MEETING

ADULTS AND SAFEGUARDING COMMITTEE

DATE AND TIME

MONDAY 18TH MARCH, 2019

AT 7.00 PM

VENUE

HENDON TOWN HALL, THE BURROUGHS, LONDON NW4 4BG

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

Chairman: Councillor Sachin Rajput Vice Chairman: Councillor David Longstaff

Councillors

Councillor Roberto Weeden-Sanz Councillor Paul Edwards Councillor Golnar Bokaei Councillor Anne Hutton Councillor Caroline Stock Councillor Jo Cooper Councillor Reema Patel Councillor Helene Richman

Substitute Members

Councillor Brian Gordon Councillor Claire Farrier Councillor Anthony Finn Councillor Daniel Thomas Councillor Alison Moore Councillor Gill Sargeant

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 Wednesday 13th March at 10AM. Requests must be submitted to Abigail Lewis abigail.lewis@barnet.gov.uk 020 8359 4369

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

Andrew Charlwood – Head of Governance

Governance Service contact: Abigail Lewis abigail.lewis@barnet.gov.uk 020 8359 4369

Media Relations Contact: Gareth Greene 020 8359 7039

ASSURANCE GROUP

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ORDER OF BUSINESS

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Decisions of the Adults and Safeguarding Committee

26 November 2018

Members Present:-

AGENDA ITEM 1

Councillor Sachin Rajput (Chairman) Councillor David Longstaff (Vice-Chairman)

Councillor Roberto Weeden-Sanz	Councillor Caroline Stock
Councillor Jess Brayne	Councillor Jo Cooper
Councillor Paul Edwards	Councillor Reema Patel
Councillor Golnar Bokaei	Councillor Helene Richman

1. MINUTES

The minutes of the meeting held on 20 September 2018 were agreed as a correct record.

2. ABSENCE OF MEMBERS

None.

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

Cllr Cooper declared a non-pecuniary interest in that she is employed by the Royal Free London NHS Foundation Trust.

Councillor Caroline Stock declared a non-pecuniary interest in that her daughter works as a Psychiatrist for the Barnet, Enfield and Haringey Mental Health Trust.

Councillor Helene Richman declared a non-pecuniary interest in that she is a Trustee of Mind in Barnet.

4. REPORT OF THE MONITORING OFFICER (IF ANY)

None.

5. MEMBERS' ITEMS (IF ANY)

None.

6. PUBLIC QUESTIONS AND COMMENTS (IF ANY)

None.

7. BARNET MULTI-AGENCY SAFEGUARDING ADULTS BOARD ANNUAL REPORT 2017-18

Fiona Bateman, Independent Chair, Barnet Safeguarding Adults Board introduced the report which documented the work of the Safeguarding Adults Board in 2017-18 and outlined membership of the Board, work of the Safeguarding Adults Service User Forum and partner agencies, work plan progress and analysis of safeguarding alerts received 2017-18.

Following the consideration of the report, the Chairman MOVED to the vote on the recommendations set out in the report.

It was RESOLVED;

1. That the Adults and Safeguarding Committee comment on the Safeguarding Adults Board Annual Report 2017-18

2. That the Committee note that following the Adults and Safeguarding Committee meeting on 26th November 2018, the Annual Report will be published on the Council website.

8. ADULTS AND COMMUNITIES ANNUAL COMPLAINTS REPORT

James Mass, Assistant Director, Community Wellbeing highlighted the salient points of the report which is a statutory requirement for Councils with adult social care responsibilities. The report provided an overview of management of, and performance in responding to, adult social care complaints.

Following consideration of the report the Chairman then MOVED to the vote on the recommendations set out in the report.

It was RESOLVED;

1.That the Adults and Safeguarding Committee notes the Annual Complaints Report 2017-2018 and approves the report for publication.

9. BUSINESS PLANNING 2019-2024

Dawn Wakeling, Strategic Director for Adults, Communities and Health introduced the report which set out the priorities for the Adults and Safeguarding Committee that makeup the corporate plan, as well as committee specific priorities. It also set out the savings proposals that have been developed for this period for approval by the Committee, as well as providing a progress update on the delivery of this year's (18/19) MTFS savings and recovery plans.

The Chairman proposed a motion to add an additional recommendation to the report to instruct the Strategic Director for Adults, Communities and Health to prepare a proposal for inclusion in the business planning report for the Policy and Resources Committee in December 2018 setting out the revenue pressures arising from the reimplementation of the Mosaic system and how the Capita contractual settlement can be used to address these financial pressures.

This was seconded by Councillor Longstaff.

A vote was taken and the results were as follows;

For	Against	Abstention
10	0	0

The motion was passed.

Following consideration of the report the Chairman then MOVED to the vote on the recommendations set out in the report. The recommendations were voted on individually and the results were as follows;

Recommendation 1:

For	Against	Abstention
6	4	0

The recommendation was passed.

Recommendation 2:

For	Against	Abstention
6	4	0

The recommendation was passed.

Recommendation 3:

For	Against	Abstention
6	4	0

The recommendation was passed.

Recommendation 4:

For	Against	Abstention
6	0	4

The recommendation was passed.

Recommendation 5:

For	Against	Abstention
6	0	4

The recommendation was passed.

Recommendation 6:

For	Against	Abstention
10	0	0

The recommendation was passed.

Recommendation 7:

For	Against	Abstention
10	0	0

The recommendation was passed.

It was RESOLVED;

1. That the Committee notes the corporate priorities in Appendix A; and approves the additional priorities and approach to delivery for the Adults and Safeguarding Committee, as set out in Appendix B.

2. That the Committee consider the MTFS proposals that relate to the committee as set out in Appendix C after having considered the initial equalities impacts and refer their comments to Policy and Resources Committee for eventual decision by Full Council.

3. That the Committee consider the savings proposals for the next financial year as set out in Appendix C subject to the initial equalities impacts and refer them to Policy and Resources Committee for consultation and eventual decision by Full Council.

4. That the Committee agrees the proposed fees and charges to take effect from 1 April 2019 – 31 March 2020.

5. That the Committee notes the progress made on in-year financial recovery.

6. That the Committee approves the proposals for use of the additional 2018/19 central government funding for winter, as set out in paragraphs 2.19-2.22.

AND

7. That the Committee request the Strategic Director for Adults, Communities and Health to prepare a proposal for inclusion in the business planning report for the Policy and Resources Committee in December 2018, setting out the revenue pressures arising from the reimplementation of the Mosaic system and how the Capita contractual settlement can be used to address these financial pressures.

10. QUARTER 2 2018/19 ADULTS AND SAFEGUARDING PERFORMANCE REPORT

Dawn Wakeling introduced the report which provided an update on the Theme Committee priorities in the Corporate Plan 2018/19 Addendum for Quarter 2 (Q2) 2018/19, including budget forecasts for revenue and capital, progress on activities, performance of key indicators and any high-level risks.

Following the consideration of the report, the Chairman MOVED to the vote on the recommendations set out in the report. The results were as follows;

For	Against	Abstention
6	0	4

It was RESOLVED that;

The Committee had reviewed the financial, performance and risk information for Q2 2018/19 and agreed not to make any referrals to Policy and Resources Committee or Financial Performance and Contracts Committee in accordance with the terms of reference of these Committees.

11. COMMITTEE FORWARD WORK PROGRAMME

The Committee noted the Forward Work Programme.

12. ANY OTHER ITEMS THAT THE CHAIRMAN DECIDES ARE URGENT

The Chairman thanked the outgoing Governance Officer, Naomi Kwasa, for her work on the Committee and welcomed the new Governance Officer, Abigail Lewis, to the Committee.

The meeting finished at 20.58

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EFFICIT MINISTER	AGENDA ITE Adults and Safeguarding Committee 18 March 2019
Title	Mobilisation of Ansell Court Extra Care Scheme
Report of	Chairman of the Adults and Safeguarding Committee
Wards	All
Status	Public
Urgent	No
Кеу	No
Enclosures	None
Officer Contact Details	Muyi Adekoya, Head of Commissioning, Older Adults and Integrated Care <u>muyi.adekoya@nhs.net</u> Caroline Glover, Health and Social Care Commissioner <u>caroline.glover@barnet.gov.uk</u>

Summary

The Adults and Safeguarding Committee Commissioning Plan (2015 - 2020) identified the expansion of extra care housing schemes as a vital addition to care and support for older people, offering an alternative to residential care. In 2014/2015, a small number of potential extra care sites were identified in the borough, including Moreton Close in Mill Hill, and two further schemes are now in the planning stages. Funding of £15 million was identified in the council's capital programme for a Barnet Homes development of 53 units of extra care housing at the Moreton Close site, now renamed Ansell Court. This report informs the committee of the plans for the opening of Ansell Court. The report also provides comparative information on extra care costs as requested by the committee.



Officer's Recommendations

- **1.** That the Adults and Safeguarding Committee notes the plans for the opening of Ansell Court, including planned timescales for all flats to be occupied.
- 2. That the Adults and Safeguarding Committee notes the comparative information on extra care costs provided in the report.

1. WHY THIS REPORT IS NEEDED

BACKGROUND

- 1.1. The Adults and Safeguarding Committee Commissioning Plan (2015 2020) identified the expansion of extra care housing schemes as a vital addition to care and support for older people, offering an alternative to residential care. The expansion of extra care provision would help to meet the projected future care and support needs of older adults, which identified that an additional 227 affordable rent extra care places would be required by 2030 to meet eligible needs.
- 1.2. In 2014/2015 a small number of potential extra care sites were identified in the borough, including Moreton Close in Mill Hill. £15 million was identified in the Council's capital programme for a development of 53 units of extra care housing at the old Moreton Close site, now renamed Ansell Court (henceforth referred to as such), to be delivered by Barnet Homes.
- 1.3. The Ansell Court Extra Care scheme will have a dementia focus. The intention is that 50% of residents will have dementia, with the remainder of units occupied by residents with other care and support needs. Residents will have a housing need in addition to a social care need.
- 1.4. In order for an extra care scheme to be successful, there needs to be a balanced mix of needs amongst the residents. The Ansell Court specification sets out that the needs mix should be as follows:

Banding	Assessed care hours per week	Proportion of residents	Notes
High need	16 + hrs	50%	Bandings are not only determined by hours of care needed. A person's
Medium need	11-15 hrs	25%	independence and ability to be active
Low need	7-10 hrs	25%	will also be taken into account

1.5. The aim of Ansell Court is to maximise independence and choice for residents in providing an alternative to residential care. Residents at the scheme will have their own

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self-contained flat and security of tenure. Ansell Court will provide care and support for people with varying levels of need and support which will be available on-site 24 hours a day.

- 1.6. On 1 December 2016 the Policy and Resources Committee agreed the use of the teckal exemption for Ansell Court Extra Care Scheme within the council's Procurement Forward Plan for 2017/18.
- 1.7. In 2017 the council jointly produced the service specification for the Extra Care provision at Ansell Court with Your Choice Barnet (YCB), the council's social care Local Authority Trading Company. This specification has been developed in line with the: Adults and Safeguarding Committee Commissioning Plan 2015-2020; Barnet Council's Corporate Plan 2015 2020; and The Right Home Barnet's Strategic Commissioning Plan for Adult Social Care Accommodation and Support.
- 1.8. YCB and Barnet Homes will work together to deliver the care and support and housing management services at the Ansell Court Extra Care Scheme. YCB will deliver the care and support service; Barnet Homes will provide the housing and facilities management at the scheme.
- 1.9. Initially the Ansell Court build was due to be completed July 2018, however the completion date was postponed by six months due to delays with building works.
- 1.10. On 30th January 2019 the building of the site was completed and the keys for Ansell Court were handed over to Your Choice Barnet.
- 1.11. On the 5th February 2019 the Care Quality Commission (CQC), the regulator for health and social care, confirmed Ansell Court's CQC registration to deliver social care services at the site.

PHASED MOBILISATION

- 1.12. In order to ensure that the service is opened successfully, the council and YCB have planned a phased approach to residents moving in to the scheme. Current phasing and referral rates will see the scheme fully occupied within three months of the scheme opening.
- 1.13. A phased approach is required because:
 - Good practice suggests that phasing will enable the service to induct residents and staff through a managed transition to maintain high quality services and positive resident experience
 - Residents with more complex needs may take longer to make the transition from their current accommodation to Ansell Court (for example, if they need specific adaptations to their flat or if care and support staff require specialist training in order to support their specific needs)
 - Residents may need to serve notice on their current accommodation provider

- 1.14. Barnet Homes have agreed that where service users are currently Barnet Homes' tenants (and where it is appropriate), it will be possible to reduce their notice period to two weeks to enable service users to move more quickly into Ansell Court.
- 1.15. Currently there are more than forty-five individuals who have been referred to the scheme. Referrals are continuing to be received at a steady rate.
- 1.16. During the week commencing the 11th February 2019, the Registered Manager started to meet with residents referred to the scheme to identify their preferred move-in dates and to co-design their support plans.
- 1.17. Residents are scheduled to begin moving into the scheme from March 2019 onwards.

1.18. Comparative costs of extra care

1.19. At the Adults and Safeguarding Committee meeting on 22nd January 2018, the Committee requested that comparative information on the costs of extra care be brought back to the Committee. This section sets out local and London-based information on the pricing of extra care support hours. Table 1 summarises cost information showing the hourly care and support rates for local authorities that purchase extra care support by the hour¹.

Local Authority	Average hourly care and support rates for extra care
Inner London Local Authority A	£21 - £22
Inner London Local Authority B	£17 - £18
Outer London Local Authority C	£16 - £17
Barnet Council	£15 – £16
Outer London Authority D	
Outer London Authority E	£13 - £14

Table 1 – Hourly care and support extra care prices

1.20. This data does not include core costs for extra care schemes. As there is significant variation about what is included in core costs, comparisons are not meaningful. Models

¹ This information was gathered following a request that Barnet sent out to the London Commissioners Network in February 2018 to which five councils responded with their hourly rates. The councils have been anonymised so that their data can be used in this report.

vary significantly not just across local authorities but across individual extra care schemes within a local authority. For example, they may or may not include some or all of the following: night cover costs; a certain number of block care hours; activity coordination posts; costs of background staffing etc. There is also variation on how core costs are paid to providers (e.g. some schemes have their core costs paid through quarterly block payments and some core payments are related to the number of residents). Finally, not all councils pay core costs for all of their extra care schemes. For this reason, only comparative information on the care and support costs has been included.

2. REASONS FOR RECOMMENDATIONS

Ansell Court forms a key component of the Committee's commissioning plan and hence progress is being reported to Committee.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED Not applicable.

4. POST DECISION IMPLEMENTATION

- 4.1 YCB will continue to carry out reviews of the people on the referral list to ensure that they are suitable to move in to the scheme and that referrals into the scheme are in line with the required needs mix.
- 4.2 Once it has been identified that they are appropriate, the Registered Manager at Ansell Court will work with the individual, their family (where appropriate) and their allocated worker to identify an appropriate move in date, develop their support plan and support their transition into the scheme.
- 4.3 The Ansell Court contract will be monitored by the council's Care Quality Service to ensure that performance meets the requirements set out in the performance framework and contract.
- 4.4 Relevant officers will continue to meet fortnightly during the first four months of mobilisation to:
 - monitor the number of people moving in to the scheme and ensure use of the resource is maximised and referrals appropriate
 - ensure on-going engagement, communication and promotion of the scheme to staff, residents who could benefit from the scheme, their families and other relevant organisations.

5. IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

- 5.1.1. Extra Care supports delivery of the council's Corporate Plan Outcome 'Our residents live happy, healthy, independent lives with the most vulnerable protected'.
- 5.1.2. The corporate priority 'Supporting our residents who are older, vulnerable or who have disabilities, to remain independent and have a good quality of life' identifies opening new

Extra Care schemes for people who need additional support to remain living independently as a key delivery mechanism.

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

- 5.2.1 The Policy and Resources Committee on 28th June 2016 tasked the Adults and Safeguarding Committee with developing proposals for savings of £15.070m between 2016 and 2020.
- 5.2.2 Ansell Court supports the delivery of savings by providing a responsive service that can delay or prevent older people being admitted to residential care. The scheme will contribute to cost avoidance by making available an alternative to residential care, enabling residents to remain in their own home as long as possible as care can be adjusted to respond to changing needs.
- 5.2.3 The costs of the care and support service at Ansell Court will have the following components:
 - Weekly core service charge per flat: payment for a proportion of the background costs of the Extra Care Scheme, which will ensure that staff members are available 24 hours a day, 7 days a week for background support and emergency care when needed.
 - **Personalised Care and Support hours**: these are the hours of support that will be provided to residents as defined in their individual care plans. The number of support hours required by each resident/service users will be agreed following assessment by Adult Social Care.
- 5.2.4 Regular financial monitoring forms part of the contract, as does working within the ethos of continuous service improvement. The provider will be required to comply with key performance indicators and to provide evidence of the same at the performance monitoring and contract monitoring meetings which will take place on a quarterly basis.

5.3 Social Value

The Public Services (Social Value) Act 2012 requires people who commission public services to think about how they can also secure wider social, economic and environmental benefits. Before commencing a procurement process, commissioners should think about whether the services they are going to buy, or the way they are going to buy them, could secure these benefits for their area or stakeholders.

5.4 Legal and Constitutional References

- 5.4.1. The Terms of Reference for the Adults and Safeguarding Committee are set out in the council's Constitution (Article 7, 7.5 Responsibility for Functions). The Adults and Safeguarding Committee has the following responsibilities:
 - Responsibility for all matters relating to vulnerable adults, adult social care and leisure services.
 - Work with partners on the Health and Well Being Board to ensure that social care, interventions are effectively and seamlessly joined up with public health and

healthcare and promote the Health and Well Being Strategy and its associated sub strategies.

- To submit to the Policy and Resources Committee proposals relating to the Committee's budget for the following year in accordance with the budget timetable.
- To make recommendations to Policy and Resources Committee on issues relating to the budget for the Committee, including virements or underspends and overspends on the budget. No decisions which result in amendments to the agreed budget may be made by the Committee unless and until the amendment has been agreed by Policy and Resources Committee.
- To receive reports on relevant performance information and risk on the services under the remit of the Committee.
- To recommend for approval fees and charges for those areas under the remit of the Committee.
- 5.4.2. The provision of extra care services is in line with the duties of the Council under the Care Act 2014 in providing choice to residents, preventing or reducing needs and promoting a resident's wellbeing.

5.5 Risk Management

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

The broad purpose of this duty is to integrate considerations of equality into day business and keep them under review in decision making, the design of policies and the delivery of services.

5.6.2. Pursuant to the Equality Act 2010, public sector organisations have a responsibility to consider equality as part of every procurement. The Council and any organisation contracted by the Council to provide services on its behalf are under an obligation to have due regard to eliminating unlawful discrimination, advancing equality and fostering good relations in the contexts of age, disability, gender reassignment, pregnancy, and maternity, religion or belief and sexual orientation.

5.7 Corporate Parenting

In line with Children and Social Work Act 2017, the council has a duty to consider Corporate Parenting Principles in decision-making across the council. There are no implications for Corporate Parenting in relation to this report.

5.8 Consultation and Engagement

Between October 2015 and January 2016 the council met with a wide range of stakeholders (including a working group with residents of one of Barnet's current extra care schemes; engagement with carers and social care teams and visiting extra care schemes in other councils) to research good practice in the provision of care and support in extra care housing schemes. This research was used when designing the Ansell Court scheme and in the development of the specification.

5.9 Insight

It is estimated that there are currently over 4,000 people with dementia in Barnet and by 2021 this figure is expected to increase by 24%. People with dementia are usually, at a later stage of the disease, admitted to residential care and Ansell Court will provide an alternative option.

6. BACKGROUND PAPERS

- 6.1 Appendix 1 of the Annual Procurement Forward Plan (agenda Item 10, line 189 and 190 of the appendix) for 2017/2018 presented to the Policy and Resources Committee on 1 December 2016 which provided approval for the Teckal exemption for Moreton Close https://barnet.moderngov.co.uk/ieListDocuments.aspx?Cld=692&Mld=8731&Ver4
- 6.2 Adults Safeguarding Committee, 10 November 2016, (agenda Item 9) agreed that the council enter into a formal dialogue with Your Choice (Barnet) Ltd (YCB) to provide care and support services at Moreton Close Extra Care Scheme https://barnet.moderngov.co.uk/ieListDocuments.aspx?Cld=698&Mld=8674&Ver=4
- 6.3 Housing Strategy and Housing Committee Commissioning Plan, Housing Committee, 19th October 2015 <u>https://barnet.moderngov.co.uk/documents/s26448/Housing%20committee%20report20h</u> <u>ousing%20commissioning%20plan%20strategy%20final%20cleared%20report.pdf</u>
- 6.4 Funding for an Extra Care Housing Scheme at Moreton Close, NW7 and Advance Acquisitions of Leasehold properties on Regeneration Estates, 21st July 2014 <u>https://barnet.moderngov.co.uk/documents/s16154/Funding%20for%20an%20Extra%20</u> <u>Care%20Housing%20Scheme%20at%20Moreton%20Close%20NW7%20and%20Advan</u> <u>ce%20Acquisitions%20of%20Leasehold.pdf</u>
- 6.5 Annual Performance Report and the Local Account 2015/16, 13th July 2016 https://barnet.moderngov.co.uk/documents/s33224/Annual%20Performance%20Report% 20and%20Local%20Account.pdf
- 6.6 Adults and Safeguarding Business Plan 2016-17, Adults and Safeguarding Committee, 12 November 2015 https://barnet.moderngov.co.uk/documents/s27181/Adults%20and%20Safeguarding%20 Business%20Plan%202016-2017.pdf

ETHICIT MINISTERIO	AGENDA ITEM 8 Adults and Safeguarding Committee 18 March 2019
Title	Quarter 3 2018/19 Adults and Safeguarding Performance Report
Report of	Chairman of Adults and Safeguarding Committee
Wards	All
Status	Public
Urgent	No
Кеу	No
Enclosures	None
Officer Contact Details	Alaine Clarke, Head of Performance and Risk alaine.clarke@barnet.gov.uk

Summary

This report provides an update on the Theme Committee priorities in the Corporate Plan 2018/19 Addendum for **Quarter 3 (Q3) 2018/19**, including budget forecasts for revenue and capital, progress on activities, performance of key indicators and any high level risks.

Officer Recommendations

1. The Committee is asked to review the financial, performance and risk information for Q3 2018/19 and make any referrals to Policy and Resources Committee or Financial Performance and Contracts Committee in accordance with the terms of reference of these Committees.



1. PURPOSE OF REPORT

Introduction

- 1.1 The Adults and Safeguarding Committee has responsibility for all matters relating to vulnerable adults, adult social care and leisure services; and works with partners on the Health and Wellbeing Board to ensure that social care interventions are effectively and seamlessly joined up with Public Health and healthcare. The priorities for the year (see table 1) are set out in the Corporate Plan 2018/19 Addendum, which is available online at https://www.barnet.gov.uk/citizen-home/council-and-democracy/policy-and-performance/corporate-plan-and-performance
- 1.2 This report provides an update on these priorities for **Q3 2018/19**, including budget forecasts for revenue and capital, progress on activities, performance of key indicators and any high level risks.
- 1.3 This report is in addition to the Q3 2018/19 Strategic Performance Report to Policy and Resources Committee (20 February 2019) and the Q3 2018/19 Contracts Performance Report to Financial Performance and Contracts (FPC) Committee (11 March 2019). These reports are published on the committee section of the council's website at https://barnet.moderngov.co.uk/ieDocHome.aspx?bcr=1 prior to the committees.

Priorities	Key activities
Embedding strength-based best practice	 Share and develop strength-based working with citizens, health providers and the voluntary and community sector Implement the prevention and wellbeing co-ordination model with the local voluntary and community sector Work with partners to support communities to take practical actions to enable people to live well with dementia and make Barnet a dementia-friendly borough Focus on Improving Mental Health in the community through the delivery of an enablement model that will allow people to lead better lives through targeted support. This will include an improved pathway/access to services through joint working with the NHS Offer employment support to people who use adult social care through the new employment support framework and Your Choice Barnet (YCB) services Continue to provide advice and support to carers
Integrating local health and social care	 Implement the rapid response homecare to support timely hospital discharge and work with NHS Barnet Clinical Commissioning Group (CCG) to enhance support to care homes to avoid unnecessary hospital admissions Work in partnership with the CCG to implement the Care Closer to Home programme Develop a Care Home Strategy and an enhanced offer for care homes, including the red bag initiative to accompany people from care homes to and from hospital and Significant Seven (S7) training to support staff in the early identification of deterioration of patients Improve the health of carers through delivery of the carers and young carers strategy.

Table 1: Adults and Safeguarding Committee priorities for 2018/19

Priorities	Key activities
Needs-based support	 Work with NHS England to develop a joined-up plan for the future care needs of people in specialist residential services under the Transforming Care programme Expand homecare, enablement and support options for residents e.g. offer more technology services and increase supported living and nursing care Work with Barnet Homes and YCB to build a new extra care scheme at Moreton Close (renamed Ansell Court); and progress two further schemes in the west and south of the borough Re-commission care and support services at two extra care schemes (Goodwin Court and Wood Court) Work with Barnet Homes to enhance existing sheltered housing and housing plus to meet the increasing needs of older residents and those with disabilities Deliver the wider vision for accommodation and support services embedding greater use of all services and shaping the market to deliver an even greater range of housing options for independent living Prototype employment services for working age adults to support them to find and maintain employment Work with Barnet Mencap - Bright Futures (following the recent procurement) to ensure that prevention services are provided to more residents and that through the strength-based approach more people are
Improving leisure facilities and physical activity	 supported to achieve great, sustainable outcomes Complete implementation of the new leisure management contract including new services for residents Continue construction of two new leisure centres - Barnet Copthall and New Barnet – for a planned opening in 2019 Deliver improvements to existing leisure centres Raise awareness of sport and physical activity and increase participation through the Fit and Active Barnet Partnership Co-ordinate funding applications, volunteering and training opportunities through the Fit and Active Barnet Partnership Complete an Indoor Sport and Recreation Study which will act as a strategic review and complement to the Barnet Playing Pitch Strategy and Local Plan
Health and Wellbeing	 Commission lead providers for health checks and smoking cessation services to simplify administration and deliver improved outcomes Implement the Healthy Weight Implementation Plan across the partnership

Budget forecasts

1.4 The forecast **revenue outturn** (after reserve movements) at Q3 2018/19 for Adults and Communities was £95.071m; a projected **underspend of £0.426m** (see table 2).

Table 2: Revenue forecast (Q3 2018/19)

Service	Revised Budget £000	Q3 18/19 Forecast £000	Variance from Revised Budget Adv/(fav) £000	Reserve Move- ments £000	Q3 18/19 Forecast after Reserve Move- ments £000	Variance after Reserve Move- ments Adv/(fav) £000
	2000	2000	2000	2000	2000	2000
Integrated Care – Learning Disabilities	28,226	28,226	0	0	28,226	0
Integrated care – Mental Health	6,604	6,604	(0)	0	6,604	(0)
Integrated Care – Older Adults	32,139	32,274	135	0	32,274	135
Integrated Care – Physical Disabilities	8,430	8,430	0	0	8,430	0
Workforce	14,601	14,242	(359)	0	14,242	(359)
A&C Other	5,498	5,295	(202)	0	5,295	(202)
Adults and Communities	95,497	95,071	(426)	0	95,071	(426)

1.5 A proposal will be put to Council to use capital receipts to fund one off costs relating to the Mosaic project. As a result, the revenue budget for **Adults and Communities** is projected to underspend by £0.426m. The underspend relates to staffing budgets within the service. These are now proposed to be funded through the flexible use of capital receipts, subject to Council approval.

Non-achievement of any mitigating actions will lead to an increased pressure. Risks are monitored monthly and will result in an overspend of $\pounds 0.573m$, if all materialise. One of the key risks being monitored is the potential increase in care referrals due to winter spikes in health activity (currently estimated at $\pounds 0.315m$).

The non-placements budgets are forecasting a net underspend of £0.562m which is the net effect of £0.417m underspend on staffing budget and £0.145m underspend mostly due to Equipment and Adaptations and partially offset by overspends on Deprivation of Liberty safeguards (DOLs) assessment costs. The Equipment and Adaptations budget is used to purchase small items of equipment. Following a review, it was decided that it was more appropriate to capitalise the large items of equipment via the Disabled Facilities Grant (DFG) budget. The DFG capital budget is managed within the Development and Regulatory Services area of the capital programme and is expected to be overcommitted. This pressure has therefore emerged as a forecast overspend on the revenue budget.

The forecast outturn on placements is currently showing a £0.135m overspend as at Period 9, all due to Older Adults. Winter Pressures funding from the Government of £1.400m is included within the projections, and reallocated in Period 8 to better reflect pressure from hospital discharge.

There is presently a backlog in raising invoices for income due to the service and focused work is taking place to eliminate this. In addition, there are a number of significant debtors (such as the CCG) for the service which could result in debt write

offs being written back to the service. The service management are working hard to resolve the backlog, officers are liaising closely with CCG officers to resolve the debt issues, and the council is introducing a Debt Board to look at how debt is managed and pursued.

1.6 The projected **capital forecast** at Q3 2018/19 for Adults and Communities (Investing in IT) was **£2.400m** and for the Commissioning Group (Sport and Physical Activities) was **£23.277m**.

Service	18/19 Revised Budget	Additions/ (Deletions)	(Slippage)/ Accelerated Spend	Q3 18/19 Forecast	Variance from Approved Budget
	£000	£000	£000	£000	£000
Investing in IT	2,850	0	(450)	2,400	(450)
Adults and Communities	2,850	0	(450)	2,400	(450)
Sport and Physical Activities (SPA)	22,761	0	516	23,277	516
Commissioning Group (SPA)	22,761	0	516	23,277	516

Table 3: Capital forecast (Q3 2018/19)

- 1.7 The Mosaic project has forecast slippage of £0.450m.
- 1.8 The budget for the Sport and Physical Activities (SPA) construction programme for Barnet Copthall and New Barnet leisure centres has been reprofiled and £0.516m accelerated for works scheduled in 2018/19.

Committee priorities

- 1.9 The update on Committee priorities includes performance and risk information as follows:
 - Progress on activities
 - Performance of key indicators¹
 - High level risks from the Corporate Risk Register²
 - Strategic issues/escalations related to the Theme Committee's terms of reference and annual plan.
- 1.10 An overall status for each of the Committee's priorities is shown in table 4. This reflects the Q3 2018/19 position on budget forecasts, progress on activities, performance of key indicators and any high level risks.

¹ RAG rating reflects the percentage variance of the result against the target as follows: On target = GREEN (G); Up to 9.9% off target = AMBER (A); 10% or more off target = RED (R). The Direction of Travel (DOT) status shows the percentage variation in the result since last year e.g. Improving (\uparrow I), Worsening (\downarrow W) or Same (\rightarrow S). The percentage variation is calculated as follows: Q3 18/19 result minus Q3 17/18 result equals difference; then difference divided by Q3 17/18 result multiplied by 100 = percentage variation. Any results not for three months of quarter, illustrated by (c) = cumulative from start of financial year; (s) snapshot at end quarter; or (r) rolling 12 months.

² The Corporate Risk Register includes strategic risks (strategic and business critical risks) and high level (scoring 15 and above) service/joint risks (service and contract delivery risks). All risks are managed in line with the council's risk management framework. The risk registers are live documents and the Q3 18/19 Corporate Risk Register provides a snapshot in time (as at end December 2018).

Table 4: Overall status for priorities (Q3 2018/19)

Adults and Communities Committee priorities	Overall status
Embedding strength-based best practice	Amber
Integrating local health and social care	Green
Needs-based support	Green
Improving leisure facilities and physical activity	Amber
Health and Wellbeing	Amber

Embedding strength-based practice

1.11 Operational work to embed strength-based social care improvement has continued. Since September 2018 a panel chaired by an Assistant Director has been used to review and authorise all care and support plans including lower level funded packages of care. Areas of improvement have been identified, though the majority of packages of support have been approved as appropriately strength-based. An external audit of case recording will take place early in Q4 and the findings reported into the operational Quality Board.

The Adult Social Care User Survey for 2017/18 has been published. The key indicators for strength-based practice showed that performance had been maintained or improved; and Barnet performed strongly against comparator local authorities. Overall satisfaction (very and extremely satisfied categories only) with care and support increased from 61.7% in 2016/17 to 63.6% in 2017/18, with Barnet ranked 2nd in the comparator group of 16 local authorities. The proportion of people who said they had as much social contact as they would like also increased, from 43.4% in 2016/17 to 46% in 2017/18, with Barnet ranked 3rd in the comparator group. Barnet also maintained strong performance in relation to social care-related quality of life and ranked 4th in the comparator group, and Barnet ranked 2nd when people were asked about the impact of social care on their quality of life against the comparator group. These indicators are reported a year in arrears, as part of the 2018/19 social care performance framework.

Other measures reported in Q3 have also performed well against targets. A recently published Local Government Association benchmarking tool shows that Barnet has the 4th lowest level in England of residential care admissions for those over 65, demonstrating the effectiveness of the service's strengths-based and independencefocused approach. The percentage of adults with learning disabilities living in their own homes or with families is at 78.4% against a target of 72.5% - a slight percentage decrease from the previous guarter but an increase from 627 to 629 adults living in stable accommodation. A targeted programme of case reviews for adults with mental health (MH) issues potentially able to step down from residential care took place in Q3 and the number of adults with MH issues living independently has increased by four individuals to 83.5%, outperforming the target of 83%. Employment for adults with MH issues was at 8.4%, better than the 7.5% target. Employment for adults with learning disabilities (LD) has fallen short of the target and is the reason for the amber rating for the priority. Prototyping of the new employment and day opportunities support service with LD service users has continued in Q3. Roll out of the service to MH service users was delayed in Q3 but is being progressed in Q4. Steering groups to support this are being held in January 2019.

- 1.12 There are 11 key indicators linked to this priority in the Corporate Plan. Seven have met the quarterly target; three cannot be reported because of difficulties reporting from the case management system (Mosaic); and one has not met the quarterly target.
 - Adults with learning disabilities in paid employment (RAG rated RED) 9.7% against a target of 10.9%. Support plans at all levels of cost continue to be signed off via a panel process which provides feedback and challenge on whether employment options have been considered. The new learning disabilities day opportunities and employment support service was prototyped in Q3 and will be rolled out more widely in Q4. The roll-out includes a steering group working with social workers to identify and increase referrals into the services.

Indicator	Indicator Polarity 17/18 18/19		C	23 18/19		Q3 17/18	Benchmarking	
		EOY	Target	Target	Result	DOT	Result	Ũ
Permanent admissions to residential and nursing care homes, per 100,000 population age 65+ (c)	Smaller is Better	312.5	468.5 ³	351	260 (G)	↑ +1.2%	256.5	CIPFA Neighbours 383.4 London 406.2 England 585.6 (NASCIS, 17/18)
Permanent admissions to residential and nursing care homes, per 100,000 population age 18-64 (c)	Smaller is Better	3.2	12.0	9.0	3.3 (G)	↓ W +63%	2.0	CIPFA Neighbours 8.8 London 9.6 England 14.0 (NASCIS, 17/18)
Adults with learning disabilities who live in their own home or with their family	Bigger is Better	75%	72.5%	72.5%	78.4% (G)	↑ I +9.2%	71.8%	CIPFA Neighbours 70.9% London 73.3% England 77.2% (NASCIS, 17/18)
Adults with learning disabilities in paid employment	Bigger is Better	10.1%	10.9%	10.9%	9.7% (R)	↑ I +1.5%	9.6%	CIPFÁ Neighbours 9.3% London 7.5% England 6.0% (NASCIS, 17/18)

³ This target has been revised to bring it into line with the trajectory agreed in Better Care Fund monitoring.

Indicator	Polarity	17/18	18/19	(23 18/19		Q3 17/18	Benchmarking
indicator	Folding	EOY	Target	Target	Result	DOT	Result	Denominarking
Adults with mental health needs in paid employment	Bigger is Better	6.7%	7.5%	7.5%	8.4% (G)	↑ I +12%	7.5%	CIPFA Neighbours 7.8% London 6% England 7% (NASCIS, 17/18)
Adults with mental health needs who live independently, with or without support	Bigger is Better	82.4%	83%	83%	83.5% (G)	↑ +1.7%	82.1%	CIPFA Neighbours 67.1% London 61% England 57% (NASCIS, 17/18)
Contacts that result in a care package (c)	Monitor	22.9%	Monitor	Monitor	No result⁴	N/A	16.7%	No benchmark available
Service users receiving ongoing services with telecare (c)	Bigger is Better	25.4%	26.5%	26.2%	No result⁵	N/A	24.3%	No benchmark available
Instances of information, advice and guidance provided to carers (c)	Bigger is Better	3874	3600	2700	No result ⁶	N/A	2854	No benchmark available
People who feel in control of their own lives (Annual)	Bigger is Better	72.1% ⁷	73%	73%	75.8% (G)	↑ +8.4%	69.9%	CIPFA Neighbours 74.1% London 73.2% England 77.7% (NASCIS, 17/18)
Service users who find it easy to get information (Annual)	Bigger is Better	61.1% ⁸	69.8%	69.8%	69.1% (G)	↓ W -4.2%	72.1%	CIPFÁ Neighbours 71.2% London 70.1% England 73.3% (NASCIS, 17/18)

⁴ This indicator cannot be reported because of difficulties with Mosaic configuration, reports and data quality.

⁵ This indicator cannot be reported because of difficulties with Mosaic configuration, reports and data quality.

⁶ This indicator cannot be reported because of difficulties with Mosaic configuration, reports and data quality.

⁷ This survey indicator has a confidence interval of +/-4.1%pts. The result differs slightly to that reported in Q3 2017/18 (69.9%) due to further data cleansing.

⁸ This survey indicator has a confidence interval of +/-4.1%pts. The measures from the annual social care survey have been subject to further validation and are being resubmitted to NHS Digital, the publishers of national social care data.

- 1.13 There are five high level risks linked to this priority two strategic risks and three service risks. The case management system risk sits at both strategic and service level.
 - STR007 Significant adults safeguarding incident (residual score 15). The safeguarding risk in Adult Social Care is being managed by various policies and procedures, including practice standards; training; and quality assurance, including case audits and supervision audits. The service reports to CMT Assurance, Barnet Safeguarding Adults Board, Adults and Safeguarding Committee and the Health and Wellbeing Board annually. There has been a comparison exercise of safeguarding indicators to national benchmarks in Q3, which showed Barnet to be in line with national benchmarks including the conversion rate of safeguarding concerns to inquiries and an improved satisfaction in adults who use the service feeling safe and secure. It is understood that even with very effective management of safeguarding risks, a safeguarding incident could still occur.
 - STR020 / AC028 Lack of fully functioning case management system (residual score 15 reduced from 20). If the substantial remedial work required to Mosaic is not implemented in a timely manner, the lack of a fully functioning case management system will have an impact on key business processes and on data/information. The main commercial process has completed and a new contractor, Bettergov, has been procured to complete implementation of Mosaic. A plan and approach are being developed to deliver the remedial work, with an expectation that this is signed off by the programme board in January 2019. As a result, the likelihood score has reduced from 4 to 3, resulting in a reduced residual score of 15 (from 20)
 - AC001 Increased overspend to meet statutory duties (residual score 20). The uncertainty of the operating environment could lead to insufficient resources for the service to meet its statutory duties. The demand for care services has continued to increase, particularly in complexity and the cost of individual care packages. The announcement of winter pressures monies has significantly improved the in-year budget position. Recovery planning has been undertaken and measures implemented, including holding vacant posts; scrutiny of new spend by an Assistant Director to ensure care planning is appropriate and proportionate; recruitment of additional capacity to carry out financial assessments to ensure income is realised. The medium term pressures remain.
 - AC031 Budget management (residual score 16). Delays in resolving issues with Mosaic have limited the ability to produce routine budget reports, which could result in budget issues not being identified and addressed in a timely fashion leading to overspend. A new contractor, Bettergov, has been procured to complete implementation of the Mosaic system. A plan and approach are being developed to deliver the remedial work, with an expectation that this is signed off by the programme board in January 2019. The plan focuses in its initial stages on streamlining the brokerage processes to ensure more timely purchasing of care. The new finance reporting solution is in use with trend analysis tools being developed and tested for rollout at the end of Q4.

These updated figures are not yet reflected in the published NHS Digital results. The result differs slightly to that reported in Q3 2017/18 (61.7%) due to further data cleansing.

Integrating local health and social care

1.14 Delayed Transfers of Care (DTOC) have been maintained at a low level during the autumn 2018. There were higher levels of delays in September 2018, particularly in relation to complex mental health cases, but the adult social care target was achieved. Delays were brought down in October and November 2018. The reduction in delays is in part due to Barnet contracting with 23 new providers to increase capacity in the homecare market. These contracts went live in Q3. Delays are likely to become more challenging in Q4 as the winter pressures continue to build.

The council has been working with Barnet CCG on the Care Closer to Home programme. There are now six Care Closer to Home Integrated Networks (CHINs) in varying stages of development across Barnet. Paediatric rapid access clinics and a Frailty multi-disciplinary team (CHIN 1 and 2) have gone live in Q3. Further mobilisation will take place for a diagnostics proposal that has already gone through the CCG Governance process for CHIN 3, while upcoming projects will focus on implementing digital platforms and ensuring all CHINs are in a go-live state by the end of Q4. A specialist dementia focused CHIN is being scoped and developed, which will focus on improving health and wellbeing outcomes for adults with dementia and carers of adults with dementia.

The Transforming Care Partnership has continued to perform well, although there have been a small number of new hospital admissions in Q3. There is no further financial impact on Barnet Adult Social Care due to agreements with other local authorities and no discharges are imminent. A number of complex cases have arisen where funding responsibilities are subject to dispute with other CCGs. Officers are working closely to identify any particular risks, although it is likely that the risks will be held by the CCG.

- 1.15 There are two key indicators linked to this priority in the Corporate Plan. Reducing Delayed Transfers of Care (DTOC) has been a priority for Adult Social Care, with national targets set for DTOC reduction in July 2017 and the improved Better Care Fund (iBCF) was linked to achieving this target.
 - Delayed transfers of care (DTOC) from hospital per day per 100,000 population (aged 18+) which are attributable to NHS and adult social care (RAG rated AMBER) - 6.98 against a target of 6.84. The result is slightly worse than target by -0.12 delays per day per 100,000 population. Social care delays outperformed the target but both NHS and joint delays underperformed. Close work with NHS partners has continued to manage delays through the winter period, discharge pathways are under continuous review for improvements and additional brokerage capacity has been recruited to speed up the sourcing of care packages.

Indicator	Polarity 1	17/18	18/19	Q3 18/19			Q3 17/18	Benchmarking
	Polanty	EOY	Target	Target	Result	DOT	Result	Denchinarking
Delayed transfers of care from hospital per day per 100,000 population (aged 18+) which are attributable to NHS and adult social care (s)	Smaller is Better	9.4 ¹⁰	6.84 ¹¹	6.84	6.98 (A)	N/A	N/A ¹²	CIPFA Neighbours 7.2 London 7 England 12.3 (November 18, Department of Health)
Delayed transfers of care from hospital per day per 100,000 population which are attributable to adult social care only (s)	Smaller is Better	2.3 ¹³	2.03 ¹⁴	2.03	1.28 (G)	N/A	N/A ¹⁵	CIPFA Neighbours 2.98 London 2.7 England 4.3 (November 18, Department of Health)

1.16 There are two high level service risks linked to this priority.

- AC002 Failure of care provider (residual score 20 increased from 12). The failure of a care provider could lead to services not being delivered. Due diligence is undertaken at the start of all contracts to ensure the quality and sustainability of providers; and regular contract monitoring takes place. The service works across the care market to share best practice, support staff development and improve the quality of care. A provider failure / closure approach is in place to manage closure of homes and the safe transition of service users. The quality of social care providers is broadly good across Barnet; and there is a low level of provider concerns. However, there has been an increased focus on 'supported living' providers and the Care Quality team has identified a number of providers where significant improvements are required to improve quality. There has also been the failure of Allied Healthcare. This has been managed effectively to ensure continued service delivery and a number of contingency plans put in place. As a result, the likelihood score has increased from 3 to 5, resulting in an increased residual score of 20 (from 12).
- AC005 Challenges to recruit and retain qualified staff (residual score 16 increased from 12). A challenging job market could lead to difficulties in recruiting and retaining sufficient staff. An increasing number of posts are being held vacant to support financial recovery planning and in other cases recruitment has been

⁹ Q3 2018/19 result is for November 2018. The NHS publication schedule for this data means there is a gap in reporting with December 2018 data due to be released on 14 February 2018.

¹⁰ A new methodology was introduced for DTOC indicators by the Department of Health in 2017/18, so results are not comparable.

¹¹ The DTOC targets are set by NHS England at a national level and were subject to revision when the Corporate Plan 2018/19 Addendum was published. Subsequently, the target has changed from 9.1 to 6.84.

¹² A new methodology was introduced for DTOC indicators by the Department of Health in 2017/18, so results are not comparable.

¹³ A new methodology was introduced for DTOC indicators by the Department of Health in 2017/18, so results are not comparable.

¹⁴ The DTOC targets are set by NHS England at a national level and were subject to revision when the Corporate Plan 2018/19 Addendum was published. Subsequently, the target has changed from 2.6 to 2.03.

¹⁵ A new methodology was introduced for DTOC indicators by the Department of Health in 2017/18, so results are not comparable.

postponed. This has an impact on remaining staff who are managing increased caseloads and holding higher volumes of incoming work as a result. The Delivery Unit is monitoring the effect on staff morale. The majority of agency staff who are not in project-based posts have been transferred to permanent contracts or left. Work has continued to monitor any additional risks posed by the office move and Brexit impact, both of which are also being monitored corporately. As a result, the impact score has increased from 3 to 4, resulting in an increased residual score of 16 (from 12).

Needs-based support

1.17 A workshop was held with accommodation and support providers in October 2018 to inform the review of the supported living services. Engagement with operational staff has taken place to inform this review. New referral forms are being developed to streamline processes.

The site build for Ansell Court completed in January 2019. Two open days were held in November 2018 for potential resident, carers and stakeholders to visit the scheme and see the show flat. The scheme will be ready for service users to move in to from March 2019. Activity to support the re-procurement of extra care support at Wood Court also took place in quarter 3.

The Autism Self-Assessment Framework, designed to measure NHS and local authorities' progress towards meeting the requirements of the Autism Act, was submitted in December 2018. A service user and carer focus group was held to inform the return. The main gaps and issues identified, as well as proposed actions to address them, will be reported back to the focus group in Q4. Work has continued on a business case to develop more provision for autism screening and diagnosis, which is commissioned by the NHS.

The North Central London (NCL) project developing support for adults with learning disabilities (LD) experiencing mental health (MH) crisis has continued, with a consultation event held in early January 2019.

1.18 There are two indicators linked to this priority in the Corporate Plan. Both are annual indicators and have met the annual target.

Indicator Polarity	Polarity	Polarity 17/18 EOY	18/19 Target -	Q3 18/19			Q3 17/18	Benchmarking
				Target	Result	DOT	Result	Ŭ

Indicator	Polarity	17/18 EOY	Target		Q3 18/19	17/18		Benchmarking
People who use adult social care services satisfied with their care and support (Annual)	Bigger is Better	63.6% 16	62.1% (within confiden ce interval)	Target 62.1%	Result 63.6% (G)	▲ I +3.1%	61.7%	CIPFA Neighbours 60.7 London 59.3% England 65.0% (NASCIS, 17/18)
People who use services who say those services make them feel safe and secure (Annual)	Bigger is Better	83.7% 17	81% (within confiden ce interval)	81%	83.7% (G)	↑ 1 +7.3%	78%	CIPFÁ 83.7% London 82.2% England 86.3% (NASCIS, 17/18)

1.19 There are no high level risks linked to this priority.

Improving leisure facilities and physical activity

1.20 The council has been working closely with Greenwich Leisure Ltd (GLL) to develop more opportunities available through the Fit and Active Barnet (FAB) Card. Approximately, 17,000 residents have registered for the free FAB Card since the launch in July 2018.

GLL have delivered c.£1.5m facility improvements at Finchley Lido Leisure Centre and Burnt Oak Leisure Centre, which include the creation of a new mezzanine floor at Finchley Lido for an enhanced gym and fitness area and a new upgraded 3G football pitch at Burnt Oak, as part of their ongoing commitment to supporting physical activity in Barnet. This has resulted in increased attendances at both facilities.

In addition, GLL in partnership with Dementia Hub UK launched a new monthly Dementia Hub at Barnet Copthall in December 2018. Physical activity taster sessions were delivered at the following care homes in November 2018, as part of the Hub Network: Catherine Lodge, Dell Field Court and Kenwood Care Home.

The council investments in the construction of new centres at Barnet Copthall and New Barnet leisure centres are progressing well. A topping out ceremony was held at New Barnet Leisure Centre in November 2018. The facilities are on track for completion by the summer 2019.

¹⁶ This survey indicator has a confidence interval of +/-4.1%pts. The measures from the annual social care survey have been subject to further validation and are being resubmitted to NHS Digital, the publishers of national social care data. These updated figures are not yet reflected in the published NHS Digital results. The result has been updated to reflect the published NHS Digital result.

¹⁷ This survey indicator has a confidence interval of +/-3.2%pts, so is within target. The result has been updated to reflect the published NHS Digital result.

- 1.21 There are two key indicators linked to this priority in the Corporate Plan. One is an annual indicator from the Sport England Active Lives survey and one is a quarterly indicator that monitors leisure attendances. Neither indicator has met the target.
 - Population taking part in sport and physical activity at least twice in the last month (RAG rated AMBER) 72.2% against an annual target of 78.5%. The sample size for the survey is 500 people and the variation from target equates to three people. The council is investing in a number of schemes that support the improvement of physical activity infrastructure and opportunities in the borough, including new leisure facilities, sports facility enhancements via master planning exercises at Barnet Copthall, West Hendon, King George V Playing Fields, and the Fit and Active Barnet (FAB) campaign that has seen c.17,000 residents register for their free FAB Card since July 2018. In addition, work with key stakeholders has led to new community based initiatives, including new weekly Parkrun events in Friary Park (juniors) and Sunny Hill Park.
 - Leisure attendances (RAG rated AMBER) 267,738 against a target of 290,750. This indicator is profiled as an approximate over four quarters and seasonal variances will affect target achievement. Attendances are slightly below target, but have increased since Q2 (265,911). It is anticipated that attendances will peak in January 2019 in line with industry trends, which will support achievement of the annual target. Capital investment at Finchley Lido and Burnt Oak leisure centres has resulted in increased attendances at these facilities during Q3 and this trend is expected to continue into Q4 with targeted marketing campaigns. A capital investment programme has been delivered at Hendon leisure centre throughout Q3, which has caused some disruption to customers.

Indicator	Polarity	17/18 EOY	18/19 Torgot	Q3 18/19			Q3 17/18	Benchmarking
		EUT	Target	Target	Result	DOT	Result	
Population taking part in sport and physical activity at least twice in the last month (Annual) ¹⁸	Bigger is Better	77.9%	78.5%	78.5%	72.2% (A)	↓ W -7.3%	77.9%	Rank 30 (out of 33 London Boroughs)
Total number of leisure attendances	Bigger is Better	New for 18/19	1,163, 000	290, 750	267, 738 (A)	New for 18/19	New for 18/19	No benchmark available

1.22 There are no high level risks linked to this priority.

¹⁸ The Active Lives Adult Survey was sent out to a randomly selected sample of households across England in May 2018. The overall sample size was around 198,250 people, with 500 from Barnet. The data is weighted to the Office for National Statistics (ONS) population measures for geography and key demographics. The result is impacted slightly due to the ONS producing revised estimates of the sub-national population in June 2018, where Barnet's population has increased. A confidence interval of +/- 2% points applies. This is a provisional result, which will be confirmed in May 2019. Another survey was undertaken in November 2018, which will be published in 2019/20.

Health and Wellbeing

1.23 The **Stop Smoking Service** has continued to encourage smokers to attend sessions. In Q2, 4-week quitters were at 84, compared with 78 last year (YTD was 181¹⁹, compared with 172²⁰ last year). This represents a 5.2% increase which has been achieved despite a slight reduction in number of people setting a quit date (430 vs 452) and reflects a greater conversion rate (42.1% vs 38%) and a lower Lost to Follow Up²¹ rate (36% vs 42.7%) in comparison to last year. Access to the service has improved for specialist groups (Long Term Health Conditions, Pregnancy, and Mental Health) and the number of quit dates set has increased by 64% (148 vs 90) and the amount of quits from these groups has increased by 34% (47 vs 35). Ongoing training will focus on developing the service in these areas. Lost to Follow Up calls are being processed and there are 130 outstanding clients to be contacted. The results of these calls will further improve the Quit and Lost to Follow Up rates.

The **NHS Health Checks** programme in Barnet is delivered by GP practices, with most local practices (48 out of 55) engaged in delivering the programme and completing health checks with some of their eligible patients. The remaining practices are being encouraged to deliver health checks and practices are being chased up on their contracts. In Q2, more people (5050) were invited to a health check (above target) than last year (4540); and there has been a rise in the number of people receiving a health check (2161, compared to 1265 last year). An ambitious target has been set for completed health checks to motivate GP practices, with performance slightly below target for Q2. However, there has been a significant (77%) increase on last year. Training on how to deliver the health checks was delivered in November 2018, with 24 participants from surgeries.

The Health and Wellbeing Board signed the Local Government Declaration on Sugar Reduction and Healthier Eating formalising Barnet's public commitment to tackling the proliferation of unhealthy food and drinks. Action taken have included discussions with ISS catering for schools and North London Business Park, in addition to catering arrangements for the new council office.

Action taken in the 2017/18 year to improve the food environment was formally recognised by the GLA and Sustain as the council received the award for most improved borough at the Good Food for London Awards. Two of Barnet's High Streets were also recognised as being in the top 10 healthiest high streets in London, a reflection of our work with the policy team on hot food takeaways and healthier catering interactions with local food businesses. The **healthy weight** programme for children in Barnet was successfully transferred to the new provider (GLL) in September 2018.

1.24 There are five key indicators linked to this priority in the Corporate Plan. Child excess weight is an annual indicator and will be reported later in the year. Smoking cessation and NHS Health Checks are reported a quarter in arrears, so Q2 results are reported below. NHS Health Checks has not met the quarterly target.

¹⁹ This is a cumulative YTD figure for Q2 2018/19. The data for this indicator is updated throughout the year. The final figure will be adjusted to account for this and confirmed at the end of the financial year.

²⁰ This is the cumulative YTD figure for Q2 2017/18. The figures are adjusted throughout the year. The final YTD figure for Q2 2017/18 was 195.

²¹ 'Lost to follow-ups' refer to patients who at one point in time were actively participating in smoking cessation sessions but have become lost at the point of follow-up.

 NHS Health Checks – Uptake (RAG rated AMBER) - 2161 against a target of 2325. The annual target for NHS Health Checks is ambitious and a clear increase on service delivery. Although the uptake of NHS Health Checks in Q2 (2161) was lower than target, this was a significant increase on last year (1265) and an improvement on Q1 (1757). To improve performance, training was provided for staff in GP practices on how to deliver the service in November 2018.

Indicator	Polarity	17/18 EOY	18/19 Target	Q2 18/19			Q2 17/18	Benchmarking
				Target	Result	DOT	Result	0
Smoking cessation – 4- week quitters (c)	Bigger is Better	444	400	176	181 ²² (G)	↓ W -7.2%	195 ²³	No benchmark available
NHS Health Checks – Invites	Bigger is Better	17938	20155	5038	5050 (G)	↑ +11.2%	4540	No benchmark available
NHS Health Checks - Uptake	Bigger is Better	6286	9300	2325	2161 (A)	↑ +70.8%	1265	No benchmark available
Child excess weight – 4/5 year olds (Annual)	Smaller is Better	21.00%	18.97%	N/A	Due Q1 19/20	N/A	N/A	London 22.31% England 22.63% (16/17, Public Health England)
Child excess weight – 10/11 year olds (Annual)	Smaller is Better	32.60%	31.16%	N/A	Due Q1 19/20	N/A	N/A	London 38.55% England 34.25% (16/17, Public Health England)

1.25 There is one high level service risk linked to this priority.

PH06 - Pandemic Influenza type disease outbreak (residual score 20) - A Declaration of Pandemic Influenza by the World Health Organisation (WHO) could lead to severe resource and capacity issues for the council and partner agencies impacting on the delivery of services and the health protection of the boroughs residents. [Pandemic Influenza is a national risk and is recorded on the Borough Resilience Forum Risk Register. Local Authority management of a Pandemic Influenza outbreak is in accordance with the council's category 1 statutory responsibilities and obligations, in line with the Civil Contingencies Act (2004)]. Mitigations are in place in terms of the Pandemic Flu plan – signed off in 2017 which will be reviewed and updated. The Barnet operational pandemic framework was completed in September 2018. A multi-agency Pan Flu preparedness exercise has been undertaken, which was facilitated by Public Health England and used operation Corvus, a scenario designed by PHE, to test Barnet's operational pandemic framework. Feedback from the exercise will inform updates to Barnet's pandemic flu plan.

²² This is a cumulative YTD figure for Q2 2018/19. The data for this indicator is updated throughout the year. The final figure will be adjusted to account for this and confirmed at the end of the financial year.

²³ This is the final YTD figure for Q2 2017/18 after adjustments were made.

Strategic issues/escalations

1.26 This report does not identify any matters which require an escalation to Policy and Resources Committee by the Adults and Safeguarding Committee.

2 REASONS FOR RECOMMENDATIONS

2.1 These recommendations are to provide the Committee with relevant financial, performance and risk information in relation to the priorities in the Corporate Plan 2018/19 Addendum.

3 ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

3.1 None.

4 POST DECISION IMPLEMENTATION

4.1 None.

5 IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

- 5.1.1 The report provides an overview of performance for Q3, including budget forecasts for revenue and capital, progress on activities, performance of key indicators and any high level risks.
- 5.1.2 The Q3 2018/19 results for all Corporate Plan indicators are published on the Open Barnet portal at <u>https://open.barnet.gov.uk/dataset</u>
- 5.1.3 Robust budget, performance and risk monitoring are essential to ensure that there are adequate and appropriately directed resources to support delivery and achievement of council priorities and targets as set out in the Corporate Plan.
- 5.1.4 Relevant council strategies and policies include the following:
 - Corporate Plan 2015-2020
 - Corporate Plan 2016/17, 2017/18 and 2018/19 Addendums
 - Medium Term Financial Strategy
 - Performance and Risk Management Frameworks.
- 5.1.5 The priorities of the council are aligned to the delivery of the Health and Wellbeing Strategy.

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

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

5.3 Social Value

5.3.1 The Public Services (Social Value) Act 2012 requires people who commission public services to think about how they can also secure wider social, economic and environmental benefits. Before commencing a procurement process, commissioners should think about whether the services they are going to buy, or the way they are going to buy them, could secure these benefits for their area or stakeholders. The

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

5.4 Legal and Constitutional References

- 5.4.1 Section 151 of the Local Government Act 1972 states that: "without prejudice to section 111, every local authority shall make arrangements for the proper administration of their financial affairs and shall secure that one of their officers has responsibility for the administration of those affairs". Section 111 of the Local Government Act 1972, relates to the subsidiary powers of local authorities.
- 5.4.2 Section 28 of the Local Government Act 2003 (the Act) imposes a statutory duty on a billing or major precepting authority to monitor, during the financial year, its income and expenditure against the budget calculations. If the monitoring establishes that the budgetary situation has deteriorated, the authority must take such action as it considers necessary to deal with the situation. Definition as to whether there is deterioration in an authority's financial position is set out in sub-section 28(4) of the Act.
- 5.4.3 The Council's Constitution (Article 7, Article 7 Committees, Forums, Working Groups and Partnerships) sets out the responsibilities of all council Committees. The responsibilities of the Adults and Safeguarding Committee include:
 - (1) Responsibility for all matters relating to vulnerable adults, adult social care and leisure services.
 - (2) Work with partners on the Health and Well Being Board to ensure that social care, interventions are effectively and seamlessly joined up with public health and healthcare and promote the Health and Wellbeing Strategy and its associated sub strategies.
 - (3) To submit to the Policy and Resources Committee proposals relating to the Committee's budget for the following year in accordance with the budget timetable.
 - (4) To make recommendations to Policy and Resources Committee on issues relating to the budget for the Committee, including virements or underspends and overspends on the budget. No decisions which result in amendments to the agreed budget may be made by the Committee unless and until the amendment has been agreed by Policy and Resources Committee.
 - (5) To receive reports on relevant performance information and risk on the services under the remit of the Committee.
- 5.4.4 The council's Financial Regulations can be found at: <u>http://barnet.moderngov.co.uk/documents/s46515/17FinancialRegulations.doc.pdf</u>

5.5 Risk Management

5.5.1 The council has an established approach to risk management, which is set out in the Risk Management Framework. All high level risks (scoring 15 or above) associated with the priorities for this Committee are outlined in the report.

5.6 Equalities and Diversity

- 5.6.1 The Public Sector Equality Duty at s29 of The Equality Act 2010 requires organisations exercising public functions to demonstrate that due regard has been paid to equalities in:
 - Elimination of unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010.
 - Advancement of equality of opportunity between people from different groups.
 - Fostering of good relations between people from different groups.
- 5.6.2 The Equality Act 2010 identifies the following protected characteristics: age; disability; gender reassignment; marriage and civil partnership, pregnancy and maternity; race; religion or belief; sex and sexual orientation.
- 5.6.3 In order to assist in meeting the duty the council will:
 - Try to understand the diversity of our customers to improve our services.
 - Consider the impact of our decisions on different groups to ensure they are fair.
 - Mainstream equalities into business and financial planning and integrating equalities into everything we do.
 - Learn more about Barnet's diverse communities by engaging with them.
 - This is also what we expect of our partners.
- 5.6.4 This is set out in the council's Equalities Policy together with our strategic Equalities Objective - as set out in the Corporate Plan - that citizens will be treated equally with understanding and respect; have equal opportunities and receive quality services provided to best value principles.
- 5.6.5 Progress against the performance measures we use is published on our website at: <a href="https://www.barnet.gov.uk/info/200041/equality_and_diversity/224/equality_and_diversity/and_

5.7 Corporate Parenting

5.7.1 In line with Children and Social Work Act 2017, the council has a duty to consider Corporate Parenting Principles in decision-making across the council. There are no implications for Corporate Parenting in relation to this report.

5.8 Consultation and Engagement

5.8.1 Consultation on the Corporate Plan 2015-2020 was undertaken between summer 2013 and March 2015. Consultation on the new Corporate Plan 2019-24 was carried out in the summer 2018. The Corporate Plan will be approved by Council in March 2019.

5.9 Insight

5.9.1 The report identifies key budget, performance and risk information in relation to the Corporate Plan 2018/19 Addendum.

6 BACKGROUND PAPERS

6.1 Council, 6 March 2018 – approved 2018/19 addendum to Corporate Plan. http://barnet.moderngov.co.uk/ieListDocuments.aspx?Cld=162&Mld=9162&Ver=4



Adults and Safeguarding Committee

AGENDA ITEM 9

18 March 2019

Title	Adults and Safeguarding Committee Delivery Plan 2019/20
Report of	Chairman of Adults and Safeguarding Committee
Wards	All
Status	Public
Urgent	No
Кеу	No
Enclosures	Appendix A: Additional priorities and approach to delivery Appendix B: Delivery Plan 2019/20
Officer Contact Details	Courtney Davis, Head of Transformation <u>Courtney.Davis@Barnet.gov.uk</u>

Summary

The development of the council's Corporate Plan and Medium Term Financial Strategy (MTFS) has been aligned to cover the next five years (2019-2024). A business planning report was taken to Adults and Safeguarding Committee on 27 November 2018 which set out these documents in draft, alongside the priorities for this Committee over the next five years (Appendix A). This includes the corporate priorities that the Committee is responsible for, as well as Committee specific priorities.

This report includes an annual Delivery Plan for 2019/20 which sets out specific actions to achieve the priorities for this Committee over the next year, and how progress and performance will be measured. It also identifies any risks to delivery. The plan will be refreshed on an annual basis. The committee will receive a performance report each quarter updating on progress, performance and risk against the priorities.

The Corporate Plan and MTFS for 2019-2024 were approved by Full Council on 5th March 2019.

Officer's Recommendations



1. That the Committee approve the Delivery Plan 2019/20 as set out in Appendix B.

1. WHY THIS REPORT IS NEEDED

1.1 This report is required as part of the business planning process in order for the Committee to discuss and approve the annual Delivery Plan for 2019/20.

2. STRATEGIC CONTEXT

- 2.1 Like all councils, Barnet is facing an increasingly difficult financial challenge with demand for services increasing and funding from central government decreasing, along with an uncertainty around future funding. Therefore, the council must now make decisions to prioritise its limited resources effectively and develop plans for the next five years to deliver both statutory duties and ambitions for Barnet within these financial constraints.
- 2.2 To ensure the council has a plan that reflects local priorities, as well as a financial strategy that will support a sustainable position, the development of the Corporate Plan and MTFS have been aligned to cover the next five years (2019-2024). This will ensure there is a medium-term plan in place to use limited resources in line with what we want to achieve for the borough.
- 2.3 The Corporate Plan, known as Barnet 2024, has been refreshed to reflect the priorities of the new administration, which was elected in May 2018, and resident feedback on what matters to them. Feedback has been captured through public consultation and engagement that took place during the summer of 2018. The Corporate Plan sets the strategic direction of the council, including outcomes for the borough, the priorities we will focus our limited resources on, and how we will approach delivery.
- 2.4 The three outcomes for the borough, as set out in the Corporate Plan, focus on place, people and communities:
 - A pleasant, well maintained borough that we protect and invest in
 - Our residents live happy, healthy, independent lives with the most vulnerable protected
 - Safe and strong communities where people get along well
- 2.5 To support delivery of these outcomes, Adults and Safeguarding will be responsible for delivering any corporate priorities that fall within its remit, as well as any additional priorities that relate to matters the Committee is responsible for under its Terms of Reference. These were approved by Adults and Safeguarding Committee on 27 November 2018 and can be seen in Appendix A.
- 2.6 These priorities will inform an annual Delivery Plan which sets out the key activities, performance indicators/targets and risks in relation to delivery of the corporate and committee priorities. Delivery Plans will be refreshed on an annual basis. The committee will receive a performance report each quarter updating on progress, performance and risk against the priorities. The draft Delivery Plan for 2019/20 is at Appendix B for approval by the Committee.

3. REASONS FOR RECOMMENDATIONS

3.1 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, delivering local priorities and allocating resources effectively.

4. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

4.1 The alternative option is to not have long-term plans in place which could expose the council to significant risks. In addition, the absence of a Delivery Plan would make it difficult for progress against our outcomes to be measured.

5. POST DECISION IMPLEMENTATION

- 5.1 The priorities for this Committee will be delivered in accordance with the Delivery Plan 2019/20 set out at Appendix B.
- 5.2 The Delivery Plan will be refreshed on an annual basis. The committee will receive a performance report each quarter updating on progress, performance and risk against the priorities.

6. IMPLICATIONS OF DECISION

6.1 **Corporate Priorities and Performance**

6.1.1 The council's Corporate Plan, which sets out the outcomes, priorities and strategic approach, has been refreshed for 2019 to 2024. The Delivery Plan set out in this report supports delivery of the Corporate Plan and includes performance indicators/targets to monitor progress.

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

6.2.1 The Delivery Plan 2019/20 for Adults and Safeguarding Committee supports the savings programme that was approved by Adults and Safeguarding Committee on 27 November 2018.

6.3 Social Value

6.3.1 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.

6.4 Legal and Constitutional References

6.4.1 The council's Constitution (Article 7, Article 7 – Committees, Forums, Working Groups and Partnerships) sets out the responsibilities of all Committees. The responsibilities of the Adults

and Safeguarding Committee can be found here:

http://barnet.moderngov.co.uk/documents/s47983/08Article7CommitteesForumsWorkingGroups andPartnerships.doc.pdf.

Responsibilities include:

- Responsibility for all matters relating to vulnerable adults, adult social care and leisure services.
- Work with partners on the Health and Well Being Board to ensure that social care interventions are effectively and seamlessly joined up with public health and healthcare and promote the Health and Wellbeing Strategy and its associated sub strategies.
- To submit to the Policy and Resources Committee proposals relating to the Committee's budget for the following year in accordance with the budget timetable.
- To make recommendations to Policy and Resources Committee on issues relating to the budget for the Committee, including virements or underspends and overspends on the budget. No decisions which result in amendments to the agreed budget may be made by the Committee unless and until the amendment has been agreed by Policy and Resources Committee.
- To receive reports on relevant performance information and risk on the services under the remit of the Committee.

6.5 Risk Management

- 6.5.1 The council has an established approach to risk management, which is set out in the Risk Management Framework. Risks will be reviewed quarterly (as a minimum) and any high-level risks will be reported to the relevant Theme Committee and Policy and Resources Committee.
- 6.5.2 The Delivery Plan includes key risks to delivering the corporate and committee priorities and key activities.

6.6 Equalities and Diversity

- 6.6.1 Equality and diversity issues are a mandatory consideration in the decision-making of the council. The Equality Act 2010 and the Public-Sector Equality Duty, requires elected Members to satisfy themselves that equality considerations are integrated into day-to-day business and that all proposals emerging from the business planning process have taken into consideration the impact, if any, on any protected group and what mitigating factors can be put in place.
- 6.6.2 This is set out in the council's Equalities Policy together with our strategic Equalities Objective - as set out in the Corporate Plan - that citizens will be treated equally with understanding and respect; have equal opportunities and receive quality services provided to best value principles.

6.7 Corporate Parenting

6.7.1 In line with Children and Social Work Act 2017, the council has a duty to consider Corporate Parenting Principles in decision-making across the council. The outcomes and priorities in the refreshed Corporate Plan reflect the council's commitment to the Corporate Parenting duty to ensure the most vulnerable are protected and the needs of children are considered in everything that the council does.

6.8 **Consultation and Engagement**

- 6.8.1 Public consultation and engagement on the Corporate Plan took place between 16 July 2018 and 23 September 2018. The findings from this have been considered and incorporated into the document.
- 6.8.2 Public consultation with residents and businesses on the 2019/20 budget took place between 12 December 2018 and 16 January 2019.

5.8 Insight

5.8.1 Not applicable.

7. BACKGROUND PAPERS

7.1

Item	Decision	Link
Adults and Safeguarding Committee 26 November 2018	Business Planning 2019- 2024	https://barnet.moderngov.co .uk/documents/s49810/Busi ness%20Planning%202019- 2024.pdf
Policy and Resources Committee 11 December 2018	Corporate Plan 2019-2024, Business Planning – Medium Term Financial Strategy 2019/2024 and Draft Budget for 2019/20	https://barnet.moderngov.co .uk/documents/s50139/Corp orate%20Plan%202019- 24%20Business%20Plannin g%20Medium%20Term%20 Financial%20Strategy%202 01924%20and%20Draft%20 Budget%20.pdf

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Adults and Safeguarding Committee Delivery Plan 2019/20

1. Committee Context

The Adults and Safeguarding Committee is responsible for promoting the best possible Adult Social Care services, working with partners on the Health and Wellbeing Board to promote integration of social care with health, and ensuring that the council's safeguarding responsibilities are taken into account.

Adult Social Care services have a key role to play in improving the lives of Barnet's most vulnerable residents. We work with housing, education, and health services to enable people to stay independent, in control of their lives, and live for longer in their own homes. We do this through developing best practice social care focused on what people can do and how they can help themselves.

2. Financial Context

The savings identified for Adults and Safeguarding Committee for 2019/20 are outlined in the Table 1 below:

Table 1: Savings Proposals

Table 1: Sav	vings Proposals	
Savings Reference	Savings Title	2019/20 £000
E2	Staffing reductions	(682)
E3	Transformation of Your Choice Barnet	(227)
E4	Rescoping and targeting of prevention contracts	(370)
E6	Meeting eligible needs in more cost-effective settings	(424)
E7	Reduction of printing	(25)
11	BCF	(647)
12	<u>iBCF</u>	(1,391)
13	Maintaining affordable levels of inflation on existing care packages	(1,000)
14	Prepaid card solution	(250)
15	Reduction of bad debt	(100)
R1	Increasing the independence of OA / PD	(192)
R5	Assistive Technology	(300)
R8	Support for working age adults	(285)
R9	Mental Health service user independence	(188)
19/20 Savi	ngs Total	(6081)

The overall savings strategy in this MTFS period is to build on strengths based practice and the new ways of working and services we have developed. We will continue to maximise the use of assistive technology to reduce dependency on traditional care services across client groups and the accommodation offer with additional extra care housing. We will reduce spend on learning disabilities services through continued transformation of Your Choice Barnet supported living and day care services and working with Families and Education services to increase the independence of young people transitioning into Adult social care. We will continue to reduce spend on older adults and clients with physical disabilities, by using technology, equipment, adaptations and strength based working to promote the independence of existing clients as well as with mental health provision by continuing to review clients and put in place more independence-focussed care packages. We will also continue to ensure commissioning activity and investment is targeted, aligned with our demand and delivers a programme of work with the sector that is effective and high performing.

Table 2 below sets out the annual delivery plan for 2019/20 showing specific actions for how the priorities for this Committee will be delivered over the next year and how progress and performance will be measured. It also identifies any risks to delivery.

Table 2: Delivery Plan

Priority	How will we achieve this??	Year 1 Timescale	How will we measure this?	Year 1 Targets	What are the key risks?
Integrating health and	The Care Closer to Home Programme (CC2H) Board will continue to oversee the mobilisation and delivery of the Care Closer to Home Integrated Networks (CHIN's), with CHIN 4, 5 and 6 mobilising from March 2019. ¹ Council	CHINs Mobilised	We will continue to provide narrative updates on other aspects of our CC2H progress	Target to be	Strategic relationship within the NHS: There is a risk that the complexity of the health and
social care	prevention and wellbeing services will continue to work closely with CHIN 2 on frailty and, within CHIN 5, we will be	September	on other aspects of our cc2rr progress	confirmed	care landscape causes integration to move at
and providing	developing improved support for adults with dementia and their carers. This will include improved pathways with the	2019		3	an insufficient scale and pace impacting the
support for those with	ASC Specialist Dementia Support Team, and strengthening links with the voluntary & community sector.		Permanent admissions to residential and nursing care homes, per 100,000 population	490	delivery of activities.
mental health	Through this work, and working alongside Public Health, we will support the implementation of the 'whole borough'	March	age 65+		Surge in demand from NHS: There is a risk of
problems and	social prescribing model referring people to interventions in the community ²	2020			unpredictable surge in demand from the NHS
complex			Democrate designs to residential and	10	in situations where there is limited capacity
needs	We will continue to develop work with Barnet CCG and NCL STP on integrated care in line with the NHS Long term		Permanent admissions to residential and nursing care homes, per 100,000 population	12	could lead to the Adult Social Care being
	plan.		age 18-64		unable to meet this demand within the NHS's required timescales.
			050 10 0 T		required timescales.
	Integrated mental health services will continue to deliver care closer to home, like the integrated provision of	March	New admissions to residential care for	7.5	Strategic prevention and intervention: There
	mental health services for adults of working age and older adults. The Mental Health service is comprised of an early	2020	working age adults, per 100,000 population,		is a risk that the funding and sustainability
	intervention team, four locality teams, and an intensive enablement team who work with people with long term		MH only		challenges facing the voluntary sector could
	mental health issues. In addition to these teams the Network provides mental health enablement and recovery				lead to a reduction in the capacity of the
	services. The emphasis on the interventions provided by the Network is based on a person centred philosophy, making good use of community resources and making people as independent as possible. The service has been successful at		Percentage of adults with mental health	83% ⁴	Borough's preventative services, potentially
	supporting people to live in the community, reducing the number of people moving into residential services.		needs who live independently, with or	0370	impacting on the delivery of activities where work is being delivered closely with the
			without support.		community and voluntary sector.
	The Integrated Learning Disability Service will continue to provide multi-disciplinary support to people with learning				
	disabilities to enable them to remain living in their own home and be part of community life.		Percentage of adults with learning disabilities	74%	
			who live in their own home or with their		
	Continue to work with the NHS to achieve timely discharge from hospital through our hospital teams including	March	family.		
	continuation of 7 day working at both acute sites and through discharge to assess pathways. More than 55% of clients discharged through this pathway did not need further social care. The hospital social work teams will support,	2020	Number of delayed transfers of care from	6.84	
	alongside a jointly funded CHC (Continuing Healthcare) accessor, assessment in the community to determine individual		hospital per 100,000 population (aged 18+)	0.64	
	care needs and the hospital reviews team will assess home care packaging promptly after discharge.		which are attributable to the NHS and adult		
			social care.		
	We will continue to work to achieve timely discharge for people who are subject to the Mental Health Act and				
	admitted to hospital. The national framework for delayed discharges provides a framework for this work and a robust		Number of delayed transfers of care from	2.03	
	process for monitoring this work is in place with weekly joint health and social care monitoring meetings and monthly		hospital per 100,000 population which are		
	reporting.		attributable to adult social care only	75 05	
			% of people who feel in control of their lives	75.8 ⁵ (within	
	Offering and signposting to prevention support for people to stay active and more independent in the community		(annual measure; not available until Q3)	confidence	
	will continue with Social Care Direct and staff within adult social care proactively providing information and advice to	March	(, , , , , , , , , , , , , , , , , , ,	interval)	
	individuals they come in contact with and signposting them to different organisations to promote their independence	2020			

	and wellbeing. Our commissioned information, advice and signposting services have reached nearly 12,000 people so		People signposted to information, advice and		
	far in 2018/19, and over 2000 carers (adult carers, young carers) have received Information and advice to support		guidance (not available until end Q1)	Targets to	
	them in their caring role.			be	
	Adult Social Care will continue to work closely with the voluntary and community sector and other stakeholders to develop our prevention offer. We have four Prevention and Wellbeing Coordinators working in local wards (Edgeware, Childs Hill and Oakleigh) and one floating support coordinator as well as an online offer. Coordinators work with 30-40 individuals/families in one year, and we have worked with over 150 people since the service started. 12 new initiatives have been established working alongside the local voluntary and community sector partners, which includes an over 50s health and information community event, mental health support group, Bollywood dance activity, an IT surgery, exercise classes, walking and reading groups and volunteering placements.	March 2020	Referrals to voluntary sector organisations at first contact (not available until end Q1)	confirmed	
	Open new extra care schemes for people who need additional support to remain living independently: Ansell Court, our new 53-unit, dementia focussed, extra care scheme is now complete. Residents will be moving in from March 2019.We have a waiting list and expect to fill all of the units by the end of the calendar year. We will also continue to develop 2 additional schemes.	December 2019	Number of Extra Care beds in Ansell Court which are filled (snapshot)	53	Lack of approved mental health professionals: There is a risk that there are a lack of practicing Approved Mental Health Professionals (AMHPs) to meet rising
			Proportion of people receiving reablement	Targets to	demand and complexity could lead to breach
	We will continue to offer support to help residents remain independent through enablement services that help people regain or increase their independence as well as providing equipment that allows people to stay more independent at home. We will continue to use assistive technology to support residents to maintain their	March 2020	who go on to require a long term service (SALT measure, not available until end Q1)	be confirmed	of statutory responsibilities to carry out Mental Health act assessments; resulting in
Supporting those with disabilities, older, and vulnerable	independent at home. We will continue to use assistive technology to support residents to maintain their independence and stay safe in their homes and out in the community. The service continues to grow significantly, with a forecast 1,488 new installations in 2018/19. Specific approaches are in use to support speedy discharge from hospital and better support people in supported living. The service helps the council avoid significant costs by reducing the requirement for traditional care services. A £900k saving was achieved in 17/18 and this looks likely to be exceeded in		Proportion of people with a reduction in support needs following telecare referral (not available until end Q1),	,	Barnet not acting in someone's best interest (Mental Capacity Act).
residents to	18/19.		Percentage of service users receiving ongoing services with telecare (not available until end		
remain independent and have a good quality of life	Offer support for carers of people with dementia through a programme led by our specialist dementia team. The team supported the carers of 20 people with dementia in 18/19, preventing residential care admissions, and we are currently supporting five people with dementia and their carers. Continue to commission a variety of dementia support services in Barnet offering information, advice, assessment and advocacy. The Alzheimer's Society are specifically commissioned by Barnet and lead on Dementia Friendly Communities which is a programme that encourages everyone to share responsibility for ensuring that people with dementia feel understood, valued and able to contribute to their community.	March 2020	Q1)		
	This year we will also develop our dementia strategy which will set out our vision for how we will support adults with dementia and their carers. This will include an action plan for work we are undertaking.	July 2019			
	Deliver new and more efficient leisure facilities at Barnet Leisure Centre and Barnet Copthall Leisure Centre, with both	Sontombor	Percent of population taking park in sport and	770/	Leisure facilities: There is a risk that delays in
	new centres opening in 2019/20.	2019	physical activity at least twice in the last month (as defined by active lives, measured	/ / 70	programme could result in not meeting anticipated completion dates and the planned
	Deliver facility enhancements and improvements within our sport and leisure facilities at Hendon Leisure Centre, Burnt Oak Leisure Centre and Finchley Lido Leisure Centre.	September 2019	twice a year)		opening of the leisure centres. FAB Card: There is a risk that the 2 nd phase of
Encouraging residents to lead active	Give residents access to health and wellbeing information and activities through phase 2 of Fit and Active Barnet (FAB) campaign which includes upgrading the Fit and Active Barnet Hub website and implementing a new digital	August 2019	Number of FAB card holders following FAB2 campaign	22,000	the FAB campaign will not result in the level of anticipated FAB Card registrations.
and healthy lifestyles and	application focused on active travel.	March	Number of participants engaged in targeted	690	Leisure Contract. There is a risk that the leisure operator fails to deliver against
maintain their mental wellbeing	The new leisure contract supports the delivery of a number of public health outcomes and preventative and wellbeing services including the MECC training for leisure staff, delivery of weight management services (children and adult), falls prevention service, diabetes prevention programme and a dementia hub at new leisure facilities. The programme also coordinates the Barnet Disability Sports Network.	2020	programmes	participants annually	contractual obligations/commitments impacting the delivery of the contract and the specific health and wellbeing activities
		March			Barnet Disability Sports Network: There is a
	Working alongside the Public Health team, we will continue to support people to maintain and improve their mental health and wellbeing. We will do this by raising awareness of mental health and wellbeing working with the voluntary and community sector and residents and promote use of the digital 'good thinking' platform. ⁸	2020			risk the Network fails to identify and collaborate on opportunities to enhance access and experience for disabled residents.

⁸ Some actions against this priority are delivered by Health and Wellbeing Board

Safeguarding adults at risk of abuse and neglect	We will launch the Adults MASH, which will provide a new pathway for reporting safeguarding concerns and will enable the appropriate multi- agency triage of cases and support comprehensive, well informed, multi-agency safeguarding enquiries for adults at risk of abuse, harm or neglect. The operation of the Safeguarding Adults Board (SAB) and delivery of the SAB workplan is core to the work we do to safeguard adults as well as our statutory duty to carry out a Section 42 Enquiry where an adult is at risk of abuse or neglect.	September 2019	Number of safeguarding concerns, number of Section 42 enquiries, conversion rate concerns to enquiries.	Q2 ⁹ Monitor	MASH: There is a risk that there will be insufficient resource and subject expertise within the MASH due to capacity constraints within service areas, e.g. mental health, strategic partners, which may lead to the MASH being less effective and unable to effectively safeguard vulnerable adults.
Efficient delivery of statutory duties	Deliver the Medium Term Financial Strategy and savings programme	March 2020	Monthly monitoring to ensure savings are on track to be delivered.	Monitor	 Savings: Due to the complexity of modelling and monitoring demand led savings because of challenges predicting 'baseline' demand and avoided costs then actual savings may deviate from plans resulting in savings targets not be met. Mosaic/Reporting: Following the move to the new case management system, delays in resolving issues have limited the ability for the council to produce routine reports, which could result in budget issues not being identified and addressed in a timely fashion, leading to overspend and/or not being able to baseline and report on new performance indicators.

⁹ New target for 19/10, a performance framework is being developed and baseline established after which target will be set for the remainder of the year



Adults and Safeguarding Committee

The Adults and Safeguarding Committee is responsible for promoting the best possible Adult Social Care services, working with partners on the Health and Wellbeing Board to promote integration of social care with health, and ensuring that the council's safeguarding responsibilities are taken into account.

Introduction:

We work with health, housing, education and other services to meet people's care and support needs and help them to stay as independent as possible. We do this by focusing on people's strengths: on what people can do and how they can help themselves. We are diversifying Barnet's accommodation offer to help more people to live independently, through increasing supported living for younger adults and building new extra care facilities for older people. We have transformed our day care provision, so people can access employment and volunteering. We have integrated our social care services with health services. We have implemented innovative technology services and evidence-based prevention support to help people stay as independent as possible. We encourage active and healthy lifestyles to reduce demand on adult social services and are improving the borough's leisure facilities, parks, and open spaces to support this.

The national and local context for adult social care is one of increasing need for services at the same time as available funding through revenue support grant has been decreasing. There has been national recognition of the need for a longer-term sustainable funding solution for adult social care and a government green paper addressing this issue is expected in the near future. Barnet Council has sought to increase investment in adult social care, through application of the social care precept, review of its contribution policies and investment from council reserves of £12.3m from 2016/17 to 2018/19. The additional funding announced in the autumn 2018 budget will help balance the council's adult social care budget in 2019/20. However, beyond this there is no certainty of funding and insufficient funding in the system to meet levels of demand. This means that Barnet adult social care must focus on meeting its statutory duties alongside meeting the legal requirements of the council to remain on a sound financial footing. We will do this by ensuring that we meet eligible needs cost-effectively and that all investment in commissioned services enables better management of demand.

Corporate priority	How we will deliver this by 2024			
Integrating health and social care and providing support for those with mental health problems and	 Working with local NHS organisations, GPs and NHS Barnet Clinical Commissioning Group to provide more health and care services closer to home 			
complex needs	 Working with the NHS to achieve timely discharge from hospital for patients 			
	• Offering, and signposting to, prevention support for people to stay active and more independent in the community			
	 Developing joined up services for those with complex mental health need to prevent crisis and to enable residents to fulfil their potential 			
Supporting those with disabilities, older, and vulnerable residents to	 Opening new extra care schemes for people that need additional support to remain living independently 			
remain independent and have a good quality of life	• Providing enablement services that help people regain or increase their independence			
	 Using technology to enhance people's independence and assist with care 			
	 Offering support for carers of people with dementia 			
	 Providing equipment that allows people to stay more independent at home 			

Committee Priorities for 2019-2024





Adults and Safeguarding Committee

Encouraging residents to lead active and healthy lifestyles and maintain their mental wellbeing	 Delivering new indoor and outdoor sporting facilities and enhancing existing sporting facilities Giving residents access to health and wellbeing information and activities through the Fit and Active Barnet (FAB) framework Completing the implementation of the new leisure contract (which includes a range of well-being services such as; the Fit & Active Barnet Card, weight management services, falls prevention, dementia friendly sessions). Supporting people to maintain and improve their mental health and wellbeing by raising awareness, tackling stigma and discrimination and making mental health everyone's business 				
Additional committee priority	How we will deliver this by 2024				
Safeguarding adults at risk of abuse and neglect	 Working with partners to safeguard adults at risk of abuse and neglect through a multi-agency approach, including the establishment of a new multi-agency safeguarding hub (MASH) 				
Efficient delivery of statutory duties	 Ensuring that statutory duties are met whilst promoting financial sustainability 				

