



Community & Children's Services Committee (FOR INFORMATION PACK)

Date: WEDNESDAY, 30 APRIL 2025
Time: 2.00 pm
Venue: COMMITTEE ROOMS, 2ND FLOOR, WEST WING, GUILDHALL

Part 1 - Public Reports

3. ***ORDER OF THE COURT OF COMMON COUNCIL - TO FOLLOW**

To receive the Order of the Court of Common Council dated 25th April 2025
Item to follow upon Court of Common Council.

For Information

7. ***PUBLIC OUTSTANDING ACTIONS**

Members are asked to note the outstanding actions report.

For Information
(Pages 3 - 4)

8. ***REPORT OF ACTION TAKEN BETWEEN MEETING UNDER URGENCY PROCEDURES**

Report of the Town Clerk.

For Information
(Pages 5 - 6)

11. ***ADULT SOCIAL CARE SELF-EVALUATION FRAMEWORK 2024**

Report of the Executive Director, Community & Children's Services.

For Information
(Pages 7 - 94)

12. ***STANDING ADVISORY COUNCIL FOR RELIGIOUS EDUCATION (SACRE) & THE AGREED SYLLABUS CONFERENCE (ASC)**

Report of the Executive Director, Community & Children's Services.

For Information
(Pages 95 - 102)

13. ***GOLDEN LANE LEISURE CENTRE REFURBISHMENT UPDATE**

Report of the Executive Director, Community & Children's Services.

For Information
(Pages 103 - 108)

14. ***GOLDEN LANE ESTATE UPDATE BRIEFING - MAJOR WORKS AND ASSOCIATED ISSUES**

Report of the Executive Director, Community & Children's Services.

For Information
(Pages 109 - 116)

Part 2 - Non-Public Reports

20. ***NON-PUBLIC OUTSTANDING ACTIONS**

Members are asked to note the outstanding actions report.

For Information
(Pages 117 - 120)

21. ***REPORT OF ACTION TAKEN BETWEEN MEETING UNDER URGENCY PROCEDURES**

Report of the Town Clerk.

For Information
(Pages 121 - 122)

PUBLIC OUTSTANDING ACTIONS – COMMUNITY AND CHILDREN’S SERVICES COMMITTEE (CCS) – April 2025 Update

Title of Report/ Subject	Date Added	Initial request and pending Actions	Action Owner	Due Date	Latest Position
Window Replacement	27/07/2023	A full report on the Golden Lane Estate, not just Crescent House, to understand the entire program's progress	AD Housing	Ongoing	A high-level master programme for the entire Golden Lane Estate and an Activity Timeline have been produced by the project team. These form part of the Appendices for Complex Issues Reports, which have been drafted and will be presented at Corporate Projects Board in February and subsequently for CCS Committee in April.
City and Hackney Safeguarding Children Partnership (CHSCP) Annual report	25/01/2024	The legislative change would be presented to members for decision. The chair requested a member briefing ahead of the committee meeting which takes decision in this matter.	AD People	September 2025	The new legislative requirements regarding governance for the CHSCP have now been implemented. This will be reflected in the CHSCP Annual Report that will come to CCS in September.
Stronger Communities Annual Report	01/05/2024	The next report would provide more information in terms and conditions of grant approvals. The Resource Allocation Sub Committee (RASC) received a report on CIL funding in other boroughs some years ago and the officer agreed that this work could be refreshed.	Head of Central Funding and Charity Management	May or June 2025	The next Annual Report will provide some more detail about the programme, how it is run and how grants are managed. This has been logged and will be incorporated into next years' reporting. With regards to the next Neighbourhood Fund and how it operates in other boroughs, this research is underway, and findings will be provided to estate managers once collected.
Wardmote: Golden Lane Project	20/10/2024	A full report on the Golden Lane project has been requested to understand delays and assess risks. Increased project capacity and oversight are being implemented to ensure effective delivery.	AD Housing	October	A report will be shared at the April 2025 C&CS Committee.

PUBLIC OUTSTANDING ACTIONS – COMMUNITY AND CHILDREN’S SERVICES COMMITTEE (CCS) – April 2025 Update

City of London Children’s Centre Services – Update Report	11/12/2024	A policy paper on affordable childcare would be brought to the January Committee meeting. The importance of effective communication with parents and stakeholders was emphasised, with suggestions for improving transparency and addressing concerns about service continuity. A need for a contingency plan B) in case the new arrangements could not fully replace the current services by September 2025.	Strategic Education and Skills Director	June 2025	The consultation is live from 24/03/25 until 02/05/25. The report and draft policy is due to DCCS Committee in June 2025.
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City of London Corporation Committee Report

Committee(s): Community & Children's Services Committee – For Information	Dated: 30 th April 2025
Subject: Report of Action Taken Between Meetings	Public report: For Information
This proposal: <ul style="list-style-type: none">• provides statutory duties• provides business enabling functions	N/A
Does this proposal require extra revenue and/or capital spending?	No
If so, how much?	£0
What is the source of Funding?	N/A
Has this Funding Source been agreed with the Chamberlain's Department?	N/A
Report of:	Town Clerk
Report author:	Blair Stringman, Governance Officer

Summary

This report advises Members of action taken by the Town Clerk outside of the Committee's meeting schedule, in consultation with the Chairman and Deputy Chairman, in accordance with Standing Order Nos. 41(a) and (b).

Recommendation(s)

That Members note the report.

Main Report

Decision Under Standing Order 41(A) – UK Shared Prosperity Fund (UKSPF) – acceptance of funding of £200,000 allocated by the Greater London Authority for FY2025/26

In March 2024, the City Corporation was informed of its eligibility to receive a £200,000 grant from the Government's UK Shared Prosperity Fund, allocated by the Greater London Authority (GLA) through London Councils. Officers have since worked to

understand the eligibility criteria and identify suitable projects, confirming their positions with the GLA and London Councils. It was proposed that the City accepts the grant to fund four projects in FY2025/26: the launch of the SME Gateway Project (£66.7k), the Destination City digital platform (£16k), the Avondale Estate Multi-Use Games Area refurbishment (£100k), and the Holloway Estate Podium Greening, lighting, and waterproofing project (£17.3k). These projects have been endorsed by the Executive Directors of the Environment and Community & Children's Services departments and coordinated by the Office of the Policy Chairman on behalf of the Town Clerk.

The urgency of this decision stemmed from the late notification by the GLA in early March, necessitating a decision before the next scheduled committee meetings. The time taken to clarify eligibility criteria and identify qualifying projects had delayed the process, but it was in the Corporation's best interest to accept the funding to avoid risking the non-delivery of these projects or the need to source alternative funding.

The Town Clerk, in consultation with the Chairs and Deputy Chairs of the Community & Children's Services Committee and Policy & Resources Committee, recommended to:

- Approve receipt of £200k from UKSPF for FY2025/26
- Approve for funding to be spent on four City Corporation projects (detailed in this report) to contribute towards:
 - Launch of the new SME Gateway Project;
 - Destination City workers and visitors focused digital platform and consolidation
 - Avondale Estate Multi-Use Games Area refurbishment
 - Holloway Estate Podium Greening, lighting and waterproofing project

Conclusion

Background papers for Members are available from Blair Stringman on the email address provided below.

Blair Stringman

Governance Officer, Town Clerk's Department

E: Blair.Stringman@cityoflondon.gov.uk

City of London Corporation Committee Report

Committee(s): Community and Children's Services Committee – for information Safeguarding Sub-Committee – for information	Dated: 30/04/2025 16/06/2025
Subject: Adult Social Care Self-Evaluation Framework 2024	Public report
This proposal: <ul style="list-style-type: none"> • delivers Corporate Plan 2024-29 outcomes providing excellent services and diverse, engaged communities. 	
Does this proposal require extra revenue and/or capital spending?	No
If so, how much?	N/A
What is the source of Funding?	N/A
Has this Funding Source been agreed with the Chamberlain's Department?	N/A
Report of: Judith Finlay, Executive Director of Community and Children's Services	For Information
Report author: Scott Myers, Strategy & Projects Officer, Department of Community and Children's Services	

Summary

This report presents to members the City of London Corporation (City Corporation) Department of Community and Children's Services (DCCS) Adult Social Care Self-Evaluation Framework (SEF) 2024.

The SEF sets out DCCS' assessment of the quality and impact of Adult Social Care services and areas for development over the next year. Areas for development include enhancing co-production and resident engagement, strengthening collaboration with health partners, increasing the uptake of Disabled Facilities Grants and strengthening our partnership work with the voluntary and community sector.

Overall, the City Corporation is proud of the support that it provides for people to maintain their independence at home for as long as they are able and wish to and enable them to achieve positive outcomes.

The SEF for 2024 was submitted to the Care Quality Commissioning (CQC) in February 2025 as part of the evidence base for the forthcoming Adult Social Care CQC inspection.

Recommendation(s)

Members are asked to:

- Note the report.

Main Report

Background

1. The Adult Social Care SEF is completed annually. This is the first SEF that has been completed for Adult Social Care, and follows self-evaluations created for our Children and Families and Special Educational Needs and Disabilities services.
2. The SEF sets out achievements across Adult Social Care and links into all elements of our service, as well as our work with commissioned providers and community organisations. It also sets out our identified areas for development over the coming year.

Current Position

3. Our vision for adults with care and support needs and their carers is to create and sustain a compassionate and inclusive system that empowers individuals to lead fulfilling lives with independence, control, choice and dignity.
4. The City of London's high life expectancy and a high number of people who sleep rough are our key drivers for an increase in need for social care services. We recognise and respond to these challenges with practice and innovative responses which are at the forefront of our approach.
5. We utilise a strength and relationship-based approach, which is delivered by our stable, experienced, generic workforce, supported by strong partnership working across the health and care system.
6. During 2023-24, a total of 295 individuals engaged with Adult Social Care services. This includes those who received assessments, ongoing support, or other forms of assistance. There were also 109 adults receiving a long-term service as of 31st December 2024, and we supported 34 carers as of the same date.
7. There is strong satisfaction with our services. 64% of Adult Social Care services users are extremely or very satisfied with the service they receive.

8. We have a strong hospital discharge model built on a co-ordinated, multi-agency approach. Local authority delays are minimal through our agile and responsive practice.
9. There are no waiting lists for assessments, and people are seen promptly. 70% of Supported Self-Assessment were completed within 28 days (year to date), and 81% of the ongoing reviews were completed within 12 months of the previous assessment.
10. We have an effective Quality Assurance Framework that demonstrates our continuous improvement, with local well-established integrated care models with a range of partners which enhances our ability to provide holistic and effective care.
11. Stable political leadership and robust and effective financial management provide stability to our Adult Social Care service, and transparency and trust are fostered through visibility and accessibility of Senior Management.
12. We continue to strive for excellence, which means we are always looking to develop and enhance our services. These include, but are not limited to, further strengthening our partnership work, data collection, communication and co-production and engagement with residents.

Corporate and Strategic Implications

Strategic implications – the Adult Social Care SEF aligns with the Corporate Plan 2024–2029 outcomes of providing excellent services and ensuring that there are diverse, engaged communities. DCCS strategic objectives include: people of all ages and all backgrounds are prepared to flourish; people of all ages and all backgrounds can live independently, play a role in their communities and exercise choice over their services; people of all ages enjoy good mental and physical wellbeing; people of all ages and all backgrounds feel part of, engaged with and able to shape their community.

Financial implications – none.

Resource implications – none

Legal implications – none.

Risk implications – none.

Equalities implications – Equalities implications are considered within the SEF and where any new services are developed or services change, an Equalities Impact Assessment would be carried out.

Climate implications – none.

Security implications – none.

Conclusion

13. Overall, our practice and services for residents are high quality, based on a personalised approach. We are ambitious in continuing to improve the service we

provide to adults with care and support needs and their carers, which leads to positive outcomes. This SEF enables us to reflect, monitor and assess progress against our areas for development, and we will carry out a six-month review against our identified areas of improvement to ensure focus remains on achieving the best for adults with care and support needs and their carers.

Appendices

- Appendix 1 – Adult Social Care Self Evaluation Framework 2024 – redacted public version

Scott Myers

Strategy & Projects Officer
Department of Community & Children's Services

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Adult Social Care Self Evaluation Framework

REDACTED VERSION

City of London Corporation

FEBRUARY 2025

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Summary



The City of London is unique. High life expectancy and a high number of people who sleep rough are our key drivers for the need for health and social care support.

Overall, our practice and services for residents are an excellent quality, based on a personalised approach. We recognise and respond to challenges around complexity of needs with proactive and innovative responses which are at the forefront of our approach.

We are proud of the support that we provide for people to maintain their independence at home for as long as they are able and wish to and enable them to achieve positive outcomes. This is reflected in the strong feedback we receive from the people we support about our social workers and practitioners and the care and support that they provide.

Our excellent strengths and relationship-based approach is delivered by our stable, experienced, generic workforce, supported by strong partnership working across the health and care system.

Engagement and co-production is a key principle of our work but continues to be strengthened, recognising and valuing the individual, unique experiences that people bring.

Our Safeguarding practice is robust with comprehensive governance and oversight through the City and Hackney Safeguarding Adults Board and a specific City of London sub-group.

There is strong political support for Adult Social Care with governance and scrutiny provided through the City of London Corporation's (City Corporation) system of committees and boards. This political support has also protected a solid financial base for adult social care and has secured growth funding to help meet increased demand and complexity of need.

We continue to strive for excellence, which means we are always looking to develop and enhance our services. These include, but are not limited to, further strengthening our partnership work, data collection, communication and co-production and engagement with residents.

What works well



There is **strong satisfaction** with our services - 64% of Adult Social Care Service users are extremely or very satisfied with the service they receive.

Our **strengths-based approach** that focuses on the abilities and potential of our residents rather than their limitations.

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Our firm commitment to being **anti-racist in everything we do** ensuring equity and inclusion are at the forefront of our services.

An **experienced and knowledgeable workforce** with **high staff retention rates**, means we know our residents well and foster positive relationships which delivers effective support.

A strong **hospital discharge model** built on a co-ordinated, multi-agency approach. We are agile and responsive and local authority delays are minimal.

There are **no waiting lists** for assessments. People are seen promptly, 70% of Supported Self-Assessment were completed within 28 days (year to date), and 81% of the ongoing reviews were completed within 12 months of the previous one.

Partners told us...

"The Adult Social Care team knows its clients well, have a great understanding of their complex needs, and respond quickly".

What works well

We meet need effectively through an **agile and flexible commissioning model**.

Effective **Quality Assurance Framework** that reflects our **continuous improvement**.

Local **well-established integrated care models** with a range of partners enhances our ability to provide holistic and effective care.

Safe and personalised responses to our residents through robust and rapid professional responses to safeguarding.

Stable political leadership and **robust and effective financial management** provide stability to our Adult Social Care Service.

Transparency and trust are fostered through **visibility and accessibility** of Senior Management.

Shaping our services with the **engagement of residents and service users**.

"The City Corporation has developed a robust quality assurance framework and clearly welcomes independent challenge and scrutiny... There is an obvious commitment to continuous improvement and a determination to avoid complacency in a service which is already highly performing in many areas. The Board has clear priorities for development, which include strengthening the voice of the service user in assessing the quality of practice and identifying areas for improvement."

John Goldup, Chair Adult Social Care Quality Assurance Board

"It seemed fundamental for carers like me to be involved with a service which will affect us directly. I felt we raised important challenges on weighting of scores and we were able to create our own set of questions for panel interviews."

City of London carer involved in the recommissioning of the carers support service

Areas for development

Actions	Proposed Outcomes
1. Enhance co-production and resident engagement	Services meet the needs of our residents and increased residents' satisfaction on provided services
2. Communicate the prevention offer collaboratively with our partners	Our partners have a strong knowledge of the prevention pathways and empowering them to signpost to community offer
3. Develop an innovative staff development programme through partnerships with neighbouring local authorities	An enriched programme of development activity that supports all staff progression
4. Strengthen collaboration with health partners	City of London has a multi-disciplinary approach to health needs that meets the needs of its residents
5. Implement improvements in how we capture and respond to feedback from clients	Improved engagement from residents that enables us to respond to emerging themes
6. Increase uptake of the Disabled Facilities Grant	Residents who need support in their own home and allow people to support their independence
7. Enhance data quality and utilisation across partnerships	Our data and that of our partners enrich and contribute to service delivery for our residents
8. Strengthen our partnership work with the voluntary and community sector	Improved communication and collaboration channels with the community and voluntary sector
9. Expand on the places we communicate our offer in, such as libraries and other community settings	Residents are more aware of what our offer is and where they can access support
10. Improve our robust data management practices	Improvement to our recording tools that strengthen performance oversight

The City of London and the Corporation



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The City of London is the oldest and most historic part of London

The Square Mile is the financial centre of the capital

Smallest local authority area in the country at 1.12 miles

The City of London borders seven other local authorities

We have a unique system of administration with the Court of Common Council overseen by the Lord Mayor at the top

We have 100 elected Common Councillors and 25 Aldermen

Our work is overseen by the Community and Children's Services Committee

We provide local and police authority functions

There is one GP Practice in the City of London which has around 75% of residents registered (20% registered in Tower Hamlets)

Due to our size, there are no residential, nursing or supported living units in the City of London

Over 670,000 workers.
Millions of visitors each year

The City of London and the Corporation



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42% of the City of London's population is from a black or global majority background

We have 8579 residents, 14% are aged 65 and over

There is high life expectancy in the City with females having a life expectancy of 90.7 and males 88.8 years

There is a high number of rough sleepers – 656 in 2023/24

There are pockets of affluence and deprivation in the Square Mile, particularly in the East

Our Adult Social Care workforce is stable and experienced. Given our small size it is a generic service

The City Corporation



The City Corporation adopted its Corporate Plan in 2024 which sets out a series of deliverable Outcomes of focus.

Adult Social Care contributes to three of these Corporate Outcomes:

Providing Excellent Services

Supporting people to live healthy, independent lives and achieve their ambitions. Effective adult social care services are a vital part of this.

Diverse Engaged Communities

Everyone should feel that they belong. Connecting people of all ages and backgrounds will help build diverse, engaged communities that are involved in co-creating great services and outcomes.

Vibrant Thriving Destination

The City of London is a safe and secure location and providing the appropriate physical spaces to support people is integral to create a place where everyone prospers.



Department of Community and Children's Services



The Department of Community and Children's Services (DCCS) at the City of London Corporation is responsible for vital local authority services, including Children and Adult Social Care, Housing Homelessness and Rough Sleeping, Public Health, SEND, Libraries and Community Safety.

DCCS also shapes key strategies for Adult Social Care, SEND, Joint Health and Wellbeing, Homelessness and Rough Sleeping, and Carers .

These strategies are underpinned by our commitment to improving the lives and wellbeing of everyone who lives, works, studies or visits the City of London.

DCCS objectives

Safe: People of all ages and all backgrounds live in safe communities; our homes are safe and well maintained and our estates are protected from harm.

Potential: People of all ages and all backgrounds are prepared to flourish in a rapidly changing world through exceptional education, cultural and creative learning, and skills which link to the world of work.

Independence, Involvement and Choice: People of all ages and all backgrounds can live independently, play a role in their communities and exercise choice over their services.

Health and Wellbeing: People of all ages enjoy good mental and physical wellbeing.

Community: People of all ages and all backgrounds feel part of, engaged with, and able to shape their community.

Adult Social Care: Our ambition and aspirations

Our ambition

To create and sustain a compassionate and inclusive system that empowers individuals to lead fulfilling lives with independence, control, choice and dignity. We aim to prevent and delay the onset of care needs, with our communities empowered to remain and return to independence. A skilled workforce will provide person-centred care driven by the unique needs, culture and context of each individual, promoting their well-being and enabling them to contribute meaningfully to their communities. Excellent services - built on effective partnerships and integration – will provide better outcomes and more efficient delivery.

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Our aspirations for adults with care and support needs:

- receive the right support at the right time
- experience equity and equality
- recognise each person's self-defined strengths, preferences, and needs as the basis for providing care and support to live an independent life that is appropriate to their needs
- act in their best interests
- manage their own care through use of direct payments
- have opportunities to share their experiences and expertise to shape their lives, our services and our strategies

Our aspirations for the delivery of adult social care services:

- help people meet their own needs and aspirations in a safe and supportive way
- share a determination to evaluate and improve services based on robust evidence of need
- support a skilled, knowledgeable workforce that responds to a range of needs and opportunities
- provide clear, accessible information and processes so families know who does what and where to get the right information or access the right services
- work collaboratively and innovatively based on shared understanding, knowledge and experience of the families we work with
- make a difference to the daily lives and long-term ambitions of the people we work with

Adult Social Care: an overview



Performance Overview



Adult Social Care: an overview



Adult Social Care service users



Data for 2023/24 shows that a total of 295 individuals engaged with Adult Social Care services. This includes those who received assessments, ongoing support, or other forms of assistance. Our analysis provides insights into the demographic composition of these users, including ethnicity, age, gender, and service usage patterns.

Ethnicity Breakdown: Our adult social care users are predominantly White-British, comprising 53% (157 users). The second-largest group is White-Other at 13% (39 users), followed by Asian (12%), Black (5%), Other (2%), and Mixed (1%). Additionally, 14% (41 users) have chosen not to disclose their ethnicity.

Age Trends by Ethnicity: White-British users, typically older individuals, have the highest average age at 73, followed by White-Other users at 66. Asian users, though also older, have a slightly lower average age at 60. Black users tend to be the youngest demographic, with an average age of 58.

Gender Distribution Across Services: Short-Term Support and Carer Support services have a predominantly female user base, at 72% and 67%, respectively. In contrast, Nursing Care has a higher proportion of male users, making up 64% of its user base.

Ethnicity Representation in Services: Nursing Care is exclusively used by White-British individuals (100%). Residential Care also has a high proportion of White-British users (78%), while White-Other users are most represented in Residential Care (17%) and Community services (15%). The highest proportion of Asian users is found in Carer Support services, where they make up 27% of users.

Age Distribution Across Services: The oldest user groups are found in Short-Term Support (81), Nursing Care (77), and Residential Care (78). In contrast, Community services (70) and Carer Support services (63) serve the youngest users on average.

Theme one: working with people



We are committed to empowering individuals to proactively manage their health and wellbeing, thereby enabling them to maximise their independence, exercise choice, and maintain control over their lives.

Our support aims to facilitate healthier lifestyles and, wherever feasible, reduce the future need for formal care and support services.

Supporting people to live healthier lives

Prevention

Our strategic objectives set out in the Adult Social Care Strategy are underpinned by a strength-based approach and a commitment to supporting early identification of need with a flexible, agile and person-centred response from Adult Social Care and partners.

"Oh yes, I used the shoes. They are a little bit tight, but I used them when going out, I hadn't been out of the house since being discharged from the hospital and was able to"

City of London resident, Early Intervention Scheme

Operationally this includes:

- Occupational Therapy and Trusted Assessor support. Capacity of these services has increased in recent years
- Disabled Facilities Grant and Housing Assistance Policy which aims to support disabled people to maintain their independence at home
- an innovative early intervention scheme (see next page)
- rapid response service which includes provision to prevent hospital admission and a discharge to assess scheme (see section on providing support)
- reablement, that is delivered by the same organisation that provides the rapid response service, creating the opportunity for a strong follow-on pathway
- referral to a relevant voluntary or community sector organisation
- Welfare calls and visits through Strengths-Based Practitioners.

Supporting people to live healthier lives



Early Intervention Scheme

Innovative scheme which was developed in 2022 and provides funding to empower practitioners, together with a resident, to identify and implement low-cost one-off interventions which help improve wellbeing and in turn prevent, reduce or delay needs. This has included things like a microwave so that someone was able to have hot food to eat, a dementia radio and an emergency mobile phone so that someone could contact their support network in periods of mental health crisis.

During 2023/2024 13 adults benefitted from the scheme with 24 separate purchases with a total cost of £4040. From April – December 2024 there were six interventions.

"Having the support from management to use my initiative and listen to what would actually be helpful to the service user, led to improved outcomes for clients and improved relationships. I could show to clients that we actually do want to help in a person-centred way and prioritise what they need to make meaningful change."

City of London Social Care Practitioner, 2024

Information and advice



Information and advice is a key principle underpinning our preventative approach.

[Adult Social Care leaflets](#) are available, providing residents with information on what support and services are available.

Skilled and experienced duty workers on ASC who information and advice at initial contact.

City Advice is the commissioned service which provides a wide range of advice including on social care.

Practitioners provide a range of preventative advice. For example, to a carer about registering their carer status with the GP, how to apply for carers allowance and how to access the carers support service.

Our residents tell us that...

They would like one place where they can get all information about local authority and health services, voluntary sector services and volunteering opportunities. As a result, work is underway to further develop an online directory for City and Hackney called Finding Support Services. This will be re-launched in 2025 and includes health, social care and voluntary sector services.

City Advice

City Advice is a commissioned service provided by Toynbee Hall who work alongside people facing poverty, injustice, and inequality

It provides tailored advice on a range of issues including cost of living pressures and information and accessing social care services.

In 2023/24, the service received 18 requests specifically relating to social care.

It provides a culturally appropriate service accessible to our diverse community.

Engagement and co-production

DCCS has reviewed its approach to engagement and co-production and adopted a specific co-production and reward and recognition policy.

It is also signed up to and part of system wide engagement work such as the City and Hackney health and social care co-production charter.

Adult Social Care continues to strengthen its activities, for example establishing a service user Adult Social Care Advisory Board and is aiming to increase the diversity of residents and service users engaged with.

Engagement activities informed the development of the Adult Social Care Strategy, and the [Carers Strategy 2023-27](#) was co-produced with carers who presented the strategy to Committee for approval.

"As a user of the City carers support service, I really appreciated the opportunity to use my lived experience to input into the recommissioning process. I felt my opinion was valued and helped shape the design of the new service." - City of London carer

Co-producing the carers support service

The City of London's carers support service was recommissioned in 2024. With support from the Commissioning Manager, carers:

- responded to a call for volunteers to be involved with the recommissioning process.
- reviewed the current service and co-produced the service specification to go out for tender
- completed evaluation training to support their engagement
- informed tender weighting and questions
- were part of the bid evaluation process
- co-produced tender outcome letter
- took part in a review of what went well and how the process could be improved in the future.

Plans are being put in place for carers to be involved in contract monitoring.

Tackling inequalities

A strong departmental commitment to equality, equity, diversity and inclusion (EEDI) is demonstrated through the DCCS EEDI Group which is an all-staff forum that drives the promotion and improvement of EEDI within the department.

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The Head of Service and Assistant Directors attended the Leadership in Colour Conference and reflections from this were discussed at the People's Senior Management Team meetings and the People's Equality Group.

A People's Equalities Steering Group monitors approaches in this area. Their work has included running a book club for staff to read and discuss the book 'Me and White Supremacy' and shaping the Departmental Anti-Racist Practice Standards.

Anti-racism and cultural competency training

DCCS senior managers undertook anti-racism and cultural competency training to support a shared, consistent understanding.

Two workshops were delivered between July and October 2024. 35 senior managers attended workshop 1 and 34 attended workshop 2.

Most attendees rated each workshop either good or excellent, with 3 giving neutral responses. There were no ratings of poor or very poor for either workshop.

The top words attendees used to describe the workshops included thought provoking, valuable, interesting, informative and challenging.

Attendees overwhelmingly said they enjoyed the time for discussion with colleagues, reflection and sharing personal experiences. This training will be rolled out to all staff within DCCS.

Tackling inequalities

Tackling inequalities is an integral principle of our strengths-based approach. This includes working with partners in the community to take a holistic view of the individual.

Reflection and learning on good practice around recording people's diverse needs in our Care Act Assessments were included as part of internal training on the strengths-based approach. A 2024 audit showed that a Strengths-Based Approach is now consistently included, with no cases found without SBA evidence.

Staff across the Directorate work to anti-racist practice standards which were introduced in 2023 and applied across both Adult and Children's Social Care.

Strengths Based Practitioners and the Care Navigator support people to access various services when needed which can help address barriers to accessing services.

Tackling inequalities – Culturally appropriate support

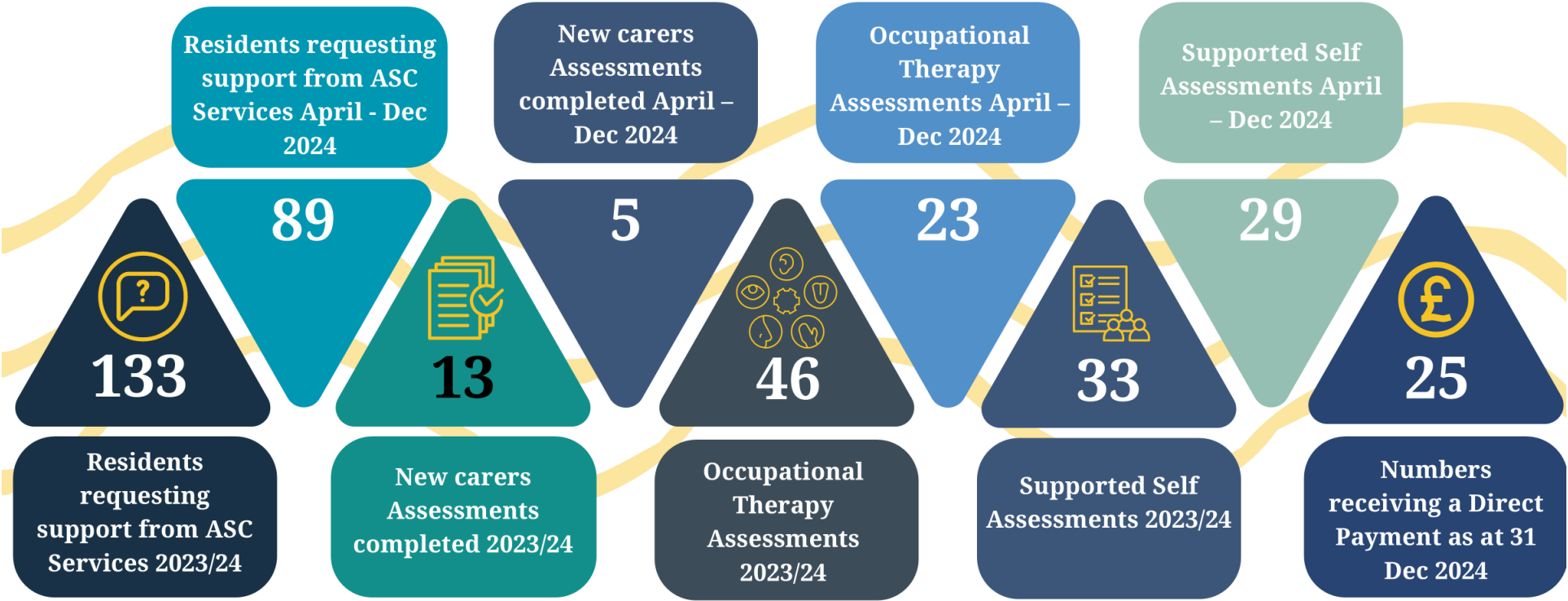
An individual [REDACTED] required Telecare services and home adaptations. Cultural sensitivity and language barriers were crucial considerations in the support provided.

Our Strengths-based Practitioner helped translate communications sent to the client which helped safeguard them from online harms. Our Practitioner also tailored their communication techniques to support the individual's language needs, as well as understanding the importance of certain religious symbols within the home when carrying out a home visit.

Working with people



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Assessing and reviewing needs

Strengths-based approach

The Adult Social Care service adopts a strengths-based approach to assessments, focusing on empowering individuals by recognising their capabilities.

A strengths-based approach supports people to maintain their independence and meet their outcomes and aspirations. It has three core-principles:

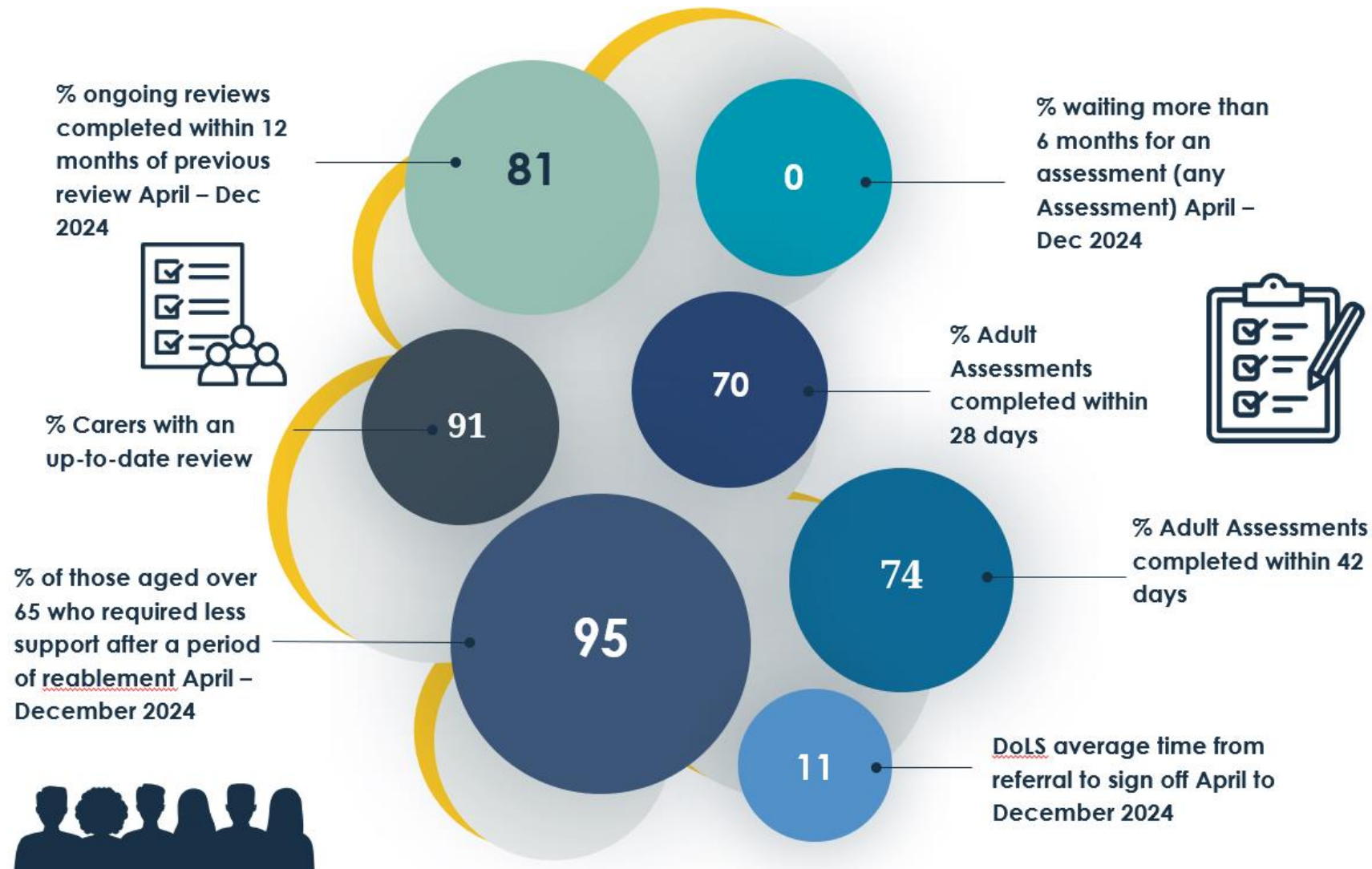
- working collaboratively on mutually agreed goals
- using the community as a resource
- having trusted and workable relationships

This approach has been embedded across Adult Social Care so that the focus is on potential rather than problems and empowers residents to take control, be able to navigate challenges and achieve meaningful goals.

"The strengths-based model focuses on building trust and functional relationships with residents, focusing on the positive elements of the person's situation and how they have coped so far."

Adult Social Care social worker

Assessing and reviewing needs



Assessing and reviewing needs

We do not hold waiting lists for assessments in adult social care. 44% of contacts and referrals were completed within 2 working days and a social worker is allocated at this point when required.

Page 35 Timeframes remain flexible and responsive, carefully aligned with the wishes, needs, and potential risks faced by the individual and their family. However, these timeframes can also be influenced by external factors, such as the need to facilitate the timely discharge of a patient from hospital, ensuring continuity of care and support. Carrying out a Care Act assessment with someone who is rough sleeping presents a particular set of challenges that may mean having to extend the length of time to complete.

In line with our practice standards, there is a commitment to completing assessments at a pace suitable to the adult, expected to be within a standard timeframe of 28 days in most situations. In cases where complexities arise—such as challenges in gathering the necessary information—this may extend to 42 days.

"Practitioners maintain a high-level of good practice, with some examples of excellent practice. Social workers understand the assessment process as a conversation, they co-produce outcomes with the adult/carer, empower people to lead on their care and support arrangements... Professionals can reflect upon differences between people, their values, beliefs, and lifestyles with respect and are sensitive of their basic cultural characteristics."

Internal strength-based practice
audit March-May 2024, July 2024

Assessing and reviewing needs

Assessment times form a vital part of our performance monitoring framework, ensuring we consistently deliver a service that balances efficiency with a person-centred focus. In the year to date, 19 supported self-assessments were completed within 28 days and 20 within 42 days.

A commissioned advocacy service is available for those who require it. At the end of December 2024, there were 15 open cases of advocacy support.

Page 36 Carers receive their assessments from qualified social workers. In 2023/24, 13 carers received an initial assessment and 5 between April and December 2024. Carers assessments can also have a positive impact on relationships between the carer and the cared for, for example by reducing stress.

At the end of December 2024 91% of carers had an up-to-date support plan.

Where there is an immediate need evident, a package of care would be provided whilst the assessment is carried out.

The services of the Language Shop in Newham are used to respond to requests for language interpretation services and to facilitate effective communication across multiple languages including Bengali/Sylheti, British Sign Language and Japanese. This ensures the communication needs of the City of London's diverse population are met.

Assessing and reviewing needs



Adult Social Care is part of the transitions Forum which reviews and plans for young people with disabilities or young carers as they start to approach adulthood. From 14 years old, the Forum considers whether a young person may require support from Adult Social Care when they turn 18 and whether it would be of a significant benefit to them to conduct a transition assessment. There are currently 5 children on the register. The adult assessment will be completed by the adult social worker who is already involved in the young person's case, collaborating with other professionals and getting to know the young person over time.

In terms of reviews, there has been an improvement in performance for reviews of care and support plans within 12 months from 67% in 2023/24 to 81% between April and December 2024. At December 2024, 91% of carers had an up-to-date support plan. This is well above general performance across London and delays are often due to personal choice or circumstances of the individual concerned.

"The City of London benefits from an experienced and united team delivering occupational therapy, trusted assessment and reablement services... The uniqueness of the City of London in terms of population and workforce supports relationship-based practice... Conversations with residents confirmed they were very happy with the [service], valuing their input, often feeling more independent because of the intervention."

Independent review of the occupational therapy, reablement and trusted assessor service in the City of London, May 2024

Direct Payments



The Adult Social Care service promotes the availability of [Direct Payments](#) to support people's aspirations, their wellbeing and independence.

The take up rate of direct payments is 32% as of December 2024 highlighting the success of our approach to promoting them as a preferred option to empower people to purchase their own care.

In terms of support provided to carers, from the 30 Carers that have an active Care and Support Plan, 73% receive direct payments to meet their needs.

Quality of practice in this area is included in the annual audit schedule.

In the past year, no individuals receiving a direct payment returned to having their care arranged by the local authority other than one individual who moved into accommodation based support.

Examples of Direct Payment use includes:

- Choosing a preferred home care agency
- Hiring a Personal Assistant (PA) to help with care and support
- Gym memberships, swimming and recreational sport activities
- Training courses, such as becoming a personal trainer, how to publish a book online, and accountancy.

"I like receiving a Direct Payment as it offers me flexibility how my care arrangement is provided."

City of London Direct Payment client feedback

People's experiences and outcomes



Adult Social Care Survey 2023/24: 67.3% of service users were very or extremely satisfied with the care and support they received. No service users recorded that they were dissatisfied. The City of London is well placed on this measure, being above the mean for both London and national local authorities.

Page 35
In both this survey and the Survey of Adult Carers in England, the issue of social isolation was evident with 36.8% of social care service users and 17.6% of carers saying they had as much social contact as they would like. This is an area of focus for us and we are working with a voluntary sector organisation who have submitted a grant bid to provide a befriending service in the City of London.

In terms of service delivery, people do not have to wait for an assessment and assessments are completed promptly.



Forget Me Not Café service user

People's experiences and outcomes



In 2024, our Adult Social Care service received positive client feedback, with no negative comments received. Despite this, we established a feedback loop, which includes regular reviews, allowing us to translate this positive feedback into tangible service improvements.

Recent service improvements as a result of feedback received include:

Page 40

- briefing our Adult Social Care Team on good practice and improved information and advice as a result of findings from the audit
- improved information and advice available to residents
- updates to our website providing more information and advice in an easy to access place

As part of the continuous feedback loop, any feedback that is received is reviewed and necessary improvements are made where required.

Quality assurance



There is a strong golden thread and connection from management to operational practice with annual direct observation of practice from the Executive Director of Community and Children's Services, the Assistant Director of People and the Head of Adult Social Care.

An Adult Social Care Assurance Board, with an independent chair, provides focus and continued drive for excellence, as well as a strong and well engaged Health and Wellbeing Board.

There is a clear timeline of all quality assurance activities which facilitates the triangulation of results, including residents and staff in reviewing practice and outcomes.

Independent practice audits are commissioned when required, e.g. review of the occupational therapy, reablement and trusted assessor service. Internal audits have included management oversight and a strengths-based practice audit.

The Principal Social Worker role is designed to strengthen practice governance.

Quality assurance



Quality Assurance Framework

A Quality Assurance Framework for Adult Social Care was updated in 2024 and reviewed annually to provide a foundation for continuous improvement using a range of methods.

The Framework sets out: relevant standards; how we support our workforce to ensure good practice; expectations around evaluating the quality of practice; the quality assurance of commissioned services; the role of external and independent assurance activities and performance management.

The Framework is essential in ensuring the delivery of high-quality services. The learning cycle model used provides a systematic approach to monitoring and improving the quality of care provided, ultimately enhancing the overall experience and outcomes for those receiving adult social care services.

Recent Thematic Audits

1. **Mental Capacity Assessment (July 2024)**
2. **Management Oversight (Sept 2024)**
3. **Feedback from adults and their carers (March 24, Feb 25)**
4. **Prevention review (Feb 25)**
5. **Carers Assessment (underway) (Feb 2025)**

Theme two: Providing Support



We are committed to working in collaboratively and transparently with partners ensuring the individual's needs are central to what we do. Our stable, knowledgeable workforce delivers an asset-based approach providing holistic support to those who need it, when they need it.

Providing support



Market shaping and commissioning

Page 45

With an ageing population and greater emphasis on choice, control and community-based support, we have worked to adapt our services to this changing social care market. This includes a greater focus on home care, specialist mental health provision and supported living that enables independent living. Where those with needs require extra care and support in their daily lives, care home placements within residential and nursing settings or more complex packages of care are commissioned.

We commission 24 Adult Social Care Services which span a range of provision, including homecare, direct payments, community equipment, technology enabled care services, and early intervention and preventative services. These services are commissioned in line with our Procurement Code, and we do not block contract care arrangements due to our lower volumes of demand due to our population scale.

These services are either secured via a procurement or service level agreement, spot purchased or provided by the voluntary and community sector.

Securing a sustainable care market

We ensure that the range of diverse needs in the population are met through the specification and contract monitoring process. In commissioning its provision, the City Corporation requires a CQC rating of Good or above, compliance with the Unison Ethical Care Charter, payment of the London Living Wage and market-sustainable prices.

We are confident that the current care market position is sustainable within the City of London. Analysis of rates paid by neighbouring authorities suggests that the City Corporation pays a sustainable and fair rate especially when taking into consideration low homecare demand levels within the City of London.

Market shaping and commissioning

North-East London Integrated Care System

We are part of the North-East London Integrated Care System, which prioritises co-designing services that prioritise prevention, community-based support and seamless health and social care integration. We participate in a range of work such as developing a new continuing care model and a piece analysing bed based and home-based care usage across the whole NEL system.

Continuity of care

When provider failure occurs, we manage it through our contingency plans as we do not block book placements or commission through one individual provider. We have not experienced any provider failures or commissioning embargoes in the past 12 months. We monitor CQC safety alerts and if there were any concerns, we would work with the provider and the individual to seek assurance, develop a way forward and manage risk effectively.

Our Commissioning Approach

Commissioning and procurement strategies are developed through a comprehensive approach. This includes analysing historical and current service needs, incorporating feedback from co-production initiatives, and utilising data from sources like PANSI, POPPI, London ADASS, and the Joint Local Health and Wellbeing Strategy. Market analysis of costs and capacity is also conducted, alongside exploring collaborative opportunities with neighbouring local authorities to optimise service delivery.

Market Position Statement

Our vision is to build a person-centred care system tailored to the City of London's unique circumstances. To assist with achieving this vision, we developed a Market Position Statement which sets out our commissioning priorities to shape the social care market.

Within 2023/24, we spent just over £3.6 million on commissioned social care provision, which primarily consisted of: home care, rapid response and reablement; Direct Payments; Residential and nursing; Supported living; Community equipment; Assistive technology; Carers services; Advocacy.

Market shaping and commissioning

Home Care

Quality home care is a vital aspect of the City Corporation's aim to enable people to remain in their homes for as long as possible. These services assist people with the tasks of daily living, usually in their own homes. The City Corporation currently commissions one care home agency to provide home care to residents within their homes in the City of London and has been doing so since June 2022 following a successful market exercise. Currently 78 people receive this home care service.

Supported living

The City of London currently has 19 people living in supported living accommodation as of December 2024. The City of London has no accommodation-based support within its boundary and therefore individuals are placed based on client need and choice within the area of other local authorities mainly within the Greater London region.

Residential and nursing care home

The City of London has no residential or nursing care homes within its boundary. Therefore, residents requiring residential, or nursing care are placed in care homes situated within other London local authorities or in other areas such as Northumberland, Stockport, and Kent. This spread is driven by client needs and choices rather than market conditions. As of December 2024, there are 10 people in a nursing home and 21 people in a residential home.

Accommodation based support is all spot purchased which provides more agility to meet need and offer choice. Although there is a risk that this could increase costs, this has not been borne out unless there is a very costly package which can skew average unit cost.

Partnership working: the local health and care system



The City of London Corporation is part of the North-East London Integrated Care System and the City and Hackney Place Based Partnership. Priorities for the Place Based Partnership are built around start well, live well and age well, and include a range of activities including further embedding Neighbourhood work (see below).

Along with Hackney, we were pioneers in establishing neighbourhood working in 2017 with eight neighbourhoods established. When Primary Care Networks were introduced, these were mapped to existing neighbourhoods.

The Shoreditch Park and City Neighbourhood covers the City of London and part of the London Borough of Hackney. This brings together local Health and service providers with residents and voluntary and community sector organisations. It aims to provide care and support closer to where people live and improve coordination between services. Resident engagement and co-design is a key principle of neighbourhood working.

We are involved with various Neighbourhood activities. For example, Adult Social Care Social Workers join multi-disciplinary team meetings to discuss complex cases which facilitates shared learning and joined-up working – see case study on page 40.



Partnership working: the local health and care system



We are also involved with Neighbourhood Forums, which facilitate networking and the sharing of ideas, and strategically in the Leadership Group. Residents and service users are involved in the Neighbourhood Forums and there is a specific City of London focused action group from the forum which is identifying areas that they would like to focus on. Current ideas include physical activity and improving mental health.

Page 19 Our Integrated Programme Board (IPB) reflects the importance of integrated health and social care in the City of London. It brings together key internal and external partners to facilitate and drive change and achieve the best possible outcomes for City of London residents. All within the unique context of the City of London and the local health arrangements. Neighbourhoods are a standing agenda item at the IPB which also acts as a space for external partners to bring ideas, debate and discussion to inform their work, ensuring City of London residents are considered and benefit from initiatives where appropriate.

The City of London Health and Wellbeing Board is a partnership that is responsible for promoting the health and wellbeing and tackling health inequalities of people who live in the City of London. The Board also sets the priorities for the Joint Health and Wellbeing Strategy, which the Integrated Care System helps deliver.



Partnership working: health



Adult Social Care have strong relationships with Health partners including the Neaman Practice and the practices in Tower Hamlets where residents (around 20%) are registered. Social workers are active members of the Multi Disciplinary Team meetings in these practices.

Mental health services are delivered by the East London Foundation Trust through the Neighbourhoods Mental Health Team. Key Mental Health Act duties are also commissioned from the Trust, including assessments, tribunal reports, and Community Mental Health framework responsibilities.

In 2024, the average Mental Health Act Assessments undertaken per quarter was 2. This was a decrease on previous years but a pattern mirrored across Hackney.

There are 37 people that we have responsibility for under s117 requirements.

Multi-disciplinary meetings enable a holistic approach to care, more responsive and proactive services tailored to individual needs, direct access to health colleagues, time efficiency, and reduced professional stress.

Feedback from a social worker emphasised that MDMs are organised, managed, and structured successfully.

"There was evidence of good multi agency working, especially with acute and intermediate care colleagues, the fire service and housing."

OT external practice audit report in May 2024

"Health, OT and physiotherapy colleagues provided critical input on equipment trials and mobility solutions. The district nursing team managed the person's wound care and pressure ulcer prevention. Communication with the GP ensured timely medical reviews and specialist referrals."

OT on partnership working

Partnership working: public health



There is a joint City and Hackney Public Health Service which includes some joint commissioning of services such as smoking cessation and weight management.

A population health hub equips partners across the system to tackle inequalities and a number of initiatives are provided such as Making Every Contact Count (MECC) all of which contribute to a preventative approach.

Our partners told us....

"There is good communication and information sharing between departments and agencies"

Public Health has supported the training of 30 adult social care staff in MECC over the past 4 years.

Two major individual risk factors for social care-related needs among adults are tobacco smoking and obesity.

Public health commissions two relevant services that contribute to both primary and secondary prevention of social care related needs:

- an integrated weight management and exercise on referral service for adults in the City
- a stop smoking service for people aged 12+ across the City (as part of a joint City and Hackney service).

Public Health also funds a falls prevention service in the City, as part of a wider falls pathway, which is currently under review to better respond to the needs of local people.

Partnership working: Healthwatch City of London and neighbouring boroughs



Healthwatch City of London

We have a mature commissioning relationship with Healthwatch City of London. The Department of Community and Children's Services facilitated and supported the establishment of the current Healthwatch in 2019. Since then, Healthwatch have taken on additional work (outside their statutory role) to support us in our co-production efforts including holding patient panels on our Adult Social Care, SEND and Carers Strategy, supporting social care users to complete a national survey of their experiences and establishing and facilitating on our behalf an Adult Social Services User Advisory Group which starts in March 2025.

Neighbouring boroughs

The City of London is bordered by seven other local authorities. We work particularly closely with the London Boroughs of Tower Hamlets (where some of our residents are registered with GPs and where residents in the east of the square mile look to for many of their services) and Hackney. Our partnership with Hackney is particularly strong and includes the sharing of a Public Health Team, being part of a joint Place Based Partnership, and delivering some services on our behalf for example the out of hours emergency duty team. There is also a joint City and Hackney Safeguarding Adults Board. These partnerships enable us to strengthen and add value to our work.

Partnership working: City of London Police



Our partnership with the City of London Police (CoLP) operates through a multi-disciplinary approach across tactical and strategic levels. We collaborate on initiatives like MARAC, Prevent, the Strategic Vulnerability Board and the Rough Sleeping Task and Action Group.

Effective collaboration enhances information sharing between partners and can reduce duplication of work by streamlining activities. This is supported by open, honest and transparent conversations which ensure all, including the resident involved, understand what is happening and any relevant outcomes.

The police are responsive to safeguarding enquiries, participating strategically in the Community Safety and Safeguarding Board and Rough Sleeping Strategy Group, ensuring coordinated multi-agency responses.

Partnership working: housing



We have social housing across two estates within the Square Mile and provide management services to Barbican residential housing. We also have 10 housing estates in six other London boroughs. There are strong working relationships with housing including a Tenancy Support Team which provides a preventative service to vulnerable people and safeguarding training is provided for all housing staff. Practitioners collaborate with housing officers in, for example, situations of high-level self-neglect - such as hoarding - to provide holistic interventions and support to the resident.

The Adult Social Care Occupational Therapy service undertakes assessments for any resident that may benefit from an adaptation or be eligible for a Disabled Facilities Grant (DFG). We have also developed a Housing Assistance Policy which aims to assist a wider range of residents who may not qualify for a DFG, helping them to achieve the home adaptations they need to maintain their independence.

The Occupational Therapy team completes housing reports with the client to support their housing needs based on their requirements of a property to increase their functioning and occupation within their homes. These can also support the medical application and impact on priority for their housing application. Occupational Therapy also supports with consulting on new build properties with regards to design and meeting resident needs where applicable.

Partnership working: voluntary and community sector



There is a small but vibrant voluntary and community sector in the City of London with a mix of commissioned, grant funded and grassroots organisations. These organisations provide important services and initiatives to promote prevention and meet a range of needs. For example, Imago is commissioned to deliver the City of London carers support service and Toynbee Hall the City Advice service.

There is no Council of VCS in the City of London, but we have recently grant funded Hackney VCS (part of the local place-based partnership) to do some support and capacity building with the voluntary and community sector organisations in the City of London to enable them to develop and bid for grants. This project also involves regular City of London coffee mornings where local organisations who are either based in the City of London, have existing links into the City of London or are exploring opportunities in the City of London - such as City and Hackney Dementia Service, Mental Fight Club (for the Dragon Café), Eat Club and Family Action - can come together to network and share ideas.

Partnership with voluntary and community sector organisations is key part of the strengths-based practice model used in the social work team. For example, referrals to City Connections for people who are lonely or looking for specific activities in the community and the Seasonal Health Intervention Network (SHINE) is a one-stop referral system to affordable warmth and seasonal health interventions for residents in the City of London.

Corporately, there is a strong grants offer including a stronger communities grant fund (for smaller projects up to £10,000) and a larger Community Infrastructure Levy Neighbourhood Fund which can provide multi-year grants up to £500,000. Several voluntary sector organisations have been funded through these funds to provides things like a toenail cutting service, an expansion of a community service to tackle social isolation and wellbeing activities for carers. There are also grants currently being considered to provide a befriending service and the expansion of a falls prevention service.

Case study: working in partnership with the voluntary and community sector



The Carer [REDACTED]

[REDACTED] They are linked in with the City Connections service commissioned from Age-UK by City of London. The Carer reports that the caring role can sometimes be frustrating, and they feel they do not have time for themselves. In addition, the Carer speaks English as a second language and can sometimes find it difficult to access services.

[REDACTED], it was important that the Carer was provided with opportunities to have breaks from their living situation by encouraging them to join as many community activities and trips as possible [REDACTED]. City connections had to consider the Carer's religion and culture when planning these with them.

The Carer took part in many of the organised trips. They said that they enjoyed the outings very much as it enabled them to see places in the City. The carer was able to go out [REDACTED] and it helped them make new friends.

[REDACTED]

City Connections linked in with City Advice, to provide an information session. This particular carer engaged with City Advice advocate coordinator, who speaks the same language, and they talk about issues with housing and the support they would like to receive.

Outcomes

By working in partnership with other organisations, key achievements included:

1. Improving the carers general wellbeing and self-confidence.
2. Showed how important multi-agencies working together is in delivering better outcomes.
3. Positive feedback from the carer about the service they received.

Workforce



We are able to build strong, lasting relationships with the people we support because of our stable and experienced workforce. We are proud of our high staff retention rates and minimal reliance on agency workers for our social worker posts. We adopt an innovative and forward-thinking approach to developing workforce capability and capacity, which is reflected in the following key areas:

Generic practitioner model: Unlike many other local authorities, our practitioners develop expertise as generic practitioners, benefiting from a breadth of skills and knowledge that enhances their professional versatility and adaptability.

Manageable caseloads: Each social worker handles fewer than 20 cases, allowing them the time and space to foster meaningful relationships with those they support.

Specialist lead practitioners: Designated lead practitioners focus on areas such as carers, transitions, and mental health. This approach promotes peer learning, encourages professional development, and ensures best practice is consistently upheld.

Dedicated Principal Social Worker: Our Principal Social Worker oversees practice governance and quality assurance while maintaining strong local and national networks that supports continuous improvement across our service.

Wellbeing support: Staff have access to the Employee Health and Wellbeing Hub and a range of team wellbeing tools to ensure they are supported when they need it most.

Workforce



Workforce overview

Between 2021 and 2023, the Adult Social Care workforce remained stable, before increasing to 25 in 2024. This figure included 17 permanent staff and 8 agency staff. Currently, there is 1 agency staff in the team covering an established social worker post.

Diversity and Representation

Women make up over 70% of the workforce, demonstrating strong female representation. The team includes 32% White British, 24% Black, 16% from Any Other White Background, and 4% Asian staff, reflecting our commitment to a diverse team.

Age Demographics and Training

The majority of the Adult Social Care workforce was aged 41 to 60 in 2021 and 2022, with an increase in this age group in 2023 and 2024. Conversely, the 21 to 30 age group saw a decline in 2024.

Our size means that we are not able to support AYSE (Assessed Year in Employment) but we are working to develop a partnership with our neighbouring boroughs to introduce a bespoke model of the programme for the City of London, as well as developing a Social Worker and Occupational Therapist apprenticeship in the future.

We currently partner with Goldsmiths University to support student social workers, and provide training for future practice educators, reinforcing a culture of learning. There are currently 2 student social workers within the Adult Social Care Team.

Our approach to providing support



Adult Social Care promote an asset-based approach to integrated care that builds on existing human, social, cultural, and environmental resources to realise the aspirations of a community. This approach centres on good partnership working with community and health professionals offering the person holistic support.

During care and support planning practitioners share information on:

- voluntary support offers
- housing services
- resources and support available in their local community

People using care and support services are enabled to build social connections and a sense of mutual support, utilising the person's identified existing support network.

Access to peer support services and opportunities for the person to offer peer support using their skills, life experience, and cultural awareness are also offered

Case study: support to transition into a care home



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[illegible]

Outcomes

Applied family and person-centred approaches ensured the couple had choice and control over their care. Key achievements included:

- the couple continue to live together, sharing a room in a care home
- the couple are receiving the necessary care for their respective needs.

"We're together, that's the main thing."

"I know we need to be here to get the help we need"

Providing support: carers



There are 30 carers supported by Adult Social Care with a support plan and 4 additional carers are open with ongoing work. Of those 30, 73% receive a direct payment. 91% of carers have an up-to-date support plan.

Carers are provided with support in different ways. A carer could receive direct payments which could be used to join activities to improve their mental and physical health or being signposted to the City of London carers support service or City Advice for benefits and financial advice.

Imago is a commissioned carers support service and there is also a peer support network for carers – City Carers Community - established by residents during the pandemic. Around 90 carers are supported through these groups.

All Carers assessments are undertaken by qualified social workers. We have developed an internal guide for our carers assessments, with a simple checklist for practitioners, which is being audited.

The co-produced City Corporation's [Carers Strategy 2023-28](#) sets out our vision and key priorities for identifying and supporting City of London carers.

There is an elected Member carers champion who champions the needs of carers at Committee and a social worker who is a lead practitioner for carers, sharing good practice and advice with other social workers in the team.

City of London carers support service

Imago delivers the [carers support service](#) in the City of London, supporting around 90 unpaid carers including SEND parent carers, City of London residents who may care for someone outside of City of London boundaries and young adult carers aged 16+ living in the City of London.

Imago offers a range of support including information, advice, and guidance throughout the carer journey, support to access specific advice on finance, debt, grants, and benefits, contingency planning and crisis support arrangements, weekly drop-in sessions, regular carer groups, and a range of activities both online and in person to support health and wellbeing with choice and flexibility to attend.

Imago also provides access to free training sessions, such as the Caring with Confidence programme, and support and guidance regarding statutory Carer's Assessments.

Providing support: homelessness and rough sleeping



Our Adult Social Care service provide long-term support for adults who have experienced rough sleeping and homelessness. The majority of these adults are in accommodation-based support such as supporting living schemes and care.

There are a total of 19 supported living placements across all of Adult Social Care as of December 2024, 10 of which are for former people who sleep rough. 90% of them have a review of their care plan in the last 12 months.

As of December 2024, there were 21 permanent residential care placements open to ASC, 10 of which were for adults who previously experienced rough sleeping or homelessness. 90% of them have a review of their care plan in the last 12 months.

As part of our support to people who sleep rough, the City Corporation invested in a building for a dedicated Rough Sleepers Assessment Centre and high support hostel within the City of London, unifying this support in one physical location. This opened in March 2024. The Homelessness and Rough Sleeping Social Workers works closely with this provision.

Homelessness and Rough Sleeping Social Worker and Strengths-based Practitioner

The joint funding of the Homelessness and Rough Sleeping Social Worker (HRS) role enables the capacity and expertise to undertake work with adults at the 'edge of care' as well as those meeting the statutory criteria for support under the Care Act.

HRS social worker operates with a caseload in the region of 18 adults, half of which are likely to be with the preventative cohort, although numbers may vary with demand.

There is also a Strengths-based Practitioner who is embedded in the homeless and rough sleeping team.

Case study: homelessness



An individual had [REDACTED] being denied leave to remain in the UK they [REDACTED] were unable to obtain secure accommodation.

The primary aim was to provide stable housing, healthcare, and support for the individual, who faced homelessness and severe health issues.

The individual was admitted to hospitals for treatment [REDACTED].

The individual was provided with supported living accommodation and financial assistance.

Referred to Praxis immigration advisors and successfully obtained leave to remain in the UK.

Registered with a GP, [REDACTED] services, and provided with necessary equipment.

Outcomes

A holistic, strengths-based approach involving multiple agencies, including the City of London, healthcare providers, and immigration advisors addressed the individual's needs, including:

1. The individual's immigration status has been resolved.
2. Stable housing, financial support, and access to healthcare.
3. Renewed purpose and hope for the future.

Providing support: hospital discharge

There are between 100 and 120 hospital discharges of City of London residents each year from a range of hospitals – mainly Royal London and University College London Hospital. All community health services come from Homerton regardless of GP you are registered with or which hospital you are admitted to. With the risk of people falling between the gaps, we established an innovative care navigator role.

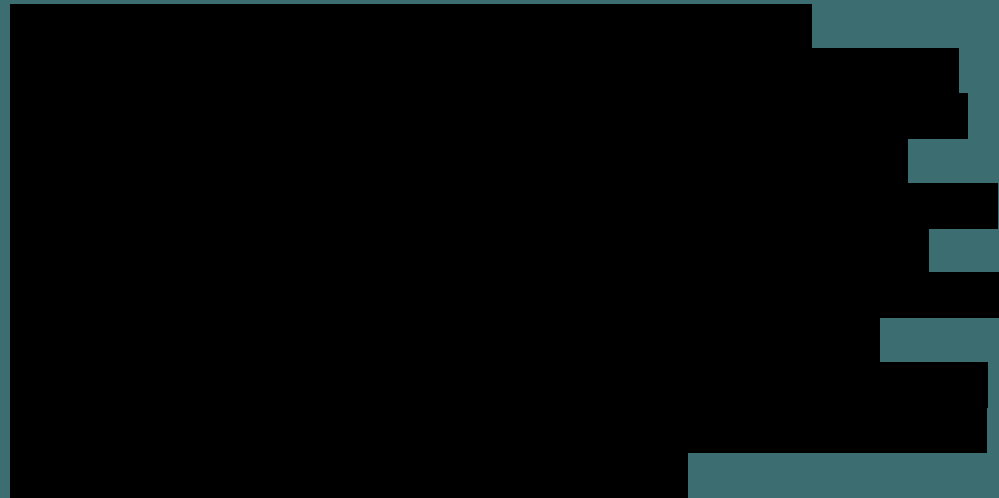
Our hospital discharge model is robust. For the first three quarters of 2024/25, 31% of discharges were delayed but only 2% of these were due to the local authority and were less than 3 days. 20% were a combination of health and the local authority.

Level of demand dictates that the model is not a 7-day model. Any planned hospital discharges over the weekend or bank holidays are dealt with during the week with capacity built into the staffing team on Fridays to ensure this can be facilitated.

Care Navigator

Our Care Navigator is an innovative role that is integral to our hospital discharge model.

The Care Navigator is funded through the Better Care Fund and facilitates safe hospital discharge and links the range of hospitals that City of London may be admitted to with GP practices and Adult Social Care to support the sharing of information to reduce risk.



Providing support: hospital discharge pathways

Pathway 0 (around 51% of cases)

People on this pathway have a supported discharge back to services they are already receiving through Adult Social Care or other arrangements of their choice.

Pathway 1 (around 37% of cases)

Occupational Therapy led reablement and discharge to Assess service is provided by one commissioned provider. Between April and Dec 2024, 95% did not require further support after a period of reablement.

Pathway 2 (around 3% of cases)

Where an individual needs further bed-based rehabilitation this would be provided through a health contract. Adult Social Care facilitate short term step-down bedded care prior to reablement or rehabilitation in the community.

Pathway 3 (around 9% of cases)

All placements are spot purchased in line with the individual and family choice.

Rapid Response Service

This service is a flexible type of Early Intervention and Prevention service which aims to improve people's independence, choice and wellbeing. It is expected that a period of up to 72 hours will provide sufficient assessment of the need and care support.

The main aim of the service is to provide support to people to stay safely in their home by providing short term care at times when their support needs are deteriorating or for those most at risk of acute admission to hospital. This includes intensive home care support (e.g. live in or double up support) with an assessment of ongoing care needs. The service also supports hospital discharges (Discharge to Assess) by providing intensive home care support to accompany a person home from hospital, a care assessment in the home, care to enable a person to remain at home and care during the installations of minor aids and adaptations.

Case study: hospital discharge



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Outcomes

A strengths-based approach empowered the individual to regain independence. Key achievements included:

1. Successful discharge to their adapted home.
2. Enabled the individual to remain at home.
3. Enhanced emotional wellbeing through sustained family and community connections.

Case study: reablement

An individual [REDACTED] admitted to hospital for eight weeks, prior to which they lived an independent life at home with their partner. The individual presented with [REDACTED] increased care needs. [REDACTED]. These challenges, coupled with the physical limitations of their living environment had a profound impact on their wellbeing.

To address their increased care needs and improve their quality of life and involve them in the decision making around their care.

[REDACTED] with the aim to increase the mobility and independence of the individual.

Coordination with district nurses was introduced to ensure that wound care was adequate and conducted regularly, whilst also liaising with the individuals GP for additional medical needs.

As part of the reablement support, additional equipment was also provided to the individual to improve their posture, sleep and personal care allowing them to stay independent within their own home.

The individual was involved in all decision making about their care and equipment, making sure that their decisions were respected, which was well received. Being able to trial equipment before permanent introduction leads to improved safety and better outcomes for the individual.

Outcomes

A strengths-based approach and involving the individual in decisions about their care improved their quality of life. Key achievements included:

1. Improved mobility and safer transfers with the Sara Stedy.
2. Effective wound care and prevention of further skin breakdown
3. Enhanced living environment and care setup, reducing risks and improving safety.

Case study: visual impairment support



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Outcomes

The training empowered the individual and improved their independence. Key achievements included:

1. Achieved confident navigation of key routes, including their daily commute
2. Improved ease in completing household tasks and independently cooking meals
3. Demonstration of sustained motivation and self-reliance

Strength-based Practitioners



The Strengths-based Practitioner role was created to utilise reablement principles in a wider context as part of our early intervention and prevention offer.

The practitioners:

- can offer short-term support to achieve identified goals and outcomes without the constraints of traditional reablement
- are Trusted Assessors who can provide basic aids, equipment and telecare and receive professional supervision from an Occupational Therapist
- offer increased capacity and response times within the duty team carrying out welfare checks, supporting hospital discharge and undertaking joint visits with social workers
- monitor and support the delivery of reablement from a commissioned provider who gave positive feedback at a recent provider engagement event saying they were learning from them how to operate in a more strengths-based way

A similar strengths-based practitioner role has been introduced to the Homelessness and Rough Sleeping service to work alongside the Homelessness and Rough Sleeping social worker. This has led to consistent engagement with 13 adults to prevent a return to rough sleeping by supporting them to manage their health, money, living space, time and safety.

Case study: Strengths-based Practitioners



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[REDACTED]

The Strengths Based Practitioner's key objective was to put in measures that would allow the client to remain as independent as possible and support with their care needs.

[REDACTED]

The Strengths Based Practitioner's intervention was planned with the intention of re-establishing a personal care routine, support with setting up a self-funded package of care with a previous provider.

Outcomes

By embedding a Strengths-Based Approach, achievements included:

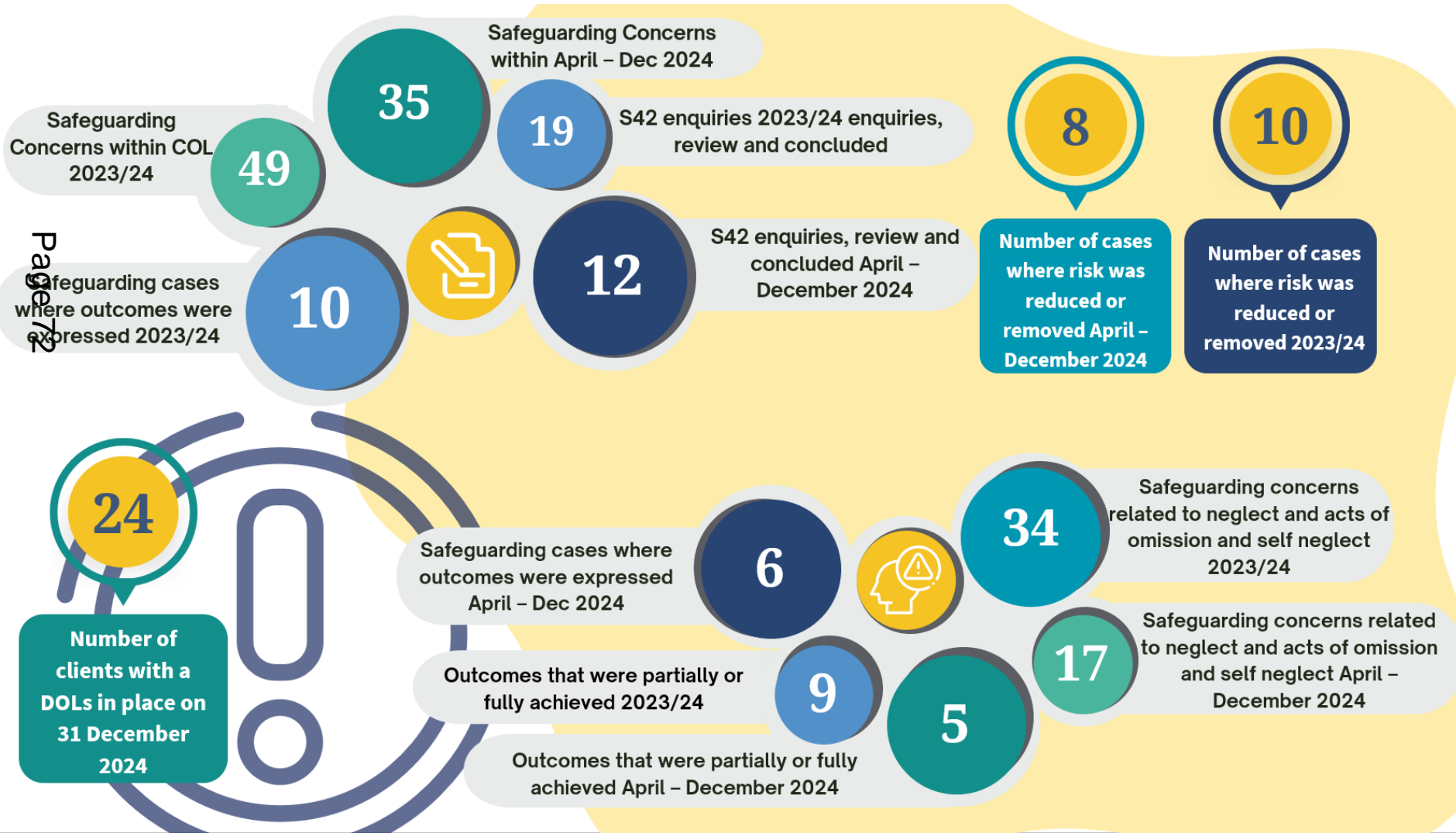
1. Improving the client's general wellbeing and self-confidence
2. Intervention visit resulted in discussing future options with a social worker, such as transition to residential care
3. Positive feedback from the client about our Strength Based Practitioner.

Theme three: Ensuring Safety



Our multi-agency commitment to safeguarding provides the foundations for a robust approach to ensuring safety is built in across the system while also allowing for a focus on the City of London.

Ensuring safety



Safeguarding



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City and Hackney Safeguarding Adults Board

The City and Hackney Safeguarding Adults Board (CHSAB) is a multi-agency partnership including statutory and non-statutory stakeholders. It ensures robust safeguarding procedures are in place. Members are committed to tackling abuse and neglect where it does occur and promoting person-centred care for all adults.

The Chair had provided consistent, strong, stable leadership for the past ten years before finishing the role in late 2024. A new Chair has been recruited.

A City of London sub-group provides focus on the City of London and provides assurance, accountability and the sharing of good practice. It considers City of London specific data and priorities in the CHSAB's workplan. The Principal Social Worker is a member of this sub-group.

The Assistant Director for People chairs the Safeguarding Adults Review sub-group.

"Colleagues from City of London Adult Social Care Services have been active and engaged participants in the work of the Board and its sub-groups. The City Corporation has been able to benefit from being part of a joint Safeguarding Adults Board with Hackney e.g. through learning from Safeguarding Adults Reviews.

The City of London Sub-Group has ensured that the unique profile, needs and voices of City of London residents have continued to be addressed. Innovative practice in response to the specific needs of residents has been impressive.

Reporting outcomes of audits has provided assurance regarding the good quality and standard of safeguarding practice to the Board."

Dr Adi Cooper, independent Chair of the City and Hackney Safeguarding Adults Board 2014 - 2024

Safeguarding



City and Hackney Safeguarding Adults Board

One City of London service user has joined the London Safeguarding Voices group, which is a pan London group of people with lived experience of the adult safeguarding process, which works with the London Safeguarding Board to help improve safeguarding practices across London.

Adult Social Care proactively reviews any Safeguarding Adults Reviews from Hackney and nationally to consider and embed recommendations where appropriate.

The CHSAB provides training for professionals in three key areas: recognised safeguarding training at the required levels; specific training commissioned by the CHSAB; and Safeguarding Adults Reviews learning events.

A 47-year-old living alone in privately rented accommodation was referred to Adult Social Care by Tenancy Support following concerns around hoarding and self-neglect potentially leading to eviction. A social worker visited and determined the property to be level 5 on the clutter image rating scale. This was discussed with the individual who was struggling with his mental health and felt unable to make positive change on his own. A referral was made on his behalf to the Hoarding Self-neglect and Fire Risk panel; where a person-centred multiagency risk plan was put in place involving Social Care, London Fire Brigade, Tenancy Support, Mental Health services and Environmental Health. Under the individual's direction, a blitz clean was undertaken and fire detection equipment installed. A full Care Act assessment was completed with the individual, and ongoing weekly specialist autism support was commissioned to support them in effectively maintaining their home environment.

CHSAB Annual Report 2023/24

Safeguarding



Learning from safeguarding reviews

Following two Safeguarding Adult Reviews in Hackney, a panel was established to provide a person-centred, timely and effective multi-agency response to situations where the person referred has been assessed as a high level of risk because of complex self-neglect, fire risk or other high-risk issues. The aim of the panel is to ensure that all relevant agencies work together to provide a co-ordinated and accountable response to the person's presenting issues and risks and to focus on the outcomes the person wants to achieve to the greatest extent possible given individual circumstances and risks.

The panel has strong representation from partners and oversees a whole range of interventions from long term therapeutic work with adults with hoarding disorder to short term preventative measures.

For example, in 2023/24 £1,225 was spent on fire prevention equipment for adults in the City of London, this included replacing fan heaters or other high risk portable heating devices with safe electric oil filled radiators, replacement of multiplugs with fused power boards, and provision of fire-retardant bedding.

The Chair of the panel (Head of Adult Social Care) also attends the City and Hackney Safeguarding Adults Board SAR group creating strong links between both groups and the Adult Social Care service. A SAR referral was made following a fire leading to the death of a resident in March 2022. While the referral was not adjudged to meet the SAR criteria, and the Coroner concluding the death to be the result of an accident, it has been agreed with the CHSAB independent chair to hold a discretionary learning review to examine how services across the City of London may be able to learn and improve from this, with the findings due in May 2025.

Safeguarding



Discretionary Safeguarding Adults Review – City of London

The City and Hackney Safeguarding Adults Board commissioned a discretionary Safeguarding Adults Review following the death of Daniel who was sleeping rough in the City of London in May 2020.

The discretionary review made 13 recommendations for partners and the Safeguarding Board developed a robust and detailed multi agency plan that has supported sustained improvements across the Rough Sleeping and Safeguarding system.

This includes:

- Adult Social Care Discharge Model reviewed and updated to reflect learning from the review
- The review was embedded into Level 3 mandatory safeguarding training as a case study
- Homeless Link undertaking and independent review of multi-agency working – recommendations were adopted by the Rough Sleeping Strategy Group
- New processes embedded for involvement of the Rough Sleeping Mental Health Team in wider rough sleeping meetings

Safeguarding



Adult Social Care has a personalised approach to safeguarding alongside the assessment and mitigation of risk. These principles are applied equally to the proportionate responses taken to those concerns not meeting S42 enquiry criteria.

London Safeguarding procedures are applied. Transitional Safeguarding and Joint Working with Children guidance is applied to support a smooth transition to adulthood.

All social workers complete mandatory safeguarding training that is relevant to their job role and responsibilities. We have 100% attendance, which includes refresher training every 2 years.

Social workers are qualified to undertake Mental Capacity Assessments and the AMPH service, provided by the East London Foundation Trust, carries out any necessary Mental Health Act Assessments. To date in 2024/25 the average number of Mental Act Assessments per quarter is 2. This is a decrease on previous years but mirrors a pattern seen across the London Borough of Hackney. We have S117 aftercare responsibilities for 37 individuals.

Mental Capacity Assessments and safeguarding are included in the internal annual audit schedule.

Best Interest Assessments are spot purchased from an independent provider although several social workers are trained in this to ensure an understanding within the service and a link to the commissioned provider.

An independent review of safeguarding carried out in 2023 recognised good practice within the team and suggested some areas of further development. The Principal Social Worker has taken forward an action plan on these areas and all have been completed.

"Work in the City regarding safeguarding people who sleep rough has been groundbreaking and influenced national policy and practices. The local Daniel SAR and other reviews have provided opportunities to improve local multi-agency arrangements, practice and protocols to promote better outcomes for people experiencing homelessness."

Dr Adi Cooper,
independent Chair of
the City and Hackney
Safeguarding Adults
Board 2014 - 2024

Safeguarding



Making Safeguarding Personal

This is embedded into the safeguarding practice of adult social care.

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	2024-25 YTD	2023-24
Total MSP Asked (with and without outcomes expressed)	7	15
Cases where outcomes were expressed	6	10
Adult at risk felt Involved in Safeguarding Process	6	9
Fully achieved	4	3
Partially achieved	1	6
Not Achieved / Not applicable (includes those who were not asked)	7	7
Percentage which were Fully and Partially met	83%	90%

Safeguarding



Deprivation of Liberty Safeguards

The City of London Corporation has excellent performance on Deprivation of Liberty Safeguards (DOLs). Requests are dealt with promptly without any waiting lists. Across the year, DOLs were processed in an average of 11 days from application to approval.

	2024/25 YTD	2023 / 24
No. of clients with DoLs in place at end of the reporting period	25	28
No. of Applications Received in the period	25	34
DOLs granted	20	26

A system-wide approach



The promotion of safety and the understanding and management of risk is embedded across all elements of the system, both internally and externally. This includes:

- a Corporate Safeguarding Policy which sets expectations for Members, officers and commissioned providers
- regular safeguarding reporting to the City Corporation's Safeguarding Sub-Committee
- online Safeguarding Awareness Training across the City Corporation
- an early intervention project that improves wellbeing by keeping people safe in ways defined by themselves
- a Care Navigator facilitates safe hospital discharge and links hospitals and GP practices to support the sharing of information to reduce risk
- the Adult Social Care Team Manager and Deputy Team Manager are embedded in the Neighbourhood multi-disciplinary meetings with health and voluntary sector partners
- social workers and the Care Navigator attend GP multi-disciplinary team meetings in practices where residents are registered
- cross-service meetings within the People's Directorate and joint working minimises risk and supports safer and more informed transitions between services
- close working between Adult Social Care and the commissioning team facilitates a high-quality alert process that picks up domiciliary care concerns below the level of formal safeguarding and ensures these are resolved at an early stage and prevent harm. Performance improvement letters are issued where safety or quality is a concern
- access and support to training for City Connections providers, and involving them in the City Safeguarding Sub-group

Theme four: Leadership



Strong, stable political and officer leadership is underpinned by robust and effective management and qualified, valued staff, driving the pursuit of excellence across Adults Social Care.

Management, leadership and governance

Adult Social Care benefits from strong relationships between experienced senior leaders and elected Members which provides accountability and direction.

The Community and Children's Services (CCS) Committee holds responsibility for Adult Social Care and its associated budget. The Chair of the CCS Committee also sits on the Safeguarding Sub-Committee, the Health and Wellbeing Board and the City and Hackney Health and Care Board, providing a strong cross-cutting approach to issues. These arrangements underpin strategic decision making and regular scrutiny of our performance data.

Further scrutiny of Adult Social Care is delivered through the Health and Social Care Scrutiny Committee.

There is strong corporate support for Adult Social Care – the Town Clerk (Chief Executive) has a social care background. Adult Social Care Performance and key strategies are considered by the Senior Leadership Team which is chaired by the Town Clerk.

The scope of the Department provides a breadth of accountability for senior officers. This provides benefits for residents through effective, integrated support.

Items discussed at Committees

- Health and Social Care Integration
- Hospital Discharge
- Quarterly Performance Statistics for Adult Social Care
- Neighbourhood model
- Mental Health Services
- Employment Support for people with Learning Disabilities
- Support for carers

Management, leadership and governance

There is a strong commitment both corporately and departmentally to being a Learning Organisation and as part of this have commissioned a number of peer reviews including one on Adult Social Care from the Local Government Association at the end of 2023. As part of this work, we developed a Peer Challenge Action Plan to address the points raised during the review, some of which were taken up as part of the ASC Transformation Programme.

As part of our commitment to continuously improving and growing, we established an Adult Social Care Assurance Board which mirrors an Achieving Excellence Board set up in Children's Social Care. The Assurance Board is independently chaired and provides us with external challenge on the services we deliver and how, the experience of service users and how we meet our statutory obligations.

Within Adult Social Care, senior management provide visible and supportive leadership to staff as well as in the wider health and care partnership.

Monthly Adult Social Care Management team meetings, as well as People Management team meetings, allow for cross-cutting themes and issues to be considered.

A complex needs panel exists where social workers present cases to Senior Managers and to make the case for specific packages for complex cases

Governance also happens through external mechanisms such as the CHSAB and NEL and Place Based Partnership structures

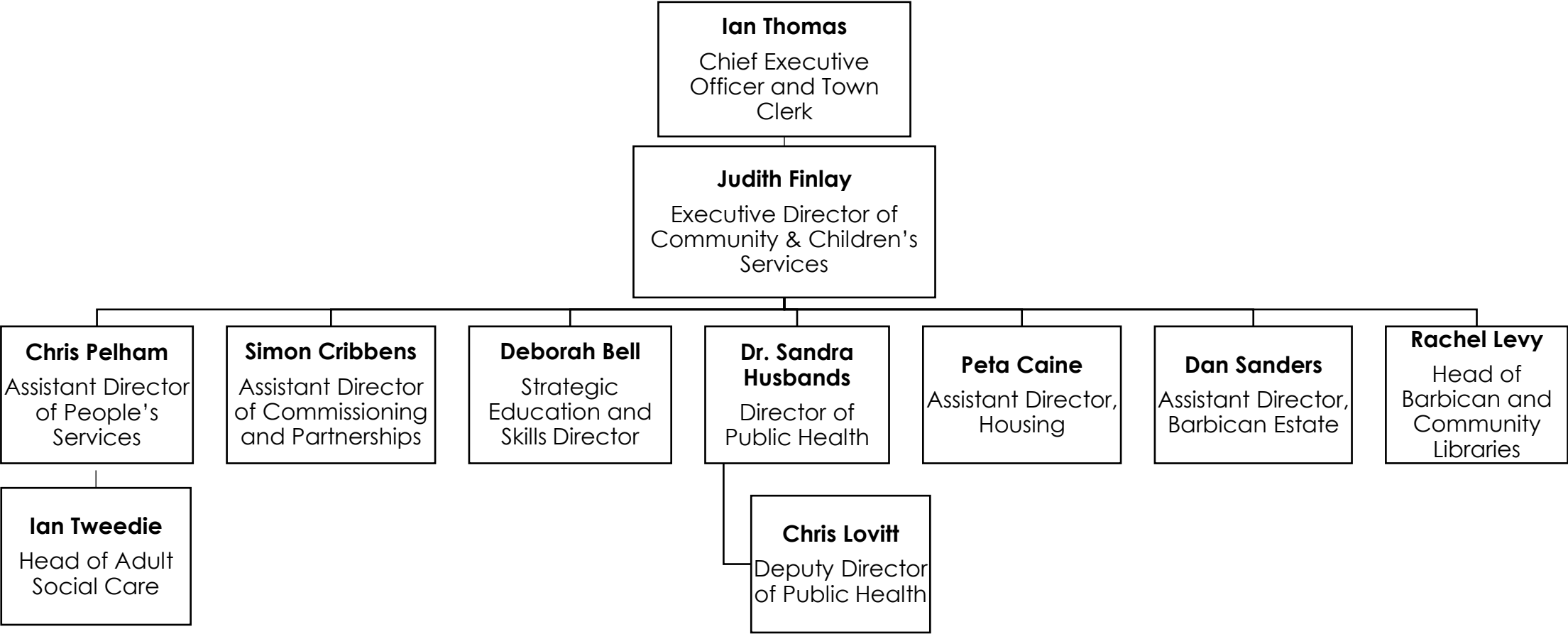
"Supervisors in Adult Social Care follow established protocols and standards... supervisors strive to continuously improve quality of management oversight records and support offered to their supervisees."

Internal decision making, recording and accountability audit and action plan (October 2024)

Department Leadership Team

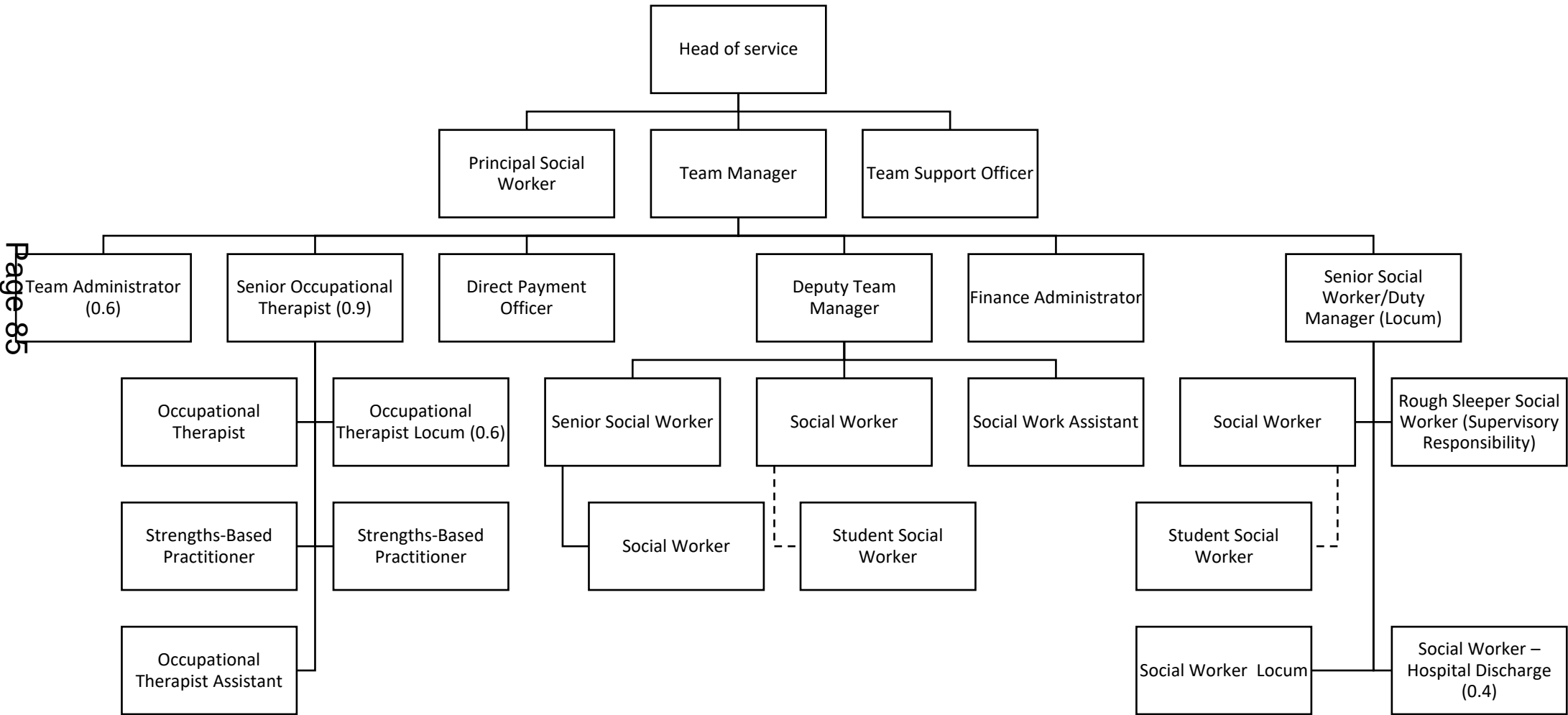


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Adult Social Care

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Management, leadership and governance



Strong political leadership and commitment has prioritised local Adult Social Care budgets. With increased demand and complexity, this political leadership secured additional growth funding for adult social care in a time of challenged resources. The commitment to Adult Social Care is also supported by the application of 1% precept on Council Tax.

The overall City Fund budget for 2025/26 is £222,341,000, of which £6,597,000 is allocated to Adult Social Care, 3% of the overall budget. This reflects that the organisation is a Corporation with local authority functions for a small resident population.

Despite financial challenges, it is expected that political leadership will continue to prioritise funding for services such as Adult Social Care at the present time.

Within the Better Care Fund we benefit from £357,283 for adult social care services from the ICB allocation against a requirement of £172,763. The Better Care Fund funds much of our hospital discharge work and the Care Navigator Role.

IBCF also plays a significant role in supporting the work of Adult Social Care.

Workforce learning and development

Our Adult Social Care staff develop expertise as generic practitioners, supported by a broad range of skills and knowledge. Activity includes:

- collaboration with Edge Training and Consultancy Ltd for comprehensive legal literacy training and use reflective practice session to implement the acquired knowledge
- City and Hackney Safeguarding Adult Board specialised training on safeguarding, domestic abuse, cultural awareness and self-neglect
- a corporate learning programme and bespoke learning opportunities including support for career progression
- completion of mandatory training is discussed during supervision and monitored by the Principal Social Worker
- membership of the South-East London Teaching Partnership (SELTP), collaborating with universities and London boroughs to train Practice Educators and host student social workers

"I feel that the training is to a good standard, and it is nice to have the training through Edge that is commissioned."

Staff survey 2024

Workforce Development Plan

Our Adult Social Care Workforce Development Plan outlines how we support a highly skilled, responsive and confident workforce able to meet our statutory responsibilities.

Development areas are legal literacy in regard to safeguarding, mental health or the Care Act 2014, strengths-based and anti-racist practice, to ensure our residents are safe, respected and are at the heart of their support planning.

All our practitioners apply critical reflection and analysis to inform and provide a rationale for professional decision-making. We do it by the use of knowledge of the law, theory and research during reflective supervision, regular reflective practice sessions and peer reflection.

Learning, improvement and innovation



Corporate Staff Survey 2024

Results showed that 80% of DCCS say that their line manager treats them fairly and with respect.

DCCS has implemented an action plan in response to the 2024 annual Staff Survey feedback. Actions include:

Working culture and relationships

- Develop a programme of inclusive departmental events, deliver more team away day and scope a work shadowing and skills development programme.

Leadership

- Use internal communications to raise awareness of actions taken as a result of the staff survey, DLT members to attend team meetings periodically to increase visibility and share updates, provide training for managers on effective appraisals and one-to-ones.

Recognising staff contributions

- Integrate recognition of staff contributions into one-to-ones and appraisals and continue to recognise staff contributions in internal communication highlights.

Wellbeing

- Wellbeing being a regular agenda item in one-to-ones and provide specific resources on managing workloads.

Learning, improvement and innovation



Adult Social Care staff said that... We have...

- average rating of 7 out of 10 for the training available
 - development is a standing item in supervision and the Principal Social Worker provides updates and ideas of what's on training opportunities are shared by people including line managers or others in networks staff are involved with
 - their main barriers to learning and development are time and the right opportunities
 - there are a lack of leadership training opportunities
- continued to build a SharePoint site with a new learning offer (introducing Talking Life), introduced learning bulletins and maximised learning and development information sharing
 - provided information on training in advance to ensure staff and managers have opportunities to plan cover, arrange workload etc
 - started to develop a training offer for our Business Support colleagues, including standardisation of minute taking
 - started to develop our Management Training Programme to include systematic supervision training, using data and performance, dynamic responsive training to use HR skills including sickness management and support and difficult conversations as a Manager
 - developed a Social Worker career progression pathway and continue working on clear development pathways for other job roles
 - agreed to establish Practice Leads, so learning can be more easily shared within the team

Learning, improvement and innovation



We have strengthened our performance culture in Adult Social Care to ensure that we robustly learn from and respond to data. This includes:

- Monthly service scorecards provide senior managers and the Adult Social Care service with intelligence and performance data giving assurance that statutory obligations are being met, that any risks are identified and mitigated, targets are being met, and any emerging trends or issues are identified.
- The monthly scorecard is discussed at an officer performance meeting and a more detailed summary of safeguarding data is scrutinised quarterly at the Safeguarding Sub-Committee.
- A quarterly scorecard is considered at meetings with the Exec Director of Community and Children's Services, AD People, The Chief Executive & the People's Division Senior Leadership Team.
- Consideration of the dashboard also takes place at the Assurance Board.

Learning from peer reviews

In 2023, the Local Government Association undertook a peer review looking at our Adult Social Care Service.

Feedback was positive and noted our Strengths-based approach, strong hospital discharge model and our agility and flexibility in commissioning to meet needs.

Areas for consideration included strengthening the triangulation of quality assurance of services and strengthening feedback mechanisms



Progress on areas for development 2023/24



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Actions	Progress and outcomes
1. Strengthen the triangulation around commissioned placements quality assurance	<ul style="list-style-type: none"> We have undertaken a brokerage project as part of the Adult Social Care Transformation Programme. Quality Assurance of commissioned placements are part of and aligned with the general Quality Assurance Framework.
2. Develop a strong performance culture within the service	<ul style="list-style-type: none"> We have set up a regular performance monitoring meeting, which includes server representatives and data analysts where performance is monitored, and issues are brought to the group for investigation and resolution. Ongoing training for staff on the use of Mosaic to ensure correct data is being inputted in the correct place and to improve staff confidence in using the system. The service now uses data in a much greater way, however further work is required to fully embed data use within the work of front-line staff. ASC Transformation Programme has also reviewed the reporting of our KPIs.
3. Strengthen our quality assurance	<ul style="list-style-type: none"> We now commission an external quality of practice audits, which has included Safeguarding (2023 and planned for April 2025) and OT practice (October 2024). The Quality Assurance Board now has an independent chair, and our Principal Social Worker collaborates with neighbouring boroughs on practice audit tools and quality measures.

Progress on areas for development 2023/24



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Actions	Progress and outcomes
4. Improve the timeliness of review	<ul style="list-style-type: none"> We have added a traffic light system to our case management system, Mosaic to flag reviews. Adult Social Care are also working with our departmental performance team to address system issues leading to differing target dates being indicated. Additional work is underway with practitioners to ensure timeliness of reviews, and options are being explored to capture reasons for delays in reviews taking place.
5. Capture and record equalities data more effectively and use this to shape our services	<ul style="list-style-type: none"> We have reviewed our system and recording of equalities data, which identified a number of changes and improvements which were made to the overall system. Our equalities data is regularly reviewed at departmental Equality and Inclusion meetings, as well as discussion at team meetings so practitioners can have an input in the discussion and suggest areas of improvement.
6. Improve the quality and accessibility of our information offer for residents	<ul style="list-style-type: none"> The improvement of our information and a review of our front door service is an important priority within the new Adult Social Care strategy. We now have new leaflets showing how to contact and access support from our services, and our web page has been updated to allow for better access to up-to-date information. Further work is ongoing to provide more information in a greater number of languages as well as easy read versions to suit community needs.

Progress on areas for development 2023/24



Actions	Progress and outcomes
7. Strengthen our co-production and collection of feedback and outcome impacts from adult social care service users	<ul style="list-style-type: none"> We are developing a reward and recognition policy to award people for their time and effort in helping co-produce services with us. In conjunction with Healthwatch City of London, we have set up an Adult Social Care User Group to collect information, feedback and to support the co-production of services with clients who are members of this group.
8. Implement robust and routine feedback from people who have been safeguarded from harm	<ul style="list-style-type: none"> This formed part of the work of the Transformation Programme which was completed in 2024.
9. Increase diversity across the service to reflect the communities which we serve	<ul style="list-style-type: none"> This has been taken forward as a Corporate priority and is reflected in the City Corporation's new People Strategy. Progress has been made over the past 12 months, but there is still more progress to be made. Increasing and promoting diversity is a priority set out within the Adult Social Care strategy, as well as promoting this amongst our commissioned services to ensure that provided care is tailored to different cultural needs across our communities.

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City of London Corporation Committee Report

Committee(s): Community and Children's Services Committee	Dated: 30/04/25
Subject: Standing Advisory Council for Religious Education (SACRE) & The Agreed Syllabus Conference (ASC)	Public report: For Information
This proposal: <ul style="list-style-type: none"> Delivers statutory duties 	SACRE and ASC operate under the Education Act 1996 and the City of London Corporation's education duties
Does this proposal require extra revenue and/or capital spending?	No
If so, how much?	£0
What is the source of Funding?	N/A
Has this Funding Source been agreed with the Chamberlain's Department?	N/A
Report of:	Judith Finlay – Executive Director of Community and Children's Services
Report author:	Kirstie Hilton – Head of Education and Early Years Services

Summary

Every local authority's Standing Advisory Council for Religious Education (SACRE) is legally required to produce an annual report, which must be published and distributed to the local authority, schools, and other relevant stakeholders. This report serves informational purposes only.

Recommendation(s)

Members are asked to:

- Note the report.

Main Report

Background

1. Since 1988, all local authorities (LAs) have been legally required to establish a Standing Advisory Council for Religious Education (SACRE), with the primary responsibility of overseeing religious education (RE) and collective worship in schools. As part of this mandate, SACREs are required to produce an annual report. This report must be published and shared with the local authority, schools, and other relevant stakeholders to ensure compliance with national educational standards and to provide transparency regarding SACRE's activities and decisions. In 1996, further guidance reinforced the requirement for SACREs to maintain an Agreed Syllabus for RE, ensuring that schools have a suitable framework for religious education that meets both legal obligations and the needs of local communities. The annual report serves as an informational tool, outlining the progress, challenges, and recommendations made by SACRE throughout the year.
2. The City of London is unique in having only one maintained school, The Aldgate School (TAS), a voluntary-aided school with a religious character. TAS has adopted the London Diocesan Board for Schools' syllabus, meaning a local Agreed Syllabus is not required. However, to comply with government guidance, the City must prepare an Agreed Syllabus to ensure an alternative is available should a parent request it.

Current Position

3. SACRE meets once a year and is attended by representatives from Group A (Christian faiths and other religious denominations), Group B (the Church of England), Group C (Teacher Associations), Group D (the Local Authority), and other attendees.
4. SACRE completed its Agreed Syllabus review in July 2023. SACRE and its Agreed Syllabus Conference renewed the license with RE Today for their model syllabus A+ and to retain a copy within the City of London. This would be issued to The Aldgate School, if a parent requested that their child not receive religious education as set by the London Diocesan Board for Education.
5. At the last meeting on 13th December 2024, the SACRE reviewed the membership advice provided to the City of London and recommended the inclusion of a Humanist member. The City is currently reviewing this recommendation and will take the lead in selecting a suitable attendee.
6. The annual report was submitted to the Department for Education and National Association of Standing Advisory Councils on RE on 05/02/2025, the report can be found in appendix 1.

Options

7. N/A

Proposals

8. N/A

Key Data

9. The SACRE must prepare an Agreed Syllabus to comply with government guidance, ensuring an alternative is available if requested by a parent. However, as The Aldgate School (TAS) follows the London Diocesan Board for Schools' syllabus, it is unlikely that the Agreed Syllabus will ever be implemented.
10. Strategic implications – This activity aligns with the delivery of the Corporate Plan 2024-2029 by ensuring compliance with national education standards and providing flexibility for parental choice in the City of London. There are no Corporate Plan performance metrics associated with this specific report.
11. Financial implications - There are no immediate financial implications as the renewal of the syllabus license and preparation of the Agreed Syllabus has been managed within existing resources.
12. Resource implications - No additional resources are required beyond those already allocated to SACRE.
13. Legal implications - The preparation of the Agreed Syllabus is in line with legal requirements for SACREs to ensure that an alternative RE syllabus is available.
14. Risk implications – No risk implications. If a parent requests an alternative to The Aldgate School syllabus, SACRE's agreed syllabus can be implemented.
15. Equalities implications – The preparation of an Agreed Syllabus complies with the Public Sector Equality Duty 2010, ensuring all students have access to a suitable RE syllabus that can be adapted according to parental wishes.
16. Climate implications – N/A
17. Security implications – N/A

Conclusion

18. In conclusion, SACRE has successfully met its obligations in reviewing and renewing its Agreed Syllabus, with the necessary arrangements in place to accommodate any parental requests. The recommendation to include a Humanist member is currently under consideration, which will further ensure that SACRE represents a broad spectrum of perspectives in its work.

Appendices

- Appendix 1 – Annual Report to the Department for Education and National Association of Standing Advisory Councils on RE (submitted 05/02/2025)

Kirstie Hilton

Head of Service Education and Early Years

Kirstie.hilton@cityoflondon.gov.uk

Appendix 1

ANNUAL REPORT OF THE CITY OF LONDON STANDING ADVISORY COUNCIL ON RELIGIOUS EDUCATION (SACRE) FOR 2023 – 2024



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Introduction

SACRE Meetings held

Membership and attendance

Agreed Syllabus review

Advice offered by SACRE and its Agreed Syllabus Conference to the City of London

Introduction

Since 1988, it has been a requirement that every local authority (LA) has a Standing Advisory Council on Religious Education (SACRE).

Though legislation sets out both the structure and the remit of a local SACRE - principally, overseeing religious education (RE) and collective worship - in practice every SACRE has developed its own particular style and character.

It is a legislative requirement that each SACRE produces an annual report of its work and that this is published, sent to the local authority, to local schools and to other interested parties.

The City of London is an unusual authority in many ways, but especially because the geographical region is very small, and the only maintained school is a voluntary aided school with a religious character. This is The Aldgate School. The implications of this for SACRE is that there is no school for whom a local Agreed Syllabus would normally apply. The legal requirements for RE in these schools is set out in the box below. The syllabus for Religious education in this school is normally provided by the London Diocesan Board for Schools. The only circumstances when an Agreed Syllabus would need to be followed are set out in the latest government guidance on religious education (see below) and this is why the City of London must prepare an Agreed Syllabus; so that one can be made available to the school should a parent make such a request.

SACRE Membership

Voluntary-aided schools with a religious character

In these schools RE is to be determined by the governors and in accordance with the provisions of the trust deed relating to the school or, where there is no provision in the trust deed, with the religion or denomination mentioned in the order designating the school as having a religious character. However, where parents prefer their children to receive RE in accordance with the locally agreed syllabus, and they cannot reasonably or conveniently send their children to a school where the syllabus is in use, then the governing body must make arrangements for RE to be provided to the children within the school in accordance with the locally agreed syllabus unless they are satisfied that there are special circumstances which would make it unreasonable to do so. If the LA is satisfied that the governing body is unwilling to make such arrangements, the LA must make them instead. ¹

[Religious Education in English Schools \(2010\)](#) page 15

Committee A		
Amanda Crowley	AC	Member from the Diocese of Westminster Education Service – Catholic Member

Leon Silver	LS	Member from the Jewish community
Ruhela Begum	RB	Member from the Muslim community
Committee B		
Mary Thorne	MT	London Diocesan Board for Schools – Church of England
Committee C		
Alex Allan	AA	The Aldgate School Headteacher – Teachers’ Association
Committee D		
Kirstie Hilton (Chair)	KH	Head of Service, Education and Early Years, City of London Corporation
In attendance		
Deborah Weston	DW	Local Authority Advisor ¹
Amrul Khan	AK	SACRE/ASC Clerk

SACRE Meetings held

The following SACRE meeting was held during the reporting period:

13th December 2024

The meeting was held via Zoom and was quorate.

Membership and attendance

SACRE reviewed the membership advice that they had offered the City of London and at the last meeting on 13th December 2024 decided to recommend that a Humanist be added to the membership of Committee A. The LA representative agreed to take this SACRE advice to the City of London. The meeting was quorate, and all members attended.

Matters considered by SACRE

- The Department for Education’s Curriculum and Assessment Review – Chaired by Prof. Becky Francis
- The campaign for a National Plan for Religious Education

¹ Deborah Weston is the Local Authority Advisor. As Deborah attends SACRE meetings in various LAs, she advises us on the following: matters relating to R/E, anything new/upcoming, any issues with other LAs, securing vacant members, any questions or concerns, assists us with securing the R/E syllabus, and drafts our annual report.

- The challenges posed for the recruitment of teachers of RE and the removal of subject knowledge enhancement grants.
- National trends in GCSE and A level entries and outcomes
- National trends in the provision for RE as evidenced by school workforce data
- The Oxford, Cambridge and RSA report into the content of the curriculum at Key Stages 3 and 4 and the role and form of assessment including SATs and GCSE qualifications.
- Open University Religion, Belief and Worldviews Hub
- Training opportunities offered by NASACRE, NATRE and others

Agreed Syllabus review

SACRE completed its Agreed Syllabus review in the summer of 2023. SACRE and its Agreed Syllabus Conference renewed the license with RE Today for their model syllabus A+ and to retain a copy within the City of London. This would be issued to The Aldgate School, if a parent requested that their child not receive religious education as set by the London Diocesan Board for Education.

Advice offered by SACRE and its Agreed Syllabus Conference to the City of London

SACRE recommended the addition of a Humanist to the membership of Committee A

End of Annual Report

City of London Corporation Committee Report

Committee: Community and Children's Services Committee	Dated: 30/04/2025
Subject: Golden Lane Leisure Centre Refurbishment Update	Public report: For Information
This proposal: Delivers Corporate Plan 2024-29 outcomes	<ul style="list-style-type: none"> • Providing Excellent Services • Leading Sustainable Environment • Vibrant Thriving Destination • Diverse Engaged Communities
Does this proposal require extra revenue and/or capital spending?	No
If so, how much?	NA
What is the source of Funding?	NA
Has this Funding Source been agreed with the Chamberlain's Department?	NA
Report of:	Judith Finlay, Executive Director of Community and Children's Services
Report author:	Greg Knight, Head of Commissioning, Community and Children's Services

Summary

The report provides Community and Children's Services Committee (CCS) members with a progress update on the refurbishment of Golden Lane Leisure Centre (GLLC) and sets out the proposed next steps.

Recommendation

Members are asked to:

- Note the report.

Main Report

Background

1. Following the completion of a range of condition surveys and a forward maintenance plan, the need for significant capital investment was identified to secure the long-term future of GLLC, in the region of £10.4m.
2. CIL funding has since been secured to complete the refurbishment of GLLC, which is approved in the context of supporting delivery of the City of London Corporation's Global City of Sport: A Sport Strategy for the Square Mile 2023-2030, Joint Local Health and Wellbeing Strategy 2024- 2028, and Our Corporate Plan 2024- 2029.
3. The Department has completed a series of actions to progress the refurbishments, as detailed within the report. The report provides details of the proposed next steps to deliver the project.

Current Position

Current GLLC Management Contract

4. The GLLC management contract with Fusion- Lifestyle has been extended for a further year, within the permissible contract terms, to allow for the service to be sustained whilst the preparatory works to refurbish GLLC are completed. The terms of the contract allow for a further 9-month extension, until 31 December 2026 at the latest, if required.

Future GLLC Management Options Appraisal

5. An in-depth options appraisal on the future management of GLLC (following the completion of the refurbishment) has been completed by The Sports Consultancy. The report appraises the benefits and limitations, including detailed revenue forecasts, for a range of internal and external management options. The options appraisal will be presented to Community and Children's Services Committee in June 2025 for decision on the preferred approach.

UK Leisure Framework- Alliance Leisure

6. The UK Leisure Services Framework (UKLF) is available to all UK public sector organisations, and specialises in new build and refurbished leisure projects for local authorities. The framework provides a compliant route to access a development partner - Alliance Leisure – for the scoping, design and refurbishment of GLLC. This approach brings access to a development partner with expertise and experience in leisure projects, benefits from the market influence of that partner (Alliance Leisure have led over 220 developments investing over £300m in leisure projects) and reduces the financial risk through achieving cost certainty for the City Corporation. Case studies have demonstrated this to be a successful model that secured Local Authorities value

for money. A procurement strategy report, recommending the UKLF has been approved at construction category board.

7. Due diligence on the framework has been completed and the fee proposal has been finalised for the initial stage of work. This stage progresses the project through stages to the point at which fully costed design proposals can be put to the City Corporation for decision.
8. Alliance Leisure are being appointed through an Access Agreement, which following clarification of fee proposals and some additions to align with the City Corporation's requirements will be finalised by the end of April 2025.

Initial Stakeholder Engagement

9. Engagement and consultation on the design proposals and use mix for the leisure centre will be delivered as part of a communications and engagement strategy (see below). At this early stage, intelligence from engagement in relation to the City Corporation's sports strategy, and other relevant intelligence has been supplemented by some initial engagement.
10. TA6, the marketing agency of Alliance Leisure, have been appointed to complete the initial engagement and opportunity report to inform the design brief. This has included a survey of stakeholders and focus groups. Over 500 survey responses were completed by residents, users and other stakeholders. In addition, five focus groups discussions were delivered and generated insightful feedback on themes such as wellbeing, physical activity habits, barriers to participation, and priorities for the refurbishment. This work will inform the design team - alongside a range of other market intelligence – to develop initial options for further engagement and consultation. The opportunity report is scheduled to be presented to CCS Committee for information in June 2025.

Communications Strategy

11. A procurement exercise to appoint the communications consultant for the range of the works on Golden Lane Estate, including the refurbishment of GLLC, is currently being finalised. The consultant will be required to develop an appropriate communications and engagement strategy and action plan to effectively consult with residents, users and other stakeholders, to ensure the refurbishment best meet the needs of the City's communities. The process will require the establishment and maintenance of a project website to host full details of the refurbishment, Frequently Asked Questions and the ability to contact the project team.
12. The inclusion of GLLC alongside the communications approach to other projects on the estate aims to ensure that is a more co-ordinated approach that prevents consultation fatigue among residents. Consultation and engagement on the

GLLC will not be limited to GLE residents, but will extend across the stakeholder groups mapped as part of the engagement strategy.

Project Board

13. A Project Board has been established with the aim of providing strategic oversight of the refurbishments, identifying and managing risks, progressing through the appropriate governance, and ensuring timely delivery within the agreed budget. The project board has representation from Commissioning and Partnerships, Housing, Energy team, Commercial Services, Finance, Sports Strategy and Engagement team, City Surveyors and Alliance Leisure.

Decision Making and Governance

14. Following the completion of the designs, the Corporation will have the option to progress to a Development Agreement through the UKLF to proceed with the construction. There is no obligation to proceed through the UKLF and the designs and the City will retain ownership of design documents.
15. Decisions will be made via the City's Gateway process and procurement governance, with CCS Committee forming key decision-making process. Decisions will include signing off on the preferred design option, which will be presented along with the associated forecasted revenue operating model.

Corporate & Strategic Implications

Strategic implications – The decision to refurbish GLLC is completed in the context of delivering several strategies, notably the City of London Corporation's Global City of Sport: A Sport Strategy for the Square Mile 2023- 2030, Joint Local Health and Wellbeing Strategy 2024- 2028, and Our Corporate Plan 2024- 2029. The refurbishment will deliver the Corporate Plan outcomes of Providing Excellent Services and Leading Sustainable Environment.

Financial implications – The revenue and capital implications associated with the refurbishment of GLLC will be considered and presented to CCS committee.

Resource implications – The resourcing of the project is being considered and addressed through the established Project Board.

Legal implications – Legal implications to be considered throughout all stages of the project.

Risk implications – Risks will be identified and managed through the Project Board.

Equalities implications – Equalities implications will be considered throughout the project, including through the completion of an Equality Impact Assessment at an early stage.

Climate implications – Climate implications are being addressed through the representation of the Energy Team at the Project Board, to ensure consideration to the City’s Climate Action Strategy.

Security implications – None.

Conclusion

16. Preparatory work has been completed to progress the refurbishment of GLLC. CCS Committee will remain a key decision-making forum for the refurbishment design, construction, and future management of GLLC. Regular updates will be presented to CCS Committee, with the next scheduled for June 2025, where a decision regarding the future management option will be sought, along with the initial findings of the opportunity report presented.

Appendices

- None.

Background Papers

- None.

Greg Knight

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City of London Corporation Committee Report

Committee(s): Community And Children's Services- For Discussion/ Information	Dated: 30/04/2025
Subject: Golden Lane Estate Update Briefing – Major Works and Associated Issues	Public report: For Information
This proposal: <ul style="list-style-type: none"> • delivers Corporate Plan 2024-29 outcomes • provides statutory duties • provides business enabling functions 	Providing Excellent Services Flourishing Public Spaces Diverse Engaged Communities
Does this proposal require extra revenue and/or capital spending?	HRA
If so, how much?	£
What is the source of Funding?	
Has this Funding Source been agreed with the Chamberlain's Department?	Within existing resources (HRA)
Report of:	Judith Finlay, Executive Director Community and Children's Services
Report author:	Peta Caine, Assistant Director, Housing

Summary

Proposals approved by Members in March 2023 around window and roof replacement on the Golden Lane Estate (GLE) gave an incomplete picture of the work and resources required.

It also emerged late in 2024 that all required residential blocks on GLE had not been registered as required with the Building Safety Regulator. This has been rectified. However, this has prompted consideration of electrical upgrade, fabric repairs, fire safety, and redecoration works that were not previously included in the £29m package.

The March 2023 programme was not fully funded and unidentified Housing Revenue Account (HRA) were needed to deliver that plan.

To execute the works 2 options have been assessed these are a 20- and 10-year programme commencing 2025. The team has been asked to focus on working up the high-level costs needed to develop a 10-year programme to inform the decision making.

Continued steps have been taken to support and communicate more effectively with affected residents. We are in discussion with GLERA in the first instance on a number of issues arising from the further delay of this project.

Recommendation(s)

Members are asked to:

Note the report.

Main Report

Background

1. Golden Lane Estate (GLE)

GLE is a Grade II Listed Estate consisting of nine blocks, one of the blocks, Crescent House, is a Grade II* Listed Building. 2. The Estate was completed in the 1960s and consists of 559 homes.

Tenanted homes	285	51%
Leasehold homes	274	49%
TOTAL	559*	

* Does not include the 6 guest rooms

2. The Window programme - reasons for delay

Residents advise that the window replacement project has been discussed with them for 20 years. In March 2023 the C&CS Committee agreed the window works and roof coverings for Crescent House and the wider estate, highlighting the use of a pilot flat to demonstrate the potential on window repair & new glazing. The timescale put forward did not consider the impact of residents having to vacate their homes to allow the work to take place on the timescale for works, or the additional works required on the estate including fire safety and compliance works, fabric repairs or the sequencing of any works. The redecorations were subsequently removed and reduced to making good due to budgetary constraints. The report gave an incomplete picture of the work required, insufficient resourcing was identified and was therefore inaccurate and unachievable.

At the end of 2024, it was identified that not all residential blocks on the GLE had been registered as required with the Building Safety Regulator (BSR). All buildings of 18m high or seven storeys with at least 2 residential dwellings should

have been registered with the BSR by the end of September 2023. The City of London's team failed to do this. The submission was led by officers of the Corporation, who are no longer employed.

All of the buildings have been professionally measured by a consultant. The implications of not recognising the blocks at GLE state as HRBs is critical because any works to be progressed in a HRB now need to be agreed by the BSR and there is a significant backlog of such work nationally sitting with them.

Basterfield, Bayer, Bowater, Cullum Welch and Hatfield Houses as Higher Risk buildings (HRBs) are now registered. By virtue of their physical connection to one or more of these buildings, Crescent House and Stanley Cohen House are also now registered.

Whilst those blocks are now registered, the impact means that we had to withdraw from the tender process.

In response to this critical development, a fire strategy commissioned for Crescent House contains a series of recommendations, but it critically assumes that all the flat entrance and communal door sets within the block are fire rated. We have to incorporate this element of work within the scope of works which is a contributory factor to the delay in terms of the surveys, design and planning/listed building consent associated with the fire door sets.

Although for residents this is deeply frustrating and distressing, progressing the works outlined in the previous programme was unlikely to be successful for the reasons outlined above.

We are therefore taking a holistic view of the GLE and ensuring a clear and integrated programme of works which will enable us to properly fulfil our Landlord obligations, ensure the compliance of key issues such as fire and other safety works are completed and essential planned maintenance work (such as electrical upgrades, fabric repairs and communal decorations) which weren't previously included in the package. We will achieve better value for money and aim to reduce as far as possible disruption for residents. This will put us in a better place for the future in building a prudent and practical approach to long term maintenance.

3. Finance

The programme as outlined in March 2023 was not fully funded and unidentified HRA savings were required to deliver the plan. The new programme has an expanded scope that includes all essential compliance works on the GLE. Detailed costings for Crescent House will be available in August 2025 following completion of the revised programme of works. Funding of each of the other phases will follow as the design is completed in November 2025 (Cuthbert Harrowing), April 2026 (Great Arthur House) with the remaining blocks concluded by August 2026. To facilitate a more urgent understanding of the likely finances required, we have asked our main consultant to provide a budget estimate. This will be available in April/May 2025 and will support budget planning.

4. The Proposed 10 Year - Accelerated Programme Option

Based on a 'combined package' approach, using different criteria. Instead of decanting 6 flats (as planned for the 20-year option) at a time, a total of 12 flats would be decanted at a time, but as part of separate contracts with different main contractors. This would allow for all works to be completed at one time in each block without splitting the work into two separate packages for 5 of the blocks, as with the 20-year programme.

Therefore, the idea would be to adopt the same approach as for Crescent House so that all of the other blocks are delivered as package to deliver the works two blocks at a time, instead of one. Great Arthur House would progress concurrently.

With this accelerated programme, the programme costs would be front loaded and additional project managers, accommodation and decant support officers would be required. With the increased amount of work being undertaken at any one time, we would need more management capacity to manage the disruption and a potential increase in resident issues. Residents would be living on a building site for an extended period of time.

5. The short – term improvements we are seeking to either promote or expedite in summary

- Considering a fuel payment for residents of GLE to recognise the disadvantage experienced arising from the delays.
- Communicating and coordinating more effectively.
- New project website - www.goldenlaneprojects.co.uk launched.
- Regular meetings with GLERA and more frequent meetings with ward Members.
- A drop-in surgery every two weeks on GLE led by the AD Housing – first session took place 19 March 2025, attended by twelve residents.
- Consultation events and drop-in sessions for Major works projects.
- An additional senior member of staff to co-ordinate housing services on the estate to include all housing projects, repairs and maintenance housing management and estate services. The co-ordinator should start 22 April 2025.
- New Repairs and maintenance contract will give improvements in the delivery of R&M – more focus on planned, preventative work and less on reactive repairs.
- Deep clean of the communal areas of the Estate has taken place.
- Putting a plan in place for interim or 'meanwhile' health and safety repairs until such time as the major works are delivered.
- A fact sheet on Higher Risk Buildings (HRBs) has been produced for residents.

A leaseholder letter explaining the issue of issues of betterment vs repair was sent to all leaseholders. We will have a continuous dialogue with leaseholders and all residents.

Key Data

A

Addressing the Key Issues and Risks – Disruption for Residents

Resident Decanting and storage of goods is required because of health and safety and spatial concerns. The full extent of decanting required will be finalised once there are contractors on board. There will also be disruption caused by the number of contractor site set-ups required to accommodate a number of contractors operating on GLE at any one time.

B

Addressing the Key Issues and Risks – Availability of Funding

Our lead consultant has been asked to provide us with a budget estimate which will be suitably caveated and should be available by the end of April 2025.

C

Addressing the Key Issues and Risks – Change from Gas to Electric Heating for some Homes at Crescent House

Some homes in Crescent House have their gas flues that go through glazing. This cannot be accommodated by the proposed vacuum glazing of the refurbished windows that have been designed for Crescent House. This will mean that electric heating will be required. Legal advice has been received on this issue. We have put forward 2 options to leaseholders for further discussion.

D

Addressing the Key Issues and Risks – Leaseholder Recovery – Repair Vs Betterment and Dispensation Required

A letter has been written to leaseholders recently outlining the internal legal advice received on this issue. To develop the expanded scope of works we need to extend the appointment of the lead consultant Studio Partington and appoint a number of consultants in the areas of fire safety, mechanical and electrical, and post contract professional services. These appointments would ordinarily be subject to Section 20 Consultation but we may have to seek dispensation as an alternative because framework mini tenders may be the appropriate way to stay on track. The cost implications of this are yet to be confirmed. There are 2 issue reports covering the additional fees required for phases 1 and 2 of this project.

E

Addressing the Key Issues and Risks – Communication with Residents

Due to the nature and length of this project it is critical that a good working relationship is developed with residents. Work is being done to reset our relationship with GLERA and residents. Of late this includes direct communication with every household, updating the project website, holding resident consultation events, the next one is planned to take place 1 May 2025, holding surgeries on the estate and recruiting a GLE Co-ordinator to systemise our multi-disciplinary work at GLE.

F

Addressing the Key Issues and Risks – Resourcing: City of London Corporation and Contractors

City of London Corporation

This project requires a team that is assembled to see this project through to completion to cover project, construction management. There is an Issue Report on this agenda that covers the Organisational Restructure of the Major Works team. The proposed reorganisation will develop the foundations needed to steward this and other major works programmes successfully.

Contractor

Any contractors used will have to have knowledge of working on listed buildings in general and have the skills necessary to do the specialist works required to the windows specified for Crescent House.

G

Addressing the Key Issues and Risks – Site Management and Co-ordination

We may have as many as 3 contractors on site at any time, they will have to manage in relatively close proximity. Thought will have to be given to site setup and welfare facilities. There will also be other major works projects on the estate including the Great Arthur House roof refurbishment, podium waterproofing and the Leisure Centre refurbishment.

H

Addressing the Key Issues and Risks – Health and Safety and Winter Measures

Health and Safety Works

There is likely to be a requirement for health and safety meanwhile window repairs, intended to preserve the health and safety of frames and sashes until such time as the major works are delivered.

Winter Measures

The previous Head of Major Works implemented the purchase and supply of draught excluders, curtains, drapes etc. and potentially flooring to mitigate the impact of the works being delayed further.

Thought is being given to the development of a fuel payment to recognise the disadvantage experienced arising from the delays experienced by residents living at Crescent House. A proposal will be brought to CCS in June 2025.

Appendices

None

Peta Caine

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