



## Adults and Safeguarding Committee

### 5 June 2019

<b>Title</b>	<b>End of Year (EOY) 2018/19 Adults and Safeguarding Performance Report</b>
<b>Report of</b>	Councillor Sachin Rajput – Committee Chairman
<b>Wards</b>	All
<b>Status</b>	Public
<b>Urgent</b>	No
<b>Key</b>	No
<b>Enclosures</b>	None
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### Summary

This report provides an annual overview of the Theme Committee priorities in the Corporate Plan 2018/19 Addendum at the **End of Year (EOY) 2018/19**, including budget outturns (revenue and capital) and performance on activities and key indicators, as well as any high level (scoring 15+) risks.

### Officer Recommendations

1. The Committee is asked to review the financial, performance and risk information for EOY 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 (A&S) 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) were 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 annual overview of these priorities at the **End of Year (EOY) 2018/19**, including budget outturns (revenue and capital) and performance on activities and key indicators, as well as any high level (scoring 15+) risks.
- 1.3 This report is in addition to the EOY 2018/19 Strategic Performance Report to Policy and Resources (P&R) Committee (17 June 2019) and the EOY 2018/19 Contracts Performance Report to Financial Performance and Contracts (FPC) Committee (19 June 2019). These reports will be published on the committee section of the council's website at <https://barnet.moderngov.co.uk/ieDocHome.aspx?bcr=1> prior to the committees.

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

Priorities	Key activities
<b>Embedding strength-based best practice</b>	<ul style="list-style-type: none"><li>Share and develop strength-based working with citizens, health providers and the voluntary and community sector</li><li>Implement the prevention and wellbeing co-ordination model with the local voluntary and community sector</li><li>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</li><li>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</li><li>Offer employment support to people who use adult social care through the new employment support framework and Your Choice Barnet (YCB) services</li><li>Continue to provide advice and support to carers</li></ul>
<b>Integrating local health and social care</b>	<ul style="list-style-type: none"><li>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</li><li>Work in partnership with the CCG to implement the Care Closer to Home programme</li><li>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</li><li>Improve the health of carers through delivery of the carers and young</li></ul>

Priorities	Key activities
	<p>carers strategy.</p> <ul style="list-style-type: none"> <li>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</li> </ul>
<b>Needs-based support</b>	<ul style="list-style-type: none"> <li>Expand homecare, enablement and support options for residents e.g. offer more technology services and increase supported living and nursing care</li> <li>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</li> <li>Re-commission care and support services at two extra care schemes (Goodwin Court and Wood Court)</li> <li>Work with Barnet Homes to enhance existing sheltered housing and housing plus to meet the increasing needs of older residents and those with disabilities</li> <li>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</li> <li>Prototype employment services for working age adults to support them to find and maintain employment</li> <li>Work closely with YCB to monitor and support their person-centred approach to increase independence and help people to progress to employment</li> <li>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 supported to achieve great, sustainable outcomes</li> </ul>
<b>Improving leisure facilities and physical activity</b>	<ul style="list-style-type: none"> <li>Complete implementation of the new leisure management contract including new services for residents</li> <li>Continue construction of two new leisure centres - Barnet Copthall and New Barnet – for a planned opening in 2019</li> <li>Deliver improvements to existing leisure centres</li> <li>Raise awareness of sport and physical activity and increase participation through the Fit and Active Barnet Partnership</li> <li>Co-ordinate funding applications, volunteering and training opportunities through the Fit and Active Barnet Partnership</li> <li>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</li> </ul>
<b>Health and Wellbeing</b>	<ul style="list-style-type: none"> <li>Commission lead providers for health checks and smoking cessation services to simplify administration and deliver improved outcomes</li> <li>Implement the Healthy Weight Implementation Plan across the partnership</li> </ul>

## Budget Outturns

- 1.4 The **Revenue Outturn** (after reserve movements) for Adults and Communities underspent by £0.583m (see table 2). In total, £7.825m of savings were achieved. This was made of £2.980m MTFS savings and £4.845m in ‘recovery/mitigating’ savings.

**Table 2: Revenue Outturn (2018/19)**

Service	Revised Budget	18/19 Outturn	Variance from Revised Budget Adv/(fav)	Reserve Movements	18/19 Outturn after Reserve Movements	Variance after Reserve Movements Adv/(fav)	Savings Delivered (MTFS)	Recovery /Mitigating Savings
	£0	£0	£0	£0	£0	£0	£0	£0
Integrated Care – Learning Disabilities	28,226	28,368	142.00	0	28,368	142.00	(891)	(713)
Integrated Care – Mental Health	6,604	6,601	(3)	0	6,601	(3)	(262)	(521)
Integrated Care – Older Adults	32,139	31,974	(165)	0	31,974	(165)	(1,287)	(2,491)
Integrated Care – Physical Disabilities	8,430	8,471	41.00	0	8,471	41.00	(246)	(61)
Workforce	14,598	13,832	(766)	0	13,832	(766)	0.00	(479)
A&C Other	5,496	5,663	167.00	0	5,663	167.00	(294)	(580)
Adults and Communities	<b>95,493</b>	<b>94,910</b>	<b>(583)</b>	<b>0</b>	<b>94,910</b>	<b>(583)</b>	<b>(2,980)</b>	<b>(4,845)</b>

1.5 The non-placements budgets underspent by £0.598m, which is the net effect of £0.766m underspend on staffing budget and £0.167m overspend mostly due to Deprivation of Liberty safeguards (DoLS) assessment costs in A&C Other. This cost centre budget pays for several contracts on prevention services and DoLS.

The placements budget overspent by £0.015m mostly due to under 65's Learning and Physical Disability clients offset by underspends in Older Adults and Mental Health clients. The placements budget includes Winter Pressures funding from the Government of £1.400m which was allocated to the relevant client budgets to reflect pressure from hospital discharge.

There are several 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 debt issue and the council has put in place a Debt Board to look at how debt is managed and pursued.

1.6 The **Capital Outturn** for Adults and Communities (Investing in IT) was **£1.531m** and for the Commissioning Group (Sport and Physical Activities) was **£23.603m**.

**Table 3: Capital Outturn (2018/19)**

Service	18/19 Revised Budget	Additions/ (Deletions)	(Slippage)/ Accelerated Spend	18/19 Outturn	Variance from Approved Budget
	£000	£000	£000	£000	£000
Investing in IT	2,400	(481)	(388)	1,531	(869)
Adults and Communities	2,400	(481)	(388)	1,531	(869)
Sport and Physical Activities (SPA)	23,277	0	326	23,603	(326)
Commissioning Group (SPA)	23,277	0	326	23,603	(326)

1.7 **Adults and Communities** slippage was £0.388m and a deletion of £481m on the Mosaic project. The deletion is due to revenue project costs transferred to capital receipts.

1.8 Sport and Physical slippage was £0.326m due to expenditure scheduled in 2019/20.

### Committee priorities

1.9 The update on Committee priorities includes performance and risk information as follows:

- Progress on activities
- Performance of key indicators<sup>1</sup>
- High level (scoring 15+) risks from the Corporate Risk Register<sup>2</sup>
- 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 EOY 2018/19 position on budget forecasts, progress on activities, performance of key indicators and any high level (scoring 15+) risks.

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

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

<sup>1</sup> 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 ( I), Worsening ( W) or Same ( S). The percentage variation is calculated as follows: EOY 18/19 result minus EOY 17/18 result equals difference; then difference divided by EOY 17/18 result multiplied by 100 = percentage variation. Any results not for the full year are illustrated by (s) snapshot at end of year or (r) rolling 12 months.

<sup>2</sup> The Corporate Risk Register includes strategic risks (strategic and business critical risks) and high level (scoring 15+) 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 Q4 18/19 Corporate Risk Register provides a snapshot in time (as at end March 2019).

## Embedding strength-based practice

- 1.11 Strength-based social care practice has continued to be embedded throughout the year. This has involved regular quality checks managed through the panel authorisation process, training, and internal and external audit activity. Significant improvements have been seen in the relevant ASCOF measures (reported in Q3) and external audit results (reported in Q4).

The Adult Social Care User Survey for 2017/18 showed that performance for key indicators on strength-based practice had been maintained or improved; and Barnet performed strongly against comparator local authorities. Overall satisfaction (those who stated they were extremely or very satisfied) with care and support increased from 61.7% in 2016/17 to 63.6% in 2017/18, with Barnet ranked 2<sup>nd</sup> against the comparator group of 16 local authorities. Barnet also maintained strong performance in relation to social care-related quality of life and ranked 4<sup>th</sup> against the comparator group, and Barnet ranked 2<sup>nd</sup> when people were asked about the impact of social care on their quality of life against the comparator group.

New services to support individuals into employment have been prototyped in the latter part of the year, involving close work with senior operational managers, and will be rolled out more widely in 2019/20.

- 1.12 There were 11 key indicators linked to this priority in the Corporate Plan. Five met the annual target; three cannot be reported because of difficulties reporting from the case management system (Mosaic); and three did not meet the annual target.
- **Adults with learning disabilities in paid employment (RAG rated RED) – 8.9% against an annual target of 10.9%.** There was a slight fall in the numbers of adults with learning disabilities in paid employment known to the council's adult social care service, from 78 to 74 adults, with the percentage score reduced due to a substantial increase in the learning disabilities cohort during Q4 from 802 to 830. This cohort includes all adults with learning disabilities who have been in receipt of a long-term service over the course of the year. To support these adults, the new day opportunities and employment support service has been prototyped with service users and social workers have used the annual care and support plan review process to identify adults suitable for referral into the employment support service.

- **Adults with mental health needs in paid employment (RAG rated AMBER) – 7.3% against an annual target of 7.5%.** The new day opportunities and employment service is due to be rolled-out to adults with mental health needs in 2019/20. Although slightly below the annual target, the service has performed better than the London and England averages. To allow the council to benchmark its performance, this indicator follows a national definition which counts all adults with significant mental health needs rather than only adults in contact with council adult social care services. This means that the cohort covered by this indicator is much larger than those supported by adult social care.

- **Adults with mental health needs who live independently with or without support (RAG rated AMBER) – 80.9% against an annual target of 83%.** In Q4, there was an increase in the number of new referrals to the service with a housing need, via hospital wards, crisis resolution teams and the Recovery House. Although

slightly below the annual target, the service has performed better than the London and England averages. Again, this indicator counts all adults with significant mental health needs rather than only adults in contact with local authority social care services.

Indicator	Polarity	Annual Target	EOY 18/19		EOY 17/18 Result	Benchmarking
			Result	DOT		
Permanent admissions to residential and nursing care homes, per 100,000 population age 65+	Smaller is Better	468.5 <sup>3</sup>	381.4 (G)	⬇️ W +22%	312.5	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	Smaller is Better	12.0	9.1 (G)	⬇️ W +181%	3.2	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	72.5%	78% (G)	⬆️ I +4%	75%	CIPFA Neighbours 70.9% London 73.3% England 77.2% (NASCIS, 17/18)
Adults with learning disabilities in paid employment	Bigger is Better	10.9%	8.9% (R)	⬇️ W -11%	10.1%	CIPFA Neighbours 9.3% London 7.5% England 6.0% (NASCIS, 17/18)
Adults with mental health needs in paid employment	Bigger is Better	7.5%	7.3% (A)	⬆️ I +8%	6.7%	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	83%	80.9% (A)	⬇️ W -2%	82.4%	CIPFA Neighbours 67.1% London 61% England 57% (NASCIS, 17/18)
Contacts that result in a care package	Monitor	Monitor	No result <sup>4</sup>	N/A	22.9%	No benchmark available
Service users receiving ongoing services with telecare	Bigger is Better	26.5%	No result <sup>5</sup>	N/A	25.4%	No benchmark available
Instances of information, advice and guidance provided to carers	Bigger is Better	3600	No result <sup>6</sup>	N/A	3874	No benchmark available

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

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

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

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

Indicator	Polarity	Annual Target	EOY 18/19		EOY 17/18	Benchmarking
			Result	DOT	Result	
People who feel in control of their own lives (Annual)	Bigger is Better	73%	75.8% <sup>7</sup> (G)		69.9% <sup>8</sup>	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	69.8%	69.1% <sup>9</sup> (G)		72.1% <sup>10</sup>	CIPFA Neighbours 71.2% London 70.1% England 73.3% (NASCIS, 17/18)

1.13 There were four high level (scoring 15+) risks linked to this priority in Q4 2018/19. One was a strategic risk and three were service risks.

- **STR007 - Significant adults safeguarding incident (residual score 15).** The safeguarding risk in Adult Social Care is being managed by various policies and procedures, including adoption of the Pan-London procedures, 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. Oversight of safeguarding has been effectively maintained during the restructuring period and the implementation of the new senior management structure which is underway. The Safeguarding Board and Quality Assurance sub-group have met to ensure safeguarding standards are met across the council and partners. An external case audit took place early in Q4 and all safeguarding cases audited met safeguarding standards of practice. The Quality Assurance programme is ongoing and led by the Executive Director of Adults and Health.
- **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. Recovery planning has been ongoing 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. These actions have contributed to a forecast underspend position for 2018/19 but the medium-term pressures remain and 2019/20 will be extremely challenging.
- **AC031 – Budget management (residual score 16).** Delays in resolving issues with Mosaic have limited the ability to produce routine budget reports, which could result

<sup>7</sup> This survey indicator has a confidence interval of +/-4.2%pts.

<sup>8</sup> The EOY results for 2017/18 show the results of the annual social care survey for 2016/17, which are reported a year in arrears. The measures from the survey were subject to further validation which was not reflected in the published NHS Digital results or in previous reports. This survey indicator has a confidence interval of +/-3.4%pts.

<sup>9</sup> This survey indicator has a confidence interval of +/-5.0%pts.

<sup>10</sup> The EOY results for 2017/18 show the results of the annual social care survey for 2016/17, which are reported a year in arrears. The measures from the survey were subject to further validation which was not reflected in the published NHS Digital results or in previous reports. This survey indicator has a confidence interval of +/-4.7%pts.

in budget issues not being identified and addressed in a timely fashion leading to an overspend. Following the procurement of Bettergov to deliver the implementation of the Mosaic system, the Mosaic programme 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.

- **AC028 - Lack of fully functioning case management system (residual score 15).** 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. Good progress has been made in programme delivery.

## Integrating local health and social care

- 1.14 Although there has been a slight increase in overall health and care delays to hospital discharge in Q4, those attributable to social care have remained low throughout the year. This reflects close working with partners in the NHS and the ongoing commitment to support timely discharge. Increasing capacity in the homecare market in Q3 also contributed to the achievement of this outcome.

The council has worked closely with the Clinical Commissioning Group (CCG) on the Care Closer to Home Programme over the year. This programme has supported the development of six Care Closer to Home Networks (CHINs). In Q4, a diagnostics project to improve quality and reduce variation in care was mobilised. The programme is now focused on further developing social prescribing in Barnet, targeting Dementia and Diabetes within specific CHINs and exploring opportunities for digital transformation.

The Transforming Care Partnership has performed well throughout the year, with the only hospital admissions being in Q3. There is no financial impact for ongoing placements on Barnet Adult Social Care due to agreements with other local authorities. A number of complex cases have arisen where funding responsibilities are subject to dispute with other CCGs and legal advice has been sought on these. Officers continue to work closely to identify and manage risks; although it is likely that the risks will be held by the CCG.

- 1.15 There were 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 RED) – 9.45 against an annual target of 6.84.** This measure shows performance in February 2019 (the most recent month for which data was available at the time of reporting). Barnet achieved the target for social care delayed discharges in February 2019 and has kept social care delays below target since April 2018, despite a more aggressive target being set in July 2018 which reduced the target rate of 2.6 delays per day per 100,000 population down to 2.03 delays per day per 100,000 population.

The total rate of delayed discharges did not achieve the target due to higher rates of NHS and joint delays.

Despite an increase in care provision since the autumn, the main reason for delays has continued to be due to provider capacity for complex needs, including housing support, availability of residential/nursing placements and non-weight bearing provision in the community. Winter pressures also had an impact on this final result for 2018/19.

Indicator	Polarity	Annual Target	EOY 18/19		EOY 17/18 Result	Benchmarking
			Result	DOT		
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	6.84 <sup>11</sup>	9.45 <sup>12</sup> (R)	↓ W +0.5%	9.4 <sup>13</sup>	CIPFA Neighbours 5.61 London 6.17 England 10.9 (Feb 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	2.03 <sup>14</sup>	2.01 <sup>15</sup> (G)	↑ I -13%	2.3 <sup>16</sup>	CIPFA Neighbours 1.77 London 1.93 England 2.92 (Feb 18, Department of Health)

1.16 There were two high level (scoring 15+) service risks linked to this priority in Q4 2018/19.

- **AC002 - Failure of care provider (residual score 20).** 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 take 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 continues to be broadly good across Barnet. There continues to be a low level of provider concerns identified. However, there remains a focus on supported living providers in the borough and through this work the Care Quality team is identifying providers where significant improvements are required to improve quality. The inflation bidding process is underway for 2019/20 and uplifted minimum sustainable price rates have been communicated to the market. The potential provider failure of Allied Healthcare in Q3 2018/19 has been avoided after a rescue deal was agreed with Castlerock

<sup>11</sup> 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 changed from 9.1 to 6.84.

<sup>12</sup> The results for the DTOC indicators are a snapshot of performance in the most recent month for which data is available at the point of report production (February 2019) – they do not show data over the preceding year.

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

<sup>14</sup> 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.

<sup>15</sup> The results for the DTOC indicators are a snapshot of performance in the most recent month for which data is available at the point of report production (February 2019) – they do not show data over the preceding year.

<sup>16</sup> A new methodology was introduced for DTOC indicators by the Department of Health in 2017/18, so results are not comparable.

Recruitment Group (CRG) in December 2018. The risk score remains unchanged due to the continued fragility across the industry.

- **AC005 - Challenges to recruit and retain qualified staff (residual score 16).** 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 postponed. This has an impact on remaining staff who are managing increased caseloads and holding higher volumes of incoming work as a result. The service is monitoring the effect on staff morale. Most 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 to Colindale and Brexit.

## Needs-based support

- 1.17 Significant steps were taken to improve the provision of need-based support, including new extra care provision in Ansell Court, as well as a review of the supported living framework, accompanied by proposals to increase provision. Work to increase homecare capacity in the borough in Q3 had a direct impact on the number of delayed transfers of care from hospital, helping to manage winter pressures.

Work was carried out to review and assess the impact of autism provision, with an action plan developed to help meet statutory requirements in 2019/20. The Care Quality team continued to monitor and support early addressing of provider concerns, including management of significant issues with a national provider which enabled the council to minimise the impact on service users as well as preventing the escalation of quality issues.

- 1.18 There were two indicators linked to this priority in the Corporate Plan. Both met the annual target.

Indicator	Polarity	Annual Target	EOY 18/19		EOY 17/18	Benchmarking
			Result	DOT		
People who use adult social care services satisfied with their care and support (Annual)	Bigger is Better	62.1% (within confidence interval)	63.6% <sup>17</sup> (G)	 +4%	61.7% <sup>18</sup>	CIPFA Neighbours 60.7 London 59.3% England 65.0% (NASCIS, 17/18)

<sup>17</sup> This survey indicator has a confidence interval of +/-4.7%pts.

<sup>18</sup> The EOY results for 2017/18 show the results of the annual social care survey for 2016/17, which are reported a year in arrears. The measures from the survey were subject to further validation which was not reflected in the published NHS Digital results or in previous reports. This survey indicator has a confidence interval of +/-3.9%pts.

Indicator	Polarity	Annual Target	EOY 18/19		EOY 17/18 Result	Benchmarking
			Result	DOT		
People who use services who say those services make them feel safe and secure (Annual)	Bigger is Better	81% (within confidence interval)	83.7% <sup>19</sup> (G)		78.0% <sup>20</sup>	CIPFA 83.7% London 82.2% England 86.3% (NASCIS, 17/18)

1.19 There were no high level (scoring 15+) risks linked to this priority in Q4 2018/19.

### Improving leisure facilities and physical activity

1.20 The council worked closely with Greenwich Leisure Ltd (GLL) to develop accessibility and opportunities available through the Fit and Active Barnet (FAB) Card. Approximately, 22,000 residents registered for the free FAB Card since the launch in July 2018.

The launch of the new leisure management contract enabled a series of investments by GLL into the council's existing leisure facilities. This resulted in improvements to service and functionality at Burnt Oak, Hendon and Finchley Lido; and a new pathway for adult weight management; children's weight management; diabetes; falls prevention; cancer rehabilitation; and working with carers.

The council's new leisure centres at New Barnet and Barnet Copthall are due for practical completion in July and August 2019. The handover and mobilisation schedule are being discussed with the operator and building contractor.

1.21 There were two key indicators linked to this priority in the Corporate Plan. Neither met the annual 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%.** This indicator is measured through the Active Lives Survey. The sample size for the survey was 500 people and the variation from target equates to three people. The council has invested in a number of schemes to 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 FAB campaign. 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.
- **Total number of leisure attendances (RAG rated AMBER) – 1,133,326 against an annual target of 1,163,000.** The EOY result was impacted by lower than anticipated attendances in Q1 and new facilities being installed during the year. All facilities have seen increased year on year usage, with Burnt Oak seeing the highest growth which can be linked to the opening of the nursery, uplifted usage from the improved 3G pitch and an increase in Health and Fitness members. The growth in

<sup>19</sup> This survey indicator has a confidence interval of +/-3.1%pts.

<sup>20</sup> The EOY results for 2017/18 show the results of the annual social care survey for 2016/17, which are reported a year in arrears. The measures from the survey were subject to further validation which was not reflected in the published NHS Digital results or in previous reports. This survey indicator has a confidence interval of +/-3.2%pts.

FAB Card members since its launch in July 2018 has had a positive impact on centre usage.

Indicator	Polarity	Annual Target	EOY 18/19		EOY 17/18 Result	Benchmarking
			Result	DOT		
Population taking part in sport and physical activity at least twice in the last month (Annual) <sup>21</sup>	Bigger is Better	78.5%	72.2% <sup>22</sup> (A)	⬇️ W -7%	77.9%	Rank 30 (out of 33 London Boroughs) (2018, Sport England)
Total number of leisure attendances	Bigger is Better	1,163,000	1,133,326 (A)	New for 18/19	New for 18/19	No benchmark available

1.22 There were no high level (scoring 15+) risks linked to this priority in Q4 2018/19.

## Health and Wellbeing

1.23 The Barnet **Stop Smoking Service** has continued to encourage smokers to attend sessions to support them to quit. In 2018/19, the service has achieved 442 four-week quitters so far (compared with 444 last year). This figure should increase before the data return closing date. The service achieved a higher quit rate of 45.8 (compared to 44.8 last year). Access to the service for target populations improved with a 46% increase in the number of people with Long Term Conditions quitting (120, compared to 82 last year). The number of Mental Health service users quitting also increased to 46% (35, compared to 24 last year). More pregnant women used the service (16, compared to 6 last year). The final figures will be available in mid-June 2019.

The **NHS Health Checks** programme in Barnet is delivered by GP practices, with most local practices (49 out of 55) engaged in delivering the programme and completing health checks with some of their eligible patients. This year saw an improvement in the number of invitations sent to eligible patients by practices for an NHS Health Check (20225, compared with 17938 last year) and the target set by the Department of Health was met. The target for completed checks was not achieved. However, there was a significant (24.3%) improvement in the number of people receiving a NHS Health Check (7812, compared with 6286 last year). There was an improved invite to Health Check conversion rate (38.6%, compared with 35% last year).

Significant progress was made towards a whole systems approach to **obesity**. The food security needs analysis was completed in partnership with University College London and London School of Hygiene and Tropical Medicine and stakeholders and partners from more than 20 organisations and departments came together to talk about future action for a food secure in Barnet. The whole systems approach to healthy weight: a strategic approach was presented at the Health and Wellbeing

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<sup>21</sup> 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.

<sup>22</sup> 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. Comparisons with other London Boroughs should be considered with caution, as a sample size of 500 was used regardless of the population size.

Board in July 2018 and it formally established eight workstreams moving forward: food security; transport; Fit & Active Barnet; local government declaration on sugar reduction and healthier eating; planning policy; healthier catering commitment; healthy schools and early years; and care pathways. To determine these priority areas, a needs analysis was completed, including consultations with GP's, Mencap and residents. Barnet's healthy weight pathway, which takes a life-course approach from antenatal care into child and adult healthy weight care, was launched to assist primary care providers with signposting referrals.

The local government declaration on sugar reduction and healthier eating was agreed at Full Council and physical activity and healthier eating were integrated into other work areas, including resilient schools and workplace wellbeing. The Resilient Schools Programme is working to incorporate physical activity into its programme. A hot food takeaways and planning review was completed in partnership with the planning policy team to inform the new local plan policy around A5 premises, and healthy weight principles were considered as part of LIP3 proposals to Transport for London, as well as the re-procurement of council advertising contracts. Barnet has represented the North Central London sustainability and transformation partnership at the All-Party Parliamentary Group on Obesity.

1.24 There were five key indicators linked to this priority in the Corporate Plan. One indicator did not meet the annual target.

- **NHS Health Checks – Uptake (RAG rated AMBER) - 7812 against a target of 9300.** Health check invitations was above target, an improvement on last year where the target was not met. Uptake of health checks was below target. This target was ambitious, and the result was an improvement on last year.

Indicator	Polarity	Annual Target	EOY 18/19		EOY 17/18 Result	Benchmarking
			Result	DOT		
Smoking cessation – 4-week quitters <sup>23</sup>	Bigger is Better	400	442 (G)	⬇️ W -0.5%	444	No benchmark available
NHS Health Checks - Invites	Bigger is Better	20155	20225 (G)	⬆️ I +13%	17938	No benchmark available
NHS Health Checks - Uptake	Bigger is Better	9300	7812 (A)	⬆️ I +24%	6286	No benchmark available
Child excess weight – 4/5 year olds (Annual)	Smaller is Better	18.97%	Due Q1 19/20	N/A	21.00%	London 22.31% England 22.63% (16/17, Public Health England)
Child excess weight – 10/11 year olds (Annual)	Smaller is Better	31.16%	Due Q1 19/20	N/A	32.60%	London 38.55% England 34.25% (16/17, Public Health England)

1.25 There was one high level (scoring 15+) service risk linked to this priority in Q4 2018/19.

<sup>23</sup> Provisional result. The final result will be reported to the Department of Health on 10 June 2019.

- 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 resulting in an impact on service delivery and the health protection of 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 controls and mitigations remain in place. The Pandemic Flu Plan has been updated during the quarter and sent to the Borough Resilience Forum for approval.

### Strategic issues/escalations

1.26 There were no strategic issues/escalations in relation to this report for P&R Committee

### BREAKDOWN OF MTFS SAVINGS AND STATUS

1.27 The table below provides a breakdown of the Medium Term Financial Strategy (MTFS) savings that were delivered in 2018/19.

Ref	Opportunity Area	Amount (£000)	Status (RAG)
<b>Efficiency</b>			
E1	3rd Party Spend (Inc. Prevention)	-294	Achieved
E3	Transformation of Your Choice Barnet supported living and day-care services	-343	Achieved
<b>Income</b>			
I1	Better Care Fund	-148	Achieved
<b>Reducing demand, promoting independence</b>			
R1	Savings through supporting people in the community as opposed to high cost care packages and residential placements	-100	Achieved
R2	Carers Intervention programme - Dementia	-160	Achieved
R3	Extra-Care 1 (Moreton Court)	-465	Achieved (shortfall substituted by additional client income)
R4	Independence of Young People	-150	Achieved (substituted by additional client income)
R5	Assistive Technology	-500	Achieved
R6	Older Adults - DFGs	-170	Achieved
R7	Personal assistants	-50	Achieved
R8	Support for Working age adults	-350	Achieved
R9	Mental Health service users moving to step down/independent accommodation	-250	Achieved
<b>Total</b>		<b>-2,980</b>	Achieved

## **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 EOY 2018/19, including budget forecasts for revenue and capital, progress on activities, performance of key indicators and any high level (scoring 15+) risks.
- 5.1.2 The EOY 2018/19 results for all Corporate Plan indicators are published on the Open Barnet portal at <https://open.barnet.gov.uk/dataset>
- 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:  
<http://barnet.moderngov.co.uk/documents/s46515/17FinancialRegulations.doc.pdf>

#### **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 (scoring 15+) risks associated with the priorities for this Committee are outlined in the report.

#### **5.6 Equalities and Diversity**

- 5.6.1 Section 149 of the Equality Act 2010 sets out the Public Sector Equality Duty which requires a public authority (or those exercising public functions) to have due regard to the need to:
- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010.
  - Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not.
  - Fostering of good relations between persons who share a relevant protected characteristic and persons who do not.
- 5.6.2 The broad purpose of this duty is to integrate considerations of equality into everyday business and keep them under review in decision making, the design of policies and the delivery of services. The protected characteristics are: age; disability; gender reassignment; 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, which can be found on the website at: <https://www.barnet.gov.uk/your-council/policies-plans-and-performance/equality-and-diversity>

## **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?CId=162&MId=9162&Ver=4>