Disabled Working Age Adults with Physical Disabilities or Sensory Impairments			
Commissioning Intention	RAG	Commentary	Service

Commissioning Intention	RAG	Commentary	Service
Implement a 0-25 disabilities service that better brings together health, care and education to enable young people with disabilities to fulfil their potential to be an active citizen and improve relationships between families and the local authority	Green Amber	<p>A service level agreement (SLA) specifying the working processes and procedures between Family Services and Adults and Communities on the 0-25 disabilities service is now in place. Phase one is now closed with a final closure report being drafted. Phase 2 of the project will be delivered by Family Services to continue to embed the new ways of working.</p> <p>The work to agree the 0-25 disabilities service budget is being updated in readiness to transfer the agreed service funding from Adults and Communities to Family Services Delivery Unit.</p> <p>The Social Impact Bond (SIB) development work is underway. A technical support provider (Social Finance Ltd.) with extensive experience in developing SIBs has been procured successfully and work is underway to establish the full SIB feasibility position, in particular the financial business case, the target cohort and the interventions to deliver the SIB.</p>	Commissioning Group
Increase the supply and take-up of supported living and independent housing opportunities supporting transitions from those currently in residential settings. This should lead to improved outcomes for adults supported to live more independent lives.	Green Amber	The Accommodation Strategy for vulnerable adults is in development. Projected need across client groups has been produced. Barnet is leading West London Alliance (WLA) collaborative commissioning for supported living and residential care. Market shaping work will be scheduled in Q1 2016/17 to facilitate market engagement in a new accommodation offer.	Commissioning Group
Develop a more creative and cost effective review and support planning process. Ensure that this considers how technology can enable people with disabilities to live more independently.	Green Amber	A pilot has now commenced and the Adults and Safeguarding Committee has authorised a procurement of a new managed telecare service to help rapidly transform the service in 16/17.	Commissioning Group
Commission high quality flexible specialist home support services including personal assistants (PAs).	Green	The Personal Assistants service has been mobilised and is now accepting referrals.	Commissioning Group

Ref	Indicator	Period covered	2014/15 Result	2015/16 Target	2015/16 Result	Direction of Travel	Benchmarking	Service
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Ref		Indicator	Period covered	2014/15 Result	2015/16 Target	2015/16 Result	Direction of Travel	Benchmarking	Service
CPI	AC/C14	Permanent admissions to residential and nursing care homes, per 100,000 population age 18-64	Apr 2015 - Mar 2016	13.40	13.40	10.63 (G)	Improving	N/A (benchmarking data uses new definition)	Adults & Communities
SPI	AC/S16	Proportion of people with a Direct Payment	As at 31 March	29.4%	41.0%	40.1% (GA)	Improving	Comparator group 28.4% (2014/15, ASCOF)	Adults & Communities

Older People: Feeling Well, Enjoying Life

Commissioning Intention	RAG	Commentary	Service
Develop improved information, advice and planning services	Green	Service development work continues, including refresh of website and review of all documents. Tender currently in process to improve information and advice for carers.	Adults & Communities
Promote digital inclusion, assistive technology, equipment, adaptations	Green Amber	Pilot of new telecare applications is currently underway. June's Adults & Safeguarding Committee agreed a new approach to telecare provision and authorised procurement for the new model to go live in 2017/18..	Commissioning Group
Increase social networks and community connections	Green	The Groundwork contract and CommUNITY Barnet contracts have been put in place. The Groundwork contract is supporting the operationalisation of the Volunteering Strategy; and a community forum has been set up. In 2016/17, the Council will further review these contracts to ensure closer alignment between the Community Participation Strategy and activity delivered through these contracts.	Commissioning Group
Commission and influence the development of opportunities for older people to continue working or offer mentoring	Green	The Local Infrastructure Organisation contract is underway and delivering against performance targets	Commissioning Group
Develop a joined up social care prevention offer in line with the Care Act 2014 which is easy to recognise and use	Green	Work to deliver preventative elements of the Commissioning Plan is ongoing.	Adults & Communities
Commission the best delivery vehicle possible to support older people who need a little bit of	Green	Tiers 1 and 2 of the implementation plan have been developed.	Commissioning Group

Commissioning Intention	RAG	Commentary	Service
help			
Commission an integrated health and social care service for those with long term conditions..	Green Amber	Barnet Integrated Locality Team is mobilising across the borough. The service has been piloted, supporting patients, service users and carers in the west of the borough; providing a case management and navigation approach to enabling those accessing the service to be supported in the community. In order to ensure that those who will benefit the most are able to access the expanded service, a population tool has been used to identify those profiled as having the highest risk of an unscheduled attendance, a group which the service will work with over the year..	Commissioning Group

Ref	Indicator	Period covered	2014/15 Result	2015/16 Target	2015/16 Result	Direction of Travel	Benchmarking	Service	
SPI	CG/S17	Number of older people who take up leisure services – participation of over 45s	Jan – Mar 2016	19.0%	20.4%	19.8%	Improving	N/A	Commissioning Group
	AC/S7	Proportion of people who use services, who reported that they had as much social contact as they would like	Apr 2015 - Mar 2016	41.1%	45.0%	45.0% (G)	Improving	Comparator group average 43.1% (LBB in top 50%)	Adults & Communities
SPI	AC/S17	Number of new telecare packages installed	Apr 2015 - Mar 2016	216	430	889 (G)	Worsening	N/A	Adults & Communities
SPI	AC/S18	Percentage of service users receiving on-going services with telecare	Apr 2015 - Mar 2016	13.0%	17.0%	12.7% (R)	Worsening	N/A	Adults & Communities

Older People: Social Care Services

Commissioning Intention	RAG	Commentary	Service
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Commissioning Intention	RAG	Commentary	Service
Commission an integrated health and social care service for frail older people and those with long term conditions. Consider alternative models of delivery to ensure best fit.	Green Amber	The newly mobilised integrated locality team provides an alternative delivery approach for managing both carers and service uses in the community. The service comprises of a joint team who will use a multi-disciplinary approach to jointly assess and support patients..	Commissioning Group
Increase housing choices for older people where the existing accommodation is not suitable	Green	Development of Moreton Close to come on stream in 2017 – extra care. Work has commenced for options for extra care housing on the Brent Cross/ Cricklewood scheme.	Commissioning Group
Commission high quality flexible specialist home support services including personal assistants	Green	The Personal Assistance service has been mobilised and will be accepting referrals in Q1 2016/17.	Commissioning Group
Increase the use of enablement services for all older people	Green	Enablement triage service now in place to ensure suitability of all referrals.	Adults & Communities
All support plans will increase the ability of older people to access community resources and social/family networks	Green	New strength based programme of social work is helping to achieve this. Panel process is providing additional scrutiny to ensure practitioners are considering community support options in support planning.	Adults & Communities

Ref	Indicator	Period covered	2014/15 Result	2015/16 Target	2015/16 Result	Direction of Travel	Benchmarking	Service	
CPI	AC/S10	Proportion of people who feel in control of their own lives	Apr 2015 - Mar 2016	68.5%	75.5%	68.4% (R)	Worsening	Comparator group average 71.8% (LBB in bottom 25%)	Adults & Communities
	AC/S19	Proportion of people who leave enablement with a no care package	Apr 2015 - Mar 2016	70.0%	63.0%	73.0% (G)	Improving	N/A	Adults & Communities
	AC/S11	Proportion of older people remaining at home 91 days after discharge	Apr 2015 - Mar 2016	71.9%	81.5%	77.1% (RA)	Improving	Comparator group average 86.6%	Adults & Communities

Ref		Indicator	Period covered	2014/15 Result	2015/16 Target	2015/16 Result	Direction of Travel	Benchmarking	Service
CPI	AC/S8	Proportion of new clients, older people accessing enablement	Apr 2015 - Mar 2016	N/A	50%	61.5% (G)	N/A	N/A	Adults & Communities
CPI	AC/S9	Permanent admissions to residential and nursing care homes, per 100,000 population age 65+	Apr 2015 - Mar 2016	475.1	399.0	426.55 (GA)	Improving	N/A	Adults & Communities

Carers			
Commissioning Intention	RAG	Commentary	Service
Prioritise meeting the needs of carers, including young carers, through the assessment and support planning process by better supporting carers' own physical and mental health needs.	Green	New carers' strategy is now live, with new specialist dementia support team in place and working to identify initial cohort. Staff engagement sessions run in April to June 2016 to improve practice and awareness of resources for carer support. New carers' service provider commissioned with contract due to go live October 2016.	Adults & Communities
Strengthen the current carers' support offer e.g. assistive technology, intensive support for carers of people with dementia.	Green		Adults & Communities
Better support carers to balance work and caring commitments. Local small businesses know how to retain carers in their workforce.	Green Amber		Employer engagement programme planned for delivery Q3 2016/17 . Review is taking place of LBB HR policies to improve internal recruitment and retention of staff with caring responsibilities.

Ref		Indicator	Period covered	2014/15 Result	2015/16 Target	2015/16 Result	Direction of Travel	Benchmarking	Service
	AC/S12	Proportion of carers satisfied with social services	Apr 2015 - Mar 2016	34.6% (2013/14)	35.7%	33.5% (R) (2014/15)	Worsening	Comparator group average 35.4%	Adults & Communities
	AC/S13	Carers' reported quality of life	Apr 2015 - Mar 2016	7.3 (2012/13)	7.8	7.3 (R) (2014/15)	Same	Comparator group average 7.6	Adults & Communities

Ref	Indicator	Period covered	2014/15 Result	2015/16 Target	2015/16 Result	Direction of Travel	Benchmarking	Service
AC/S14	Percentage of adult carers who have as much social contact as they would like according to the Personal Social Services Carers survey	Apr 2015 - Mar 2016	35.8% (2013/14)	36.5%	32.5% (R) (2014/15)	Worsening	Comparator group 35.2% (2014/15, ASCOF)	Adults & Communities
SPI	Carer assessments resulting in information, advice and services	Apr 2015 - Mar 2016	1394	1948	1145 (R) ¹	Worsening	Not available	Adults & Communities

Leisure Services			
Commissioning Intention	RAG	Commentary	Service
Achievement of a cost-neutral provision of the Council-owned leisure centre facilities (with capital investment).	Green Amber	<p>The SPA team continues to work on achieving critical milestones of the SPA project, which is currently RAG rated Green. However, our ability to achieve a cost-neutral service is not formally guaranteed until a contract has been awarded during contract negotiation in July/August 2017. This element of the project is therefore currently RAG rated Green Amber.</p> <p>Preparation for the re-procurement of the new leisure contract (January 2018) continues to progress. The commencement of a formal procurement process is expected to commence in October 2016. In advance, workshops conducted with commissioners (internal colleagues) and external partners/stakeholders throughout May and June will assist in designing appropriate health outcomes (including how these are effectively measured) within a new contract. Resident engagement sessions are scheduled for July 2016 to present design information in respect of new leisure centre developments at Barnet Cophall and New Barnet Leisure Centre. An expression of interest has been submitted to Sport England in respect of facility investment (£2m) towards the capital of both schemes.</p>	Commissioning Group

¹ Revised outturn as at June 2016.

Commissioning Intention	RAG	Commentary	Service
<p>Improved levels of physical activity within Barnet, particularly in target geographical areas for both adults and children, leading to improvements in public health outcomes and general wellbeing.</p>	<p>Green</p>	<p>The latest Sport England Active People Survey 10 (Q2), which measures adult (16+) engagement in sport and physical activity, demonstrates that approx. 37.2% of Barnet’s adult population are physically active at least once a week (moderate intensity for 30 min or more).</p> <p>In addition to the above:</p> <ul style="list-style-type: none"> Leisure Centre membership = 26,932 (January – May 16). This is a 1.57% increase on the same period in 2015. Leisure Centre usage = 516,236 (January – May 16). This is a 15.2% increase on the same period in 2015 Burnt Oak and Finchley Lido Leisure Centres have been accredited with Inclusive Fitness Initiative status. GLL are working closely with Barnet and Harrow Public Health to deliver a Physical Activity Referral Scheme via GP Surgeries (50 referrals achieved since April 16) and collaborating with Tottenham Hotspur Foundation to implement a Cancer exercise referral programme (ACE). The SHAPE programme (delivered in Burnt Oak and Colindale, targeting 14 – 19 year olds) continues to effectively engage young people, engaging over 800 young people since Sep 2014. The positive outcomes achieved via the programme have been recognised by the National Lottery with the project being shortlisted from 600 national applications to the final 14 via their annual award programme. Two community SPA projects were approved and funded via the Chipping Barnet area committee on 31 March 2016. The providers: Our Parks (engaging 65+ to address social isolation over a 16 week period) and GLL (engaging young people and adults, addressing healthy weight and participation over a 12 month period) commenced delivery in June. The Mayor’s Golden KM Challenge is a multi-agency pilot project to improve exercise levels in primary schools by encouraging schools to facilitate their pupils walking, jogging or running a 1km route either within school or a local park. The pilot has been implemented and will be reviewed August/September with a view to extend from September 2016. Working in partnership with the LTA a number of Barnet Parks will be 	<p>Commissioning Group</p>

Commissioning Intention	RAG	Commentary	Service
		offering tennis activity to mark Great British Tennis Weekend. This will include a 6 week follow on programme connected to local clubs to aid the participation pathway.	

Ref	Indicator	Period covered	2014/15 Result	2015/16 Target	2015/16 Result	Direction of Travel	Benchmarking	Service	
SPI	TBC	Increasing participation in sport and physical activity	Apr 15 – Mar 16)	37.7% (APS9; Oct 14 – Mar 15)	37.9%	37.2% (APS10 Q3 Apr 15 – Mar 16)	Worsening ²	Not available	Commissioning Group
	TBC	Increasing residents' satisfaction with the Council's provision	Aug 14 – Aug 15	90%	90%	90% (G)	Same	Not available	Commissioning Group

Cross-Cutting issues			
Commissioning Intention	RAG	Commentary	Service
Ensure that the voice of people who use adult social care and carers contributes to the design and delivery of services.	Green	Work to put in place consultation activity for the ADM and New Operating Model has commenced. A refreshed Neighbourhood offer for older people has been designed with the leadership/engagement of older people. All Together Better – local expansion and project prioritisation has been undertaken with the engagement of older people. Engagement with Carers through the New Dementia Carer Project and Carers and Employment work programmes has commenced.	Commissioning Group
Promote and maintain the quality and consistency of the social care workforce. Ensure that the workforce development	Green	Workforce development plan is being delivered. Quality assurance framework launched and governance agreed. Continued engagement with providers to support development of quality in workforce and support recruitment.	Adults & Communities

² It is however important to note that the 2015/16 Active People Survey result is not inclusive of a full data set (waiting for Sport England to release). Please note that statistically there has been no change due to the low sample size engaged in the survey; APS9 (535) and APS10 Q3 (533).

programme is focused on strengthening the quality and consistency of practice.			
Constrain inflationary pressure on procured goods and services to 0.5% from 16/17 – 19/20.	Red	Significant pressures in the market through increases in National Living Wage have resulted in significant cost pressures – agreed by Policy and Resources.	Adults & Communities
Identify measures to reduce the cost of the workforce employed by LBB.	Green	New staff structure implemented 1 April 2016.	Adults & Communities
Adopt new policies on eligibility, contributions and deferred payments.	Green	Policies up-to-date and in-line with Care Act	Adults & Communities

Ref	Indicator	Period covered	2014/15 Result	2015/16 Target	2015/16 Result	Direction of Travel	Benchmarking	Service	
AC/S22	Number of safeguarding adults alerts	Apr 2015 - Mar 2016	565	Monitor	1,208	N/A	Not available	Adults & Communities	
AC/S1	Proportion of people who use adult social care services satisfied with their care and support	Apr 2015 - Mar 2016	88.3%	90.0%	88.2% (GA)	Worsening	Comparator group average 88.8%	Adults & Communities	
AC/S15	Proportion of people who use services who feel safe	Apr 2015 - Mar 2016	67.4%	68.1%	67.5% (GA)	Improving	Comparator group average 65.4%	Adults & Communities	
AC/S23	Number of people meeting their outcomes at support plan review.	Apr 2015 - Mar 2016	92.9%	90.0%	95.5% (G)	Improving	N/A	Adults & Communities	
AC/S24	Overall number of contact events into Social Care Direct	Apr 2015 - Mar 2016	40,357	Monitor	58,822	N/A	N/A	Adults & Communities	
SPI	AC/S25	Percentage of Social Care Direct customers who are satisfied or very satisfied with the service they have received post resolution	March 2016	81.0%	85%	100% (G)	Improving	N/A	Adults & Communities

Ref		Indicator	Period covered	2014/15 Result	2015/16 Target	2015/16 Result	Direction of Travel	Benchmarking	Service
SPI	AC/S27	Percentage of customer contacts into Social Care Direct resolved at first point of contact	March 2016	58.0%	Monitor	55.0%	N/A	N/A	Adults & Communities
SPI	AC/S28	Percentage of customer contacts into Social Care Direct passed to adult social care	March 2016	22.0%	Monitor	26.0%	N/A	N/A	Adults & Communities

Key:

Ref	RAG Rating	Percentage of Targeted Improvement Achieved	
CPI = Corporate Plan Indicator for 2016/17	Green	100% or more	Target is met or exceeded
SPI = Commissioning Plan Indicator for 2016/17	Green Amber	>80% <100%	Target not met, but 80% or more of targeted improvement achieved
	Red Amber	>65% <80%	Target not met, but 65-80% of targeted improvement achieved
	Red	<65%	Target not met, and less than 65% of targeted improvement achieved

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Appendix B – Report to Adults & Safeguarding Committee

Detailed summary of 2015/16 performance

1. **Summary of 2015/16 performance**
2. **End of year outturn and benchmarking data**
3. **Detailed commentary on performance**

1. **Summary of 2015/16 performance**

Adults & Communities reported against **42** outcome measures (indicators) to Performance & Contracts Management Committee each quarter in 2015/16. Of the 42 indicators, **31** received a RAG rating at the end of the year. **32% (10)** were “on or above target” and **68% (21)** were “off target”. **28** indicators were given a ‘direction of travel’ (DOT) status. **46% (13)** have an “improved or maintained” DOT; **46% (13)** have a “worsened” DOT and **8% (2)** have stayed the same.

Significant successes included **reductions in the rate of new admissions to residential care for working age adults**, which fell substantially on the 2014/15 rate (from 13.4 per 100,000 to 10.63 per 100,000). This was the result of extensive work to identify alternative accommodation packages for adults with learning disabilities or mental health needs, as well as proactive work with local landlords to increase the range of private sector accommodation available to service users. The effect was also seen in the **proportion of adults with learning disabilities or mental health needs living in stable accommodation**, each of which outperformed their targets (63.6% against the 60% target and 81% against the 75% target respectively). For adults with mental health needs and for working age adults overall, Barnet outperformed its comparators and the London and national averages.

Preventative services also performed strongly against their targets. The Delivery Unit maintained above-target access to enablement with 61.5% of new service users aged over 65 accessing enablement against the 50% target, and the proportion of people leaving enablement without a care package at 73% against the 63% target. The proportion of people at home 91 days after a hospital discharge following enablement shows that Barnet improved its performance against this indicator even though it still fell below the average for its comparators. The increased number of telecare advisers in the service also had an impact with installations consistently high – 889 packages installed at year end against 229 in 2014/15.¹

Quality measures were also high at the end of the year with customer satisfaction with the Social Care Direct Service running at 100% and the proportion of service users reporting that their outcomes had been achieved at support plan review also at 95.5%. The Delivery Unit’s Community Offer Team won the Social Work Team of the Year award in December 2015.

These were nonetheless set against an overall context in which **more than two thirds of indicators missed their target**. A number of the indicators which were RAG rated red in 2015/16 related to the annual service user and carers’ surveys and while these missed their targets, they remained broadly

¹ Not all installations were for Barnet service users and not all installations for Barnet service users are captured in the denominator for indicator AC/S18 – percentage of service users receiving ongoing services with telecare. Further detail on this is given in the table below.

stable, showing limited falls in service user satisfaction despite this being a year in which the Delivery Unit implemented a significant organisational restructure and held a high vacancy rate to support recovery of its financial position. However, **the impact on productivity was visible with waiting lists for assessments** seeing no significant fall, the **proportion of service users receiving an annual review** remaining low, and the number of **carers' assessments** also falling.

Detail on each of the performance measures in the 2015/16 framework is set out in the table below.

2. End of year outturn and benchmarking data

Benchmarking methodology

Barnet benchmarks through the national Adult Social Care Outcomes Framework (ASCOF), using its Chartered Institute of Public Finance and Accountancy (CIPFA) comparator group. This approach is designed to allow a like for like comparison between different councils' social care data. Barnet also uses some data supplied to NHS England to benchmark indicators relating to health and social care.

The comparator group is made up of 15 councils which have been identified as similar to Barnet across a range of economic and demographic factors using CIPFA's 'nearest neighbours' methodology. These are Bexley, Brent, Bromley, Croydon, Ealing, Enfield, Harrow, Hillingdon, Hounslow, Kingston-Upon-Thames, Merton, Redbridge, Richmond upon Thames, Sutton & Wandsworth.

Benchmarking data is primarily available for the year 2014/15 and in some cases – in particular, indicators drawn from the annual Social Care User Survey – indicators reported in 2015/16 relate to performance in the previous financial year.

Benchmarking summary

19 indicators have a **2014/15 or 2015/16 comparator group benchmark: 31% (6)** were better than the comparator group average, **69% (13)** were worse.

19 indicators have a **2014/15 or 2015/16 London benchmark: 37% (7)** were better than the London average, **63% (12)** were worse.

19 indicators have a **2014/15 or 2015/16 national benchmark: 42% (8)** were better than the national average, **58% (11)** were worse.

End of year performance and benchmarking detail

The following table (Table 1) shows the detail of Barnet's performance against target at the end of 2015/16 and against its various benchmarking groups. Detailed commentary on each indicator is contained in Table 2, in section 3 of this report (below).

Table 1

Owner	Ref	Indicator	Period Covered	2014/15 Result	2015/16 Target	2015/16 Result	Direction of Travel (2014/15 to 2015/16)	Benchmarking Nearest Neighbours 2014/15	Benchmarking London Average 2014/15	Benchmarking National Average 2014/15	2016/17 Target
A&C	AC/S1 (ASCOF 3A) – old cohort ²	Percentage of people who use adult social care services satisfied with their care and support – includes those who were both ‘extremely or very satisfied’ and ‘quite satisfied’	Apr 2014 - Mar 2015	88.3% (2013/14)	90.0%	88.2% (GA) (2014/15)	Worsening	Comparator group 88.8% (2014/15, ASCOF)	87.8% (Barnet 0.4% better than London average)	90.6% (Barnet 2.4% worse than National average)	N/A
	AC/S1 (ASCOF 3A) – new cohort	Percentage of people who use adult social care services satisfied with their care and support – includes those who were ‘extremely or very satisfied’ only		61.8% (2013/14)	N/A	61%	Worsening	Comparator group 60.4% (2014/15, ASCOF)	59.5% (Barnet better than London average)	64.7% (Barnet worse than National average)	61% within CI
A&C	AC/S2 (ASCOF 3D)	Service users who find it easy to get information	Apr 2014 - Mar 2015	72.6% (2013/14)	74.5%	71.3% (R) (2014/15)	Worsening	Comparator group 74.3% (2014/15, ASCOF)	72.5% (Barnet worse than London average)	74.5% (Barnet worse than National average)	71.3% within CI
CG/ A&C	AC/S3 (ASCOF 1G)	Percentage of adults with learning disabilities who live in their own home or with their family	As at 31 March	59.6%	60.0%	63.6% (G)	Improving	Comparator group 68.3% (2014/15, ASCOF)	69.1% (Barnet worse than London average)	73.3% (Barnet worse than National average)	63%
CG/ A&C	AC/S4 (ASCOF 1E)	Percentage of adults with learning disabilities in paid employment	As at 31 March	9.5%	10.6%	9.2% (R)	Worsening	Comparator group 9.8% (2014/15, ASCOF)	7.7% (Barnet better than London average)	6% (Barnet better than National average)	10.8%
CG/ A&C	AC/S5 (ASCOF 1F)	Percentage of adults with mental health needs in paid employment	As at 31 March	5.2%	7.0%	4.8% (R)	Worsening	Comparator group 7.0% (2014/15, ASCOF)	5.5% (Barnet worse than London average)	6.8% (Barnet worse than National average)	7.2%

² ‘Old cohort’ includes those who were both ‘extremely or very satisfied’ and ‘quite satisfied’. ‘New cohort’ includes those who were ‘extremely or very satisfied’ only

Owner	Ref	Indicator	Period Covered	2014/15 Result	2015/16 Target	2015/16 Result	Direction of Travel (2014/15 to 2015/16)	Benchmarking Nearest Neighbours 2014/15	Benchmarking London Average 2014/15	Benchmarking National Average 2014/15	2016/17 Target
CG/ A&C	AC/S6 (ASCOF 1H)	Percentage of adults with mental health needs who live independently, with or without support	As at 31 March	70.4%	75.0%	81.0% (G)	Improving	Comparator group 79.6% (2014/15, ASCOF)	77.8% (Barnet better than London average)	59.7% (Barnet better than National average)	83.0%
A&C	AC/S7	Percentage of people who use services, who reported that they had as much social contact as they would like	April 2014-Mar 2015	41.0%	45.0%	45.0%	Improving	Comparator average 43.1% (2014/15, ASCOF) – Barnet in top 50%	47.1% (Barnet worse than London average)	44.8% (Barnet better than National average)	N/A
A&C	AC/S8	Percentage of new clients, older people accessing enablement	Apr 2015 - Mar 2016	N/A	50.0%	61.5% (G)	N/A	N/A	N/A	N/A	63.0%
A&C	AC/S9 ASCOF 2A (2) – old cohort	Permanent admissions to residential and nursing care homes, per 100,000 population age 65+ ³	Apr 2015 - Mar 2016	475.10	399.0	426.55 (GA)	Improving				N/A
	AC/S9 ASCOF 2A (2) – new cohort			622.5	N/A	508.0	Improving	Comparator group 408 (2014/15, ASCOF)	491.7 (Barnet worse than London average)	668.8 (Barnet better than National average)	530.0
A&C	AC/S10 (ASCOF 1B)	Percentage of people who feel in control of their own lives	Apr 2014 - Mar 2015	68.5% (2013/14)	75.5%	68.4% (R) (2014/15)	Worsening	Comparator group 71.8% (2014/15, ASCOF) (Barnet in bottom 25%)	71.6% (Barnet worse than London average)	77.3% (Barnet worse than National average)	69% within CI ⁴
A&C/ CG	AC/S11 ASCOF 2B (1)	Percentage of older people remaining at home 91 days after discharge	Apr 2015 - Mar 2016	71.9%	81.5%	77.1% (RA)	Improving	Comparator group 86.6% (2014/15, ASCOF)	85.3% (Barnet worse than London average)	82.1% (Barnet worse than National average)	81.5%

³ Please note this measure has a new methodology and the target and outturn reported in 2014/15 is not comparable with benchmarking data for 2014/15 or 2015/16. The target for 16/17 is based on the same rationale as the previous measure – a percentage reduction in caseload – and will be reviewed at the end of Q3 to reflect the impact of use of the new A&C database.

⁴ All survey indicator targets have been set within a 'confidence interval' (CI) which takes account of the margin of error which may result from surveying a small sample of the population.

Owner	Ref	Indicator	Period Covered	2014/15 Result	2015/16 Target	2015/16 Result	Direction of Travel (2014/15 to 2015/16)	Benchmarking Nearest Neighbours 2014/15	Benchmarking London Average 2014/15	Benchmarking National Average 2014/15	2016/17 Target
A&C	AC/S12	Percentage of carers satisfied with social services	Apr 2014 - Mar 2015	34.6% (2013/14)	35.7%	33.5% (R) (2014/15)	Worsening	Comparator group 35.4% (2014/15, ASCOF)	35.2% (Barnet worse than London average)	41.2% (Barnet worse than National average)	NA
A&C	AC/S13	Carers' reported quality of life	Apr 2014 - Mar 2015	7.3 (2012/13)	7.8	7.3 (R) (2014/15)	Same	Comparator group 7.6 (2014/15, ASCOF)	7.6 (Barnet worse than London average)	7.9 (Barnet worse than National average)	NA
A&C	AC/S14 ASCOF 1I(2)	Percentage of adult carers who have as much social contact as they would like	Apr 2014 - Mar 2015	35.8% (2013/14)	36.5%	32.5% (R) (2014/15)	Worsening	Comparator group 34.3% (2014/15, ASCOF)	35.5% (Barnet worse than London average)	38.5% (Barnet worse than National average)	32.5% within CI
A&C	AC/S15	Percentage of people who use services who feel safe	Apr 2014 - Mar 2015	67.4% (2013/14)	68.1%	67.5% (GA)	Improving	Comparator group 65.4% (2014/15, ASCOF)	65.9% (Barnet better than London average)	68.5% (Barnet worse than National average)	N/A
A&C	AC/S16 (ASCOF 1C/2A)	Proportion of service users with a direct payment	As at 31 March	40%	41.0%	40.1% (GA)	Improving	Comparator group 28.4% (2014/15, ASCOF)	26% (Barnet better than London average)	26.3% (Barnet better than National average)	42%
A&C	AC/S17	Number of new telecare packages installed	Apr 2015 - Mar 2016	216	470	889 (G)	Improving	N/A	N/A	N/A	800
A&C	AC/S18	Percentage of service users receiving ongoing services with telecare	Apr 2015 - Mar 2016	13.0%	17.0%	12.7% (R)	Worsening	N/A	N/A	N/A	17%
A&C	AC/S19	Proportion of people who leave enablement with no care package	April 2015 - Mar 2016	70.0%	63.0%	73.0%	N/A	N/A	N/A	N/A	N/A
A&C	AC/S21	Number of carer assessments (resulting in information, advice and services)	Apr 2015 - Mar 2016	1394	1948	1145 ⁵ (R)	Worsening	N/A	N/A	N/A	1045
A&C	AC/S22	Number of safeguarding adults alerts (concerns)	Apr 2015 - Mar 2016	565	Monitor	1208	N/A	N/A	N/A	N/A	NA

⁵ Year end outturn revised following data cleansing exercise

Owner	Ref	Indicator	Period Covered	2014/15 Result	2015/16 Target	2015/16 Result	Direction of Travel (2014/15 to 2015/16)	Benchmarking Nearest Neighbours 2014/15	Benchmarking London Average 2014/15	Benchmarking National Average 2014/15	2016/17 Target
A&C	AC/S23	Percentage of people meeting their outcomes at support plan review	Apr 2015 - Mar 2016	86%	90.0%	95.5% (G)	Improving	N/A	N/A	N/A	90.5%
CSG	AC/S24	Overall number of contact events into Social Care Direct	April 2015 - Mar 2016	40,357	Monitor	58,822	N/A	N/A	N/A	N/A	N/A
CSG	AC/25	Percentage of Social Care Direct customers who are satisfied or very satisfied with the service they have received post resolution	Apr 2015 - Mar 2016	81%	85%	100%	Improving	N/A	N/A	N/A	85%
CSG	AC/27	Percentage of customer contacts into Social Care Direct resolved at first point of contact	April 2015 - Mar 2016	58%	Monitor	55%	N/A	N/A	N/A	N/A	N/A
CSG	AC/S28	Percentage of customer contacts into Social Care Direct passed to adult social care	April 2015 - Mar 2016	228%	Monitor	26%	N/A	N/A	N/A	N/A	N/A
CG	AC/C1	Total non-elective admissions into hospital (general & acute), all-age, per 100,000 population	Apr 2015 - Feb 2016	7742	7333	8292 (GA)	Worsening	Comparator group 9449 (Apr - Feb 2015/16)	8803 (Barnet better than London average)	9419 (Barnet better than National average)	TBC
A&C	AC/C2	Proportion of people using social care who receive self-directed support	As at 31 March	98.4%	99.5%	99.6%	Improving	Comparator group average 81.8%	81.1% (Barnet better than London average)	83.7% (Barnet better than National average)	N/A
A&C	AC/C3	Percentage of people with concluded safeguarding referrals who expressed that their outcomes are fully or partly met	April 2015 - Mar 2016	N/A	Monitor	45.8%	N/A	N/A	N/A	N/A	N/A

Owner	Ref	Indicator	Period Covered	2014/15 Result	2015/16 Target	2015/16 Result	Direction of Travel (2014/15 to 2015/16)	Benchmarking Nearest Neighbours 2014/15	Benchmarking London Average 2014/15	Benchmarking National Average 2014/15	2016/17 Target
A&C	AC/C4	Percentage of people with concluded safeguarding referrals which were fully or partly substantiated	April 2015 – Mar 2016	41.7%	Monitor	41.7%	N/A	N/A	N/A	N/A	N/A
A&C	AC/C5	Number of DoLS applications	April 2015 – Mar 2016	N/A	Monitor	1357	N/A	N/A	N/A	N/A	N/A
A&C	AC/C6	Number of DoLS granted	April 2015 – Mar 2016	N/A	Monitor	797	N/A	N/A	N/A	N/A	N/A
A&C	AC/C7	Percentage of DoLS applications completed within statutory timeframes	Apr 2015 - Mar 2016	N/A	100.0%	9.0% (R)	N/A	N/A	N/A	N/A	100%
A&C	AC/C8	Number of assessments completed	Apr 2015 - Mar 2016	2,657	Monitor	2,364	N/A	N/A	N/A	N/A	Monitor
A&C	AC/C9	Number of review events	Apr 2015 - Mar 2016	N/A	Monitor	5697	N/A	N/A	N/A	N/A	Monitor
A&C	AC/C10	Percentage of clients receiving an on-going package of care reviewed	Apr 2015 - Mar 2016	69.84%	75.0%	62.23% (R)	Worsening	N/A	N/A	N/A	75%
A&C	AC/C11	Average number of days from contact to end of assessment	Apr 2015 - Mar 2016	17.6	18.0	24.24 (R)	Worsening	N/A	N/A	N/A	N/A

Owner	Ref	Indicator	Period Covered	2014/15 Result	2015/16 Target	2015/16 Result	Direction of Travel (2014/15 to 2015/16)	Benchmarking Nearest Neighbours 2014/15	Benchmarking London Average 2014/15	Benchmarking National Average 2014/15	2016/17 Target
CG/A&C	AC/C12 (ASCOF 2C/1)	Number of delayed transfers of care from hospital per 100,000 population (aged 18+) which are attributable to both NHS and Adult Social Care	Mar 2015 – Feb 2016	6.2	5.8	7.5 (R)	Worsening	Comparator group 7.6 (2014/15, ASCOF)	6.9 (Barnet worse than London average)	11.1 (Barnet better than National average)	5.8
CG/A&C	AC/C13 (ASCOF 2C/2)	Number of delayed transfers of care from hospital, and those which are attributable to adult social care per 100,000 population	Mar 2015 - Feb 2016	2.5	2.5	3.3 (R)	Worsening	Comparator group 2.4 (2014/15, ASCOF)	2.4 (Barnet worse than London average)	3.7 (Barnet better than National average)	2.5
A&C	AC/C14 (ASCOF 2A/1) – old cohort	Permanent admissions to residential and nursing care homes, per 100,000 population age 18-64 ⁶	Apr 2015 - Mar 2016	13.4	13.4	10.63 (G)	Improving				
	AC/C14 (ASCOF 2A/1) – new cohort			16.6	16.6	10.2		Comparator group 8.3 (2014/15, ASCOF)	11.1 (Barnet better than London average)	14.2 (Barnet better than National average)	16.6
A&C	AC/C15	The proportion of carers who use services who find it easy to find information about support.	Apr 2014 - Mar 2015	N/A	Monitor	61.4% (GA)	N/A	Comparator group 63.4% (Apr 2014- Mar 2015)	62.1 (Barnet worse than London average)	65.5 (Barnet worse than National average)	N/A
CG	AC/C16	Number of referrals to hospital social work teams	Apr 2015 - Mar 2016	800	Monitor	828	N/A	N/A	N/A	N/A	Monitor

⁶ Please note that this measure has a new methodology and the baseline is not comparable with 2014/15 or 2015/16. The target for 16/17 uses the same rationale as 14/15, which aimed to maintain the previous year's performance.

3. Detailed commentary on performance

The following table gives detailed commentary on Barnet's performance against each of the indicators which received a RAG rating in 2015/16, including reasons for underperformance and mitigating measures to address these.

Table 2

Ref and title	RAG	Comments and Interventions
AC/S1 Percentage of people who use adult social care services satisfied with their care and support	GA	This measure - along with the other survey-related indicators in this performance framework - is based on the results of the annual social care surveys and the period it covers is the last financial year. Performance did not decline significantly on that in the previous two years despite this being a period of significant change for Adults & Communities and remains above the average for Barnet's comparator group, if below target.
AC/S2 Service users who find it easy to get information	R	<p>Again, this is an annual indicator which retrospectively measures performance for 2014/15.</p> <p>In 2015/16 Adults & Communities improved the quality and accessibility of its information and advice offer through implementation of the integrated front door Social Care Direct model.</p> <p>Social Care Direct handled 58,822 contact events in 2015/16, of which 26% were passed to Adult Social Care. It is helpful to have a consistent approach to service user contact due to the number of calls in question, the majority of which involve an information, advice and signposting component. Reported satisfaction with the Social Care Direct service was consistently above 90% in 2015/16.</p> <p>Service user satisfaction with information and advice can also be reflected through satisfaction with the Council's website. Regular customer experience reports showed relatively low levels of satisfaction and the Delivery Unit has participated in a customer access leads' group to drive improvement across the Council's website.</p> <p>The Delivery Unit also launched a new information, advice and advocacy contract with Barnet CAB in Q2 of 2015/16.</p>
AC/S3 Percentage of adults with learning disabilities who live in stable accommodation	G	The proportion of adults with learning disabilities who live in their own homes or with their families has increased steadily over the course of the year, from 59.5% to 63.6%, and the absolute number has also increased from 422 to 472 individuals. The Council has led on the West London Alliance (WLA) collaborative commissioning for supported living and residential care and the Delivery Unit has worked closely with individual service users to enable step-down from residential care – and reduce admissions – and with private landlords to ensure a more diverse accommodation market and offer. This has translated into an overall fall of over 20% in the rate of working age adults admitted to residential care in 2015/16.
AC/S4 Percentage of adults with learning disabilities in paid employment	R	The number of adults with learning disabilities in paid employment remained roughly static over the course of the year, showing a small increase from 66 to 68 individuals at year end. Work has been undertaken with employers and providers to implement a supported employment pathway for people with autism/learning disabilities. Barnet Mencap has been running a supported employment service for adults with learning disabilities since the beginning of 2015/16 though the number of referrals of social care service users has to date been low. To address this an exercise is being undertaken in 2016/17 to map and track referrals into the service to ensure social care service users are being referred in at the expected rate. Frontline practitioners will receive information about new and existing services and training on referrals by December 2016. Other high performing London

Ref and title	RAG	Comments and Interventions
		<p>boroughs such as Hounslow which with 20.1% of LD service users in employment is at the top of Barnet's comparator group have focused on effective pathways between children's services, education and adult social care to identify young people suitable for internships – of whom 70% have gone on to find paid employment. The new 0-25 disability service in Barnet is now seeking to replicate this success.</p> <p>A commissioning lead for workplace inclusion has been appointed, leading a project to develop a supported employment offer for the Borough and identify service users who might benefit from the programme. The Council is redesigning the supported employment and daycare offer for service users with learning disabilities or mental health issues to improve its effectiveness and developing the market to diversify the range of employment services available. Your Choice Barnet are also working with the Council to redesign their daycare offer to focus on enablement and employment to mobilise in November 2016.</p> <p>In addition, the Council is using its purchasing power to secure employment opportunities with its suppliers for adults with learning disabilities, mental health issues, or physical or sensory needs, with amendments to contracts to be agreed by April 2017. Barnet will also aim to lead by example by successfully recruiting and retaining people from the above groups, revising its HR policies and procedures and rolling out training and support to managers in or before October 2016. This approach has worked well in other boroughs. LB Bexley has taken this approach and is the second highest performer in Barnet's comparator group with 18% of LD service users in paid employment.</p>
<p>AC/S5 Percentage of adults with mental health needs in paid employment</p>	R	<p>The number of service users in employment has fluctuated much more over the course of the year, from 34 at its lowest to 45 at its greatest. As with adults with learning disabilities, there are challenges in sustaining employment opportunities for service users with mental health issues.</p> <p>This indicator follows a national definition which enables the Council to compare its performance against other boroughs but this means that the cohort included in the indicator is made up of a number of people whom the Council does not work with directly, often with complex mental health needs that require inpatient care and which mean employment is not appropriate for them.</p> <p>Two community employment support services (MAPS and IPS) have been running since 2014 and between them have supported 129 service users into employment in 2015/16. Both services have recently been positively evaluated against a range of outcomes by the National Development Team for Inclusion. The Council's 'Network' mental health service supported a further 51 service users with lower level support needs into employment over the course of the year.</p> <p>The secondary mental health employment support service (provided by Twining) has workers co-located with frontline mental health teams and an exercise is being undertaken in 2016/17 to map and track referrals into the service, to ensure social care service users are being referred in at the expected rate.</p> <p>The borough's workplace inclusion programme will also focus on service users with mental health issues (see AC/S4 for further detail.)</p>
<p>AC/S6 Percentage of adults with mental health needs who live independently, with or without support</p>	G	<p>As set out in the commentary against AC/S3, a package of measures has reduced admissions of working age adults to residential care, though both the cohort in stable accommodation and the overall number of MH service users have fallen over the course of the year. A new accommodation strategy for vulnerable adults is being developed for implementation in 2016/17 to maintain the momentum away from residential admissions.</p>

Ref and title	RAG	Comments and Interventions
<p>AC/S7 Percentage of people who use services, who reported that they had as much social contact as they would like</p>	G	<p>Again, this is an annual indicator which retrospectively measures performance for 2014/15. Performance is above comparator, London and national averages. Strong performance against this measure is a positive basis for the Delivery Unit's new strengths-based working approach, which aims to support individuals to consider the assets and resources already available to them within their homes or communities to meet their needs, as well as those which could be provided through a funded service.</p> <p>The same strong performance is not seen in the carers' social contact measure (AC/S14). This gap is being addressed through the raft of carers measures set out at AC/S12.</p>
<p>AC/S8 Percentage of new clients, older people accessing enablement</p>	G	<p>This indicator aims to increase access to the Council's enablement services with the intention of reducing the intensity of support required for those who do go on to receive a care package. The enablement service has performed strongly throughout 2015/16 with the number of people leaving the service without a package of care (AC/S19) also above target. The new enablement triage service within the integrated Front Door is helping to ensure that referrals to the service are appropriate for each service user's needs. Performance against AC/S11 – the percentage of older people remaining at home after discharge from hospital – was less effective, although again this is a retrospective indicator reporting against 2014/15 performance. This is in part due to an increased proportion of frail older adults within the cohort who are in the long term being supported at home rather than in residential care, but who are less likely to remain out of hospital directly after discharge. As stays in acute care grow shorter, people are discharged into enablement or intermediate care services with higher levels of need and this is currently increasing.</p>
<p>AC/S9 Permanent admissions to residential and nursing care homes, per 100,000 population age 65+</p>	GA	<p>While a Q3 spike in the rate of residential care admissions for older adults pushed performance above target overall, 2015/16 has seen a substantial reduction on the previous year, from 475.1 to 426.55 per 100,000. Significant progress has been made in identifying more creative support solutions and promoting enablement services, and backing these up through robust panel decisions.</p> <p>The Q3 spike was due in part to a combination of high winter demand and lack of capacity in the homecare market and in part to uniquely high pressures on the NHS. See also commentary against AC/C12.</p>
<p>AC/S10 Percentage of people who feel in control of their own lives</p>	R	<p>This indicator measures people reporting that they feel in control of their own lives through the Adult Social Care user survey. It is an important quality measure – a high score here has a positive effect on a range of other outcomes. Performance in 2015/16 was 68.4% against a 75.5% target (and a comparator group average of 71.8%). Barnet is roughly in the middle of its comparator group for the majority of social care user survey indicators but relatively weak – in the lowest 25% – on this one.</p> <p>Barnet is a strong performer – highest in its comparator group – against linked measures such as the proportion of people receiving self-directed support (AC/C2, 99.5%) but the survey indicator suggests this is not translating into an overall sense of autonomy and control.</p> <p>Analysis of the service user survey responses which make up the social care related quality of life measure, which combines replies to a range of questions in relation to different types of need, show that where Barnet service users are asked how well their services contribute to their quality of life they respond more positively than when asked about their quality of life itself. This is a positive message in relation to satisfaction with the services they received but may indicate a sense of dependence on services which is translating into an overall feeling of lack of control.</p> <p>Addressing this lack of autonomy is a key focus of the new operating model for adult social care in Barnet. As set out in AC/S7 above, the Delivery Unit is piloting a strengths-based working approach which is helping people consider resources available to</p>


Ref and title	RAG	Comments and Interventions
		them to meet their own needs before or alongside a funded service. Public health literature argues that such approaches can help to promote individual independence and resilience and increase health and wellbeing.
AC/S11 Percentage of older people remaining at home 91 days after discharge	RA	See AC/S8.
AC/S12 Percentage of carers satisfied with social services	R	<p>Again, the various carers' satisfaction measures are retrospective and relate to 2014/15 performance but these are underpinned by low levels of carer-related activity in 2015/16, including the number of carers' assessments carried out by the Council. This is in part because of high vacancy levels which have compelled the Delivery Unit to prioritise activities (see AC/C10 below). There has also been feedback that the forms used for carers' assessments are over-long and not user-friendly.</p> <p>Staff education sessions have been held with carers' service providers improve practitioners' knowledge of carer needs and the resources available to support them. The carers' assessment forms are being redesigned and improved.</p> <p>The new carers' strategy has been launched and a new carers' service provider commissioned, to be launched in October 2016. A specialist service for carers of people with dementia has already launched and is identifying its initial cohort.</p> <p>The Council is also focusing on improving carers' employment with an employer engagement programme planned and work underway to improve the Council's own role as a carers' employer.</p>
AC/S13 Carers' reported quality of life	R	See AC/S12
AC/S14 Percentage of adult carers who have as much social contact as they would like	R	See AC/S12
AC/S15 Percentage of people who use services who feel safe	GA	<p>Again, this is an annual indicator which retrospectively measures performance for 2014/15. Performance is below the national average but above the average for London and for the comparator group. Barnet also showed a small improvement on 2013/14 performance.</p> <p>The number of safeguarding concerns raised in 2015/16 more than doubled on the previous year, from 565 to 1208. This is an indicator that the service is trusted with reports.</p>
AC/S16 Proportion of people with a Direct Payment	GA	Barnet has a strong record for having high numbers of people who receive their care through a Direct Payment. This measure is above the comparator, national and London averages and has remained broadly stable across 2015/16 at just under target. Comparison between those who do and do not receive a direct payment has not shown any strong distinguishing factors such as equality concerns. All cases coming to panel need to demonstrate that a DP option has been considered. Review activity has resulted in some individuals on low level DPs no longer receiving a payment but also in a significant number of new DPs being agreed.

Ref and title	RAG	Comments and Interventions
<p>AC/S17 Number of new telecare packages installed</p>	<p>G</p>	<p>Telecare is an important preventative service which can delay the need for more intensive forms of care. The number of telecare packages installed in 2015/16 was a more than 300% increase on the previous year. In 2015/16 an additional telecare adviser was employed to work across both health and social care services in Barnet, and opportunities to access telecare were highlighted at the first point of contact with Adult Social Care through Social Care Direct.</p> <p>The Council installs some telecare packages for current service users and some telecare packages for people who do not use Council services and where the Council does not maintain the equipment (either because it does not require maintenance or because the recipient funds the package themselves). The rationale for this is because telecare is a preventative service which can have benefits in delaying the need for more intensive services. Telecare is purchased through an IT system not owned or controlled by the Council and as a result the data the Council receives on new installations does not allow us to match it against our own records and identify which of the installations are for current service users. This is the data which informs AC/S17 (number of telecare packages installed). The installations recorded in AC/S17 include standalone and self-funded packages as well as those requiring ongoing maintenance by Barnet, and include preventative installations for people who are not using Barnet social care services.</p> <p>The data for AC/S18 is drawn directly from the Swift case management system but as a result only covers the installations that the Council funds and maintains for current service users. The number of these installations which is captured on Swift is lower than the total number of packages installed by the Council and lower than the total number of packages installed for current service users. This is the reason for the discrepancy between the two indicators and, because we are unable to capture the full range of telecare installations for current service users, increased performance in AC/S17 is not clearly reflected in AC/S18.</p> <p>Plans are under way to look at how these datasets can be reconciled in the future once the new case management system for Adults & Communities is in place.</p>
<p>AC/S18 Percentage of Service users receiving on-going services with telecare</p>	<p>R</p>	<p>See AC/S17</p>
<p>AC/S19 Proportion of people who leave enablement with no care package</p>	<p>G</p>	<p>See AC/S8</p>
<p>AC/S21 Carer assessments resulting in information, advice and services (end of year projection)</p>	<p>R</p>	<p>See AC/S12</p>
<p>AC/S23 Percentage of people meeting their outcomes at support plan review</p>	<p>G</p>	<p>This measure is a proxy for the quality of support planning and together with AC/S25, which measures customer satisfaction with the Social Care Direct service, has been a consistently positive reflection of in-year satisfaction with services in 2015/16.</p>

Ref and title	RAG	Comments and Interventions
AC/S25 Percentage of Social Care Direct customers who are satisfied or very satisfied with the service they have received post resolution	G	See AC/23.
AC/C1 Total non-elective admissions into hospital (general & acute), all-age, per 100,000 population	GA	Annual non-elective admissions in 2015/16 exceeded target though Barnet outperformed comparator, London and national averages. A small reduction in admissions among under-65s (a combination of reduced admissions among young children and among patients in obstetrics services) was balanced out by an increase in the numbers of older adults admitted to hospital. As with AC/S8, this is in part due to an increased proportion of frail older adults who are in the long term being supported at home rather than in residential care, but who are more likely to be admitted to hospital in an emergency.
AC/C2 Proportion of people using social care who receive self-directed support	G	See AC/S10.
AC/C7 Percentage of DoLS applications completed within statutory timeframes	R	The number of Deprivation of Liberty Safeguards (DoLS) applications has vastly exceeded that in previous years (1,357 against 674 in 2014/15). Comparator exercises suggest other boroughs are also seeing huge increases in the numbers of applications but not at the same level. This may be due to Barnet's higher number of care home beds relative to population. There are not enough assessors available to meet this level of demand. The Council is exploring potential measures to manage this demand more effectively. Other local authorities are reducing the seniority level required for authorisation of an application and/or prioritising cases to operate 'waiting lists'.
AC/C10 Percentage of clients receiving an on-going package of care reviewed (end of year projection)	R	Adults & Communities maintained high vacancy rates in 2015/16 to help it recover its financial position. As a result overall work volumes fell substantially on the previous year with a fall in the proportion of clients reviewed as well as a limited decrease in the waiting times for assessments. Additional reviewing capacity has been resourced through the Adults' Transformation Programme and is in place for 2016/17.
AC/C11 Average number of days from contact to end of assessment	R	As with AC/C10 above, lower staffing numbers has had an impact on the speed at which the average time waiting for assessment decreased. In 2015/16 assessments were prioritised and as a result a number of clients who had spent a long time on waiting lists were assessed, causing the average time to assessment to rise.
AC/C12 Number of delayed transfers of care from hospital, from hospital per 100,000 population (aged 18+)	R	There has been a focus in the second half of 2015/16 on the number of delayed transfers of care from hospital, which peaked in December and January. There are ongoing challenges in relation to high turnover and a greater number of referrals, from acute care, of older, frailer people with more complex needs, matched by a lack of capacity in the homecare market. LBB is currently working with health colleagues to explore a peak in requests for double care packages – which support both service users and carers – to confirm that these are appropriate. Measures have been put in place to ensure that patients are not delayed waiting for a social care assessment and that discharge notifications are triaged to prioritise cases which require immediate action from social care teams. This means that limited resources are targeted in the correct areas to enable prompt discharges from hospital.

Ref and title	RAG	Comments and Interventions
AC/C13 Number of delayed transfers of care from hospital, and those which are attributable to adult social care per 100,000 population	R	See AC/C13.
AC/C14 Permanent admissions to residential and nursing care homes, per 100,000 population age 18-64	G	See AC/S3.
AC/C15 The proportion of carers who use services who find it easy to find information about support.	R	See AC/S2 and AC/S12.

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	<p>AGENDA ITEM 8</p> <p>Adults and Safeguarding Committee 13 July 2016</p>
<p>Title</p>	<p>Statutory Adult Social Care Annual Complaints Report 2015/16</p>
<p>Report of</p>	<p>James Mass – Assistant Director Community and Wellbeing</p>
<p>Wards</p>	<p>All</p>
<p>Key / Non Key?</p>	<p>Non Key</p>
<p>Urgent / Non Urgent</p>	<p>Non Urgent</p>
<p>Status</p>	<p>Public</p>
<p>Enclosures</p>	<p>Appendix 1 – Adults and Communities Annual Complaints Report 2015-2016</p>
<p>Officer Contact Details</p>	<p>Emily Bowler emily.bowler@barnet.gov.uk 020 8359 4463</p>

<p>Summary</p>
<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 2015-16 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>
<p>Recommendations</p>
<p>That the Adults and Safeguarding Committee note the information contained within the Adults and Communities Annual Complaints Report 2015-2016 and approves the report for 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.
- 1.2 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 compliments for Barnet Adults and Communities for the period 1 April 2015 to 31 March 2016. 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.
- 2.3 The report considers complaints dealt with through both the statutory adult social care and corporate complaints procedures.
- 2.4 Barnet Council is required under statutory regulations, to report annually to the relevant council committee on adult social care complaints.
- 2.5 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.
- 2.6 6,923 social care assessment and reviews were completed during 2015-2016.
- 2.7 During this period, Adults and Communities Social Care Direct Team received 58,822 requests through Social Care Direct. Of which:
 - 24% resulted in information and advice being provided
 - 42% were resolved by Social Care Direct and did not need a social care service
 - 2% were signposted to another organisation for advice and support
 - 20% were referred for assessment by our social work teams.
- 2.8 In 2015-2016, the following complaints and compliments were received from service users, carers and/or their representatives:
 - 109 Compliments
 - 94 Complaints
 - 8 Local Government Ombudsman complaints.

- 2.9 There is a marked increase in the number of recorded compliments received between 2015- 2016. 69 compliments were recorded in 2014/15 and 109 recorded in 2015/16.
- 2.10 The number of compliments recorded indicates that good practice is happening across the department and the people who use our services are grateful and satisfied with aspects of the service provided.
- 2.11 The number of complaints received has slightly decreased compared to the previous years. 106 complaints were received in 2014/15 compared to 94 in 2015/16.
- 2.12 There has also been a marked improvement in the number of complaints responded to within the agreed timescale.
- 2.13 Common themes which can be seen across multiple complaints include:
- Lack of communication
 - Reduction in support or funding
 - Barnet Council staff behaviour and attitude.
- 2.14 Of the 94 complaints, 85 resulted in an outcome, 7 were withdrawn and 2 cases are still being investigation.
- 34 (40%) were not upheld
 - 29 (34%) were upheld
 - 22 (26%) were partially upheld.
- 2.15 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.
- 2.16 Lessons have been learnt from the complaints received throughout 2015-2016 and this learning is fed back into the ongoing service improvement, ensuring high standards of customer care are sustained by the Delivery Unit and our care providers.

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 2015-2016 is a public document and will available through the council website and staff intranet.
- 4.2 The Complaints Annual Report includes a number of lessons learnt, which are actions for improvement for the delivery unit. These actions will be implemented in 2015-16.

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 care and support to facilitate good, outcomes and improve user experience”.

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

5.2.1 As Adults and Communities continue to make changes to the way services are managed and delivered within the budget, every effort will be made to minimise the impact on the customer. The cost of work carried out in responding to complaints, including improvements to the service, 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 2015-2016 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 helps people who are not able to make representations and complaints in their own right to do so through the use of advocacy services such as Citizens Advice Bureau, Disability Law Service, 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.

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Adults and Communities

Annual Complaints Report

2015-2016

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1. Introduction

This report provides information on complaints for Barnet Adults and Communities for the period 1 April 2015 to 31 March 2016.

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 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.

Barnet Council is required under statutory regulations, to report annually to the relevant council committee on adult social care complaints. The report considers complaints dealt with through both the statutory adult social care and corporate complaints procedures.

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.

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 as soon as possible.

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 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. A final decision on the complaint is then provided.

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

Adults and Communities continually seeks ways to encourage people who use social care and carers to give feedback, good or bad on the services that they have received.

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.
- 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 is on the council website at www.barnet.gov.uk/comments-and-complaints-adult-social-care
- Managers are asked to feature compliments 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 Team.
- Information about complaints is shared with the management and staff to improve practice.

Adults and Communities have commissioned Barnet Citizens Advice Bureau (BCAB) as the lead provider for specialist information, advice and advocacy support. This ensures that the council has in place a dedicated support service for people who require access to independent information, advice and advocacy. BCAB work with their subcontracted partners Advocacy in Barnet and Mind in Barnet and work closely with other partners who provide a range of advocacy services e.g. statutory advocacy and independent health advocacy. This means that advocacy services are available to complainants if they require advocacy support to help them in making a complaint. Adults and Communities staff are trained in accordance with the Care Act and staff understand their statutory duties in regards to advocacy.

4. Overview

Between 1 April 2015 and 31 March 2016 the Adults and Communities Social Care Direct Team received 58,822 requests.

Of which:

- 24% resulted in information and advice being provided
- 42% were resolved by Social Care Direct and did not need a social care service
- 2% were signposted to another organisation for advice and support
- 20% were referred for assessment by our social work teams.

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

- 109 Compliments
- 94 Complaints
- 8 Local Government Ombudsman complaints.

Common themes which can be seen across multiple complaints include:

- Lack of communication
- Reduction in support or funding
- Barnet Council staff behaviour and attitude.

Of the 94 complaints, 85 resulted in an outcome, 7 were withdrawn and 2 cases are still being investigated.

- 34 (40%) were not upheld
- 29 (34%) were upheld
- 22 (26%) were partially upheld.

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 2015-2016 and this learning is feedback into the ongoing service improvement, ensuring high standards of customer care are sustained by the Delivery Unit and our care providers.

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

- The council responds to feedback from people who use social care services, their carers and residents effectively and efficiently to ensure the improvement of individuals' experience and promote wider improvement.
- The low number 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 34% complaints were not upheld. 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.
- An increased number of compliments were recorded and this indicates, not only better recording but that people who use social care services and their 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 2015 to 31 March 2016 compared to the previous year.

	2014-2015	2015-2016
Compliments	69	109

There is a marked increase in the number of recorded compliments received between 2015- 2016. This could be due to a number of factors including updating the recording process and promotion of the importance of recording and collating compliments.

The number of recorded compliments received indicate that good practice is happening across the department and the people who use our services 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 2015-2016:

"X's communication skills are excellent he always provides accurate information, whether it's good bad or indifferent. X has the ability to make me feel that my brothers is his only case and I am sure that is far from the truth. He always presents himself in a professional manor and although Z is my brother and I want what I feel is best for him, X is always quick to remind me that it's not what I want, it's my brothers choice. (and rightly so).

"It is very obvious to me that X is a caring person and is always smiling. Social workers get a lot of bad press in the media and I can only imagine the pressure you have to work under. So no bad press today. Well done X you are a good chap and deserve a pat on the back"

"Thank you very much for all your hard work which you undertook to give Mr Z a dignified send off. His friends and family were delighted and the wider veteran's community, many of whom travelled great distances made the effort to be there your staff are superb and I was impressed by the efforts they made to help."

"I just want to express our sincerest gratitude at the sterling and most considerate and helpful way in which you have handled this project right from the start. As you

may know, it was quite a desperate time for us when we realized that we were facing major changes, challenges and an upheaval in our very home, and at the same time having to deal with all the foibles of an institutionalized procedure. But you have put the kindest human face on this process imaginable, and I speak for all of us when I say we now feel more confident that with your help Z can get control over his life and develop some much needed independence, while our home can be re-arranged in a way we still find comfortable and pleasing.”

“Thank you once again for all your help and advice over the last couple of years with my nan... It has been greatly appreciated...we wish there were more people as kind and as sympathetic and as helpful as YOU and your team”.

5.1 Number of compliments received in 2015-2016 broken down by service area

The table below shows the total number of compliments recorded in Adults and Communities from 1 April 2015 to 31 March 2016 by service area and gives a comparison to the previous year.

Service Area	2014-2015	2015-2016
Localities (Older People & Physical Disabilities)	34	18
Integrated Care Learning Disabilities	24	16
Customer and Financial Affairs	4	3
Social Care Direct	1	0
Other teams / functions	6	8
The Network	0	64
Total	69	109

6. Complaints

6.1 Number of statutory complaints received

From 1 April 2015 to 31 March 2016, a total of 94 statutory complaints were received by Adults and Communities. This is a slight decrease compared to the previous years.

	2014-2015	2015-2016
Complaints	106	94

6.2 Number of complaints received broken down by month

Month	Statutory complaints received
April 2015	2
May	8
June	6
July	8
August	5
September	7
October	11
November	4
December	8
January 2016	9
February	18
March	8
Total	94

6.3 Complaints received by designated stage

Of the 94 complaints received between 1 April 2015 and 31 March 2016, all were dealt with under the Statutory Social Care Complaints Procedure. There were 4 serious or complex complaints received in this year.

Of the 94 statutory social care complaints received:

- 83 were considered as straightforward
- 4 considered as serious and/or complex complaints
- 7 were withdrawn.

Category	2014-2015	2015-2016
Statutory Straightforward (Low/Moderate risk)	98	83
Statutory Serious and/or Complex (High risk)	0	4
Withdrawn	6	7
Total complaints - all	106	94

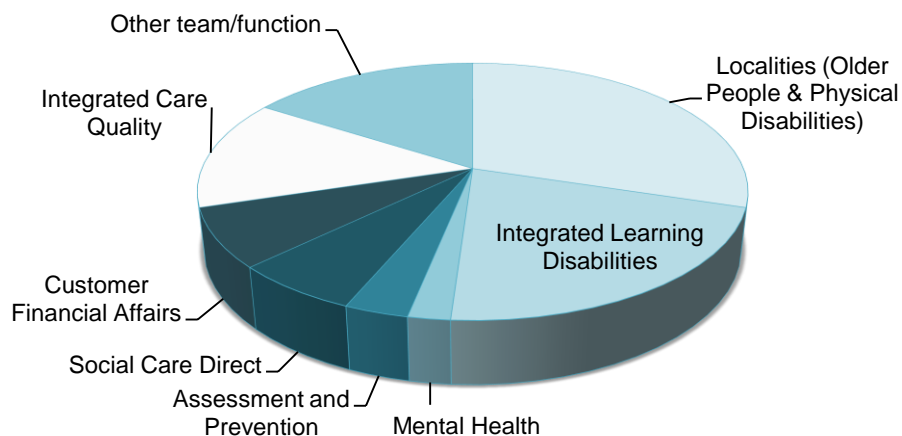
6.4 Complaint type by outcome

Category	No.	%
Statutory	87	100%
Not Upheld	34	40%
Partially Upheld	22	26%
Upheld	29	34%
Total statutory complaints with an outcome	85	98%
Withdrawn	7	8%
Not yet resolved	2	2%

6.5 Complaints by service area

Service Area	No. of Statutory Complaints	% of statutory complaints
Localities (Older People & Physical Disabilities)	28	29.7%
Integrated Learning Disabilities	20	21.2%
Mental Health	2	2.1%
Assessment and Prevention	3	3.19%
Social Care Direct	6	6.38%
Customer Financial Affairs	7	7.4%
Integrated Care Quality	13	13.8%
Other team/function	15	15.9%
Total	94	100%

Complaints by service area



6.6 Complaints by category

The table below shows the number of complaints by subject that were upheld or partially upheld by Adults and Communities

Category	2015-2016	Upheld	Partially upheld
Statutory Straightforward (Low/moderate risk)			
Lack of Communication	19	6	7
Timeliness - process/decision	3	2	1
Timeliness - delayed service	6	2	2
Quality of service	4	3	1
Quality of service - provider	10	5	0
Reduction in support/funding	12	2	1
Outcome of assessment	12	6	4
Staff behaviour /attitude	14	3	4
Other	3	0	1
Total Straightforward (Low/moderate risk)	83	29	21
Complex/serious (Moderate/high risk)			
Multiple reasons	4*	0	1
*2 cases still under investigation			
Total Complex/serious (Moderate/high risk)	4	1	1
Total number of complaints	94	29	22

6.7 Timeliness of acknowledgements to complaints

Quarter	Number of Complaints	Number acknowledged within 3 working days*	Percentage %
1	16	15	94%
2	20	19	95%
3	23	19	79%
4	35	33	94%

* Figures include 7 complaints that were acknowledged but withdrawn at a later date

The speed of acknowledgement and response in 2015-2016 has improved to an average of 90% which is a marked improvement since the previous year of 62%.

6.8 Performance relating to timeliness of responses to complaints within 20 working days

	2014/15			2015/16			
Quarter	Number of complaints	Number of responses within target	Percentage %	Number of complaints	Number of responses within target	Number withdrawn	Percentage %
1	36	21	58	16	13	0	81%
2	30	19	63	17	17	3	100%
3	16	8	50	21	18	2	86%
4	24	8	33	33	25	2	76%
Total	106	56	51%	87	73	7	87%

There has been a marked improvement in the number of complaints responded to within the agreed timescale.

Responding to complaints within timescales has been escalated as a priority for all managers within Adults and Communities. The process of managing complaints is now the responsibility of the Head of Service for each service area who work with team managers to investigate complaints and provide responses where necessary, but ultimately owning responsibility for the timeliness and quality of responses.

7. Learning from 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
- Monthly reports to the Adults and Communities Leadership Team
- Where services are purchased under contract, informing the appropriate service Commissioners and Care Quality 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 2015 and 31 March 2016:

- We are reviewing the information and advice about social care services through revising our website content and publications. This will ensure people who use our services and their carers are clear about what services we can offer and criteria for receiving the services.
- We are reviewing and updating our financial assessment information so that people are clear about how we charge for social care services
- During 2016-2017, we are trialling 'Strength Based Practice' which focuses on working collaboratively with residents to help them use the skills and abilities they've developed through their lives to enable them to help themselves.

Through Strength Based training programme, social care professionals will learn to work in a different way to develop person-centred care and take it to the next level to have more positive conversations with people who come to us for help.

8. 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.

8.1 Complaints and enquiries dealt with by the LGO 2015-2016

Table below shows the total number of new LGO enquiries and complaints received in Adult and Communities from 1 April 2015 to 31 March 2016, compared to the previous year.

	2014-2015	2015-2016
Complaints	4	8
Enquiries	8	11

The LGO Annual Report 2015-2016 highlights 19 complaints and enquires for Barnet social care service from 12 individuals, 8 of these resulted in a full investigation. The remaining 11 were preliminary enquiries which went no further.

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

We are responsible for ensuring 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 no statutory requirement but all new contracts for services commissioned by the council include a requirement to have a complaints procedure. This is also examined during the procurement process.

Where a person who used social care services or their representatives raises a concern about the quality of an external provider with the council, our Care Quality Service 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 the Care Quality Service, Adults and Communities may take further action, through the complaints process if appropriate.

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

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

9.1 Monitoring Care Quality

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

- 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 as appropriate when services do not meet the fundamental standards below which the provision of regulated activities and the care people receive must never fall.
- Responding to any other events, including safeguarding incidents which indicate that the provider is not fully complying with contractual requirements

The table below 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.

	2014 - 2015	2015 - 2016
Complaints and quality alerts	177	146
Complaints managed within Adults and Communities	8	28
Total	185	174

The number of complaints and quality alerts managed through the Care Quality Team has reduced slightly to 174 in 2015-2016. Analysis of these events shows that:

- 35 were about the quality of service provided
- 22 misconduct of staff
- 16 concerned the non-delivery of service
- 14 were in relation to timekeeping.

The vast majority (154) 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.

9.2 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 to work with providers of services to share best practice and support improvement. The service now also delivers a programme of support and engagement with providers of domiciliary homecare and supported living services

The 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 supporting prevention and wellbeing.

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

The Care Homes and Supported Living Team is also responsible for undertaking reviews of all older adults and people with physical disabilities placed in care homes by Barnet. This enables the service to be more responsive to quality concerns picked up as part of a review, and where the team has identified concerns through contract monitoring, to act swiftly to ensure people are safe.

The service also delivers a range of practice sharing and training events including:

- Monthly Practice Forums (supported by Skills for Care)
- Action Learning Sets
- Specialist Network Support groups including Learning Disabilities, Mental Health, Older Adults, Activity Co-ordinators and Nurses
- Specialist workshops run in conjunction with other professionals, for example CCG, North London Hospice Safeguarding Month and Mental Capacity Month events
- End of Life Care Planning.

The service is currently working jointly with Barnet Clinical Commissioning Group to develop a training initiative aimed at improving clinical practice in Care Homes. Training will be offered to both nurses and care workers on a number of areas including Dementia, deteriorating condition, palliative care and communication.

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	<p>Adults and Safeguarding Committee 13 July 2016</p>
<p style="text-align: right;">Title</p>	<p>Adults and Safeguarding Committee Work Programme</p>
<p style="text-align: right;">Report of</p>	<p>Governance Service</p>
<p style="text-align: right;">Wards</p>	<p>All</p>
<p style="text-align: right;">Status</p>	<p>Public</p>
<p style="text-align: right;">Urgent</p>	<p>No</p>
<p style="text-align: right;">Key</p>	<p>No</p>
<p style="text-align: right;">Enclosures</p>	<p>Appendix A – Committee Forward Work Programme</p>
<p style="text-align: right;">Officer Contact Details</p>	<p>Anita O'Malley, Governance Team Leader Email: anita.vukomanovic@barnet.gov.uk Tel: 020 8359 7034</p>

Summary

The Committee is requested to consider and comment on the items included in the 2016/17 work programme

Recommendations

- 1. That the Committee consider and comment on the items included in the 2016/17 work programme**

1. WHY THIS REPORT IS NEEDED

- 1.1 The Adults and Safeguarding Committee Work Programme 2016/17 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 This approach allows the Committee to respond to Adults and Safeguarding related matters of interest in the Borough.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

3.1 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.

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 in accordance with the Council's strategic objectives and priorities as stated in the Corporate Plan 2015-20.

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

5.2.1 None in the context of this report.

5.3 Social Value

5.3.1 N/A

5.4 Legal and Constitutional References

5.4.1 The Terms of Reference of the Committee is included in the Constitution, Responsibility for Functions, Annex A.

5.5 Risk Management

5.5.1 None in the context of this report.

5.6 Equalities and Diversity

5.6.1 None in the context of this report.

5.7 Consultation and Engagement

5.8 Insight

5.8.1 N/A

6. BACKGROUND PAPERS

6.1 None.

**London Borough of Barnet
Updated Again: Adults and
Safeguarding Committee
Forward Work Programme
July 2016 - May 2017**

Contact: Anita Vukomanovic 020 8359 7034 anita.vukomanovic@barnet.gov.uk

Title of Report	Overview of decision	Report Of (<i>officer</i>)	Issue Type (Non key/Key/Urgent)
13 July 2016			
Statutory Adult Social Care Annual Complaints Report 2015/16	<p>1. To note the information contained within the statutory Annual Complaints Report 2015/16;</p> <p>2. Approve the draft report for final publishing.</p>	Adults Social Care Assitant Director	Key
Adults and Safeguarding Performance Report including the Adult Social Care Local Account	<p>1. That the Committee note the progress made during 2015/16 and agree to use the information provided to help in future decision making.</p> <p>2. That the Committee notes the information contained within the Adult Social Care Local Account 2015-16 and approves the version of the report attached at Appendix A for publishing as final on the Council website.</p> <p>Following the consideration of Cllr Patel Members' item at the Committee's meeting on 16 June 2016, this report will include an analysis of the performance and benchmarking data which are intended to deliver the Committee's Commissioning Plan.</p>	Adults and Communities Director, Commissioning Director (Adults and Health)	Key

Title of Report	Overview of decision	Report Of (<i>officer</i>)	Issue Type (Non key/Key/Urgent)
19 September 2016			
Revised Business Case on Single Adult Social Care Alternative Delivery Vehicle	Committee to receive a report on Adult Social Care Alternative Delivery Model project Outline Business Case.	Commissioning Director Adults and Health	Key
Business Planning		Commissioning Director Adults and Health	Key
Barnet Multi-Agency Safeguarding Adults Board Annual Report 2015/16	That the Committee note the information contained within the Draft Barnet Multi-Agency Safeguarding Adults Board Annual Report 2015-16 which is due to be approved by the Multi- Agency Safeguarding Adults Board on 21st July 2016 and will be published after this date.		Key
Commissioning Strategy for Supported Living	Committee to receive a commissioning strategy for supported living.	Commissioning Director (Adults and Health)	Key
10 November 2016			
Annual Fees and Charges	Committee to receive a report on annual fees and charges.	Director of Resources (Deputy Section 151 Officer)	Key

Title of Report	Overview of decision	Report Of (<i>officer</i>)	Issue Type (Non key/Key/Urgent)
Your Choice Barnet: Consultation Findings		Commissioning Director Adults and Health	Non-key
Business Planning			Key
23 January 2017			
Adults and Safeguarding Performance Report	That the Committee note the progress made in 2016/17 and agree to use the information provided to help in future decision making.	Commissioning Director Adults and Health	Non-key