



Adults and Safeguarding Committee

7th March 2022

Title	Building on strengths and maintaining independence
Report of	Chairman of the Adults and Safeguarding Committee
Wards	All
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Summary

The Barnet Corporate Plan, 2021 – 2025, identifies ‘strengths and independence’ as a pillar of the Healthy priority for the borough. Our ambition is to ‘work in a strength-based way, recognising people’s goals, aspirations and existing communities to ensure that they can stay well and independent.’

At the January committee meeting, it was agreed that the committee would receive a report outlining the council’s work to promote the independence of adults with care and support needs. This report summarises recent relevant activity across Adult Social Care, and plans for the coming year, that support the delivery of the corporate plan ambition.

Officers Recommendations

The Committee is asked to note the content of this report and endorse the prospective activity outlined to continue to support, maintain and improve the independence of residents in the borough.

1. Why this report is needed

- 1.1 Working in a strengths-based way, recognising people's goals, aspirations, and the value of their communities, to ensure that they can stay well and independent, is at the centre of all of the work delivered through Adult Social Care. Following the committee's request, this report briefs the committee on relevant practice and activity to this end.

Strengths-based Practice

- 1.2 Strengths based practice is a collaborative process between the individual and those who work with them, drawing on the strengths and assets around them, enabling coproduction, promoting empowerment, and maintaining independence.
- 1.3 The Care Act (2014) statutory guidance directs practitioners to consider the person's own strengths and capabilities, what support might be available from their wider support networks, or within the community to help in considering 'what else other or alongside the provision of care and support might assist the person in meeting the outcomes they want to achieve' (DH2017).
- 1.4 Considered as a golden thread that runs through everything we do, a strengths-based approach is used throughout Adult Social Care in our interactions with residents, carers, external providers, and our colleagues - from frontline practitioners to commissioning.
- 1.5 Through our strengths-based approach we aim to prevent, reduce or delay an adult's social care needs from either developing or escalating. To deliver this, alongside partners, we draw on our workforce – 'competent, confident, creative and caring' (Barnet Adult Social Care Quality Framework).
- 1.6 Services that the council commissions all build on this philosophy. Our commissioning seeks to enable and support the individual to capitalise on their assets, draw on their strengths, and the strengths of those around them, to achieve their outcomes.

Accommodation and Support

- 1.7 Barnet's approved provider list for Accommodation and Support ensures that there is a range of accommodation-based options available to support people to live as independently as possible.
- 1.8 These services are a core component of the council's strategy to promote independence offering an alternative to traditional residential provision for people with social care needs and supporting people to progress to more independent living arrangements.
- 1.9 Following an extensive procurement exercise that concluded in January 2022, contracts for the new approved list are currently being issued to successful providers. The tender process has increased the range and diversity of supported living provision within the borough and broadened the range of options available to residents.
- 1.10 **Table 1 – Service types**

Service	Purpose	No. of Providers
Hoarding assertive outreach service	The service aims to help individuals remove clutter and reduce the risk of harm due to poor sanitation or inhabitable living environments.	2
Neighbourhood networks	To enable people living in a particular area (neighbourhood) to develop skills to live independently, build natural community support and social networks to support each other and meet responsibilities as a tenant / occupier.	4
Supported living – low / medium / high needs	Supported Living offer that includes accommodation, care and support for people with disabilities, including learning disabilities and mental health conditions.	41
Supported living – young adult transition	This service is to provide accommodation, care and support for young people with health and social care needs.	23
Supported living - specialist mental health step down support	Accommodation and high-level support following discharge from secondary mental health services. Access to support 24 hours that is flexible and responsive to the individual's needs. The service is to be time limited, supporting individuals to successfully move to more independent living.	12
Supported living for people with complex disabilities and health needs	Supported living for people with complex disabilities and health needs, and targeted support for those with mental ill health, that provides a well-coordinated combination of social care and clinical support to maintain good and positive health as well as independence.	21
A 'crash pad' for people with learning disabilities and / or autism and / or mental health needs	Care and support for people with learning disabilities, autism or mental health needs who require emergency respite. The service will prevent and minimise the risk of crisis within an individual's life by providing either emergency accommodation (crash pad) or extra care and support within an individual's own home.	7

1.11 **Table 2: Total successful and new providers**

Successful providers (across all lots)	New providers
110*	22

*Some providers have been successful across more than one lot.

- 1.12 As part of the re-procurement, we have also expanded the offer to include assertive outreach services to work with people who hoard. Providers will be expected to help individuals remove clutter and reduce the risk of harm due to poor sanitation or inhabitable living environments. The providers will support people to address their hoarding issues at a pace the individual can control and which promotes their wellbeing. Operational teams had identified this as a priority area, given the challenges involved in effectively supporting residents who have entrenched hoarding behaviours, particularly when these behaviours potentially mask other unmet health and social care needs.
- 1.13 Specifications for all services were coproduced with operational teams and with residents to ensure service options available in the coming years match local needs and expectations, and that they support our ambitions around strengths and independence. The commissioning and care quality teams will be working with successful providers through mobilisation and implementation to ensure that service delivery matches these specifications.
- 1.14 Key features include:
- Increased scope for individuals with a range of needs, notably an increased range of provision for mental health, autism, and physical disabilities
 - A focus on progression – supporting residents to build on their strengths and be aspirational for their future
 - Supporting people in the least restrictive settings, managing complex needs within the community, and seeking to avoid admission to hospitals
 - Strengthening of existing requirements to deliver enablement and recovery-focused activities, in line with strengths-based assessments that identify individual goals and monitor progress towards them

Extra Care

- 1.15 With parallels to the accommodation services outlined above, extra care housing offers a flexible housing-based service for older people. It also supports the council's aim to promote integrated communities and ensure that there are good housing choices for older people. Extra care housing provides a further way to support people to remain in their own homes, to avoid social isolation and to maintain high standards of independent living for longer, while having access to care and support when needed. There are currently 4 extra-care schemes in Barnet, one of which is Ansell Court, described below.
- 1.16 In November 2016 the Adults and Safeguarding Committee approved the expansion of extra care housing provision (ECH) in Barnet. This is a further core component of the council's strategy to promote independence.
- 1.17 The council commissioned Barnet Homes to act as the development agent for a pipeline of affordable extra care housing. It was identified that the expansion of extra care provision would help to meet the projected future care and support needs of older adults. Projections indicated that an additional 227 affordable rent extra care places would be required by 2030 to meet eligible needs.

- The phase one scheme, Ansell Court, was completed in 2019 and the first tenants moved into the setting in April 2019. £15 million was identified in the council's capital programme for this development. Situated in Mill Hill, this scheme has 53 flats, some of which have 2 bedrooms.
- Stagg House (which will be renamed Atholl House upon completion) is the second of the schemes and is currently under development with capital works underway on the site. The scheme is situated in Burnt Oak and will have 50 flats. Completion is scheduled for early 2023.
- The third location is Cheshir House, and the build is due to be completed by Spring 2024. The scheme is situated in Hendon and will have 75 flats.

1.18 These services deliver high quality, self-contained accommodation and give the individual full tenancy rights. A cornerstone of extra care is the flexibility of the support provision on site and the ability to increase or decrease care and support in response to individual needs. The service enables tenants to retain control over their own lives while receiving the support they need in a suitable environment with access to communal space and facilities.

1.19 Extra care is available to residents in Barnet over the age of 55 who have a housing and social care need. There is some flexibility on age requirement for younger people living with dementia and for people with learning disabilities, and this is exercised on a case-by-case basis in the best interests of the individual and the residents of the scheme.

Enablement

1.20 The council's enablement service is an essential part of the preventative, early intervention and wellbeing offer, promoting independence and reducing or delaying the need for longer-term care and support. Enablement provides intensive, time limited and needs-based care to eligible adults to help them improve their quality of life.

1.21 It can be delivered wherever the individual is accommodated, including in the range of settings already outlined. It is a flexible service which provides outreach support in the individual's home.

1.22 Over recent years there has been significant change in the levels of demand and complexity of individuals who are referred into the service. This has partly been driven by the impact of Covid 19 and by the close working between the council and health partners to support timely discharge from hospital.

1.23 During 2020 and 2021, there have been significant changes in national legislation that have reshaped the pathways for people moving from hospital into the community and the council's enablement service has been key in ensuring that individuals can leave hospital and return to their homes safely and in a timely manner.

1.24 In March 2020 legislation was introduced with immediate effect that changed the timescales and formalised practice associated with hospital discharge focussing on a 'Home First Discharge to Assess (D2A) Operational Model'. These changes have undergone further modification since their initial implementation and are now the

required hospital discharge and community support model, as set out by the Government in guidance published on 5th July 2021¹.

- 1.25 During 2021, the council worked closely with the service provider, Your Choice Enablement, and other key stakeholders, to revise service pathways and maximise the available enablement capacity. This ensured that the service was able to respond effectively to wider system changes and offer the valuable support needed by residents to maintain their independence within the community.
- 1.26 From March 2021 to January 2022 more than 1,800 Barnet residents received enablement support, with 79% of people starting directly from hospital so they could return to their homes. 58% of people who received an enablement service went on to need no further support and to fully regain their independence.

Assistive Technology – ‘Telecare’

- 1.27 The assistive technology service provides the council with a high quality, mainstreamed and highly innovative service, that uses technology, monitoring and support to enable people to live as independently as possible in the community, within their own homes and in a range of settings.
- 1.28 It can be used independently, or alongside other support and interventions to maximise safety and independence in the community, following a coproduced assessment and care planning process.
- 1.29 The service helps avoid unplanned hospital attendance or admission by effectively supporting people to prevent their health and social care needs increasing, facilitate hospital discharge as quickly and safely as possible and to improve outcomes for people.
- 1.30 Examples of assistive technology in use are:
- Emergency alarms and sensors for people at risk of falling
 - Visual alarms and sensors in the home connected to fire alarms, telephones and doorbells for people with hearing impairment
 - Pendant alarms to reach help at the touch of a button
 - Talking clocks and reminders for people with visual impairment
 - Personalised interactive devices to assist the individual to be independent
 - Telecare is also linked to response services, who will call or visit the individual in response to an alert
- 1.31 The digital offer within the service was adapted to respond to the change in local needs during the height of the pandemic, and the current provider responded well to

¹ [Hospital discharge and community support: policy and operating model - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/guidance/hospital-discharge-and-community-support-policy-and-operating-model)

the challenges presented by Covid-19. Currently, the telecare service is used by around 4,000 people in Barnet.

- 1.32 Work is underway to design and commission the future service in the borough from April 2023 onwards with a strengthened offer built on innovation for people with a range of care needs outside of the traditional model, and work with health partners to identify the growing opportunities for healthcare technology and explore shared endeavours.

Progression in Learning Disabilities

- 1.33 Strengths and independence with a particular focus on 'progression' is a core part of the work of the Barnet Learning Disability Service (BLDS). People with learning disabilities want to develop their skills and increase their independence wherever possible. The team works to ensure that care and support is appropriate and is linked to clear outcomes set by the person themselves which they can progress towards.
- 1.34 The progression model is based on strength-based assessments which maximise opportunities for independence, helping people to acquire independent living skills through taking small steps to greater independence.
- 1.35 The principle of progression is fundamental to all activity within the service; reviewing support plans and working with care and support providers to ensure the best match of services to meet the persons' needs and that these will enable the person to fulfil their ambitions.
- 1.36 Building on this work we are developing an approach to day opportunities provision that is progression-focused, which will work with the individual's strengths and enable people to increase their skills and independence.
- 1.37 The council will be working with a range of providers both within and outside the care market to shape a range of meaningful day activity and employment support interventions, drawing on universal services such as transport, fitness, and leisure.

Prevention

- 1.38 As noted by the committee in the report presented in January 2022, the council's Prevention and Wellbeing Team is being expanded. The service focuses on three core areas of activity:
- Personalised & individual support for people known to adult social care and their informal carers
 - Community engagement and development work with local organisations
 - Creating new initiatives and increasing community capacity
- 1.39 In addition to this in-house provision, we commission a range of preventative services that support early intervention, addressing needs in the community before they escalate to the point of needing a statutory intervention. Key examples include:
- Neighbourhood services, run by Age UK, which include community run fitness groups, dance, art, lunch clubs and other activities to address social isolation and ensure people maintain connections to the community

- A range of community-based dementia services, also run by Age UK, that support and promote independence and wellbeing for adults with dementia and their carers
- The Barnet Mencap 'Bright Futures' contract, which provides a range of early intervention and prevention services, including employment support, day and community opportunities for people with learning disabilities and/or those with autism.

- 1.40 An example of services responding to support people to remain independent and remain safe in the community during the pandemic, can be seen within the Bright Futures service.
- 1.41 Over the last two years we have worked with Barnet Mencap to adjust their offer to continue to prevent escalation of needs and management of risks, through completing weekly and fortnightly telephone wellbeing and welfare checks, targeting those living alone or with parents or carers aged 70 or over or with their own support needs.
- 1.42 Staff were able to respond to safeguarding concerns, changes in behaviour at home and other situations. In addition, Barnet Mencap staff were able to discuss a range of health matters and helped to identify missed health appointments and vaccinations.
- 1.43 The model has enabled the provision of early and proportionate support and created opportunities for links with other voluntary and community services, such as Barnet Carers' Centre, the Wellbeing Hub, Age UK, and escalation to Barnet Learning Disability Service (BLDS).

2. Reasons for recommendations

- 2.1 At the last meeting, the Adults and Safeguarding Committee agreed to receive a report updating on services to support the independence of Barnet residents.

3. Alternative options considered and not recommended

None.

4. Post decision implementation

None.

5. Implications of decision

5.1 Corporate Priorities and Performance

- 5.2 On 8th February 2021, Policy and Resources Committee approved the Barnet Plan, which identified the four key priorities for the council over the next four years, as set out below. The approaches and services outlined within this report support the healthy priority.

- Clean, safe and well run: a place where our streets are clean and antisocial behaviour is dealt with, so residents feel safe. Providing good quality, customer friendly services in all that we do.
- Family Friendly: creating a Family Friendly Barnet, enabling opportunities for our children and young people to achieve their best.
- Healthy: a place with fantastic facilities for all ages, enabling people to live happy and healthy lives.
- Thriving: a place fit for the future, where all residents, businesses and visitors benefit from improved sustainable infrastructure & opportunity.

5.2.1 This report has articulated a range of ways in which Adult Social Care are working in partnership with key stakeholders to ensure we achieve our ambitions to empower residents to maximise their strengths and independence.

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

5.3.1 Resource decisions in relation to the work referenced in this report have been managed within the existing budget. These approaches and services support the council to meet its statutory duties within the available funding envelope.

5.4 **Legal and Constitutional References**

5.4.1 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:

- 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 receive reports on relevant performance information and risk on the services under the remit of the Committee.

5.4.2 Both the Care Act 2014 and the supporting statutory Care and Support Guidance note that the care and support system should actively promote wellbeing and independence, and that the concept of independent living is a core part of the wellbeing principle.

5.4.3 The Local Authority has a duty under s 5 of the Care Act (2014) to shape and maintain an efficient and effective market of services for meeting care and support needs in the local area.

5.5 **Insight**

5.5.1 Monitoring information and performance data is collected and analysed on an ongoing basis and used to inform commissioning intentions.

5.6 Social Value

5.6.1 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.

5.6.2 All tender activity referenced in this report included or will include a specific method statement question to test providers on how they will deliver social value through the contract in question. Bidders are asked to demonstrate how they intend to: support the local economy, promote skills and employment, protect and improve our environment, create healthier, safer and more resilient communities and/or increase social capital by supporting London Councils' Procurement Pledge.

5.6.3 The care quality team works with providers throughout the duration of contracts to understand how these commitments are being maintained.

5.7 Risk Management

5.7.1 Risks associated with any procurement processes are identified and suitable mitigations implemented. This includes ensuring that processes are legally compliant and consistent with budget resources and savings targets.

5.7.2 Risks of non-delivery are managed by developing strategic relationships with successful providers and robust contract and performance monitoring. Approved provider lists can be re-opened during the contract period to add new suppliers, subject to the usual procurement processes.

5.8 Equalities and Diversity

5.8.1 Equality and diversity issues are a mandatory consideration in the decision making of the council.

5.8.2 Decision makers should have due regard to the public sector equality duty in making their decisions. The Equality Act 2010 and the Public-Sector Equality Duty require 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. The equalities duties are continuing duties they are not duties to secure a particular outcome. The statutory grounds of the public sector equality duty are found at section 149 of the Equality Act 2010 and are as follows:

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

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

5.8.4 Having due regard to the need to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it involves

having due regard, in particular, to the need to:

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

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

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

- Tackle prejudice, and
- Promote understanding.

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

- Age
- Disability
- Gender reassignment
- Pregnancy and maternity
- Race,
- Religion or belief
- Sex
- Sexual orientation
- Marriage and Civil partnership

5.8.8 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.

5.8.9 Progress against the performance measures we use is published on our website at: <https://www.barnet.gov.uk/your-council/policies-plans-and-performance/equality-and-diversity>

5.9 Corporate Parenting

All relevant work referenced in this report has given consideration to the specific care * support needs of young adults and those who are care experienced. . For example, the approved provider list for accommodation and support has a specific lot working with young adults with additional support needs. These services will offer young

people accommodation options where they can receive age-appropriate wrap around support to develop independent living skills as part of a personalised progression plan.

5.10 Consultation and Engagement

5.10.1 A wide range of engagement activity with stakeholders is undertaken to support all service development work, including engagement with experts by experience, operational staff, and provider markets. Commissioned providers are also required to collect regular feedback from residents and carers in order to inform their own service planning and for review by our own contract monitoring team.

5.10.2 The Adult Social Care Engagement Officer is in the process of drafting the engagement plan for 2022/23 which will drive key activity in the coming year, ensuring that the voice of residents and carers is heard throughout the offer.

5.11 Environmental Impact

5.11.1 Commissioned providers are required to consider environmental impact as part of their social value contributions. The care quality team works with providers throughout the duration of contracts to understand how these commitments are being maintained.

6. Background papers

None.