

# Adult & Communities – Q4 2016/17

## 1. SUMMARY

### 1.1 SERVICE DASHBOARD

Finance	Revenue Budget Variance	Capital Actual Variance
	5,353	588

	Performance	Actions
Green rated	61% (11)	71% (12)
Green Amber rated	17% (3)	18% (3)
Red Amber rated	6% (1)	12% (2)
Red rated	17% (3)	0% (0)

Risks	Low	Medium Low	Medium High	High	Reduced/Same	Increased	New
			3	10	6	17	0

## 1.2 TOP ACHIEVEMENTS AND ACTIONS

### Key Successes in Quarter 4

A number of significant new services have been mobilised, including the new telecare service; the revised accommodation and support offer, which includes a number of innovative service options such as Neighbourhood Networks (which help people maintain their tenancies and develop their local, social and support networks), supported living for people with complex disabilities and health needs, and the Crash Pad emergency respite service for people with learning disabilities; access to new day opportunities through the Your Choice Barnet contract. These will lead to improved quality of life for residents and lower cost to the Council.

The new Mental Health structure is now operational, with the service focusing on implementing the new operating model for mental health. The model has a greater focus on enablement and preventative services with a holistic, person-centred approach to meeting people's needs.

The Mosaic case management system has 'gone live' to schedule, following significant commitment to system development, training, and business transformation from the Delivery Unit.

### Key Successes in 2016/17

The Delivery Unit implemented strengths-based social care, a delivery approach which aims to improve quality of practice, promote resilience for service users and reduce the reliance on funded packages of care. A strengths-based practice training programme was co-developed through a successful pilot in Quarter 1 and rolled out across the operational teams in Quarters 2 and 3; the programme was shortlisted for the Creative and Innovative Social Work Practice award at the Social Worker of the Year awards. CareSpace – the second wave of assessment hubs – was rolled out across the borough, enabling operational teams to make stronger links with local communities and service users to have better access to community resources, with two hubs (the Independent Living Centre and Anne Owens) co-located with local voluntary and community sector (VCS) organisations. Social work teams were also encouraged to work more flexibly within the community through the introduction of mobile working technology across the Delivery Unit.

A range of innovative new care and support services have been commissioned and launched, including (in addition to the Quarter 4 services) the supported employment offer (including support with job searches and for people moving into work) delivered in partnership with the voluntary sector; a new Personal Assistants (PAs) service, delivered by Your Choice Barnet, and the Shared Lives service, delivered in partnership with LB Harrow.

The new carers' support offer was launched, with a new contract for specialist carers' support services mobilised and the development of a new team which supports carers of people with dementia. The Council also became part of the national Employers for Carers scheme. These services formed part of the integrated Barnet Carers and Young Carers' Strategy.

Key Challenges in Quarter 4	Actions Required
The Delivery Unit has been managing further pressures on market capacity.	<ul style="list-style-type: none"> <li>• Continue work with the provider sector to promote good practice and develop greater sustainability within the market.</li> <li>• Ongoing work with commissioners to stimulate the market and develop more long term provision including agreement of a joint work programme with the Clinical Commissioning Group (CCG).</li> </ul>
The implementation of Mosaic has had a significant impact on resources available to carry out business as usual activity.	<ul style="list-style-type: none"> <li>• Continue close work with the programme team to ensure remaining deliverables run to schedule.</li> <li>• Monitor business impact while the system is stabilised.</li> </ul>
Continuing pressures on the NHS create a knock-on impact on social care.	<ul style="list-style-type: none"> <li>• Continue intensive focus on discharge logistics – managing discharge lists, setting up quick escalation routes, senior management based in hospitals. Work with partners through established routes such as the A&amp;E Delivery Board.</li> <li>• Work (as above) to increase capacity in the enablement and homecare provider markets.</li> </ul>
Key Challenges in 2016/17	Actions Required
Managing the continuing financial pressure on adult social care – at M11 the Delivery Unit was forecasting spend 5.7% above the approved budget	<ul style="list-style-type: none"> <li>• Continuing activity to monitor immediate spend, with senior management scrutinising any high cost packages authorised.</li> <li>• Recruitment freeze</li> <li>• Plan for in-year savings agreed by Strategic Commissioning Board</li> <li>• Short, medium and long-term work to identify savings in</li> </ul>

	spend on placements.
Managing the knock-on impact of pressure on the NHS	<ul style="list-style-type: none"> <li>• As in Q4 key challenges, above.</li> </ul>
Resolving the issues with enablement provision in the Borough.	<ul style="list-style-type: none"> <li>• Continued development of the Your Choice Enablement service, now delivering 600 hours of care a week.</li> <li>• Ongoing work with providers to improve market sustainability</li> </ul>

### 1.3 OVERVIEW – FINANCE, PERFORMANCE AND RISK

Overall performance has remained positive with 78% of indicators rated Green or Green Amber in Quarter 4. The Delivery Unit has seen sustained success in keeping the rate of admissions to residential care well below target for both older and working age adults. For older adults new admissions are at 381.9 per 100,000 and for working age adults new admissions are at 8.5 per 100,000 population against a target of 16.6. These numbers will be validated as part of year end activity to support the Council's statutory returns.

Other preventative services have also performed strongly. Telecare installations are at 1,013 packages for the year, well above the target of 800 while the percentage of service users receiving ongoing services who have telecare has increased from 12.7% at the end of 2015/16 to 16.2% at the end of Q4, just short of the 17% target, and creating a strong foundation for the new telecare provider to build on in the next financial year. The number of instances of information, advice and guidance provided to carers reached 3,226, exceeding the target of 3,000 instances.

The mental health accommodation and employment indicators are both rated Green with substantial improvement in the employment indicator in particular, which has reached 7.6% against the 7.2% target. This is a recovery following a dip in Q3 when a number of cases were reviewed and some service users – those more likely to be in employment – moved on from receiving mental health services. The new mental health service structure is in place enabling delivery of the new operating model – focusing on enablement and prevention – to be embedded in 2017/18.

The employment and accommodation indicators for Learning Disabilities have improved; both indicators performing to a Green rating at year end. LD service users should benefit from the new accommodation support options and day opportunities (including employment support services) which have launched in Quarter 4. An in-depth review of the LD service is currently under way with a focus on identifying any barriers to accessing more creative support options.

Barnet has performed well against the indicator for non-elective admissions to hospital, with 7,072 admissions against the target of 7,749, relieving some pressure on the NHS. However, delayed transfers of care – an indicator of the pressure across the health and social care system – have performed more weakly than the target throughout the year. At Quarter 4 delays due to both health and social care were at 9.9 per 100,000 against the target of 7.35. Social care delays were at 5.1 against a target of 2.5 per 100,000. Both these indicators include non-acute delayed discharges from the Borough's community hospitals and delayed discharges of mental health patients, as well as delays in discharging people from acute care. Barnet has taken part, with NHS partners, in a 'deep dive' exercise to explore the root causes of issues in A&E performance including delayed discharges. The exercise found that Barnet does not have issues with delays caused by social care assessments or by the availability of equipment. Issues were raised in relation to the availability of homecare and nursing care although residential care capacity was perceived to be less of an issue.

The Delivery Unit continues to work closely with the NHS to maintain the operational arrangements which enable assessments to take place in an efficient and timely manner. Barnet is an active participant in its local Accident and Emergency Delivery board and senior managers took part in a series of 'rapid improvement events' in hospitals early in 2017. Other local authorities across North Central London have been experiencing similar issues with market capacity and a joint programme of work has been agreed with NHS partners to stimulate the provider market. . In the interim, the Delivery Unit has been proactive in managing these pressures. The new Your Choice Enablement service has been developed further in Quarter 4 and has added 600 hours of care a week to available provision in the Borough.

The number of case reviews dipped slightly in Quarter 4, from 1063 service users reviewed in Quarter 3 to 824 in Quarter 4. The year has finished with 61.9% of service users having received a formal annual review and the indicator is rated Green Amber This does not mean that no contact was made with other services over the course of the year (for example, through alternative or specialist assessment mechanisms). In 2017/18 the Delivery Unit is working to rationalise reviews and coordinate them more closely with such contacts as well as prioritising cohorts for early review on a risk stratified basis.

The Mosaic case management system went 'live' on 3 April as planned. The Delivery Unit has contributed extensively to system development to make sure the Council realises the full benefits of the system including opportunities to transform service provision. System validation, testing and training were both substantial draws on staff time throughout the quarter but the system has had very positive responses from users. The Delivery Unit is continuing to work closely with the programme team to stabilise the system and make sure all remaining work is delivered.

Adult Social Care experienced significant challenges in relation to its budget in 2016/17, due to the impact of demand pressures and increased complexity of need. The care budgets have seen significant overspends since 2014/15. The position for 2016/17 reflected the full year budget impact for a number of individuals placed part way through 2015/16 and continuing through into

2016/17, as well as new pressures from new placements in year and increases to existing packages reflecting increases in need. The Deprivation of Liberty Safeguards (DOLs) service continued to have a significant pressure in 2016/17 (£0.5m), as a result of the Supreme Court judgements in 2014/15 and a loss of grant funding since 2015/16.

The Delivery Unit is continuing to take positive measures to mitigate the impact of this wherever possible. Additional funding went into the Adults budget for 2016/17 though the majority of this replaced one off funding received in 2015/16; for example, removal of grants and contingency no longer available in 2016/17. The areas of spend that were directly controllable (staffing, non-care third party spend) have underspent. Significant work has been done to alleviate the above pressures on the care budgets in year.

## 2. Financial

### 2.1 Revenue

Description	Variations				Comments	% Variation of revised budget
	Original Budget	Revised Budget	outturn	Variation		
	£000	£000	£000	£000		
Performance & Improvement	992	1,413	1,336	(77)		-5.4%
Safeguarding	604	685	1,012	327	Deprivation of Liberty Safeguards (DOLS) service continues to have significant pressures in 2016/17, as a result of Supreme Court judgements in 2014/15 and a loss of grant funding since 2015/16.	47.7%
Care Quality	4,736	4,439	4,103	(336)	The non-placements budget areas have been closely monitored and managed throughout the year and have resulted in an underspend position which is offsetting overspends in placements spend.	-7.6%
Community Well-being	733	538	6	(532)	The non-placements budget areas have been closely monitored and managed throughout the year and have resulted in an underspend position which is offsetting overspends in placements spend.	-98.9%
Customer Care	334	251	195	(56)		-22.3%
Customer Finance	719	843	816	(27)		-3.2%
Dir Adult Soc Serv & Health	186	783	167	(616)	The non-placements budget areas have been closely monitored and managed throughout the year and have resulted in an underspend position which is offsetting overspends in placements spend.	-78.7%
Integrated care - LD & MH	40,421	37,889	41,326	3,437	The care budgets within Adults have seen significant overspends since 2014/15 as a result of rising demand for services and increasing complexity in relation to those supported. The main pressure for learning disabilities also continues to be in relation to clients complex needs increasing and individuals transitioning from children's services into adult services. There are further pressures on the LD budget resulting from Ordinary Residents clients transitioning into Barnet.	9.1%
Integrated care - OP & DP	35,609	38,668	42,013	3,345	The care budgets within Adults have seen significant overspends since 2014/15 as a result of rising demand for services and increasing complexity in relation to those supported. In 2016/17, demand continues to grow for older adults placements with a particular growth in clients with dementia requiring complex packages of care.	8.7%
Prevention & Well Being	653	562	535	(27)		-4.8%
Social Care Management	412	737	652	(85)		-11.5%
<b>Total</b>	<b>85,400</b>	<b>86,808</b>	<b>92,161</b>	<b>5,353</b>		<b>6.2%</b>

## 2.2 Capital

	2016-17 Approved Budget	Additions/ Deletions Recommended	Slippage / Accelerated Spend Recommended	2016/17 outturn	Variance from Approved Budget	% slippage of 2016/17	Comments
	£000	£000	£000	£000	£000	%	
Adults and Communities	1,380	661	(73)	1,968	588	-5.3%	investing in IT is overspending and requires further investment in 17/18
<b>Adults and Communities</b>	<b>1,380</b>	<b>661</b>	<b>(73)</b>	<b>1,968</b>	<b>588</b>	<b>-5.3%</b>	



### 3. Key Actions and Performance Dashboards

#### 3.1 How the Delivery Unit is performing against its Key Actions

RAG ratings					No. of Actions due this quarter
Green - Met	Green Amber - delayed, Low Impact	Red Amber -delayed, Medium Impact	Red - Risk of Not Delivering Or High Impact	Not Rated (Not due, N/A or TBC)	
71% (12)	18% (3)	12% (2)	0% (0)	1	17

#### Key

RAG	Description
Green	Action Met
Green Amber	Action delayed, Low Impact
Red Amber	Action delayed, Medium Impact
Red	Risk of Not Delivering Or High Impact

#### 3.2 How the Delivery Unit is performing against its Performance Indicators

	RAG					Long Term Direction of Travel			No. of indicators expected to report this quarter	
	Green	Green Amber	Red Amber	Red	Total RAG ratings	Monitor	Improving or the same	Worsening		No Direction of Travel
CPI	8	0	0	0	8	0	5	0	3	8
Other Indicators	3	3	1	3	10	5	2	5	8	15
<b>Total</b>	<b>61% (11)</b>	<b>17% (3)</b>	<b>6% (1)</b>	<b>17% (3)</b>	<b>100% (18)</b>	<b>22% (5)</b>	<b>58% (7)</b>	<b>42% (5)</b>		<b>23</b>

**Key**

CPI	Corporate Plan Indicator
Other Indicators	Commissioning Plan Indicators, Management Agreement Indicators, Cross Cutting Indicators.

**3.3 Performance: Key Actions and Indicators Reported this Quarter**

The tables below provide an update on progress against delivering the Strategic and Commissioning priorities as set out in the revised Corporate Plan and Adults Commissioning Plan

**Managing demand for services (Fairness)**

**PLANNING FOR LIFE - Working age adults and older people live a healthy, full and active life, in homes that meet their needs, and their contribution to society is valued and respected.**

This priority drives work to improve the range of accommodation options for vulnerable or potentially vulnerable people in the borough, and other initiatives to help people live and work independently in their homes.

Commissioning Intention	RAG Status	Comments
Increase the supply and take-up of supported living and independent housing opportunities.	Green	Admissions to residential care have remained well below target throughout the year for both working age and older adults. Assessments and reviews have been used to identify individuals where moves out of residential care may be appropriate. In the wider market, construction on the Moreton Close scheme site has commenced. An additional three units have been secured with the Barnet Homes draft allocations process to be considered in Q1 2017/18.
Support more people to live in a home of their own with support.	Green	The Accommodation and Support tender process has closed with contracts awarded to 39 providers over 8 lots. New services including the Crash Pad emergency respite scheme, neighbourhood networks, support at home and intensive mental health step down are now available. Work continues with providers on new ways of working with new performance frameworks also implemented. The Delivery Unit has continued to support the West London Alliance and North Central

Commissioning Intention	RAG Status	Comments
		<p>London accommodation collaboratives with advice on market conditions, quality issues and market engagement.</p> <p>The Delivery Unit continues to promote access to support services with the new Your Choice Enablement service now mobilised. The proportion of new 65+ clients accessing enablement has exceeded target.</p>
Commission high quality flexible specialist home support services including personal assistants (PAs) that enable people to remain independent.		<p>The Accommodation and Support tender has ensured new supported living provision has been commissioned. The PA and Shared Lives continue to be delivered with work ongoing to improve referrals.</p> <p>The Council continues to participate in the West London Alliance and North Central London accommodation collaboratives. A review of the effectiveness of participation in the West London Alliance is being undertaken, including review of the market rates for the provision of accommodation and support. This will be completed in Q1 2017/18.</p>

Type of indicator	Ref	Indicator description	Polarity	2016/17 Annual Target	Q4 2016/17 Target	Numerator and Denominator	Q4 2016/17 Result	Q3 2016/17 Result	DOT Short Term (From previous Quarter)	Q4 2015/16 Result	DOT Long Term (From Q4 previous Year)	Benchmarking <i>How performance compared to other councils</i>
CPI	AC/S3 (ASCOF 1G)	Percentage of adults with learning disabilities who live in their own home or with their family	Bigger is Better	63.0%	63.0%	531/742	71.6%	62.42%	Improving	63.60%	Improving	68.8% (CIPFA) 70.1% (London) ASCOF Comparators (2015/16)

Type of indicator	Ref	Indicator description	Polarity	2016/17 Annual Target	Q4 2016/17 Target	Numerator and Denominator	Q4 2016/17 Result	Q3 2016/17 Result	DOT Short Term (From previous Quarter)	Q4 2015/16 Result	DOT Long Term (From Q4 previous Year)	Benchmarking <i>How performance compared to other councils</i>
CPI	AC/S6 (ASCOF 1H)	Percentage of adults with mental health needs who live independently, with or without support	Bigger is Better	83.2%	83.0%	563/669	84.2%	84.7%	Worsening	81.0%	Improving	74.4% (CIPFA) 73.5% (London)  ASCOF Comparators (2015/16)
MPI	AC/C8	Number of assessments completed	Monitor	Monitor	Monitor	N/A	2272	1584	N/A	2364		
SPI	AC/S27	Percentage of customer contacts into Social Care Direct resolved at first point of contact	Monitor	Monitor	Monitor	N/A	54.0%	51.0%	N/A	55.0%		

**EARLY INTERVENTION AND PREVENTION - Working age adults and older people are provided with the tools to manage their own health and wellbeing and maintain independence.**

This priority covers employment, enablement and prevention, reducing social isolation, better information and advice, and the use of equipment and technology to promote independence.

Commissioning Intention	RAG Status	Comments
Develop the employment support offer for working aged adults with disabilities (including mental health and learning disabilities) and ensure there are sufficient employment opportunities available in the Borough.	Green	<p>The DU continues to provide advice and signposting in relation to employment and promotes access to employment through review and support planning as part of its strengths based working approach.</p> <p>Employment support and workplace retention services, which will provide a pathway to support people with mental health problems and learning disabilities back into work, are included in the Day Opportunities tender, live in Q4.</p>
	Green	
Implement a 0-25 disabilities service for people with learning disabilities; that better brings together health, care and education to enable young people with disabilities to fulfil their potential to be an active citizen and improves relationships between families and local authorities	Orange	<p>The second tranche of 0-25 service users were transferred to the care of the Family Services team on 1 April 2017.</p>
Increase access to meaningful activities and reduce social isolation	Green	<p>The Delivery Unit's Prevention and Wellbeing team has carried out extensive work to map local community and voluntary services. Surgeries have taken place throughout the year to promote knowledge of VCS services to social work teams and to Social Care Direct, and increase takeup among service users. Groundwork, the Council's Local Infrastructure Organisation partner, has mapped Barnet's VCS organisations and launched, with the Council, a searchable online directory of services.</p>
Continue to improve the review and support planning process (including how equipment and technology can increase independence)	Green	<p>The Delivery Unit's strengths based working approach is now fully embedded with social work teams and a Strengths Based Practice coach has been appointed, promoting use of community resources and assets where this is appropriate to do so.</p> <p>The new telecare contract has been mobilised with referrals to the new provider taking place</p>

Commissioning Intention	RAG Status	Comments
		from April 2017.
Stimulate the market to encourage providers to effectively focus on enablement and prevention		<p>The Delivery Unit continues to deliver a programme of quality assurance, practice improvement and provider support to maintain good relationships with the sector and share and stimulate good practice.</p> <p>An event was held for the registered managers of care providers; this was well attended and had positive feedback from the sector.</p>
Continue to embed improved information, advice and planning services		<p>Work continues to develop the Adults &amp; Communities website with new carers' pages now available. The long-term digital strategy for Adults is under development in Q4 and will continue into Q1 2017/18.</p> <p>Quarterly monitoring of the Age UK Later Life Planning and Neighbourhood Services continues. The provider has regular contact with LBB.</p> <p>In January 2017 the Adults and Safeguarding Committee made a decision to extend the Later Life Planning service throughout 2017/18.</p>

Type of indicator	Ref	Indicator description	Polarity	2016/17 Annual Target	Q4 2016/17 Target	Numerator and Denominator	Q4 2016/17 Result	Q3 2016/17 Result	DOT Short Term (From previous Quarter)	Q4 2015/16 Result	DOT Long Term (From Q4 previous Year)	Benchmarking <i>How performance compared to other councils</i>
CPI	AC/S4 (ASCOF 1E)	Percentage of adults with learning disabilities in paid employment	Bigger is Better	10.8%	10.8%	81/742	10.9%	10.0%	Improving	9.2%	Improving	9.9% (CIPFA) 7.5% (London)  ASCOF Comparators (2015/16)

Type of indicator	Ref	Indicator description	Polarity	2016/17 Annual Target	Q4 2016/17 Target	Numerator and Denominator	Q4 2016/17 Result	Q3 2016/17 Result	DOT Short Term (From previous Quarter)	Q4 2015/16 Result	DOT Long Term (From Q4 previous Year)	Benchmarking <i>How performance compared to other councils</i>
CPI	AC/S5 (ASCOF 1F)	Percentage of adults with mental health needs in paid employment	Bigger is Better	7.2%	7.2%	51/669	7.6%	6.1%	Improving	4.8%	Improving	6.5% (CIPFA) 5.0% (London)  ASCOF Comparators (2015/16)
SPI	AC/S17	Number of new telecare packages installed*	Bigger is Better	800	800	N/A	1013	772	Improving	889	Improving	
SPI	AC/S18	Percentage of service users receiving ongoing services with telecare*	Bigger is Better	17.0%	17.0%	759/4681	16.2%	15.7%	Improving	12.7%	Improving	

Type of indicator	Ref	Indicator description	Polarity	2016/17 Annual Target	Q4 2016/17 Target	Numerator and Denominator	Q4 2016/17 Result	Q3 2016/17 Result	DOT Short Term (From previous Quarter)	Q4 2015/16 Result	DOT Long Term (From Q4 previous Year)	Benchmarking <i>How performance compared to other councils</i>
MPI	AC/C17	Percentage of contacts that result in a care package*	Monitor	Monitor	Monitor	1624/7798	20.83%	19.98%	Worsening	N/A		

**PERSON-CENTRED INTEGRATED SUPPORT** - Working age adults and older people have timely access to health and social care support that maintains independence and avoids hospital admission or admission to residential care.

This priority includes support to promote positive outcomes for service users and maximise the quality of care, as well as outcome measures which indicate the current state of the health and social care system, including admissions to residential care, non-elective admissions to hospital, and delayed transfers of care.

Commissioning Intention	RAG Status	Comments
Re-focus mental health social care on recovery, maximising inclusion and reduce long term costs.	Green	The new Mental Health model became operational in April 2017, prioritising enablement and preventative services.
Joining up services so that residents have a better experience and that services are delivered more effectively and efficiently	Green	Work continues to coordinate with the NHS through the Barnet Health and Wellbeing Board (HWBB), Joint Commissioning Executive Group (JCEG) and Health and Social Care Integration (HSCI) Board and through delivery of Better Care Fund initiatives.  A positive HWBB workshop was held in March to review Barnet's approach to the North Central



London Sustainability and Transformation Plan. JCEG is currently being reviewed to merge with the CCG-led Care Closer to Home oversight group in order to maximise opportunities for collaboration and joint commissioning. Membership of this group will be expanded to include providers and CCG Board members.

NHS England released the Better Care Fund (BCF) policy framework on 31 March 2017. BCF leads are awaiting additional guidance on planning requirements.

Type of indicator	Ref	Indicator description	Polarity	2016/17 Annual Target	Q4 2016/17 Target	Numerator and Denominator	Q4 2016/17 Result	Q3 2016/17 Result	DOT Short Term (From previous Quarter)	Q4 2015/16 Result	DOT Long Term (From Q4 previous Year)	Benchmarking <i>How performance compared to other councils</i>
CPI	AC/S8	Percentage of new clients, older people accessing enablement	Bigger is Better	63.0%	63.0%	531/755	70.3%	63.1%	Improving	61.5%	Improving	
CPI	AC/S9 ASCOF2 A (2)	Permanent admissions to residential and nursing care homes, per 100,000 population age	Smaller is Better	530 (new method)	530	N/A	381.9	262.0	Worsening	N/A not comparable		445.2 (CIPFA) 516.5 (London)  ASCOF Comparators (2015/16)

Type of indicator	Ref	Indicator description	Polarity	2016/17 Annual Target	Q4 2016/17 Target	Numerator and Denominator	Q4 2016/17 Result	Q3 2016/17 Result	DOT Short Term (From previous Quarter)	Q4 2015/16 Result	DOT Long Term (From Q4 previous Year)	Benchmarking <i>How performance compared to other councils</i>
		65+										
SPI	AC/S16 (ASCOF 1C/2A)	Proportion of service users with a direct payment (ASCOF 1C/2A)	Bigger is Better	42.0%	42.0%	999/2662	37.53%	38.97%	Worsening	40.10%	Worsening	29.5% (CIPFA) 27.6% (London)  ASCOF Comparators (2015/16)
MPI	AC/S23	Percentage of people meeting their outcomes at support plan review	Bigger is Better	90.5%	90.5%	N/A	92.0%	100.0%	Worsening	95.5%	Worsening	

Type of indicator	Ref	Indicator description	Polarity	2016/17 Annual Target	Q4 2016/17 Target	Numerator and Denominator	Q4 2016/17 Result	Q3 2016/17 Result	DOT Short Term (From previous Quarter)	Q4 2015/16 Result	DOT Long Term (From Q4 previous Year)	Benchmarking <i>How performance compared to other councils</i>
MPI	AC/C10	Percentage of clients receiving an ongoing package of care reviewed	Bigger is Better	75.0%	75.0%	4440/7176	61.9%	46.3%	Improving	Not comparable		
MPI	AC/C12 (ASCOF 2c(1))	Number of delayed transfers of care from hospital per 100,000 population (aged 18+) which are attributable to both NHS and Adult Social Care	Smaller is Better	7.3	7.4	N/A	9.9	9.1	Worsening	7.5	Worsening	8.8 (CIPFA) 7.8 (London) ASCOF Comparators (2015/16)

Type of indicator	Ref	Indicator description	Polarity	2016/17 Annual Target	Q4 2016/17 Target	Numerator and Denominator	Q4 2016/17 Result	Q3 2016/17 Result	DOT Short Term (From previous Quarter)	Q4 2015/16 Result	DOT Long Term (From Q4 previous Year)	Benchmarking <i>How performance compared to other councils</i>
MPI	AC/C13 (ASCOF 2C/2)	Number of delayed transfers of care from hospital, and those which are attributable to adult social care, per 100,000 population	Smaller is Better	2.5	2.5	N/A	5.1	4.1	Worsening	3.3	Worsening	3.6 (CIPFA) 3.3 (London) ASCOF Comparators (2015/16)
CPI	AC/C14	Permanent admissions to residential and nursing care homes, per 100,000 population age 18-	Smaller is Better	16.60	16.60	N/A	8.50	8.50	Same	10.63		

Type of indicator	Ref	Indicator description	Polarity	2016/17 Annual Target	Q4 2016/17 Target	Numerator and Denominator	Q4 2016/17 Result	Q3 2016/17 Result	DOT Short Term (From previous Quarter)	Q4 2015/16 Result	DOT Long Term (From Q4 previous Year)	Benchmarking <i>How performance compared to other councils</i>
		64*										
MPI	AC/C16	Number of referrals to hospital social work teams	Monitor	Monitor	Monitor	N/A	697	526	Worsening	828		
SPI	AC/S25	Percentage of Social Care Direct customers who are satisfied or very satisfied with the service	Bigger is Better	85.0%	85.0%	N/A	80%	100%	Worsening	100.0%	Worsening	

Type of indicator	Ref	Indicator description	Polarity	2016/17 Annual Target	Q4 2016/17 Target	Numerator and Denominator	Q4 2016/17 Result	Q3 2016/17 Result	DOT Short Term (From previous Quarter)	Q4 2015/16 Result	DOT Long Term (From Q4 previous Year)	Benchmarking <i>How performance compared to other councils</i>
		they have received post resolution										
MPI	AC/C1	Total non-elective admission in to hospital (general & acute) all-age, per 100,000 population*	Smaller is Better	30098	7749	N/A	7072	7173	Improving	Not comparable		

**SAFEGUARDING** - Working age adults and older people are supported to live safely through strategies which maximise independence and minimise risk.

This priority covers measures to monitor the Council's safeguarding responsibilities and the way in which it processes Deprivation of Liberty Safeguards applications.

Type of indicator	Ref	Indicator description	Polarity	2016/17 Annual Target	Q4 2016/17 Target	Numerator and Denominator	Q4 2016/17 Result	Q3 2016/17 Result	DOT Short Term (From previous Quarter)	Q4 2015/16 Result	DOT Long Term (From Q4 previous Year)	Benchmarking <i>How performance compared to other councils</i>
MPI	AC/C7	Percentage of DoLS applications completed within statutory timeframes	Bigger is Better	Monitor	Monitor	0/20	0.0%	3.1%	Worsening	9.00%		

CARERS - Carers are valued as expert partners in supporting working age adults and older people to live independent lives.

Carers, and their role in supporting people to live independently, are a key strategic focus for the Council's commissioning plans. This priority covers a range of work including a full Carers' Strategy as well as pilot schemes such as a programme of support for carers for people with dementia. Of the two indicators with a RAAG rating, one is rated green and one is red.

Commissioning Intention	RAG Status	Comments
To prioritise meeting the needs of carers, including young carers, through the assessment and support planning process by better supporting carers' own physical and mental health needs to ensure carers feel able to continue to		

Commissioning Intention	RAG Status	Comments
support an individual for as long as they can.	Green	The carers' centre contract is now live and running as business as usual. The carers' strategy is in delivery with a steering group meeting regularly.
To strengthen the current carers' support offer e.g. assistive technology, intensive support for carers of people with dementia	Green	
Reduce the number of carer breakdowns and improve family satisfaction from sustaining the family environment.	Green	
To better support carers to balance work and caring commitments. Local small businesses know how to retain carers in their workforce.	Green	The Employers for Carers scheme is live and training has been delivered to Barnet staff.

Type of indicator	Ref	Indicator description	Polarity	2016/17 Annual Target	Q4 2016/17 Target	Numerator and Denominator	Q4 2016/17 Result	Q3 2016/17 Result	DOT Short Term (From previous Quarter)	Q4 2015/16 Result	DOT Long Term (From Q4 previous Year)	Benchmarking <i>How performance compared to other councils</i>
CPI	AC/S29	Number of instances of information, advice and guidance provided to carers	Bigger is Better	3000	3000	N/A	3226	2584	Improving	N/A		



Type of indicator	Ref	Indicator description	Polarity	2016/17 Annual Target	Q4 2016/17 Target	Numerator and Denominator	Q4 2016/17 Result	Q3 2016/17 Result	DOT Short Term (From previous Quarter)	Q4 2015/16 Result	DOT Long Term (From Q4 previous Year)	Benchmarking <i>How performance compared to other councils</i>
MPI	AC/S21	Number of carers' assessments	Bigger is Better	1045	1045	N/A	824	N/A	Improving	946		

#### ADULTS – Cross Cutting

This priority covers commitments relating to cross-cutting, enabling activity such as workforce issues, engagement with service users, use of information technology and other resources.

Commissioning Intention	RAG Status	Comments
Ensure the voice of people who use adult social care and carers contributes to the design and delivery of services	Green	Implementation of the new Engagement Structure is progressing well. A new Engagement Lead was recruited and started in role in March 2017. A successful second Involvement Board was held in March. A regular monthly newsletter is being circulated. Involvement in the People Bank is being promoted. Training for resident representatives was run by Healthwatch Barnet in March 2017.
Develop effective and efficient management reporting tools.	Red	The Mosaic case management system went live on 3 April 2017. Extensive work has been carried out to develop new reporting tools. Key teams within the Delivery Unit (Performance, Business Intelligence) have received training on new software and a programme of report building is in progress. There are significant dependencies on the Mosaic configuration (from which the data for reports is drawn) which have delayed some aspects of the project and continue to cause delays as issues are resolved post-implementation. Once Mosaic has been stabilised the pace of progress against this commitment will increase.

### 3.3a Comments and proposed interventions for indicators which did not meet target

Ref and title	Comments and Proposed Intervention
<p>AC/S16 (ASCOF 1C/2A) Proportion of service users with a direct payment (ASCOF 1C/2A)</p>	<p>The number of service users with a direct payment has decreased from 1009 at end Q3 to 999 at end Q4 - 37.53% of service users.</p> <p>Direct Payments continue to be promoted through the support planning process and through challenge at the Panel approval stage. However, a number of direct payment recipients were prioritised for review in 2016/17 and as a result a number of services have been ended as a direct payment was no longer deemed suitable.</p> <p>Barnet remains a high performer nationally against this indicator with benchmarking data for 2015/16 showing a comparator group average of 29.5% and a London average of 27.6%, in comparison to the end of year result of 37.5%.</p> <p>Intervention is at Level 1.</p>
<p>AC/S18 Percentage of service users receiving ongoing services with telecare*</p>	<p>This indicator is rated Green Amber, and has just fallen short of meeting the final year target by 37 packages (out of more than 4600 service users). The indicator has shown significant improvement in 2016/17 after remaining largely static in 2015/16, increasing the percentage of service users with telecare from 13.8% at the end of Quarter 1 to 16.2% at the end of the year.</p> <p>The new telecare contract is now live. The service is being promoted to social workers, AEOs and SCD to ensure referrals are made and the referrals process itself has been streamlined through the introduction of the new Mosaic case management system.</p> <p>Intervention is at Level 1.</p>
<p>AC/S21 Number of carers' assessments</p>	<p>The number of carers' assessments carried out directly by Barnet staff has been low throughout the year, reflecting work to signpost carers towards the specialist support services commissioned from the local VCS. There have been incremental increases in the numbers carried out in each quarter (211 assessments completed in Q4 in comparison to 194 carried out in Q1). Data on the number of carers' assessments completed is monitored by Heads of Service on a monthly basis at the same time as information on other key activities such as case reviews.</p> <p>The total number of instances of information, advice and guidance given to carers – which includes work done by the Council's specialist partner organisations as well as the work done directly by the Council – is much higher, at 3226, which is in line with the Council's strategic aim to channel a greater proportion of people towards specialist support.</p> <p>Intervention is at Level 1.</p>

Ref and title	Comments and Proposed Intervention
<p>AC/C10 Percentage of clients receiving an ongoing package of care reviewed</p>	<p>This indicator is rated Green Amber. The number of clients reviewed in Quarter 4 was 824 against 1063 reviewed in Quarter 3. Mosaic training and cutover took place in Q4 - at the same time as other more standard year end activities - which placed substantial demands on operational social work teams and reduced the time available to carry out business as usual activities.</p> <p>Overall, good progress was made on case reviews this year with better targeting of reviews through the identification of priority cohorts and use of capacity from external reviewing teams.</p> <p>A new interim Head of Service has been appointed to focus on improving reviewing capacity in 2017/18. Work is currently being carried out to identify priority cohorts for the next financial year, using a stratification approach which takes into account any possible risks to service users from a delay in being reviewed as well as their current care and support plan.</p> <p>Intervention is at Level 1.</p>
<p>AC/S25 Percentage of Social Care Direct customers who are satisfied or very satisfied with the service they have received post resolution</p>	<p>Performance dropped in Quarter 4 to 80% against the 85% target, from 100% at the end of Q3. The indicator is rated Green Amber. Satisfaction ratings are being considered as part of the overall review of the Adult Social Care Front Door structure which is being implemented in 2017/18.</p> <p>Intervention is at Level 1.</p>
<p>AC/C12 (ASCOF 2c(1)) Number of delayed transfers of care from hospital per 100,000 population (aged 18+) which are attributable to both NHS and Adult Social Care</p>	<p>Both delayed transfers of care indicators include non-acute delayed discharges from the Borough's community hospitals and delayed discharges of mental health patients, as well as delays in discharging people from acute care. Performance against this indicator reflects the significant pressures across the health and social care system which have continued into Quarter 4. To some extent this has been exacerbated by reduced capacity in the social care provider market even though Barnet is working to maximise available capacity,</p> <p>Barnet has taken part, with NHS partners, in a 'deep dive' exercise to explore the root causes of issues in A&amp;E performance including delayed discharges. The exercise found that Barnet does not have issues with delays caused by social care assessments or by the availability of equipment. Issues were raised in relation to the availability of homecare, even though Barnet is working to maximise available capacity, commissioning significantly more hours of homecare, for example, than in previous years ((702,000 hours in 2016/17 in comparison to 647,000 in 2015/16). There were also perceived issues with the availability of nursing care although residential care capacity was seen as less of an concern.</p> <p>The Delivery Unit continues to work closely with the NHS to maintain the operational arrangements which enable assessments to take place in an efficient and timely manner. Barnet is an active participant in its local Accident and Emergency Delivery board and senior managers took part in a series of 'rapid improvement events' in hospitals early in 2017. Other local authorities across North Central London have been experiencing similar issues with market capacity and a joint programme of work has been agreed with NHS partners to stimulate the provider market. .</p>

Ref and title	Comments and Proposed Intervention
	<p>In the interim, the Delivery Unit has been proactive in managing these pressures, negotiating more block provision with providers which in turn gives providers the reassurance they need to recruit and to increase capacity. The new Your Choice Enablement service has developed further in Quarter 4 and has added 600 hours of care a week to available provision in the Borough. Other measures have included purchasing services via spot contracts or through partner organisations; work (including workshops) with providers to highlight the current commercial opportunities for them and to start developing a joint approach to improving local capacity; ongoing support and engagement with providers to deliver local sector-wide improvement.</p> <p>Intervention is at Level 1.</p>
<p>AC/C13 (ASCOF 2C/2) Number of delayed transfers of care from hospital, and those which are attributable to adult social care, per 100,000 population</p>	<p>As in AC/C12 above.</p> <p>Intervention is at Level 1.</p>

## 4. Customer Experience

Customer Experience description	Comments and Proposed Intervention
Front Door and Website	<p>The review of the Adults &amp; Communities Front Door has been completed and the results have informed the development of the new Mosaic case management system.</p> <p>Work has been carried out to improve the Adults &amp; Communities web pages in Q3 with a particular focus on pages for carers. These were tested with users in Q4 with further updates being progressed to implement their feedback. A new directory of services is being explored as well as further improvements to the website.</p>
Complaints	<p>28 complaints were received in Quarter 4 and 23 were due for response during the quarter. 4 were upheld, 6 partially upheld, and 7 not upheld. Eighteen of the 23 complaints (78%) were responded to within the statutory timescales.</p> <p>The service has implemented the recommendations from an internal audit carried out in Q3, with a particular focus on identifying, and tracking responses to, the lessons learned from complaints received. A report summarising lessons learned from complaints in Q4 will be presented to the Delivery Unit's leadership team in April 2017 and complaints will subsequently be reviewed for service improvement opportunities at the Delivery Unit's monthly Quality Board.</p>
Member Enquiries	<p>The Delivery Unit received 79 Member Enquiries over the course of the 2016/17 financial year. Of these, three related to complex cases and were dealt with through separate enquiry channels. Of the remaining 76, 96% (73) were dealt with within the target timescales.</p>

## 5. Risk

The 5 X 5 matrix (heat map) below shows the residual risk assessment (probability and impact scores) for each risk.  
*(The heat map should show the position of all risks on the service risk register)*

		LIKELIHOOD					
		1	2	3	4	5	
		Rare	Unlikely	Possible	Likely	Almost Certain	
IMPACT	5	Catastrophic			2	1	
	4	Major		2	5	2	
	3	Moderate		3	3		1
	2	Minor					
	1	Negligible					

### Risk Commentary:

- *There are 19 risks on the risk register, 11 of which are rated 12 or above.*
- *The risk register is currently being circulated for review once a month, and an update is a standing item at each monthly leadership team meeting to flag any concerns or escalations and capture any performance risks.*
- *Additional actions are being taken to mitigate risks further, including*
  - *Strengthening strategic links with Barnet CCG to mitigate issues relating to joint work with health*
  - *Continuing to embed good practice in relation to health and safety and information management*
  - *Further developing preventative activities*
- *The most significant strategic risk for Adults is the challenge of meeting statutory duties within current resources. This could have a negative impact on the Council's strategic priority to manage demand on services.*

The table below lists all risks rated 12 and above.

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
AC001	Increased overspend to meet statutory duties	Adults & Communities Delivery Unit could have insufficient resources to meet its statutory duties due to operating in an environment in which there is inherent uncertainty in future demand for services, exacerbated by a potential inability to deliver savings, reduced ability to raise income from clients, the rising cost of care, other in year financial	Adults and Communities Director	Compliance	The Council's budget management process (MTFS) forecasts demographic growth and pressures over a 3 year period. Budget and performance monitoring and management controls are used throughout the year. Work to reduce addressable spend (such as expenditure on agency staff) is being	5	5	5	4	Compliance	20	Treat	Reduced

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
		pressures due to unexpected demand, the increasing complexity and cost of care packages, and legislative changes. This could result in harm to individuals, legal challenge, worsening budget overspend, and reputational damage.			carried out in year.  The Joint Strategic Needs Assessment will identify future demand pressures, and the Council will undertake initiatives focused on reducing and managing future demand in response, including the Adults' New Operating Model/ Alternative Delivery Vehicle which focus on reducing demand for								



Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
					services and finding more creative ways to manage complex need.								

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
AC002	Failure of care provider	A care provider could suddenly be unable to deliver services, due to: - provider going into administration - failure of regulatory inspection relating to quality of service - care provider chooses not to deliver services - HS&E breach leading to operational disruption to manage the situation, harm to individuals by not having their care and support needs met, unexpected financial consequences, breach of	Head of Integrated Care Quality	Business continuity	For contracted services, extensive due diligence is carried out before and during any contract. The Delivery Unit carries out ongoing contract management and monitoring to ensure it continues to engage with providers, complemented by relationship management work, and monitoring of individuals placed with providers.  The Council	5	5	4	4	Compliance	16	Treat	Reduced

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
		statutory duty,			<p>also works with the market as a whole, making a programme of best practice and improvement initiatives available to the provider sector.</p> <p>A regular report setting out provider risks and concerns is circulated to the DASS and to the DU's Leadership team on a monthly basis and discussed through the regular DASS assurance meeting.</p>								

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
AC003	Unacceptable level of quality services provided by care providers	Unacceptable levels of quality of services provided by care provider could lead to additional dedicated Barnet resource needing to be put in place to address the situation, resulting in reduced ability to manage BAU, financial consequences. If the additional resource is not able to address the underperformance of the care provider, this could also lead to harm to individuals, reputational consequences	Head of Integrated Care Quality	Compliance	For contracted services, extensive due diligence is carried out before and during any contract. The Delivery Unit carries out ongoing contract management and monitoring to ensure it continues to engage with providers, complemented by relationship management work, and monitoring of individuals placed with providers.  The Council	4	5	4	4	Compliance	16	Treat	Same

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
					also works with the market as a whole, making a programme of best practice and improvement initiatives available to the provider sector.								
AC004	Surge in demand from NHS	An unpredictable surge in demand from the NHS in situations where there is limited capacity could lead to the DU being unable to meet this	Assistant Director Adult Social Care	Compliance	System-wide resilience monies have been made available and these can be used to buy in extra capacity, subject to agreement by	4	5	3	5	Compliance	15	Treat	Same

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
		demand within the NHS's required timescales. This could result in financial consequences, operational disruption leading to rushed decisions being made that have unintended negative consequences, potentially for individuals that have been discharged, and increased central government scrutiny.			the NHS-led Improvement Board. There are monthly system resilience and operational resilience meetings between LBB, CCG and NHS Provider Trusts to discuss & manage pressures in the system, and to deliver action plans. Daily conference calls are in place to deal jointly with events as these happen.								

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
AC005	Challenges to recruit and retain qualified staff	A challenging job market (rest of London competing for the limited supply of social workers, qualified occupational therapists and other social care staff across all levels) could lead to difficulties in recruiting and retaining sufficient staff, resulting in insufficient staff to meet demand, reliance on agency workers impacting on budget, inability to carry out quality work, knock on effect on morale, non-	Assistant Director Adult Social Care	Staffing & Culture	The Unified Pay & Reward project puts in place options to offer incentives. The Delivery Unit can also make use of agency staff. There is a workforce development plan in place to mitigate this risk in the medium to long term.	4	4	4	3	Financial	12	Treat	Same

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
		statutory duties being de-prioritised											
AC006	Wellbeing and safety of DU staff	The need for staff to work in high-risk situations (in locations with high levels of crime, entering homes on their own, working with volatile individuals) could impact on staff's general	Assistant Director Adult Social Care	Health & Safety	Corporate and local HS&E policies and guidance control and mitigate risk. The Delivery Unit records risk flags for certain cases on the client record system.	5	4	4	3	Health & Safety	12	Treat	Same



Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
		wellbeing and could also lead to a Health & Safety incident resulting in harm to Barnet employees, legal challenge, reputational damage as well as lowering workforce morale			Corporate HS&E training and HS&E audits help discharge the duty of care to staff. Regular supervision is used to address specific issues. Wellbeing initiatives are deployed across the Delivery Unit.								

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
AC008	Non-adherence to safeguarding policies and procedures	Insufficient competent staff (permanent and agency, at all levels) to meet rising demand and complexity could lead to non-adherence with policies and procedures (specifically safeguarding within the Care Act, and London-wide safeguarding policies and procedures), resulting in death or serious harm to individuals, legal challenge, financial loss, decreasing staff morale due to greater pressure and reputational damage.	Head of Safeguarding Adults	Compliance	Staff training is in place, supported by practice forums. Quality assurance framework, led by the Quality Board, monitors supervision (and responds to, for example, supervision and other quality audits). Regular case file audits take place (using a pool of auditors from across the Department). Monthly reporting to leadership team on safeguarding	5	4	5	3	Compliance	15	Treat	Same

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
					<p>activity.</p> <p>Monthly quality and safeguarding meeting with DASS includes review of high risk cases. External case file audits are conducted.</p> <p>The Safeguarding Adults Board (multi-agency) meets regularly. Tools are available to support practitioners (e.g. recording templates, assessment tools etc.), as well as learning processes such</p>								

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
					as safeguarding adult reviews (SARs) and the domestic homicide review process.								

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
AC009	Data protection breach	The high quantity of sensitive information handled by the Adults & Communities Delivery Unit could lead to a data protection breach, resulting in risk to individuals, legal challenge, financial penalty and reputational damage	Head of Performance and Improvement	Compliance	Data protection training is mandatory for all staff. Data protection and information governance policies are in place. DBS checks are required for new members of staff accessing sensitive personal data. There is refresher training and there are regular communications to highlight issues in relation to common breaches.  A monthly	4	5	4	3	Information governance	12	Treat	Same

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
					Information Management Governance Group is in place as the route for raising, identifying and resolving risks and breaches, with strategic ownership over information governance. An action log is being embedded to ensure mitigating actions are implemented.								

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
AC011	Breach of mental capacity act or code of practice	Insufficient competent staff (permanent and agency, at all levels) to meet rising demand and complexity could lead to breach of the Mental Capacity Act or Code of Practice, resulting in Barnet not acting in someone's best interest (Mental Capacity Act), and as a result serious harm to individuals and/or the ongoing impact of such a breach on an individual's life; legal challenge, financial loss (legal costs) and reputational	Assistant Director Social Care	Compliance	As with safeguarding issues, staff training is in place, supported by practice forums. Quality assurance framework, led by the Quality Board, monitors supervision (and responds to, for example, supervision and other quality audits). Regular case file audits take place (using a pool of auditors from across the Department).  Monthly	5	4	5	3	Compliance	15	Treat	Same

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
		damage.			<p>reporting to leadership team on safeguarding activity</p> <p>Monthly quality and safeguarding meeting with DASS includes review of high risk cases.</p> <p>External case file audits are conducted.</p> <p>The Safeguarding Adults Board (multi-agency) meets regularly.</p> <p>Tools are available to support practitioners (e.g. recording templates, assessment tools etc.), as</p>								



Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
					well as learning processes such as safeguarding adult reviews (SARs) and the domestic homicide review process.								

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
AC019	Capacity in the provider market	Market conditions could create shortages in both generalist and specialist service provision (such as specialist accommodation or Personal Assistants) which in turn could drive up placement prices and challenge the Council's ability to meet service users' needs in accordance with its strategic objectives or within the desired budget.	Associate Director, Commissioning, Joint Commissioning Unit	Compliance	The Council has developed commissioning strategies and a five year commissioning plan which is updated each year to ensure the market is kept informed about current and future direction. The Council also works with the market as a whole, making a programme of best practice and improvement initiatives available to the provider sector.  The Delivery Unit carries out ongoing	4	4	4	3	Compliance	12	Treat	Same

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
					contract management and monitoring to ensure it continues to engage with providers, complemented by relationship management work, and monitoring of individuals placed with providers.								
AC020	Lack of practicing Approved Mental Health Professionals (AMHPs)	Lack of practicing Approved Mental Health Professionals (AMHPs) to meet rising demand and complexity could lead to breach of statutory responsibilities to carry out	Assistant Director Social Care	Compliance	Monthly cross borough meetings between AMHP leads are taking place to develop joint working arrangements. A cross borough protocol has	4	4	4	3	Compliance	12	Treat	New

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
		Mental Health act assessments; resulting in Barnet not acting in someone's best interest (Mental Capacity Act). This could result in serious harm to individuals and/or the ongoing impact of such a breach on an individual's life; legal challenge, financial loss (legal costs) and reputational damage.			been developed to review managing demand and 136 suite arrangements. Status updates and current issues are included in the DASS Monthly Dashboard. Regular supervision of AMHP Manager by the Head of Service takes place. The use of as and when AMHPs are used to manage out of hours assessments. The restructuring of the MH service will								

Risk ID	Short Risk Title	Long Description	Risk Owner	Nature of Risk	Controls and mitigations in place	Inherent Risk		Residual Risk (with controls in place)				Response Option	Direction of travel (from previous quarter)
						Impact	Likelihood	Impact	Likelihood	Highest impact area	Risk Score		
					strengthen the enablement model to prevent people escalating to crisis.								

## 6. Equalities

Equalities description	Comments and Proposed Intervention
Consultation and engagement	The annual Adult Social Care Service User and biannual Carers' Survey have been carried out, providing a rich source of qualitative information on service quality and needs. Results and comparator data will be reported in October 2017.