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21 June 2023

To: All Members of the Adults & Health Scrutiny Panel

Dear Member,

Adults & Health Scrutiny Panel - Thursday, 22nd June, 2023

I attach a copy of the following reports for the above-mentioned meeting which were not available at the time of collation of the agenda:

**3. ITEMS OF URGENT BUSINESS (PAGES 1 - 38)**

To note the terms of reference, protocols and membership of the Overview & Scrutiny Committee and Scrutiny Panels for 2023/24.

**8. WORKFORCE FUNDING AND REFORM AGENDA (PAGES 39 - 74)**

**9. LGA COMMISSIONING REVIEW (PAGES 75 - 126)**

Yours sincerely

Dominic O'Brien,  
Principal Scrutiny Officer

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**Report for:** Adults and Health Scrutiny Panel – 22 June 2023

**Title:** Terms of Reference and Membership 2023/24

**Report**

**authorised by:** Ayshe Simsek, Democratic Services and Scrutiny Manager

**Lead Officer:** Dominic O'Brien, Principal Scrutiny Officer  
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**Ward(s) affected:** N/A

**Report for Key/**

**Non-Key Decision:** N/A

**1. Describe the issue under consideration**

1.1 This report sets out the terms of reference and membership for the Overview and Scrutiny Committee and the Scrutiny Panels for 2023/24.

**2. Recommendations**

2.1 The Panel is asked to:

(a) Note the terms of reference (**Appendix A**), and protocols for the Overview and Scrutiny Committee and its Panels (**Appendix B**) and non-voting co-opted Members on Scrutiny Panels (**Appendix C**);

(b) Note the policy areas/remits and membership for each Scrutiny Panel for 2023/24 (**Appendix D**).

(c) Approve the non-voting co-opted Members for the Adults & Health Scrutiny Panel for 2023/24.

**3. Overview and Scrutiny Committee**

3.1 As agreed by Council on 15 May 2023, the membership of the Overview and Scrutiny Committee for 2023/24 will be:

- Cllr Matt White (Chair);
- Cllr Pippa Connor (Vice-Chair);
- Cllr Makbule Gunes;
- Cllr Michelle Simmons-Safo;
- Cllr Alexandra Worrell.

3.2 The terms of reference and role of the OSC and its Panels are set out in Part Two (Article 6), Part Three (Section B) and Part Four (Section G) of the Council's

Constitution. Together, these specify key responsibilities for the Committee. This information is provided in full in **Appendix A**.

- 3.3 There is also a Protocol, outside the Constitution and provided at **Appendix B**, that sets out how the OSC is to operate.
- 3.4 In addition, there is now a draft Protocol (**Appendix C**) for non-voting co-opted scrutiny Members on scrutiny panels. The purpose of this is to ensure openness and transparency in their appointment and clarify their role.
- 3.5 Each Scrutiny Panel is entitled to appoint up to three non-voting co-optees to assist with scrutiny work. In 2022/23 the non-voting co-optees appointed to the Adults & Health Scrutiny Panel were Ali Amasyali and Helena Kania. The Panel has not received any additional applications for 2023/24. The Panel is invited to consider the reappointment of Ali Amasyali and Helena Kania as non-voting co-optee members for 2023/24.

#### 4. Scrutiny Panels

- 4.1 Article 6 of the Constitution states the OSC shall appoint Scrutiny Panels in order to discharge the Overview and Scrutiny role.
- 4.2 The specific functions for any Scrutiny Panels established is outlined in Article 6 of the Constitution at 6.3 (b) and 6.3 (c). The procedure by which this operates is detailed in the Scrutiny Protocol:
  - The OSC shall establish four standing Scrutiny Panels, to examine designated public services;
  - The OSC shall determine the terms of reference for each Scrutiny Panel;
  - If there is any overlap between the business of the Panels, it is the responsibility of the OSC to resolve the issue;
  - Areas which are not covered by the four standing Scrutiny Panels shall be the responsibility of the main OSC;
  - The Chair of each Scrutiny Panel shall be a member of the OSC, as determined by the OSC at its first meeting;
  - It is intended that each Scrutiny Panel shall be comprised of between 3 and 7 backbench or opposition members, and be politically propionate as far as possible;
  - Each Scrutiny Panel shall be entitled to appoint up to three non-voting co-optees. The Children and Young People’s Scrutiny Panel membership will include the statutory education representatives of OSC.
- 4.3 The proposed 2023/24 membership for the four Scrutiny Panels is listed below.

<b>Scrutiny Panel</b>	<b>Membership</b>
Adults and Health	Cllr Pippa Connor (Chair), Cllr Cathy Brennan, Cllr Thayahlan lyngkaran, Cllr Mary Mason, Cllr Sean O’Donovan, Cllr Felicia Opoku, Cllr Sheila Peacock

Children and Young People	Cllr Mukbule Gunes (Chair), Cllr Anna Abela; Cllr Gina Adamou, Cllr Mark Blake, Cllr Lotte Collett, Cllr Marsha Isilar-Gosling, Cllr Sue Jameson;
Climate, Community Wellbeing and Culture	Cllr Michelle Simmons-Safo (Chair); Cllr Gina Adamou, Cllr Charles Adje, Cllr Eldridge Culverwell, Cllr Isidoros Diakides, Cllr George Dunstall, Cllr Marsha Isilar-Gosling.
Housing, Planning and Development	Cllr Alexandra Worrell (Chair); Cllr Dawn Barnes; Cllr John Bevan; Cllr Mark Blake; Cllr Holly Harrison-Mullane; Cllr Tammy Hymas; Cllr Khaled Moyeed.
All Councillors (except Members of the Cabinet) may be members of the Overview and Scrutiny Committee and the Scrutiny Review Panels. However, no Member may be involved in scrutinising a decision in which he/she has been directly involved.	

4.4 The policy areas to be covered by the four existing Scrutiny Panels are attached at **Appendix D**, together with the relevant portfolio holders for each scrutiny body.

## 5. Contribution to strategic outcomes

5.1 The contribution scrutiny can make to strategic outcomes will be considered as part of its routine work.

## 6. Statutory Officers Comments

### Finance and Procurement

6.1 Should any of the work undertaken by Overview and Scrutiny generate recommendations with financial implications then these will be highlighted at that time.

### Legal

6.2 The Assistant Director for Corporate Governance has been consulted on the contents of this report.

6.3 Under Section 21 (6) of the Local Government Act 2000, an Overview and Scrutiny Committee has the power to appoint one or more sub-committee to discharge any of its functions. The establishment of Scrutiny Panels by the Committee falls within this power and is in accordance with the requirements of the Council's Constitution.

- 6.4 Scrutiny Panels are non-decision-making bodies and the work programme and any subsequent reports and recommendations that each scrutiny panel produces must be approved by the OSC. Such reports can then be referred to Cabinet or Council under agreed protocols.

### **Equality**

- 6.5 The Council has a public sector equality duty under the Equalities Act (2010) to have due regard to:

- Tackle discrimination and victimisation of persons that share the characteristics protected under S4 of the Act. These include the characteristics of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex (formerly gender) and sexual orientation;
- Advance equality of opportunity between people who share those protected characteristics and people who do not;
- Foster good relations between people who share those characteristics and people who do not.

- 6.6 The proposals outlined in this report relate to the membership and terms of reference for the OSC and carry no direct implications for the Council's general equality duty. However, the Committee should ensure that it addresses these duties by considering them within its work programme and those of its panels, as well as individual pieces of work. This should include considering and clearly stating;

- How policy issues impact on different groups within the community, particularly those that share the nine protected characteristics;
- Whether the impact on particular groups is fair and proportionate;
- Whether there is equality of access to services and fair representation of all groups within Haringey;
- Whether any positive opportunities to advance equality of opportunity and/or good relations between people, are being realised.

- 6.7 The Committee should ensure that equalities comments are based on evidence. Wherever possible this should include demographic and service level data and evidence of residents/service-users views gathered through consultation.

## **7. Use of Appendices**

Appendix A - Part Two (Article 6), Part Three (Section B), and Part Four (Section G) of the Constitution of the London Borough of Haringey.

Appendix B - Scrutiny Protocol

Appendix C - Protocol for Non-Voting Co-opted Scrutiny Members

Appendix D - Overview & Scrutiny Remits and Membership 2023/24

## **APPENDIX A**

### **PART TWO – ARTICLES OF THE CONSTITUTION**

Last updated 24 July 2017

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#### **Article 6 - Overview and Scrutiny**

##### **6.01 Terms of reference**

The Council will appoint an Overview and Scrutiny Committee to discharge the functions conferred by section 9F of the Local Government Act 2000, the Health & Social Care Act 2001 and the NHS Reform & Health Professionals Act 2002.

##### **6.02. General role**

Within its terms of reference, the Overview and Scrutiny Committee may:

- (a) Exercise an overview of the forward plan;
- (b) Review or scrutinise decisions made or actions taken in connection with the discharge of any of the Cabinet's or Council's functions;
- (c) Make reports and recommendations to the full Council, the Cabinet or relevant non-Executive Committee in connection with the discharge of any functions;
- (d) Make reports or recommendations on matters affecting the area or its inhabitants;
- (e) Exercise the right to call-in, for reconsideration, key decisions made but not yet implemented by the Executive;
- (f) Receive the reports and recommendations of its commissioned Scrutiny Review Panels; and
- (g) In accordance with statutory regulations to review and scrutinise matters relating to the health service within the Authority's area and to make reports and recommendations thereon to local NHS bodies;
- (h) Enter into or appoint such joint overview and scrutiny committees that include the London Borough of Haringey and other boroughs for the purpose of responding to consultation by NHS bodies on proposals for substantial variation or development in the provision of health services as required by The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013.

##### **6.03 Specific functions**

###### **(a) Scrutiny Review Panels.**

The Overview and Scrutiny Committee shall appoint Scrutiny Review Panels in order to discharge the Overview and Scrutiny role for designated public services and will co-ordinate their respective roles.

**(b) Policy development and review.**

The Overview and Scrutiny Committee and any Scrutiny Review Panels it may establish may:

- (i) Assist the Council and the Cabinet in the development of its budget and policy framework by in-depth analysis of policy issues;
- (ii) Conduct research, community and other consultation in the analysis of policy issues and possible options;
- (iii) Consider and implement mechanisms to encourage and enhance community participation in the development of policy options;
- (iv) Question members of the Cabinet and chief officers about their views on issues and proposals affecting the area; and
- (v) Liaise with other external organisations operating in the area, whether national, regional or local, to ensure that the interests of local people are enhanced by collaborative working.

**(c) Scrutiny.**

The Overview and Scrutiny Committee and any Scrutiny Review Panels it may establish may:

- (i) Review and scrutinise the decisions made by and performance of the Cabinet and Council officers both in relation to individual decisions and over time;
- (ii) Review and scrutinise the performance of the Council in relation to its policy objectives, performance targets and/or particular service areas;
- (iii) Question members of the Cabinet and chief officers about their decisions and performance, whether generally in comparison with service plans and targets over a period of time, or in relation to particular decisions, initiatives or projects;
- (iv) Make recommendations to the Cabinet or relevant non-executive Committee arising from the outcome of the scrutiny process;
- (v) Review and scrutinise the performance of other public bodies in the area and invite reports from them by requesting them to address the overview and scrutiny committee and local people about their activities and performance; and
- (vi) Question and gather evidence from any person (with their consent).

**(d) Finance**

Overview and Scrutiny Committee may exercise overall responsibility for the finances made available to them.



**(e) Annual report.**

Overview and Scrutiny Committee must report annually to full Council on their workings and make recommendations for future work programmes and amended working methods if appropriate.

**6.04 Proceedings of Overview and Scrutiny Committee**

The Overview and Scrutiny Committee and any Scrutiny Review Panels it may establish will conduct their proceedings in accordance with the Overview and Scrutiny Procedure Rules set out in Part 4 of this Constitution.

**6.05 Votes of No Confidence**

The Chair of the Overview and Scrutiny Committee or the Chair of a Scrutiny Review Panel shall cease to hold that office as a Scrutiny member if a vote of no confidence, of which notice appears on the agenda, is carried at the meeting of the relevant body. The responsibilities of that member shall be carried out by the relevant Vice-Chair until such time as a subsequent meeting of that body has been notified of the appointment of a replacement or the reappointment of the member concerned. In the event of all members of the Overview and Scrutiny Committee having been removed from office in this way at any time, Scrutiny functions shall in the interim be carried out by full Council.

**PART THREE – RESPONSIBILITY FOR FUNCTIONS**  
**SECTION B**

Last updated 24 July 2017

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**SECTION 2 – COMMITTEES**

The following shall be committees of the Council and they shall have the membership as described in the Appointments of Committees, Sub-Committees, Panels, etc (as approved by the Annual Meeting):

- 1. The Corporate Committee**
  - 2. Combined Pensions Committee and Board**
  - 3. Staffing and Remuneration Committee**
  - 4. Overview and Scrutiny Committee**
  - 5. Standards Committee**
  - 6. Alexandra Palace and Park Board**
  - 7. The Regulatory Committee**
  - 8. The Health and Wellbeing Board**
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**4. Overview and Scrutiny Committee**

The Overview and Scrutiny Committee may:

- (a) exercise an overview of the forward plan;
- (b) review or scrutinise decisions made or actions taken in connection with the discharge of any of the Cabinet's or Council's functions;
- (c) make reports and recommendations to the full Council, the Cabinet or relevant non-Executive Committee in connection with the discharge of any functions;
- (d) make reports or recommendations on matters affecting the area or its inhabitants;
- (e) exercise the right to call-in, for reconsideration, key decisions made but not yet implemented by the Cabinet;
- (f) receive the reports and recommendations of its Scrutiny Review Panels;
- (g) in accordance with statutory regulations to review and scrutinise matters relating to the health service and all NHS funded services within the Authority's

area and to make reports and recommendations thereon to local NHS and NHS funded bodies;

- (h) enter into or appoint such joint overview and scrutiny committees that include the London Borough of Haringey and other boroughs for the purpose of responding to consultation by NHS bodies on proposals for substantial variation or development in the provision of health services as required by The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013;
- (i) review or scrutinise decisions made, or other action taken, in connection with the discharge by the responsible partner authorities of their crime and disorder functions;
- (j) make reports or recommendations to the Cabinet or full Council where appropriate with respect to the discharge of the crime and disorder functions by the responsible partner authorities;
- (k) make arrangements which enable any councillor who is not a Committee member to refer any crime and disorder matter to the Committee under the Councillor Call for Action procedure; and
- (l) make arrangements which enable any councillor who is not a Committee member to refer to the Committee any local government matter which is relevant to the functions of the Committee under the Councillor Call for Action procedure.
- (m) there is a Protocol outside this Constitution setting out how the Overview and Scrutiny Committee is to operate. The Protocol shall be applied in a manner consistent with the Committee Procedure Rules in Part 4 and any issue on procedure at the meeting shall be subject to the ruling of the Chair. The Protocol can be amended by the written agreement of the Leaders of the Political Groups on the Council.
- (o) to appoint two representatives to the standing Joint Health Overview and Scrutiny Committee for North Central London. (Since this appointment is for only two members to the Joint Committee, the "political proportionality" rules in the Local Government and Housing Act 1989 do not apply.)

### **SECTION 3 - SUB-COMMITTEES AND PANELS**

The following bodies shall be created as Sub-Committees of the relevant Committee of the Council under which they are listed. Bodies described as "Panels" are Sub-Committees unless otherwise stated. Sub-Committees shall report to their parent bodies and they shall have the membership as described in the Appointments of Non-Executive Committees, Sub-Committees, Panels, etc as approved by the Annual Meeting.

#### **2. Under Overview and Scrutiny Committee**

## **2.1 Scrutiny Review Panels**

- (a) To carry out scrutiny processes relevant to particular services as determined by Overview and Scrutiny Committee and within the parameters, protocols and procedures agreed by Overview and Scrutiny Committee for all Scrutiny Review Panels.
- (b) Within these scrutiny processes to request and receive submissions, information and answers to questions from Cabinet Members, officers and other senior employees of the Council, service users, external experts and relevant members of the public.
- (c) To refer the findings/recommendations in the form of a written report, with the approval of the Overview and Scrutiny Committee, to The Cabinet and/or the Council as appropriate.

**PART FOUR – RULES OF PROCEDURE**  
**SECTION G – OVERVIEW & SCRUTINY PROCEDURE RULES**

Last updated 21 July 2014

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**1. The arrangements for Overview and Scrutiny**

1.1 The Council will have one Overview and Scrutiny Committee, which will have responsibility for all overview and scrutiny functions on behalf of the Council.

1.2 The terms of reference of the Overview and Scrutiny Committee will be:

- (i) The performance of all overview and scrutiny functions on behalf of the Council.
- (ii) The appointment of Scrutiny Review Panels, with membership that reflects the political balance of the Council.
- (iii) To determine the terms of reference of all Scrutiny Review Panels.
- (iv) To receive reports from local National Health Service bodies on the state of health services and public health in the borough area.
- (v) To enter into or appoint such joint overview and scrutiny committees that include the London Borough of Haringey and other boroughs for the purpose of responding to consultation by NHS bodies on proposals for substantial variation or development in the provision of health services as required by The Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013.
- (vi) To monitor the effectiveness of the Council's Forward Plan.
- (vii) To receive all appropriate performance management and budget monitoring information.
- (viii) To approve a programme of future overview and scrutiny work so as to ensure that the Overview and Scrutiny Committee's and Scrutiny Review Panels' time is effectively and efficiently utilised;
- (ix) To consider all requests for call-in and decide whether to call-in a key decision, how it should be considered and whether to refer the decision to the Cabinet or to Council.
- (x) To monitor the effectiveness of the Call-in procedure.
- (xi) To review and scrutinise action taken by partner authorities in discharge of crime and disorder functions and to make reports and recommendations to Cabinet and Council on these.

- (xii) To make arrangements which enable any Councillor who is not a Committee Member to refer any local government matter, or any crime and disorder matter, to the Committee under the Councillor Call for Action Procedure.
- (xiii) To ensure that referrals from Overview and Scrutiny Committee to the Cabinet either by way of report or call-in are managed efficiently, and
- (xiv) To ensure community and voluntary sector organisations, users of services and others are appropriately involved in giving evidence to the Overview and Scrutiny Committee or relevant Scrutiny Review Panel.

1.3 The Overview and Scrutiny Committee may establish a number of Scrutiny Review Panels:

- (i) Scrutiny Reviews Panels are appointed to examine designated Council services. Scrutiny Review Panels will refer their findings/ recommendations in the form of a written report, with the approval of the Overview and Scrutiny Committee, to the Cabinet and/or the Council as appropriate.
- (ii) Scrutiny Review Panels will analyse submissions, request and analyse any additional information, and question the Cabinet Member(s), relevant Council officers, local stakeholders, and where relevant officers and/or board members of local NHS bodies or NHS funded bodies.
- (iii) Subject to the approval of the Overview and Scrutiny Committee, Scrutiny Review Panels will be able to appoint external advisors and/or to commission specific pieces of research if this is deemed necessary.
- (iv) Scrutiny Review Panels should make every effort to work by consensus; however, in exceptional circumstances Members may submit minority reports.
- (v) Prior to publication, draft reports will be sent to the relevant chief officers or where relevant officers of the National Health Service for checking for inaccuracies and the presence of exempt and/or confidential information; Scrutiny Review Panel members will revisit any conclusions drawn from disputed information;
- (vi) Following approval by the Overview and Scrutiny Committee, final reports and recommendations will be presented to the next available Cabinet meeting together with an officer report where appropriate. The Cabinet will consider the reports and formally agree their decisions.
- (vii) Following approval by the Overview and Scrutiny Committee, reports on NHS, non-executive or regulatory matters will be copied to the Cabinet for information.

- (viii) At the Cabinet meeting to receive the final report and recommendations, the Chair of the Overview and Scrutiny Committee or the Chair of the Scrutiny Review Panel may attend and speak.
- (ix) After an appropriate period, post implementation, Overview and Scrutiny Committee will carry out a follow up review to determine if the recommendations had the intended outcomes and to measure any improvements.

- 1.4 When Scrutiny Review Panels report on non-executive or regulatory functions the above rules apply, except the references to The Cabinet shall be taken as reference to the relevant non-executive body.
- 1.5 The Overview and Scrutiny Committee shall undertake scrutiny of the Council's budget through a Budget Scrutiny process. The procedure by which this operates is detailed in the Protocol covering the Overview and Scrutiny Committee.
- 1.6 All Overview and Scrutiny meetings shall take place in public (except where exempt or confidential matters are considered).
- 1.7 The Overview and Scrutiny function should not be seen as an alternative to established disciplinary, audit or complaints mechanisms and should not interfere with or pre-empt their work.

## **2. Membership of the Overview and Scrutiny Committee and Scrutiny Review Panels**

- 2.1 All Councillors (except Members of the Cabinet) may be members of the Overview and Scrutiny Committee and the Scrutiny Review Panels. However, no Member may be involved in scrutinising a decision in which he/she has been directly involved.
- 2.2 The membership of the Overview and Scrutiny Committee and Scrutiny Review Panels shall, as far as is practicable, be in proportion to the representation of different political groups on the Council.

## **3. Co-optees**

- 3.1 Each Scrutiny Review Panel shall be entitled to appoint up to three people as non-voting co-optees.
- 3.2 Statutory voting non-Councillor members of Overview and Scrutiny Committee will be paid an allowance in accordance with the Members' Allowances Scheme in Part 6 of this Constitution.

## **4. Education representatives**

- 4.1 The Overview and Scrutiny Committee and the Scrutiny Review Panel whose terms of reference relate to education functions that are the responsibility of the Cabinet, shall include in its membership the following representatives:

- (i) At least one Church of England diocesan representative (voting).
- (ii) At least one Roman Catholic diocesan representative (voting).
- (iii) 2 parent governor representatives (voting).

These voting representatives will be entitled to vote where the Overview and Scrutiny Committee or the Scrutiny Review Panel is considering matters that relate to relevant education functions. If the Overview and Scrutiny Committee or Scrutiny Review Panel is dealing with other matters, these representatives shall not vote on those matters though they may stay in the meeting and speak at the discretion of the Chair. The Overview and Scrutiny Committee and Scrutiny Review Panel will attempt to organise its meetings so that relevant education matters are grouped together.

## **5. Meetings of the Overview and Scrutiny Committee and Scrutiny Review Panels**

- 5.1 In addition to ordinary meetings of the Overview and Scrutiny Committee, extraordinary meetings may be called from time to time as and when appropriate. An Overview and Scrutiny Committee meeting may be called by the Chair of the Overview and Scrutiny Committee after consultation with the Chief Executive, by any two Members of the Committee or by the proper officer if he/she considers it necessary or appropriate.
- 5.2 In addition to ordinary meetings of the Scrutiny Review Panels, extraordinary meetings may be called from time to time as and when appropriate. A Scrutiny Review Panel meeting may be called by the Chair of the Panel after consultation with the Chief Executive, by any two Members of the Committee or by the proper officer if he/she considers it necessary or appropriate.

## **6. Quorum**

The quorum for the Overview Scrutiny Committee and for each Scrutiny Review Panel shall be at least one quarter of its membership and not less than 3 voting members.

## **7. Chair of the Overview and Scrutiny Committee and Scrutiny Review Panels**

- 7.1 The Chair of the Overview and Scrutiny Committee will be appointed by the Council.
- 7.2 The Chair of the Overview and Scrutiny Committee shall resign with immediate effect if a vote of no confidence is passed by the Overview and Scrutiny Committee.
- 7.3 Chairs of Scrutiny Review Panels will be drawn from among the Councillors sitting on the Overview and Scrutiny Committee. Subject to this requirement,



the Overview and Scrutiny Committee may appoint any person as it considers appropriate as Chair having regard to the objective of cross-party chairing in proportion to the political balance of the Council. The Scrutiny Review Panels shall not be able to change the appointed Chair unless there is a vote of no confidence as outlined in Article 6.5 in this Constitution.

- 7.4 The Chair of the Budget Scrutiny Review process will be drawn from among the opposition party Councillors sitting on the Overview and Scrutiny Committee. The Overview and Scrutiny Committee shall not be able to change the appointed Chair unless there is a vote of no confidence as outlined in Article 6.5 in this Constitution.

## **8. Work programme**

Overview and Scrutiny Committee will determine the future scrutiny work programme and will establish Scrutiny Review Panels to assist it to perform its functions. The Committee will appoint a Chair for each Scrutiny Review Panel.

## **9. Agenda items for the Overview and Scrutiny Committee**

- 9.1 Any member of the Overview and Scrutiny Committee shall be entitled to give notice to the proper officer that he/she wishes an item relevant to the functions of the Committee to be included on the agenda for the next available meeting of the Committee. On receipt of such a request the proper officer will ensure that it is included on the next available agenda.
- 9.2 The Overview and Scrutiny Committee shall also respond, as soon as its work programme permits, to requests from the Council and, if it considers it appropriate, from the Cabinet to review particular areas of Council activity. Where they do so, the Overview and Scrutiny Committee shall report their findings and any recommendations back to the Cabinet within an agreed timescale.

## **10. Policy review and development**

- 10.1 The role of the Overview and Scrutiny Committee in relation to the development of the Council's budget and policy framework is set out in the Budget and Policy Framework Procedure Rules in Part 4 of this constitution.
- 10.2 In relation to the development of the Council's approach to other matters not forming part of its policy and budget framework, the Overview and Scrutiny Committee and its Scrutiny Review Panels may make proposals to the Cabinet for developments insofar as they relate to matters within their terms of reference. The Scrutiny Review Panels must do so via the Overview and Scrutiny Committee.

## **11. Reports from the Overview and Scrutiny Committee**

Following endorsement by the Overview and Scrutiny Committee, final reports and recommendations will be presented to the next available Cabinet meeting. The procedure to be followed is set out in paragraphs 1.3 or 1.4 above.

**12. Making sure that overview and scrutiny reports are considered by the Cabinet**

12.1 The agenda for Cabinet meetings shall include an item entitled 'Issues arising from Scrutiny'. Reports of the Overview and Scrutiny Committee referred to the Cabinet shall be included at this point in the agenda unless either they have been considered in the context of the Cabinet's deliberations on a substantive item on the agenda or the Cabinet gives reasons why they cannot be included and states when they will be considered.

12.2 Where the Overview and Scrutiny Committee prepares a report for consideration by the Cabinet in relation to a matter where decision making power has been delegated to an individual Cabinet Member, a Committee of the Cabinet, an Area Committee, or an Officer, or under Joint Arrangements, then the Overview and Scrutiny Committee will also submit a copy of their report to that body or individual for consideration, and a copy to the proper officer. If the Member, committee, or officer with delegated decision making power does not accept the recommendations of the Overview and Scrutiny Committee, then the body/he/she must then refer the matter to the next appropriate meeting of the Cabinet for debate before making a decision.

**13. Rights and powers of Overview and Scrutiny Committee members**

**13.1 Rights to documents**

(i) In addition to their rights as Councillors, members of the Overview and Scrutiny Committee and Scrutiny Review Panels have the additional right to documents, and to notice of meetings as set out in the Access to Information Procedure Rules in Part 4 of this Constitution.

(ii) Nothing in this paragraph prevents more detailed liaison between the Cabinet and the Overview and Scrutiny Committee and Scrutiny Review Panels as appropriate depending on the particular matter under consideration.

**13.2 Powers to conduct enquiries**

The Overview and Scrutiny Committee and Scrutiny Review Panels may hold enquiries into past performance and investigate the available options for future direction in policy development and may appoint advisers and assessors to assist them in these processes. They may go on site visits, conduct public surveys, hold public meetings, commission research and do all other things that they reasonably consider necessary to inform their deliberations, within available resources. They may ask witnesses to attend to address them on any matter under consideration and may pay any

advisers, assessors and witnesses a reasonable fee and expenses for doing so. Scrutiny Review Panels require the support of the Overview and Scrutiny Committee to do so.

### **13.3 Power to require Members and officers to give account**

- (i) The Overview and Scrutiny Committee and Scrutiny Review Panels may scrutinise and review decisions made or actions taken in connection with the discharge of any Council functions (Scrutiny Review Panels will keep to issues that fall within their terms of reference). As well as reviewing documentation, in fulfilling the scrutiny role, it may require any Member of the Cabinet, the Head of Paid Service and/or any senior officer (at second or third tier), and chief officers of the local National Health Service to attend before it to explain in relation to matters within their remit:
  - (a) any particular decision or series of decisions;
  - (b) the extent to which the actions taken implement Council policy (or NHS policy, where appropriate); and
  - (c) their performance.

It is the duty of those persons to attend if so required. At the discretion of their Director, council officers below third tier may attend, usually accompanied by a senior manager. At the discretion of the relevant Chief Executive, other NHS officers may also attend overview and scrutiny meetings.

- (ii) Where any Member or officer is required to attend the Overview and Scrutiny Committee or Scrutiny Review Panel under this provision, the Chair of that body will inform the Member or proper officer. The proper officer shall inform the Member or officer in writing giving at least 10 working days notice of the meeting at which he/she is required to attend. The notice will state the nature of the item on which he/she is required to attend to give account and whether any papers are required to be produced for the Overview and Scrutiny Committee or Scrutiny Review Panel. Where the account to be given to Overview and Scrutiny Committee or Scrutiny Review Panel will require the production of a report, then the Member or officer concerned will be given sufficient notice to allow for preparation of that documentation.
- (iii) Where, in exceptional circumstances, the Member or officer is unable to attend on the required date, then the Overview and Scrutiny Committee or Scrutiny Review Panel shall in consultation with the Member or officer arrange an alternative date for attendance, to take place within a maximum of 10 days from the date of the original request.

### **14. Attendance by others**

The Overview and Scrutiny Committee or Scrutiny Review Panel may invite people other than those people referred to in paragraph 13 above to address it, discuss issues of local concern and/or answer questions. It may for example wish to hear from residents, stakeholders and Members and officers in other parts of the public sector and may invite such people to attend. Attendance is optional.

**15. Call-in**

The call-in procedure is dealt with separately at Part 4 Section H of the Constitution, immediately following these Overview and Scrutiny Procedure Rules.

**16. Councillor Call for Action (CCfA)**

The Council has adopted a Protocol for handling requests by non-Committee Members that the Committee should consider any local government matter which is a matter of significant community concern. This procedure should only be a last resort once the other usual methods for resolving local concerns have failed. Certain matters such as individual complaints and planning or licensing decisions are excluded.

Requests for a CCfA referral should be made to the Democratic Services Manager, who will check with the Monitoring Officer that the request falls within the Protocol. The Councillor making the referral will be able to attend the relevant meeting of the Committee to explain the matter. Among other actions, the Committee may: (i) make recommendations to the Cabinet, Directors or partner agencies, (ii) ask officers for a further report, (iii) ask for further evidence from the Councillor making the referral, or (iv) decide to take no further action on the referral.

The Protocol is not included within this Constitution but will be subject to regular review by the Committee.

**17. Procedure at Overview and Scrutiny Committee meetings and meetings of the Scrutiny Review Panels.**

(a) The Overview and Scrutiny Committee shall consider the following business as appropriate:

- (i) apologies for absence;
- (ii) urgent business;
- (iii) declarations of interest;
- (iv) minutes of the last meeting;
- (v) deputations and petitions;

- (vi) consideration of any matter referred to the Committee for a decision in relation to call-in of a key decision;
  - (vii) responses of the Cabinet to reports of the Committee;
  - (viii) business arising from Area Committees;
  - (ix) the business otherwise set out on the agenda for the meeting.
- (b) A Scrutiny Review Panel shall consider the following business as appropriate:
- (i) minutes of the last meeting;
  - (ii) declarations of interest;
  - (iii) the business otherwise set out on the agenda for the meeting.
- (c) Where the Overview and Scrutiny Committee or Scrutiny Review Panel has asked people to attend to give evidence at meetings, these are to be conducted in accordance with the following principles:
- (i) that the investigation be conducted fairly and all members of the Overview and Scrutiny Committee and Scrutiny Review Panels be given the opportunity to ask questions of attendees, to contribute and to speak;
  - (ii) that those assisting the Overview and Scrutiny Committee or Scrutiny Review Panel by giving evidence be treated with respect and courtesy;
  - (iii) that the investigation be conducted so as to maximise the efficiency of the investigation or analysis; and
  - (iv) that reasonable effort be made to provide appropriate assistance with translation or alternative methods of communication to assist those giving evidence.
- (d) Following any investigation or review, the Overview and Scrutiny Committee or Scrutiny Review Panel shall prepare a report, for submission to the Cabinet and shall make its report and findings public.

#### **17A. Declarations Of Interest Of Members**

- (a) If a member of the Overview and Scrutiny Committee or Scrutiny Review Panel has a disclosable pecuniary interest or a prejudicial interest as referred to in Members' Code of Conduct in any matter under consideration, then the member shall declare his or her interest at the start of the meeting or as soon as the interest becomes apparent. The member may not participate or participate further in any

discussion of the matter or participate in any vote or further vote taken on the matter at the meeting and must withdraw from the meeting until discussion of the relevant matter is concluded unless that member has obtained a dispensation from the Council's Standards Committee.

- (b) If a member of the Overview and Scrutiny Committee or Scrutiny Review Panel has a personal interest which is not a disclosable pecuniary interest nor a prejudicial interest, the member is under no obligation to make a disclosure at the meeting but may do so if he/she wishes.

## **18. The Party Whip**

Scrutiny is intended to operate outside the party whip system. However, when considering any matter in respect of which a Member of scrutiny is subject to a party whip the Member must declare the existence of the whip and the nature of it before the commencement of the Committee/Panel's deliberations on the matter. The Declaration, and the detail of the whipping arrangements, shall be recorded in the minutes of the meeting.

The expression "party whip" can be taken to mean: "Any instruction given by or on behalf of a political group to any Councillor who is a Member of that group as to how that Councillor shall speak or vote on any matter before the Council or any committee or sub-committee, or the application or threat to apply any sanction by the group in respect of that Councillor should he/she speak or vote in any particular manner."

## **19. Matters within the remit of more than one Scrutiny Review Panel**

Should there be any overlap between the business of any Scrutiny Review Panels, the Overview and Scrutiny Committee is empowered to resolve the issue.

## OVERVIEW AND SCRUTINY COMMITTEE (OSC) PROTOCOL 2021

### 1 INTRODUCTION

- 1.1 Overview and Scrutiny plays a fundamental role in the Council's governance arrangements through holding decision makers to account, policy review and development, acting as a community voice and ensuring the efficient delivery of public services. Effective scrutiny requires the commitment of the whole Council and partners, as well as creating the right culture, behaviours and attitude that sees scrutiny as a valuable contributor to the business of the Council.
- 1.2 This new protocol is a welcome opportunity for the whole Council to re-affirm its commitment to effective scrutiny, foster an effective and constructive working relationship with all stakeholders in the scrutiny process and refresh relevant policies and procedures so that they reflect best practice. It also takes into account learning from recent Haringey scrutiny work as well as the new Statutory Guidance on Overview and Scrutiny in Local and Combined Authorities that was published by the Ministry of Housing, Communities and Local Government (MHCLG) in May 2019.
- 1.3 The Protocol is intended to give effect to the provisions in the Constitution relating to Overview and Scrutiny. In the event of any apparent conflict that may arise between the provisions in the Protocol and the Constitution, the Constitution shall take precedence.

### 2 ROLE OF OVERVIEW AND SCRUTINY COMMITTEE

- 2.1 The Council is committed to creating an environment conducive to effective scrutiny. It is a statutory function and a requirement for all authorities operating executive arrangements. It is also an integral part of the Council's decision-making structure and provides essential checks and balances to the Council's Cabinet to ensure that its powers are used wisely. Whilst its legitimacy is beyond question, scrutiny should nonetheless be able to demonstrate clearly to the Council and its Cabinet, senior management team, partners and the public the value that it adds in its work and seek to make recommendations that improve the lives of local residents.
- 2.2 Effective Overview and Scrutiny should:
  - Provide constructive challenge;
  - Amplify the voices and concerns of the public;
  - Be led by independent minded Members who take responsibility for their role; and
  - Drive improvement in public services.

#### *Challenge*

- 2.3 For challenge to be effective, it needs to be sufficiently robust. It should nevertheless be constructive and focused on matters of timely relevance to the Council and the wider community. The role of scrutiny as a 'Critical Friend' should be undertaken in a courteous and professional manner, reflecting the Member's Code of Conduct. The aim of scrutiny should be to improve decision making and outcomes for residents, not scoring political points or providing a political opposition to those who make decisions.

#### *Public and Community Involvement*

- 2.4 Overview and Scrutiny has an important role in articulating the concerns of residents and community organisations. It will therefore strive to facilitate their involvement in its work and, in particular, the development of its work plan, providing evidence and asking questions.
- 2.5 Overview and scrutiny will seek to ensure that the feedback that it receives is representative of the local community. It will be proactive in seeking input and seek to involve individuals and groups within it that are best placed to inform specific pieces of work. It will use a range of methods and, where possible, locations in order to best to engage with diverse stakeholders and listen to their views and experience.

### *Independence*

- 2.6 Overview and scrutiny shall be independent in both outlook and operation. The Cabinet should not seek to direct the areas that it focusses upon, although suggestions can be made for the work programme. Overview and scrutiny shall not be subject to undue party political influence, such as whipping. Members on scrutiny bodies shall also undertake their work with an open mind and make recommendations that are based on the evidence that they receive rather than pre-conceived ideas or pressure from within the political group. It should seek to be strategic and focused on the Council and its communities of interest.

### *Driving Improvement*

- 2.7 It is important that scrutiny not only provides challenge but delivers outcomes. These should aim to make a difference to the lives of residents through improving public services. This should be achieved by the making of evidence-based recommendations to the Council's Cabinet and other organisations responsible for the commissioning and delivery of public services.

## **3 RESPONSIBILITIES**

- 3.1 Overview and scrutiny can scrutinise any matter which affects the authority's area or its residents' wellbeing. The powers of Overview and Scrutiny were contained in the Local Government Act 2000 and consolidated by the Localism Act 2011. It can:
- Review decisions taken by the Cabinet or the Council;
  - Investigate matters affecting the borough of Haringey and its residents;
  - Contribute to policy development for the Council;
  - Make reports and recommendations to the Cabinet or the Council;
  - Review decisions made by the Cabinet but not yet implemented ("call-in");
  - Appoint sub-committees and arrange for them to discharge any of its functions;
  - Review matters relating to the health service and crime and disorder and make reports and recommendations;
  - Require members of the Cabinet and officers to attend to provide information and answer questions;
  - Invite other persons to attend meetings as part of its evidence gathering;
  - Give notice in writing to a relevant partner authority requiring that it has regard to a report or recommendations relating to its functions; and
  - Request information from a relevant partner authority that is required for Overview and Scrutiny to discharge its functions.

## **4 STRUCTURE**



- 4.1 The Overview and Scrutiny Committee shall comprise five members and be politically proportionate as far as possible. The membership shall be appointed each year at the Annual Council Meeting. The chair of the Committee shall be a member of the majority group. The Vice-Chair shall be a member of the largest minority group. The Committee shall also comprise statutory education co-optees, who have voting rights on education matters.
- 4.2 The Overview and Scrutiny Committee shall establish four standing Scrutiny Panels to examine designated public services. The Committee shall determine the terms of reference of each Panel. If there is any overlap between the business of the Panels, it is the responsibility of the Overview and Scrutiny Committee to resolve the issue. Areas which are not covered by the four standing Panels shall be the responsibility of the Overview and Scrutiny Committee.
- 4.3 The chair of each standing Scrutiny Panel shall be a member of the Overview and Scrutiny Committee and shall be determined by the Committee at its first meeting of the year. It is intended that each Panel shall be comprised of between 3 and 7 members and be politically proportionate as far as possible. The membership of each Scrutiny Panel shall be appointed by the Overview and Scrutiny Committee. It is intended that, other than the Chair, the other members will be non-executive members who do not sit on the Overview and Scrutiny Committee.
- 4.4 Should one of the Panels be responsible for education issues, the membership shall include the statutory education co-optees. It is intended that the education co-optees will also attend the Overview and Scrutiny Committee when reports from a relevant Scrutiny Panel are considered.
- 4.5 Each Scrutiny Panel shall be entitled to appoint up to three non-voting co-optees. Non voting co-optees are expected to add value to scrutiny by performing the following roles:
  - To bring a diverse spectrum of experience and adding a different perspective to any items;
  - To act as a non-party political voice for those who live and/or work in Haringey; and
  - To bring specialist knowledge and/or skills to the Overview and Scrutiny process and an element of external challenge by representing the public.
- 4.6 Nominations for non-voting co-optees will be sought primarily from established community groups but consideration can be given to specific individuals where particular expertise/experience is required that would not be otherwise available<sup>1</sup>.
- 4.7 Overview and Scrutiny bodies shall seek to work by consensus. Votes should only take place when as a last resort and when all efforts to achieve a consensus have been unsuccessful.

## **5 MEETING FREQUENCY AND FORMAT**

- 5.1 The Committee shall hold six scheduled meetings each year. One meeting shall include agreement of the annual work programme for Overview and Scrutiny. One meeting, in January, shall consider the budget scrutiny recommendations from each Scrutiny Panel. In addition, the Committee may also hold evidence gathering meetings as part of in-depth scrutiny reviews on a specific issue as and when required. An extraordinary meeting of the OSC may be called in accordance with the Council's Constitution (Part 4 Section G).

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<sup>1</sup> There is a separate and detailed Protocol regarding the process for appointment of non-voting co-optees.

- 5.2 Members of the Council may Call In a decision of the Cabinet, or any Key Decision made under delegated powers, within five working days of the decision being made. The full procedure is given in the Council's Constitution (Part 4 Section H).
- 5.3 Pre-decision scrutiny on forthcoming Cabinet decisions shall only be undertaken at scheduled Overview and Scrutiny Committee meetings, in adherence with the Council's Forward Plan.
- 5.4 It is intended that each Scrutiny Panel shall hold four scheduled meetings each year. An extraordinary meeting of a Panel may be called in accordance with the Council's Constitution (Part 4 Section G). In addition, Scrutiny Panels may also hold evidence gathering meetings as part of in-depth scrutiny reviews on a specific issue as and when required.
- 5.5 The choice of venue for meetings may have regard to the business to be transacted and the circumstances of the time. This may include meeting online for remote working or to improve access to those providing evidence to the Committee or a Panel.

## **6 ENGAGING WITH THE CABINET**

- 6.1 Legislation relating to local authority governance provides for the separation of the Executive and Non-executive Members of a Council in order to provide a check and balance on decision-making. The Overview and Scrutiny Committee therefore shall engage regularly with Cabinet, particularly regarding its future work programme and the Forward Plan. The first of such meetings should be arranged with Cabinet prior to the first meeting of the Committee. The Chairs of the Overview and Scrutiny Committee and the Scrutiny Panels shall seek to liaise on a regular basis with the relevant Cabinet Members covering relevant portfolios regarding the progress of the work programme, agenda setting and requests for reports, attendance and updates.
- 6.2 The Leader of the Council and Chief Executive shall be invited to the Overview and Scrutiny Committee as required, based upon the agenda of a meeting, but at least once a year at the meeting when the Overview and Scrutiny work programme is considered. This shall be an opportunity to discuss jointly, amongst other matters, the Council's priorities for the next year. Meetings between the Cabinet and scrutiny should focus on outcomes and be respectful and constructive, respecting the different but complementary nature of the roles and the value of scrutiny to the Council and its residents.
- 6.3 All Cabinet Members will be expected to attend either the Overview and Scrutiny Committee and/or Scrutiny Panels as required and with reasonable notice, based upon the agenda of a meeting, but at least twice a year. Cabinet Members will be expected to provide information specific to an agenda item, to provide updates on key areas within their portfolios and to answer questions.
- 6.4 The Leader and Cabinet Members attending an Overview and Scrutiny Committee or Scrutiny Panel meeting may be accompanied and assisted by any service officers they consider necessary. The Member may invite an officer attending to answer a question and provide information on their behalf.
- 6.5 Cabinet Members and senior officers attending formal meetings of scrutiny bodies shall strive to provide full answers to questions that are put to them. Where this is not possible due to the necessary information not being accessible at the meeting, a written answer will be provided within 7 working days of the date of the meeting. To better meet requests for information, members of the Committee

and its Panels will seek to provide advance notice of questions so that Cabinet Members and senior officers may prepare for their participation in the meeting.

### **7 RESPONDING TO SCRUTINY RECOMMENDATIONS**

7.1 Overview and Scrutiny may make recommendations to the Cabinet or any other public service providers. Recommendations to Cabinet shall be introduced by either the Chair of the Overview and Scrutiny Committee or the relevant Scrutiny Panel. They shall be responded to by the appropriate body within two months of their receipt. Responses shall be circulated to Members of the relevant scrutiny body before the Cabinet meeting to approve the response. Where recommendations from Overview and Scrutiny are not accepted by Cabinet, an explanation will be given of the reasons why. Where a response is requested from NHS funded bodies, the response shall be made within 28 days.

### **8 THE OVERVIEW AND SCRUTINY WORK PROGRAMME**

8.1 Overview and Scrutiny will agree its own annual work programme and keep it under review over the course of a municipal year. It will have regard to corporate and strategic priorities and consult widely to inform the focus for scrutiny activity.

8.2 The Council's Democratic Services Team shall coordinate the development of the work programme for Overview and Scrutiny, covering the work of the Committee and of the Scrutiny Panels. The development process for this should include engagement with Members, Cabinet, senior officers, partners, voluntary and community organisations and residents, with specific opportunities provided for each of them to submit suggestions. Whilst safeguarding the independence of the scrutiny process, the Committee shall have regard to all such suggestions when they decide their work programme.

8.3 Decision makers should seek to involve scrutiny in the development of new policy at an early stage when proposals are being developed so that account can be taken of it when developing its work plan.

8.4 As part of the development of the work programme, the Committee will determine how external partners and public service providers shall be scrutinised and engage with key personnel to build the necessary relationships and awareness for this purpose.

8.5 The scrutiny work programme should reflect a balance of activities, including:

- Holding the Executive to account;
- Policy review and development;
- Performance management;
- External scrutiny; and
- Public and community engagement.

8.6 The work programme should;

- Reflect local needs and priorities. Issues should be of community concern as well as Borough Plan and Medium Term Financial Strategy priorities;
- Prioritise issues that have most impact or benefit to residents;
- Involve local stakeholders; and
- Be flexible enough to respond to new or urgent issues.

8.7 Scrutiny work will be carried out in a variety of ways and use whatever format that is best suited to the issue being considered. This can include a variety of "one-off" reports as well as in-depth scrutiny

review projects that provide opportunities to thoroughly investigate a topic and recommend improvements.

- 8.8 In deciding its work programme, the Committee shall be mindful of the need to achieve meaningful outcomes by ensuring that plans are deliverable within the timescale set and with the resources available.
- 8.9 A template shall be maintained and shared by the Democratic Services Team to provide criteria to assist with the preparation and updating of the work programme. The Team also will assist the Committee and its Panels in tracking their decisions and requesting updates on progress from time to time, following which the Chair and officer will consider whether such matters need to form an agenda item.
- 8.10 A template shall be maintained for the use of the Chairs and Officers of the OSC and Panels to assist the Cabinet and senior officers in understanding the purpose of scrutiny activity relating to specific topics and to justify requests for information or reports. Agenda planning meetings shall be arranged between Chairs and senior officers ahead of scheduled meetings to ensure clarity on any reports that are requested. A detailed scope, terms of reference and project plan shall also be prepared for each in-depth scrutiny review project prior to it starting. This shall include consideration of resources, timescale for completion and aspired outcomes.

## 9 BUDGET SCRUTINY

- 9.1 The Council's budget shall be scrutinised by both the Overview and Scrutiny Committee and each of the Scrutiny Panels. The role of the Committee shall be to scrutinise the overall budgetary position and direction of the Council and strategic issues relating to this, whilst each Scrutiny Panel will scrutinise areas that come within their terms of reference. Any individual areas of the budget that are not covered by the Panels shall be considered by the Committee.
- 9.2 A lead Committee member from the largest opposition group shall be responsible for chairing the Budget Scrutiny process and co-ordinating recommendations made by respective Scrutiny Panels and the Committee relating to the budget.
- 9.3 To allow effective scrutiny of the budget in advance of it formally being set, the following timescale is suggested:
- **Scrutiny Panel Meetings: May to November**  
The Overview and Scrutiny Committee will receive regular budget monitoring reports budget whilst each Scrutiny Panel shall monitor budgets within their respective areas. Between May and November, this shall involve scrutinising progress with the Medium Term Financial Strategy (MTFS) approved at the budget setting full Council meeting in February.
  - **Scrutiny Panel Meetings: December/January**  
Each Scrutiny Panel shall hold a meeting following the release of the December Cabinet report on the new MTFS. The Committee will also meet to consider proposals relating to any areas within the MTFS that are not covered by individual scrutiny panels. Each Panel and the Committee shall consider the proposals in this report for their respective areas, in addition to their budget scrutiny already carried out. Relevant Cabinet Members will be expected to attend these meetings to answer questions relating to proposals affecting their portfolios as well as senior service officers.

Scrutiny Panels and the Committee may also request that the Cabinet Member for Finance and/or senior officers attend these meetings to answer questions.

- **Overview and Scrutiny Committee Meeting: January**

The Committee will consider and make recommendations on the overall budgetary position and direction of the Council and the MTFs. Each Scrutiny Panel and the Committee shall also submit their final budget scrutiny report to the meeting for ratification, containing their recommendations/proposals in respect of the budget for the areas within their terms of reference.

- **Cabinet Meeting: February**

The recommendations from the Budget Scrutiny process that have been approved by the Committee shall be referred to the Cabinet. As part of the budget setting process, the Cabinet will clearly set out its response to the recommendations/proposals.

## 10 ACCESS TO INFORMATION

- 10.1 Legislation and the Council's own Standing Orders provide for all Members to have access to information based upon their membership of Committees and on a need to know basis.
- 10.2 For Overview and Scrutiny to be effective, it needs access to relevant information and in a timely manner. In particular, it is imperative that it has the information necessary to provide effective challenge about the provision, quality and resourcing of services. It has a legal right to information and this includes enhanced power to access exempt or confidential information. This is in addition to existing rights that Councillors have to access information.
- 10.3 Overview and Scrutiny Members need access to key information about the management of the Council, particularly on performance, management, funding and risk. Members should also be given the support necessary to ensure that they understand such information. In seeking this information, they should be mindful of the capacity of the Council to resource activity and the value and outcomes likely to be gained through it.
- 10.4 Overview and Scrutiny should not rely purely on those who are directly responsible for services for information and should seek to supplement the evidence at its disposal from within the Council from other sources, including service users, other residents and partners.
- 10.5 A template shall be maintained for the use of the Chairs and Officers of the OSC and Panels to explain the basis for the request for information and to detail the information that is required and the purpose to which it will be put. Requests will be responded to positively and in a timely manner. To ensure that the information provided is relevant, officers should ensure that they have a clear understanding of the reasons why information is needed by seeking clarification if necessary.
- 10.6 It is recognised that there may be rare occasions when it may be legitimate for information to be withheld and a written statement setting out the reasons for this will be provided to the OSC and its lead officer should this occur. Cabinet Members and senior officers will nevertheless seek to avoid refusing requests or limiting the information they provide. Before a decision exceptionally is made not to share information, serious consideration will be given to whether the information can instead be shared in closed session and the reason for this stated.
- 10.7 Where a Cabinet Member or senior officer determine that information requested by the OSC should be withheld, the OSC may refer the matter to the Monitoring Officer for adjudication if it wishes to

challenge the decision. In considering the matter, the Monitoring Officer should have regard to the legitimacy of Overview and Scrutiny, the reason(s) given for withholding the information and the value to the Council and residents of scrutiny activity on this matter.

### **11 TRANSPARENCY AND OPENNESS**

11.1 One of the key roles of Overview and Scrutiny is to promote transparency and openness. The presumption therefore will be that its meetings will take place in public and the need to hold closed sessions will be avoided. Meetings that take place as part of the evidence gathering process for in-depth scrutiny reviews will also take place in public.

11.2 However, it is accepted that there will be limited occasions when it will be appropriate to meet in closed session because of the nature of the business or the position of the witness giving evidence. Evidence gathering activities may therefore take place outside of formal meetings if necessary or appropriate.

11.3 The status of meetings in terms of public or closed sessions, recording and documentation should be made clear in advance to all individuals attending to provide evidence.

### **12 OFFICER ADVICE**

12.1 The Code of Conduct for Officers is clear that all Members are entitled to receive impartial advice and have access to information by virtue of their membership of committees and on a need-to-know basis.

12.2 There is therefore an expectation that all Senior Officers will provide impartial advice to scrutiny bodies as and when required. The Statutory Scrutiny Officer and the Monitoring Officer have particular roles in ensuring that timely, relevant and high quality advice is provided.

12.3 There is a specific statutory requirement for the Council to designate a Statutory Scrutiny Officer. The role of this officer is:

- To promote the role of the authority's overview and scrutiny committee(s);
- To provide support to the authority's overview and scrutiny function and to local Councillors;
- To provide guidance to members and officers of the council in relation to overview and scrutiny's functions.

12.4 The Statutory Scrutiny Officer cannot be the Council's Head of Paid Service, the Monitoring Officer or the Chief Finance Officer.

12.5 The Monitoring Officer has three principal responsibilities:

- To report on matters they believe are, or may be, illegal or amount of maladministration;
- To be responsible for the conduct of councillors and officers; and
- To be responsible for the operation, review and updating of the constitution.

12.6 Where there are disagreements about Overview and Scrutiny's powers, role and remit, the role of the Statutory Scrutiny Officer will be to advocate on behalf of it and protect its independence. The role of the Monitoring Officer will be to adjudicate on such matters and, if need be, report to Full Council on any issues that may need addressing.

## **Protocol for Non - Voting Co-opted Members**

### **Introduction**

- 1.1 The primary purpose of establishing a protocol for the co-option of non statutory, non-voting scrutiny members is as follows:
- To set out how the appointment and role of non- voting scrutiny Panel members is taken forward.
- 1.2 Each Scrutiny panel is entitled to appoint up to three non-voting co-optees to assist scrutiny with its work. Non -voting co-optees are intended to bring an additional element of external challenge to the work of the scrutiny panels. By bringing a diverse spectrum of experience and adding a different perspective to many items, they are expected to add value to scrutiny by performing the following roles:
- To act as a non-party political voice for those who live and/or work in Haringey; and
  - To bring specialist knowledge and/or skills to the Overview and Scrutiny process and bring an element of external challenge by representing the public.
- 1.3 For the purposes of this protocol, the term ‘Co-opted members/Co-optees’ refers to Co-opted Non-statutory, Non-voting scrutiny members. Sections 2.4, 3, 4 and 5 of this protocol could also be applicable to Standards Committee which is also able to appoint up to 6 non-voting co-opted members as set out in the Constitution at Article 9 - paragraph 9.02.

## **2. Non - Voting Co-opted members**

- 2.1 Most members on Scrutiny Committees are elected members and voting co-opted members. Although provision is available for the appointment of up to three co-optees on for each Scrutiny Panel. The decision making on appointment of non – voting co-opted members should take place at the start of the Municipal year.
- 2.2 Non-voting Co-opted members will be an integral part of Scrutiny Panels and are able to contribute to questioning of witnesses and analysis of evidence. Scrutiny Panel chairs are advised to invite individuals who have specific and detailed knowledge of a particular issue to act as expert witnesses or independent external advisers instead of being applicable to the appointment process at section 5 below , as this will provide them with greater scope to contribute to evidence received by panels.
- 2.3 It is expected that appointed non-voting co-optees will:
- Attend formal meetings of the Panel, which are usually held in the evening.
  - Attend additional meetings and evidence gathering sessions such as site visits.
  - Prepare for meetings by reading the agenda papers and additional information to familiarise themselves with the issues being scrutinised.

- Prior to meetings consider questions they may wish to put to Cabinet Members, officers, and external witnesses.
- Help the Panel to make practical suggestions for improvements to services.
- Assist in the preparation of reports and the formulation of recommendations.
- Contribute to the development of the annual scrutiny work programme.
- Establish good relations with members, officers and other co-optees.
- Abide by the relevant sections of the Council's Constitution in terms of the rules and procedures for Overview and Scrutiny; and
- Keep abreast of key issues for the authority and bear these in mind when scrutinising services and making recommendations for improvement!

2.4 Non-voting co-opted member should also note the following:

- Co-optees on Scrutiny Panels will have no voting rights.
- Each co-opted member will usually be appointed for a period of 1 year by the Scrutiny panel at their first meeting of the Municipal year and their membership reviewed on an annual basis by the Scrutiny Panel.
- Employees and existing Councillors of Haringey Council are excluded from applying to be Co-optees.

### **3. Appointment process**

3.1 Primarily, Scrutiny will seek nominations from established community groups for Non -voting Co-optee positions. Where the panel identifies that a Non - voting Co-opted member maybe beneficial to the work of the Panel and its work programme for the coming municipal year, the Chair of Scrutiny and Panel Chair , supported with advice from Scrutiny Officers, will identify the appropriate community organisation to invite nominations for this role. The community groups will be known through established contact with the Council and through their existing contact with scrutiny members by participating in reviews.

3.2 Where the above is not possible and a particular experience/ expertise is required to assist the Panel for the duration of the municipal year, consideration can also be given to advertising the position on council's website and social media

3.3 Community organisations will be sent:

- Information on the role of overview and scrutiny non -voting co-opted members.
- Protocol for co-opted non-statutory non-voting members
- Information on the relevant Scrutiny Panel, the Scrutiny Work programme, and the skills and experience being sought to allow the community organisation to identify the appropriate individual to nominate.

3.4 Where the Panel is seeking particular expertise/ experience which is not available through contact with community organisations and the role is advertised, an application form will be sent to interested applicants. This will include a number of questions that have been devised by the Chair of Overview and Scrutiny and Scrutiny



Panel Chair and Scrutiny Officers which will draw out the experience, community involvement and expertise needed for participation in this role.

- 3.5 The Scrutiny Panel Chair, along relevant scrutiny officer will shortlist suitable candidates. This will include an assessment against the Scrutiny Work Plan , role in the community, and considering the criteria at section 1.1 above. Applicants will also be asked to attend a short interview and provide a reference.

#### **4. Term of office**

- 4.1 Non-voting Co-opted members will be appointed for the duration of the Municipal year and the Scrutiny Panel will annually renew their membership according to consideration of their work plan.
- 4.2 Any Non-voting Co-opted members shall be appointed at the first Scrutiny Panel meeting of each Municipal year. A report shall be made to this meeting that specifies how they will add value to the work of the Panel and in particular:
- 4.3 The specialist knowledge and/or skills that the proposed Co-optees will provide; and the basis on which they can represent the local community and articulate their concerns.
- 4.5 At the end of the local election year period of office, each Scrutiny Committee will ask the Co-opted members if they wish to continue. If they do want to continue, they will be subject to the appointment process outlined above.
- 4.6 Co-optees may terminate their membership by giving one month's notice to the Democratic and Scrutiny Team Manager.

#### **5. Code of Conduct**

- 5.1 All Co-optees, including non-voting co- opted members, are required to sign the council's code of conduct which sets out the standards of behaviour expected.
- 5.2 Co-optees must also sign a declaration of interest form identifying any interests which an individual may have which require recording. Advice will be provided on these requirements.
- 5.3 Induction, training, and ongoing support
- 5.4 Non-Co-optees will receive an individual induction following appointment and prior to attending their first scrutiny meeting.
- 5.5 The induction will involve meeting with the Chair of the panel they are joining and the scrutiny officer responsible for the Panel.
- 5.6 Non-voting Co-optees are voluntary positions and there is no allowance provision for this role.

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## APPENDIX D: Overview & Scrutiny Remits and Membership 2023/24

Scrutiny Body	Areas of Responsibility	Cabinet Links
<p><b>Overview &amp; Scrutiny Committee</b>            Cllr Matt White (Chair),            Cllr Pippa Connor (Vice Chair),            Cllr Makbule Gunes, Cllr Michelle Simmons-Safo, Cllr Alexandra Worrell</p> <p>The Committee shall also comprise statutory education representatives, who shall have voting rights solely on education matters</p>	<ul style="list-style-type: none"> <li>• Haringey Deal: coproduction, codesign, participation and local democracy</li> <li>• Communications</li> <li>• Corporate governance, performance, policy and strategy</li> <li>• External partnerships</li> </ul>	<p style="text-align: center;">Cllr Peray Ahmet            Leader of the Council</p>
	<ul style="list-style-type: none"> <li>• Council finances, budget and MTFS</li> <li>• Participatory budgeting</li> <li>• Income generation</li> <li>• Community wealth-building:               <ul style="list-style-type: none"> <li>○ Procurement: policies, frameworks and systems</li> <li>○ Insourcing policy and delivery</li> </ul> </li> <li>• Capital strategy</li> <li>• Council Tax policy</li> <li>• HR, staff wellbeing and corporate recruitment</li> <li>• IT and digital transformation</li> <li>• Data policy and reform</li> <li>• Information management</li> <li>• Elections</li> <li>• Emergency planning</li> </ul>	<p style="text-align: center;">Cllr Dana Carlin            Cabinet Member for Finance and Local Investment</p>

Scrutiny Body	Areas of Responsibility	Cabinet Links
	<ul style="list-style-type: none"> <li>• Active citizenship and VCS organisations</li> <li>• Parks</li> <li>• Leisure</li> </ul>	<p style="text-align: center;">Cllr Emily Arkell Cabinet Member for Culture, Communities &amp; Leisure</p>
	<ul style="list-style-type: none"> <li>• Jobs and skills</li> <li>• Local business</li> <li>• Town centres and high streets.</li> </ul>	<p style="text-align: center;">Cllr Ruth Gordon Council House Building, Placemaking and Local Economy</p>
	<ul style="list-style-type: none"> <li>• Social inclusion</li> <li>• Licensing and regulatory services</li> </ul>	<p style="text-align: center;">Cllr Adam Jogee Cabinet Member for Community Safety and Cohesion</p>
	<ul style="list-style-type: none"> <li>• Waste and fly-tipping</li> <li>• Customer services</li> </ul>	<p style="text-align: center;">Cllr Seema Chandwani Cabinet Member for Resident Services and Tackling Inequality</p>
	<p>Cross cutting, significant or high profile issues; Matters outside the remit of individual panels</p>	<p style="text-align: center;">To be determined according to issue</p>
<p><b>Adults &amp; Health Scrutiny Panel</b> Cllrs Connor (Chair), Brennan, Iyngkaran, Mason, O'Donovan, Opoku &amp; Peacock.</p> <p>Co-optees: Ali Amasyali &amp; Helena Kania.</p>	<ul style="list-style-type: none"> <li>• Adult social care</li> <li>• Violence Against Women and Girls (VAWG)</li> <li>• Mental health and wellbeing</li> <li>• Refugee and migrant wellbeing</li> <li>• Public Health</li> <li>• Safeguarding adults</li> </ul>	<p style="text-align: center;">Cllr Lucia das Neves Cabinet Member for Health, Social Care and Well-Being</p>

Scrutiny Body	Areas of Responsibility	Cabinet Links
	<ul style="list-style-type: none"> <li>• Transitions</li> </ul>	
<p><b>Children &amp; Young People Scrutiny Panel</b>  Cllrs Gunes (Chair), Abela, Adamou, Blake, Collett, Isilar-Gosling, Jameson.</p> <p>Co-optees: Amanda Bernard, Yvonne Denny, Venassa Holt &amp; Lourdes Keever.</p>	<ul style="list-style-type: none"> <li>• Adoption and fostering</li> <li>• Early help</li> <li>• Early years and childcare</li> <li>• Looked after children and care leavers</li> <li>• Unaccompanied minors</li> <li>• Safeguarding children</li> <li>• Schools and education</li> <li>• Services for children with disabilities and additional needs</li> <li>• 16-19 education</li> <li>• Youth services and youth justice</li> <li>• Transitions</li> </ul>	<p>Cllr Zena Brabazon  Cabinet Member for Children, Schools and Families</p>
<p><b>Climate, Community &amp; Culture Scrutiny Panel.</b>  Cllrs Simmons-Safo (Chair), Adamou, Adje, Culverwell, Dunstall, Diakides &amp; Isilar-Gosling.</p>	<ul style="list-style-type: none"> <li>• Climate Action Unit</li> <li>• Strategic Transport</li> <li>• Air pollution</li> <li>• Liveable Neighbourhoods</li> <li>• Trees and canopy cover</li> <li>• Coproduced green spaces</li> <li>• Local renewable energy</li> <li>• Sustainability and decarbonisation</li> </ul>	<p>Cllr Mike Hakata  Cabinet Member for Climate Action, Environment and Transport and Deputy Leader of the Council</p>
	<ul style="list-style-type: none"> <li>• Highways</li> <li>• Flooding</li> <li>• Local welfare</li> </ul>	<p>Cllr Seema Chandwani  Cabinet Member for Resident Services and Tackling Inequality</p>

Scrutiny Body	Areas of Responsibility	Cabinet Links
	<ul style="list-style-type: none"> <li>• Local food policy</li> <li>• Culture</li> <li>• Libraries</li> </ul>	<p style="text-align: center;">Cllr Emily Arkell Cabinet Member for Culture, Communities &amp; Leisure</p>
	<ul style="list-style-type: none"> <li>• Crime prevention</li> <li>• Safer streets</li> <li>• Community cohesion</li> </ul>	<p style="text-align: center;">Cllr Adam Jogee Cabinet Member for Community Safer &amp; Cohesion</p>
<p><b>Housing &amp; Regeneration Scrutiny Panel</b> Cllrs Worrell (Chair), Barnes, Bevan, Blake, Harrison-Mullane, Hymas &amp; Moyeed.</p>	<ul style="list-style-type: none"> <li>• Council housing</li> <li>• Housing associations</li> <li>• Private sector housing               <ul style="list-style-type: none"> <li>○ Private rented homes (inc. landlord licensing and enforcement)</li> <li>○ Empty Homes</li> </ul> </li> <li>• Housing needs</li> <li>• Homelessness and rough sleeping</li> <li>• Planning policy, framework and enforcement (inc. Local Plan)</li> </ul>	<p style="text-align: center;">Cllr Sarah Williams Cabinet Member for Housing Services, Private Renters and Planning</p>
	<ul style="list-style-type: none"> <li>• Housing Strategy and Development</li> <li>• Building high-quality new council homes</li> <li>• Renewing Council housing estates</li> <li>• Placemaking</li> <li>• Council property</li> </ul>	<p style="text-align: center;">Cllr Ruth Gordon Council House Building, Placemaking and Local Economy</p>
<p style="text-align: center;">If there is any overlap between the business of the Panels, it is the responsibility of the OSC to resolve the issue. Areas which are not covered by the 4 standing Scrutiny Panels shall be the responsibility of the main OSC.</p>		



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**Report for:** Adults & Health Scrutiny Panel

**Title:** Social Work Reform and Workforce

**Lead Officer:** Vicky Murphy – Service Director Adult Social Services

**Ward(s) affected:** All

**Report for Key/Non-Key Decision:** Non-Key Decision

### **1. Describe the issue under consideration**

Recent government reforms will have a significant impact on adult social services both now and in the future. We have seen further developments in the proposed amendments to the Mental Capacity Act and Mental Health Act. In addition to this the *People at the Heart of Care* reform set in place the new inspection regime for adult social services by CQC. The presentations provide an overview of the those changes and requirements of services moving forward. Additionally, we have included an overview of our work to date on our workforce strategy as we know that recruitment, retention, and development of staff will be a key theme for future inspections.

### **2. Recommendations**

For members to be cognisant of the new responsibilities for adult social services and work to date.

### **3. Reasons for decision**

This report is provided to the panel for information purposes to support their understanding of recent developments in adults social services.

### **4 Background information**

Further information on the areas of reform can be found below.

[www.gov.uk/government/publications/people-at-the-heart-of-care-adult-social-care-reform-white-paper/people-at-the-heart-of-care-adult-social-care-reform](http://www.gov.uk/government/publications/people-at-the-heart-of-care-adult-social-care-reform-white-paper/people-at-the-heart-of-care-adult-social-care-reform)  
<https://commonslibrary.parliament.uk/research-briefings/cbp-9341/>  
<https://www.gov.uk/government/publications/draft-mental-health-bill-2022>

**5. Statutory Officers comments (Chief Finance Officer (including procurement), Assistant Director of Corporate Governance, Equalities)**

**5.1 Finance**

Not required; as no decisions are requested, there are no financial implications arising from the report.

**5.2 Procurement**

Not required; as no decisions are requested, there are no procurement implications arising from the report.

**5.3 Legal**

Not required; as no decisions are requested, there are no legal implications arising from the report.

**5.4 Equality**

Not required; as no decisions are requested, there are no equalities implications arising from the report.

**6. Use of Appendices**

**Appendix A – Draft Workforce Strategy**

**Appendix B – Social Care Reform & Professional Sustainability**

**Appendix C – CQC Local Authority Assurance briefing**

# Adult Social Care Workforce Strategy

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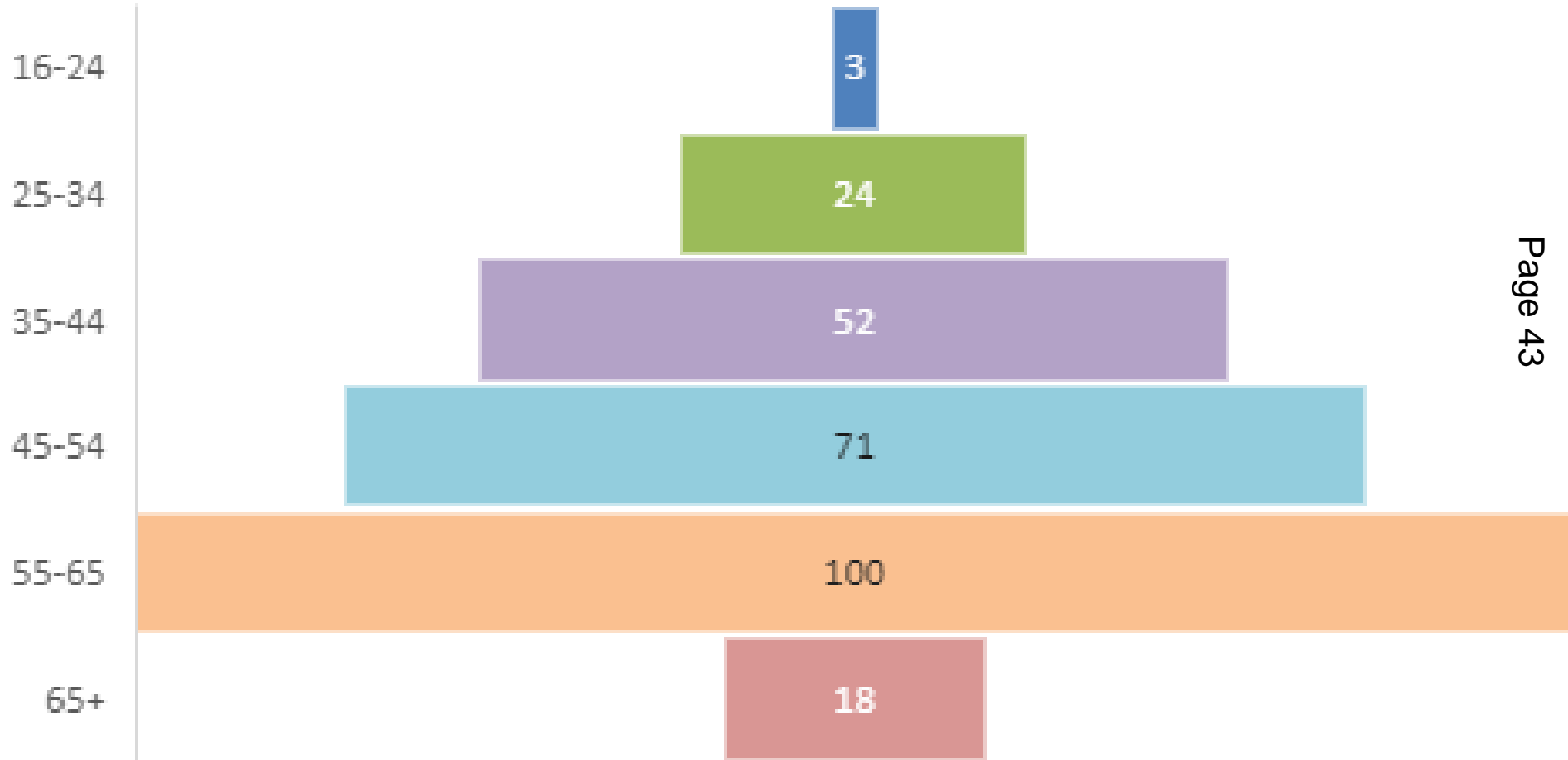
Adults, Health and Communities  
2023-2026

# Our Strategic Drivers



# Workforce Age

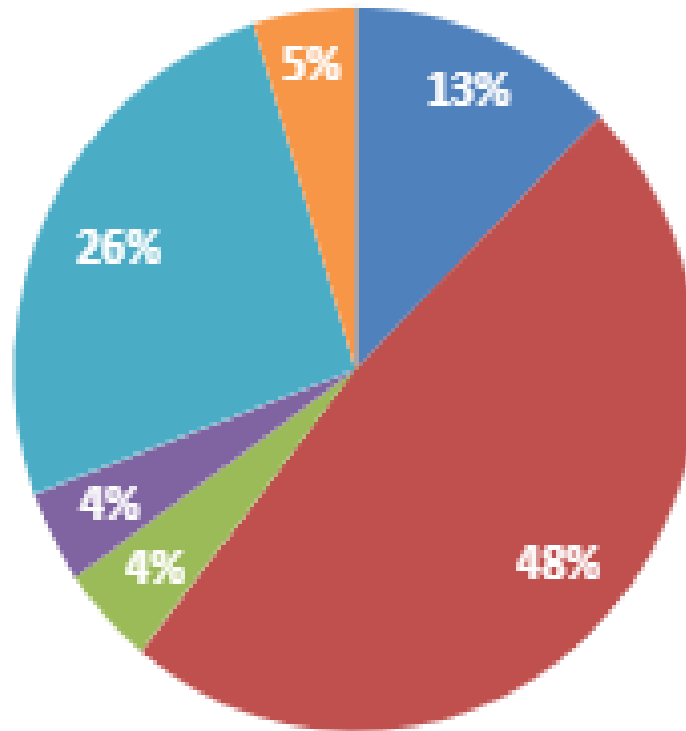
## Age Distribution across the service



# Workforce Ethnicity

## ETHNICITY ACROSS THE SERVICE

■ Asian ■ Black ■ Mixed ■ Other ■ White ■ Not Declared



# Our Workforce Priorities Arising

Workforce  
Design

Traineeships,  
and  
apprenticeships

Staff welfare  
and well being

Recruitment  
and Retention

Career  
Pathways

Leadership and  
Management

Page 45

Haringey  
Employer

Learning and  
Development

# Achievements so far

- Regular One Team Events
- Social Work Career Pathways
- Service Manager roles
- Development of Management Team



# Next Steps

- DMT – ambitions and goals session
- Adults ‘one team’ focus groups
- Use this to collaborate across Adults, Health and Communities and across Haringey partnership to identify common priorities and outcomes
- Workforce Delivery Plan finalised

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# Social Care Reforms & Professional Sustainability

Chris Atherton

Principal Social Worker & Head of Quality Assurance and Development



# Social Care Reform



# People at the Heart of Care

People at the Heart of Care followed on from the Health and Care Bill and the Build Back Better policy document.

- £5.4b committed to health and social care
- CQC Inspections for Adult Social Services
- Care CAP
- Increase collaboration amongst the NHS, local government, partners, and communities
- Greater focus on prevention



# Mental Health Reform

- Plans to tighten the admission criteria and raise the threshold for compulsory detention.
- Reduce the use of community treatment orders.
- Strengthen some of the statutory safeguards by giving more frequent access to the tribunal to review detention.
- Bolster support from family members and independent advocates.
- Enable patients to make advance choices about their future mental health care and treatment.
- Reduce the use of the Mental Health Act for persons with a learning disability and people with autism.



# Mental Capacity Act

- Mental Capacity Act was amended in 2019 which looked to replace the deprivation of liberty safeguards (DoLS) with the Liberty of Protection Safeguards (LPS).
- Changes meant expanding who would require LPS from DoLS, new responsibilities for children's and health, changes to the assessment and duration of any authorised deprivation.
- These changes have backlash due to the perceived reduction in rights for those being detained.
- The Government has decided to delay the implementation of the Liberty Protection Safeguards beyond the life of this Parliament.



# Professional Sustainability





# Professional Sustainability

- The challenge of professional recruitment and retention (social work and occupational therapy) is not just a local issue but one that we see nationally.
- The pool in which we are looking to pull workers from is shallow. This is further complicated by the competition from other London boroughs.
- Low vacancy rates ensures improved outcomes for residents, high levels of service delivery, embeds new models of practice and strengthens CQC compliance.
- We recognise the need to have a clear career pathway throughout adult services, providing all staff the opportunity to develop their skills, knowledge and opportunities.



# Social Work Officers/Occupational Therapy Officers

- We have reprofiled vacant social worker roles into social work officer posts.
- These roles will support the key functions of all teams across adult services delivering strengths-based, person centred outcomes to residents.
- Practitioners that demonstrate the required values, behaviours and outputs will have the opportunity to undertake a social work apprenticeship.
- We currently have a pilot of staff (9) from across the directorate who have stepped into these roles as secondments with permanent recruitment taking place this summer.
- We plan to provide the same program for Occupational Therapy posts as well as other roles across the directorate later this year.





# LOCAL AUTHORITY ASSURANCE

NEW CQC DUTY

# INTRODUCTION AND STRATEGIC CONTEXT FOR ASSURANCE

Provide independent assurance to the public of the quality of care in their area

How local care provided is improving outcomes for people, improving their experience of care, and reducing inequalities in their access to care.

This means looking at how services work together within an integrated system and how well systems are performing overall.

We should be aware that CQC will have looked at 6-12 months of our accessible data before arriving.

ADASS has been working with the LGA and Partners in Health & Care to support councils in preparing for assurance.

Support provided includes top tips for preparation, tools, logistics, and guidance on the final report.

# STATUTORY CONTEXT

The new duty falls under the Health & Care Act 2022.

The CQC have an independent duty to assess and review councils' delivery of their adult social care duties.

The Secretary of State for Health and Social Care has legal powers for statutory intervention. This could be where a council is failing or failed to deliver its duties.

For councils' assurance will focus on their discharge of duties under Part 1 of the care Act 2014

Interim Guidance was produced in February 2023, to support Local Authorities in preparation for the assurance process. The Guidance was approved by the Secretary of State for Health and Social Care as required by the Health and Care Act 2022.

The Guidance sets out high level framework and will be expanded and updated in collaboration with stakeholders as the CQC develop the model and process.

## WHAT DO WE ALREADY KNOW?

The Care Quality Commission (CQC) is an independent regulator for health and social care in England established in 2009.

They are an executive non-departmental public body of the Department of Health and Social Care United Kingdom.

Their role is to regulate and inspect health and social care providers in England.

Following an inspection, they produce a report that is published on their website along with ratings for that organisation.

Their rating system identifies 5 standards which the CQC form in to 5 key questions they look to answer for all organisations they inspect. Called Key Lines of Enquiry abbreviated as KLOE's.

Are they **safe**? Are they **effective**? Are they **caring**? Are they **responsive** to peoples needs?  
Are they **well-led**?

The CQC work within a context of *fundamentals of care*, the principles are; person centred care, complaints, safeguarding from abuse, consent, dignity, safety, food and drink, premises and equipment, complaints.

A context of *quality care* they call the 6 'C's of care; commitment, care, compassion, courage, competence, communication, and the 3 'C's' of *high-quality care* including; consistency continuity, and coordination.

A context of Core care values of which there are 8 including; individuality, independence, privacy, partnership, choice, dignity, respect and rights

## THE APPROACH – KEY COMPONENTS

The CQC will use their new single assessment framework to assess local authorities.

The framework is based on a set of quality statements based on people's experiences and the standards of care they expect.

A subset of the quality statements from the overall assessment framework will be used in assessments of local authorities, because local authorities are being assessed against a different set of statutory duties to that of registered providers.

The framework focuses on what matters to people who use local health and social care services and their families.

The term 'people's experiences' is used throughout the framework and is defined as *"a person's needs, expectations, lived experience and satisfaction with their care, support and treatment, including equity of experience, access to and transfers between services"*.

# THE FRAMEWORK



There are 9 quality statements across the four themes for local authorities, that begin with 'we'.



'We'...statements are what local authorities must commit to



There are a number of 'I' statements to help the understanding of what a good experience of care looks and feels like.



'I'...statements are what people expect of services and will be used to support the gathering and assessing of evidence under the People's Experience evidence category.



The 'I' and 'We' statements are taken from, making it real. A co-produced work by think local act personal, a guide on how to do personalised care.



# THE ASSESSMENT PROCESS

With the new duty, The CQC are looking to establish a starting point, a 'baseline' of completed initial assessments for all local authorities, this will inform the new assessment model as well as what the ongoing model will look like. This has been divided into 2 phases.

The first phase April 2023 to September 2023 - a pilot of 5 authorities. Ratings will be indicative. The 5 will be assessed against all 9 quality statements. The results will be published in the autumn. Opportunities for themed reporting at national level will be explored during this first 6 months.

The second phase September 2023 onwards - will aim to award ratings in this phase within 2 years for all authorities - involves formal assessment and will start in the autumn. There are approximately 152 LA to be assessed.

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# ASC RESPONSE TO THE ASSURANCE

- Preparing for the CQC's visit can feel daunting, but it is an opportunity that all of us can grasp to drive change. Not only is it an opportunity for us to recognise and celebrate the things we do well, but it's a chance to take a clear-eyed view at the things that need to be improved - and work out how to improve them.

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## THE FOUR THEMES IDENTIFIED FOR LOCAL AUTHORITIES

Information gathered under these themes will provide the evidence for the 5 CQC standards that will produce the ratings.

**1. How Local Authorities work with people** – *Assessing Needs. Supporting people to live healthier lives. Equity in experience and outcomes.*

**2. How Local Authorities provide support** – *Market Shaping. Commissioning. Workforce capacity and capability. Integration. Partnership working.*

**3. How Local Authorities ensure safety within the system** – *S42 Safeguarding enquiries. Reviews. Safe systems. Continuity of care.*

**4. Leadership** – *Governance, management and sustainability. Learning, improvement and innovation.*

# What will the CQC focus on? 'I' Statements

<b>Working with People:</b> assessing needs, care planning and review, arrangements for direct payments and charging, supporting people to live healthier lives, prevention, well-being, information and advice, understanding and removing inequalities in care and support, people's experiences and outcomes from care			<b>Providing Support:</b> market shaping, commissioning, workforce capacity and capability, integration and partnership working		Area of focus
<b>Assessing needs</b>	<b>Supporting people to live healthier lives</b>	<b>Equity in experience and outcomes</b>	<b>Care provision, integration and continuity</b>	<b>Partnerships and communities</b>	
I have care and support that is coordinated, and everyone works well together and with me. I have care and support that enables me to live as I want to, seeing me as a unique person with skills, strengths and goals.	I can get information and advice about my health, care and support and how I can be as well as possible - physically, mentally and emotionally.	I can get information and advice about my health, care and support and how I can be as well as possible - physically, mentally and emotionally.	I have care and support that is coordinated, and everyone works well together and with me.	Leaders work proactively to support staff and collaborate with partners to deliver safe, integrated, person-centred and sustainable care and to reduce inequalities	Quality statements
<b>Ensuring Safety:</b> section 42 safeguarding enquiries, reviews, safe systems, continuity of care.			<b>Leadership:</b> strategic planning, learning, improvement, innovation, governance, management, sustainability		
<b>Safe systems, pathways and transitions</b>	<b>Safeguarding</b>		<b>Governance, management and sustainability</b>	<b>Learning, improvement and innovation</b>	
When I move between services, settings or areas, there is a plan for what happens next and who will do what, and all the practical arrangements are in place. I feel safe and am supported to understand and manage any risks.	I feel safe and am supported to understand and manage any risks.		No 'I' Statements	No 'I' statements	Quality statements

# What will the CQC focus on? 'We' Statements

<b>Working with People:</b> assessing needs, care planning and review, arrangements for direct payments and charging, supporting people to live healthier lives, prevention, well-being, information and advice, understanding and removing inequalities in care and support, people's experiences and outcomes from care			<b>Providing Support:</b> market shaping, commissioning, workforce capacity and capability, integration and partnership working		Area of focus
<b>Assessing needs</b>	<b>Supporting people to live healthier lives</b>	<b>Equity in experience and outcomes</b>	<b>Care provision, integration and continuity</b>	<b>Partnerships and communities</b>	
<p>We maximise the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.</p>	<p>We support people to manage their health &amp; wellbeing so they can maximise their independence, choice and control. We support them to live healthier lives &amp; where possible, reduce future needs for care &amp; support.</p>	<p>We actively seek out and listen to information about people who are most likely to experience inequality in experience or outcomes. We tailor the care, support &amp; treatment in response to this.</p>	<p>We understand the diverse health and care needs of people and our local communities, so care is joined-up, flexible and supports choice and continuity.</p>	<p>We understand our duty to collaborate and work in partnership, so our services work seamlessly for people. We share information and learning with partners and collaborate for improvement</p>	
<b>Ensuring Safety:</b> section 42 safeguarding enquiries, reviews, safe systems, continuity of care.			<b>Leadership:</b> strategic planning, learning, improvement, innovation, governance, management, sustainability		Area of focus
<b>Safe systems, pathways and transitions</b>	<b>Safeguarding</b>		<b>Governance, management and sustainability</b>	<b>Learning, improvement and innovation</b>	
<p>We work with people and our partners to establish and maintain safe systems of care, in which safety is managed, monitored and assured. We ensure continuity of care, including when people move between different services.</p>	<p>We work with people to understand what being safe means to them as well as with our partners on the best way to achieve this. We concentrate on improving people's lives while protecting their right to live in safety, free from bullying, harassment, abuse, discrimination, avoidable harm and neglect. We make sure we share concerns quickly and appropriately.</p>		<p>We have clear responsibilities, roles, systems of accountability and good governance. We use these to manage and deliver good quality, sustainable care, treatment and support. We act on the best information about risk, performance and outcomes, and we share this securely with others when appropriate.</p>	<p>We focus on continuous learning, innovation and improvement across our organisation and the local system. We encourage creative ways of delivering equality of experience, outcome and quality of life for people. We actively contribute to safe, effective practice and research</p>	

# EVIDENCE GATHERING

The aim will be to set up portals for local authorities to provide evidence to the CQC. Evidence will fall into three main categories, evidence the CQC **have**, evidence they **request** and evidence they **collect**. This could be on site or off site as is appropriate.

Evidence they have - e.g. returns/outcomes evidence available for all local authorities.

Evidence they request - e.g. specific policies, strategies, surveys, self assessment, peer reviews

Evidence they collect - e.g. peoples experiences through case tracking, focus groups, engagement with partners, conversations with staff and leaders.

CQC will work with national and local partners in gathering evidence e.g. Social Work England and other professional regulators, Healthwatch, Local Govt and Social Care Ombudsman, health and care providers, community groups

# RATING AND REPORTING

Once enough evidence for the quality statements are gathered assessment reports will be published.

There will be a short period between assessment and publication for organisations to undertake a factual accuracy check

Reports will be published on the CQC website, detailing the overall rating and the score for each statement

The narrative will include areas that require improvement, areas of strength and will report on the direction of travel of the local authority

The approach to scoring will be consistent with that of the assessments with providers CQC currently undertaken.

The evidence provided for each quality statement in the framework will be assigned a score as follows:

1 -Evidence shows significant shortfalls in the standard of care

2 -Evidence shows some shortfalls in the standard of care

3 -Evidence shows a good standard of care

4 -Evidence shows exceptional standard of care

The overall rating uses a four point scale of either; Outstanding. Good. Requires Improvement or Inadequate.

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## WHAT HAS HAPPENED SO FAR?

- Linked in with ADASS London wide group, which provides support for inspection readiness teams, tools and guidance around inspection process and readiness that LA's can use.
- Linked in with CQC website for updates and information webinars around the new framework and LA assurance.
- Tested the workforce regarding readiness, 60% felt in mid-range regarding preparedness for the coming assurance.
- Working with quality assurance team with on the ground staff sessions around 'What Good Looks Like'.
- Sessions with team managers in ASC to inform of the process, coach around role in the inspection and support of staff in their teams and service.
- Set up system to start recording good practice and challenges from services that can be used as evidence and support the report for inspectors
- Set up system to capture relevant documents for the assurance process
- ASC response to staff around the assurance





# KEY ACTIONS OVER NEXT 6 MONTHS



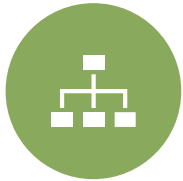
Brief key parties e.g. members, partners, service users, residents etc and establish feedback mechanisms



Contact internal partners finance, performance, HR so they are aware of their role



Ongoing sessions with ASC teams, information giving, coaching and response to questions raised



Set up ASC Inspection Readiness Group - role to oversee preparation of, responding too and delivery of assurance process.



Draw together ASC Self-Assessment - using information gathered from service Self-Assessments



Service areas to develop improvement plans following service Self-Assessment



Identify areas of good practice, areas for development or improvement areas in line with CQC LA themes and the framework



Undertake case audits to test quality of case files against the CQC framework

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## KEY ACTIONS OVER NEXT 6-8 MONTHS



Start developing information/introductory pack /slide for CQC inspectors



Start developing Haringey report for inspection visit.



Confirm logistics for any CQC visit, rooms, IT, contacts, access to systems, key staff



Clear plans around areas for development in line with CQC LA themes and the framework

## FURTHER READING

- Care Quality Commission – Interim guidance on our approach to local authority assessments – available on CQC website
- CQC Connect – latest podcasts – <https://linktr.ee/cqcconnect>
- Sector bulletins – need to sign up – <https://www.cqc.org.uk/news/newsletters-alerts/email-newsletter.cqc>
- think local act personal (tlap) – <https://www.thinklocalactpersonal.org.uk/makingitreal/about/>
- Know Our Community – <https://intranet/about-council/knowning-our-communities>

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**Report for:** Adults & Health Scrutiny Panel

**Title:** Commissioning Peer Review

**Lead Officer:** Jon Tomlinson; Senior Head of Commissioning, Brokerage and Quality Assurance; Adult Social Services, Haringey

**Ward(s) affected:** Not applicable

**Report for Key/Non-Key Decision:** Non-Key Decision (Noting and Recommendations only)

### 1. Describe the issue under consideration

This is an update to the Scrutiny Panel, to provide them with assurance that a Peer Review of the Adult Social Care Commissioning function took place in Sept – Oct 2022. The Peer Review Report and Recommendations were signed off via the Lead Member briefing at the end of April 2023. The Report identified areas for improvement and development, which are now in the early stages of implementation via a Commissioning Transformation Project. Jon Tomlinson is the SRO for the project, supported by Rebecca Cribb, Commissioning Service Manager and Alexandra Domingue, Programme Manager. There will be a short presentation to Panel on the Review and the current implementation of the Project thus far.

### 2. Recommendations

For Members to note the Peer Review and discuss at Panel. Members are asked to consider how they might wish to support implementation of parts of the Project focused on engagement with residents and communities in commissioning projects.

### 3. Reasons for decision

The Peer Review is provided to the Panel for information purposes, so they are aware of the direction of travel for the Commissioning Team and the projected outcomes of this project.

### 4 Background information

The Peer Review used a sound methodology received from the LGA, which was developed by the Public Sector Transformation Academy. The Review engaged Haringey staff from several departments and directorates, and members of health, the provider and voluntary sectors.

The Review highlighted areas for improvement and made recommendations across four areas:

- Workforce
- Residents and Community
- Foundations and Information
- Finance

The outcome of the Review has been to establish a Project Plan with a clear direction of travel for the Commissioning team and its role within the Adults, Health and Communities directorate, that will ensure a fit-for-future commissioning function for Haringey.

Once the Project is implemented, the Adult Social Services Commissioning team will be able to engage residents more in both review and development of their social care services. This outcome will support the Haringey Deal agenda, and the Council's wider strategic aims. The implementation of the Commissioning Transformation project will ensure that there is stronger contract management, quality assurance and co-produced services with residents, families, the NCL and health partners. The Commissioning team's transformation will ensure that the workforce has the strategic information to guide and support it, and the data and resource to ensure that commissioned services are achieving value-for-money.

Therefore, it is key that the recommendations of the Peer Review and their implementation are supported by the Council, so that the Commissioning function is fit-for-future for Haringey and its residents.

## **5. Statutory Officers comments (Chief Finance Officer (including procurement), Assistant Director of Corporate Governance, Equalities)**

### **5.1 Finance**

Implementation of the recommendations of the peer review will be met from within existing financial resources allocated to the service and as such will not create any new financial pressures.

### **5.2 Procurement**

Strategic Procurement note the contents of this report and confirm Strategic Procurement is engaging with the Peer Review Project Team to support the associated commissioning and procurement strategies to implement the recommendations from the Peer Review and value for money.

### **5.3 Legal**

Not required at this time, as there are no legal implications arising from the report.

**5.4 Equality**

Not required at this time. Equalities will be considered as part of the Workforce redesign.

**6. Use of Appendices**

**6.1 Appendix A:** Slides on the Peer Review

**Appendix B:** Report – Peer Review of Adult Social Services  
Commissioning

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# Peer Review: Adult Social Care Commissioning Team

Jon Tomlinson, Senior Head of Brokerage & QA

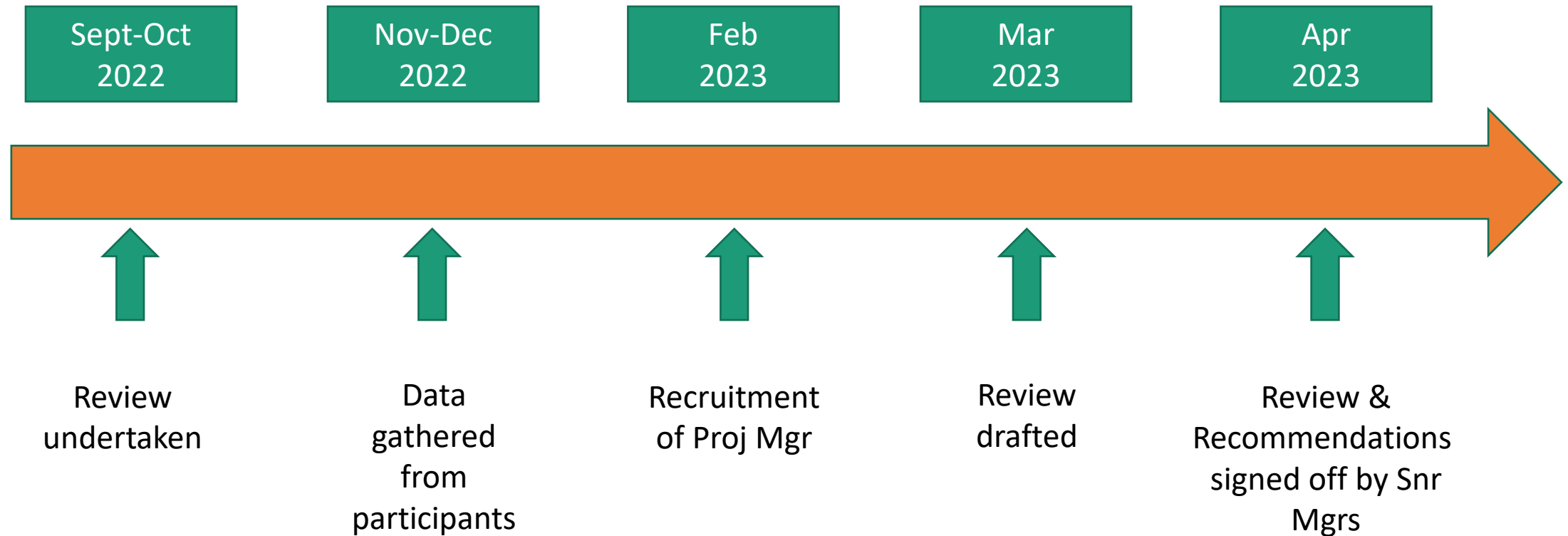
Rebecca Cribb, Service Manager, Commissioning

Alexandra Domingue, Interim Programme Manager, Commissioning

# The journey so far

- Review took place Sept-Oct 2022
- Used the Public Services Transformation Academy's draft Commissioning Playbook as the evaluation tool
- Added Section 9, Structure as part of the Review
- Involved people from teams across the Council (ASC, Finance, Procurement, HR), and in health and from Providers and the Voluntary Sector
- Draft of the Review and recommendations on next steps completed in Mar 2023; reviewed by Ben Taylor of PSTA
- Has been presented to DMT, SMT and the Lead Member (Cllr Das Neves)

# Timeline of Peer Review



The Commissioning Playbook - Aspects	Approach(es)	Avg Score / 100	High Score / 100
<p>Whole system design A place that is optimally set up for wellbeing, mutual support, and care</p>	<p>Place-based wellbeing; Design and creation of a place-based wellbeing system</p>	31	55
<p>Relationships and organisation across the system A place where everyone is focused on achieving shared goals, together</p>	<p>Leadership of place for whole system change; Creating a system that works</p>	37	50
<p>Capacity, capability, and confidence A place where people have access to what they need to live their lives well</p>	<p>Unlocking potential A place where everyone can thrive</p>	35	50
<p>User and outcome centred Everyone who engages with the care system is in charge of what they get, and their assessment of whether they got what they needed is the one that counts</p>	<p>Citizen-centred commissioning Putting people in charge of care</p>	30	45
<p>Information, insight, and innovation A commissioning approach that targets innovation and creativity</p>	<p>Values-based/disruptive commissioning; Changing the status quo</p>	39	44
<p>Managing the policy and compliance landscape Meeting and actively shaping policy requirements</p>	<p>Strategic procurement of services against needs; Services that meet demand</p>	40	65
<p>Commissioning process Technically excellent and highly professional</p>	<p>Contestability and market management Creating conditions for best value and outcomes within financial constraints</p>	36	60
<p>Models and tactics Design of delivery models that are fit for purpose, effective, and sometimes innovative</p>	<p>Delivery model design Effective delivery models enabling effective practice</p>	35	55

# Key Messages

**Strategy, Direction and Data:** Better strategic direction and reliable data to apply through commissioning cycle is needed

**Communications:** There's a need to improve communication by the commissioning team with residents and their families who use statutory Adult Social Care

**Opportunities:** To develop strengthened commissioning relationships, co-production and innovation

**Strengths:** Risk appetite, innovation and co-commissioning with other London Boroughs in the NCL

# Progress through the Models



Progress through models

	Model	Approach
1st	Models and tactics Design of delivery models that are fit for purpose, effective, and sometimes innovative	Delivery model design Effective delivery models enabling effective practice
2nd	Commissioning process Technically excellent and highly professional	Contestability and market management Creating conditions for best value and outcomes within financial constraints
3rd	Managing the policy and compliance landscape Meeting and actively shaping policy requirements	Strategic procurement of services against needs Services that meet demand
4th	Information, insight, and innovation A commissioning approach that targets innovation and creativity	Values-based/disruptive commissioning Changing the status quo
5th	User and outcome centred Everyone who engages with the care system is in charge of what they get, and their assessment of whether they got what they needed is the one that counts	Citizen-centred commissioning Putting people in charge of care

# The Recommendations

Consistent **engagement** with the community to co-produce services across the entire commissioning cycle

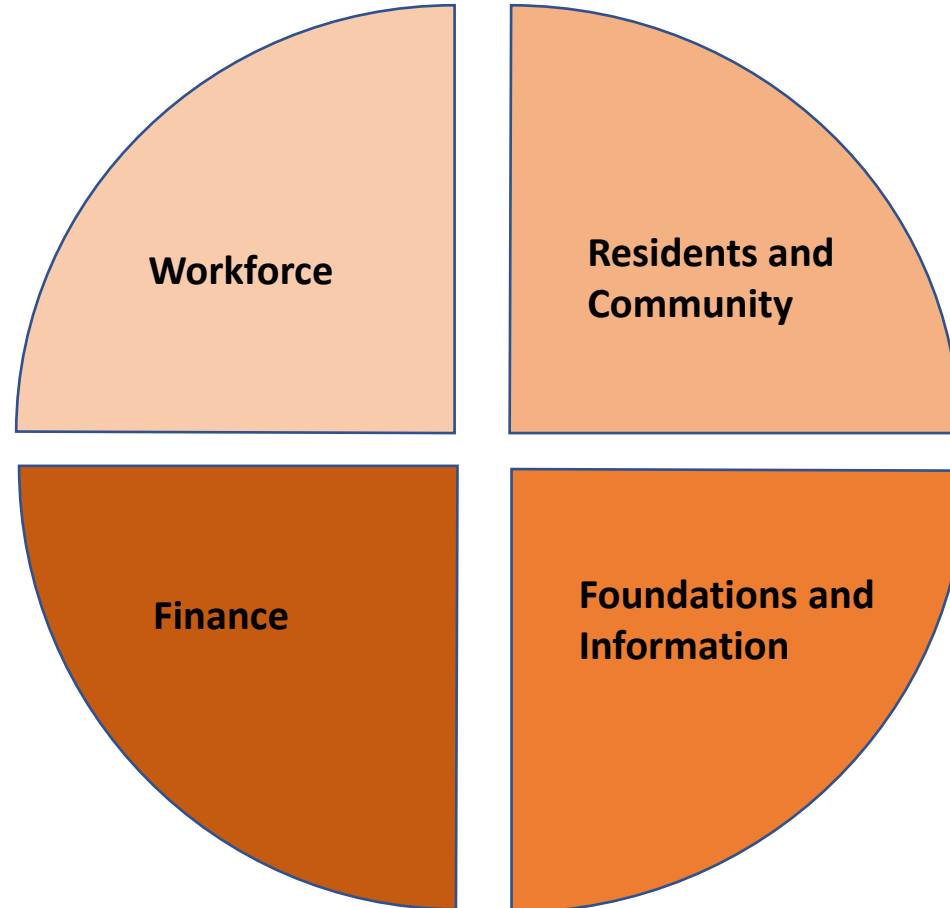
**Foundations and Information** to inform commissioning and support the wider Council

**Support from other areas** of the Council to deliver the above (e.g. Finance, Procurement and Human Resources)

# Project Plan – Balanced Scorecard approach

Provide professional development opportunities to the Workforce – commissioning and wider teams

Ensure resources to support the community's statutory needs are within budget



Increase co-production and co-design of services  
Increase engagement in commissioning cycle activities (Plan, Do, Review)

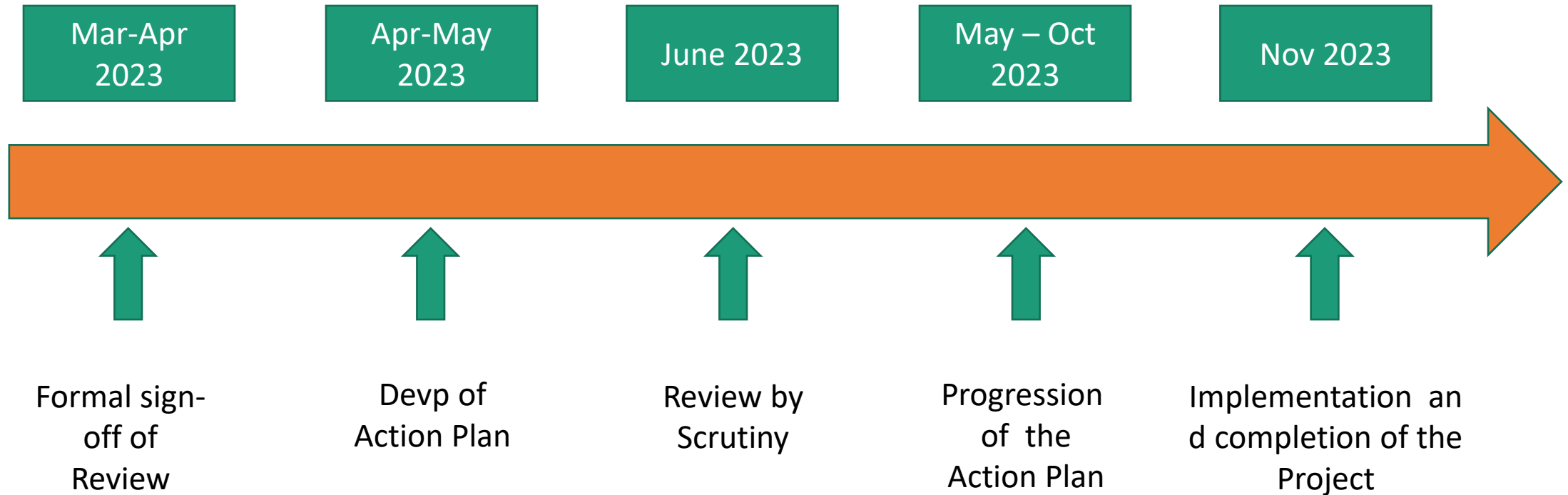
Ensure strategic direction and documents to support it are produced, aligned and embedded.



# What will it look like in 6 months?

- Engaging with the public regularly to get their views and shape what happens via the Commissioning Co-Production Board
- Planned work and strategic goals being worked towards in the Commissioning team, alongside managing the unexpected work from time to time
- Commissioning cycle embedded across Haringey
- Contributing towards achieving the Haringey Deal
- Identifying and implementing value-for-money opportunities
- CQC inspection-ready (or more-ready)!

# Timeline of Project



# Peer Review of Adult Social Services Commissioning

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## 1 EXECUTIVE SUMMARY

- 1.1. Following the transfer of the commissioning function into the Adult social services division in June 2022, the Operational Management Team (OMT) took the decision to review the wider functionality of the team. The OMT were keen to ensure that the role of the team was understood more widely and that commissioning was properly embedded within Adult Social Services, to achieve effective outcomes for those residents and families that required a service.
- 1.2. Although the team is referred to as commissioning, it is also known by many as brokerage and the Head of Service (HoS) has 'brokerage' rather than commissioning in their job title. The team that the HoS manages covers the following areas:
  - Quality Assurance
  - Adults Brokerage
  - Brokerage Payments
  - Direct Payments, Appointeeship and Court of Protection
  - Advice & Financial Assessments
- 1.3. In addition to the areas above, structure, functionality and governance arrangements relating to both joint and operational commissioning were reviewed as they would need to be robust given the financial challenges and emerging 'new' partnership arrangements being shaped following the establishment of the Integrated Care System approach with the NHS. Also, there was a need to understand other commissioning activity taking place within Haringey particularly around early intervention, prevention and place. However, references to "commissioning" within this document, unless otherwise stated, are specifically referencing the Adult Social Services commissioning team, with its QA, brokerage and other functions, rather than making comments about the other commissioning functions (prevention, place etc).
- 1.4. It is clear that the OMT are keen to enable commissioning to establish itself as a key driver for transformation and to play its role in ensuring that Haringey's adult social services are some of the best locally, regionally and nationally. A key message echoed by OMT throughout the review was that residents were the main focus for everything that is done by the directorate and that they should have a strong voice in shaping services – which must include how they're commissioned. It was also equally clear that OMT valued the work of the team and that individual contributions were highly regarded.
- 1.5. A number of themes emerged during the review which were fairly consistent across the 9 areas of enquiry:

- Team members were seen widely by key stakeholders as hard working, helpful, caring and committed to doing a good job supporting the residents of Haringey.
- Other foundation blocks, if not always immediately obvious, were in place to build an effective, high performing set of functions, such as good people, relationships and policy documents.
- Further clarity of role, function, process and managerial arrangements would enable better working between teams and individuals, leading to significantly improved outcomes.
- Some resources were not immediately available or understood and need to be put in place, such as vision and strategic direction
- Staff noted pockets of great, innovative work such as the Inequalities Fund and the Community Chest that they've undertaken
- Staff noted that there is a lack of consistency in delivering joined-up working with health, providers and the VCS in order to deliver commissioning ambitions for Haringey
- Staff indicated that commissioning work has not yet brought consistency within the HBP structure, and joint-commissioning arrangements are not always delivering clear outcomes for the social care elements of the joint arrangements
- Adequate resourcing to enable the team to meet the expectations of an effective modern function would need to be put in place.
- The transfer of the team into Adult social services provided a real opportunity to strengthen the directorate's service offer to residents, by properly integrating commissioning and using all the levers, relationships and access to resources that it provides.

1.6. To ensure that the emerging vision and ambition of the Council, directorate and OMT can be achieved, this review highlights some key recommendations that need to be implemented. Although there are some helpful building blocks in place, there are some important gaps that need to be addressed.

1.7. For example, the transfer of the function into Adult social services appears to have been undertaken without extensive review or consideration and at the time (June 2022) as staffing changes occurred, pragmatic decisions were taken. Prior to the transfer, arrangements around commissioning (and other functionality) appear to have evolved rather than to have been planned and so any existing gaps in role, function, process, governance or resources were not properly addressed.

1.8. There are also some foundational resources that are lacking within the Adult Social Service Commissioning team which would provide support to not only the commissioning function, but also to the teams with which it engages. These include:

- An overall commissioning strategy
- A clear vision about strategic commissioning across all areas in which it works
- Leadership to support the team and its functions at all levels of the organisation
- A contracts register

1.9. The Peer Review highlighted that an alignment of staff and teams within a clear commissioning process, that allows for strategic development of community support and resources is lacking, and this is due to under-resourcing of the strategic commissioning function and the inevitable fire-fighting that has developed as a result.

1.10. Recommendations therefore propose putting in place sound foundational strategic information and direction; and support to staff to develop and engage in a commissioning process that stimulates and supports innovative practice for the benefit of residents.

## 2 Process

2.1. The process followed through this supported self-assessment was one that has been developed in partnership between the Local Government Association (CHIP program), Commissioning Academy and the Public Service Transformation Academy. Although still to be launched formally, it was agreed that London Borough of Haringey (LBH) would use the process to test its applicability and effectiveness before further national roll out.

2.2. The tool was seen as offering LBH social care commissioners the opportunity to strategically assess the constraints and enablers that apply to the Council to:

- Better Understand the relevant factors at play that constrain and enable effective adult social services commissioning
- Create a commissioning development plan
- Select a strategic approach that suits the place

2.3. As part of the process, LBH ASC commissioning was assessed against the 8 aspects of commissioning outlined in the material provided. Questions under the 8 aspects enabled LBH to ascertain a position about where they stood in relation to what a high-scoring Council looks like (and what a lower-scoring Council looks like). Each of the 8 aspects were scored out of 100 and this helped establish the commissioning development plan.

2.4. The process of assessment also helped identify which factors most enable and constrain – what shapes the context and room for manoeuvre, and strengths that could be

leveraged. In order to support the review further, a 9<sup>th</sup> area – ‘structure’ was added, and review of the wider structure of commissioning functions across Adult Social Service and its joint-commissioning arrangements has continued since its launch via the Peer Review.

2.5. Therefore the 9 aspects used for the review were:

- **Whole system design** – how close are we to being able to work as one place and shape a whole health and care system or better still a wellbeing system?
- **Relationships and organization across the system** – how do the critical relationships, including incentives and funding streams, work at present and what could change to help outcomes improve?
- **Capacity, capability and confidence** – are we helping to shape and set up the provision from all sources (this includes market, social procurement, VCSE, asset-based work, workforce etc.) that helps need to be met and people to achieve their day-to-day purposes in life?
- **User and outcome centred** – are citizens in charge of their own care, are we measuring our success by whether they say their needs are met?
- **Information, insight and innovation** – the role of innovation, disruption and experimentation in changing the system and the role and power of commissioners.
- **Managing the policy and compliance landscape** – are we actively interpreting, shaping and influencing the core enablers and constraints of the legal and policy framework that we have to operate within?
- **Commissioning process** – is our commissioning process and practice well developed as a mechanism- competition, collaboration commercials, clarity of contracting? Are we using this for incremental improvement as well as new approaches?
- **Models and tactics** – are we paying attention to the way in which services are structured and delivered? Service design, practice, workforce, technology, innovation, aggregation, joining up, reducing waste and failure and improving residents' journeys?
- **Structure** - do we have adequate resources and have we configured the commissioning structure (in Adult Social Service and across other functions and joint-commissioning arrangements) to ensure that it is fit for purpose to help deliver a modern commissioning service?

2.6. Each of the aspects had a set of fixed questions designed to assess the effectiveness of commissioning in that aspect, and to score and establish the areas that were well developed and those that required improvement and would form part of a commissioning development plan. The in-office phase of the assessment was undertaken over a 3-day period and was led by senior managers from OMT and other senior colleagues from across other functions within LBH and the ICS. Participants in the self-assessment included participants from the following areas:

- Adult Social Service Operations
- Finance, Audit & Risk
- Procurement
- Commissioning, including Prevention and Joint-Commissioning and Place-Based
- Human Resources
- Health (ICS)
- VCS organisations
- Local providers of social care services

2.7. A large number of face-to-face, MS Teams and telephone interviews were undertaken both individually and in small groups. These interviews were conducted using a number of pre-set questions designed to help assess the position of commissioning in that particular domain. The interview feedback together with evidence compiled through Haringey documentation and NCL comparators (where available), was used to inform the scoring for each aspect. The scoring approach is set out below:

**Score of 0-24 Poor** (significant risk) – The peer review process has identified failures that pose significant risk to the system, these will need to be given high priority in the commissioning development plan. (red RAG rating).

**Score of 25-49 Fair** (risks – improvement required) The peer review process has identified risks to the system in place and improvement is required and will need to be addressed in the in the commissioning action plan but with a lower priority than red rag rated issues. (amber RAG rating – higher level risk).

**Score of 50-74 Good** (shortfalls identified to be addressed) The peer review process has identified no immediate risk is posed to the system in place, however several shortfalls will need to be addressed in the commissioning action plan with a lower priority. (light green RAG rating – lower-level risk).

**Score of 75-100 Excellent** (no action required) The peer review process has identified that very good/excellent practice and systems are in place and that no risk has been identified in the process (dark green RAG rating – low risk).

2.8. Analysis of themed comments linked to the areas of Residents and Community; Foundations and Information; and Finance are attached in Appendix I. Scoring of the 8 aspects reviewed via the Public Service Transformation Academy (PSTA) format is attached in Appendix II.

2.9. A copy of this report has been shared with Benjamin Taylor of the PSTA. Based on the results of the self-assessment marking, he has suggested that our approach develops through the Models as set out in Table 1.



Table 1:

<b>Model:</b>	<b>Models and tactics</b> Design of delivery models that are fit for purpose, effective, and sometimes innovative	<b>Approach:</b>	<b>Delivery model design</b> Effective delivery models enabling effective practice
<b>Model:</b>	<b>Commissioning process</b> Technically excellent and highly professional	<b>Approach:</b>	<b>Contestability and market management</b> Creating conditions for best value and outcomes within financial constraints
<b>Model:</b>	<b>Managing the policy and compliance landscape</b> Meeting and actively shaping policy requirements	<b>Approach:</b>	<b>Strategic procurement of services against needs</b> Services that meet demand
<b>Model:</b>	<b>Information, insight, and innovation</b> A commissioning approach that targets innovation and creativity	<b>Approach:</b>	<b>Values-based/disruptive commissioning</b> Changing the status quo
<b>Model:</b>	<b>User and outcome centred</b> Everyone who engages with the care system is in charge of what they get, and their assessment of whether they got what they needed is the one that counts	<b>Approach:</b>	<b>Citizen-centred commissioning</b> Putting people in charge of care

2.10. Based on Taylor’s feedback, and the recommendations being proposed as a result of the findings of the Peer Review, we propose that the commissioning development plan is formulated on the basis that Haringey ultimately will work according to the Information, Insight and Innovation model. This model supports a values-based, disruptive commissioning approach, and once the foundational approaches of the first 3 commissioning models has been implemented, it will be within grasp.

2.11. Information, Insight and Innovation is proposed as the medium-term model based on the fact that it will work best with Haringey’s strengths, and will support the regulatory CQC framework because it:

- Advocates a values-based approach which might appeal to staff who seem truly caring, but presently frustrated
- Would harness innovation and learning, and there are already pockets of this happening, but this approach would favour championing these examples
- Favours an approach based on co-production and co-commissioning that may appeal to many who are committed to delivering good outcomes for residents,

and is fundamental to the values of the CQC assessment framework for Local Authorities

- Requires a strategic options appraisal and commissioner capacity and capability
- Requires the ability to learn from practice and the previous models/systems that will be implemented (and senior-level buy-in)

2.12. This sequenced approach to implementation of the commissioning models is recommended, because it will support development of the team's current strengths, such as working within a values-base, but it also requires in-depth understanding of needs and strategic direction.

2.13. It insists upon co-production at all levels of the commissioning cycle, and encourages innovation. It is consistent with Haringey's newly launched values and would most obviously link well to them. It would need to be underpinned by development of the foundations of strategic direction in the recommendations below.

### 3 Key Messages

3.1. There were many positives to take from the comments and reflections of colleagues during the self-assessment. Many felt that innovation was supported; that there were examples of excellence and joint-working with the other NCL local authorities, NHS, VCS and Operational colleagues, for example. However, there were also areas that were a source of frustration to staff, and these along with the strengths of Haringey that were identified through the process, are summarised below.

#### 3.2. Workforce

##### 3.2.1. Internal Workforce

3.2.1.1. Working feels very silo-ed to people and reactionary internally.

3.2.1.2. Professional development needs were identified by members of the team. It was acknowledged however that there had been improvements to the commissioning team in recent years, but there is more to do.

3.2.1.3. One highlight that was noted was the effective joint-working relationships between Haringey and its other North Central London commissioners via the NCL ASC Programme. This group of commissioners

meet at least monthly, to address shared challenges in partnership and to promote a strong local authority presence within North London's Integrated Care System (ICS).

- 3.2.1.4. A core focus of the programme is to support the 5 Councils with market shaping and market management. This has focused on supporting each of the councils to understand and address shared challenges around the cost, quality and sufficiency of services in bedded-care markets, and has in recent months expanded into areas covering learning disabilities, extra-care housing and supported living.
- 3.2.1.5. The joint-commissioning function between health and social care, has noted that it has little understanding of the governance structures in Adult Social Services.
- 3.2.1.6. The reporting structure of the joint commissioning team means that Adult Social Services' commissioning managers have no regular management input with the team. There is little engagement between the joint commissioning team with the Adult Social Services commissioning function, which is resulting in a gap of commissioning activity that addresses the needs of the Adult Social Services and health directorate.
- 3.2.1.7. The wider review indicated that staff are committed to doing things well for Haringey residents and want the time to get them and providers involved in what they do. Staff across the Council and its partners have a good set of values which is why in part they feel frustrated by their working situations (where they can't do things to the best of their capabilities).
- 3.2.1.8. There are several examples of work of which staff are proud, and they'd like to see these rolled out wider (e.g. work with providers during Covid; work with health colleagues in OP services etc). However, it is also clear that work across different commissioning functions lacks aligned strategy and direction, resulting in siloed working habits and reactive rather than proactive approaches to the needs of Haringey's population.
- 3.2.1.9. Commissioning colleagues have a personal frustration that they do not have time for more strategic projects. Procurement colleagues are not always kept apprised of new hires, so they cannot give inductions consistently. Finance colleagues are dissatisfied that processes are protracted and are not delivering the savings required to keep the Council in budget. Operational social services colleagues are hampered by joint commissioning arrangements not meeting their statutory obligations, and local commissioning support not

having the resource to strategically address operational requirements.

- 3.2.1.10. Health colleagues, currently transitioning to their ICS arrangements, are facing challenges to maintain joint-working arrangements both from the perspective of not being clear of which social care team is responsible for what, and managing their own internal structural changes.
  - 3.2.1.11. All of these working situations lead to miscommunications and difficult working environments.
  - 3.2.1.12. There are examples of innovative, joined-up working, but also of a lot of silo-ed working, and a lack of understanding of each other's departments and roles is also prevalent. Improvement in communication was suggested as an action. Though it was noted that the structure and staff roles could be better defined and aligned to the work required, it was felt that as there's no clear vision and strategy this is going to be difficult to achieve until it is in place.
  - 3.2.1.13. It was acknowledged that the Adult Social Services commissioning team was not part of a previous transformation exercise and may have missed the benefits of aligning with the rest of the organisation, and that it might benefit now from some workforce development support that human resources would be willing to discuss.
  - 3.2.1.14. Retention of staff who wish to grow with the organisation will be central to reducing the overwhelming workload and firefighting that many staff experience. In addition, a focus on improving communication by and between departments will help improve the experience of accessing services for Haringey residents.
- 3.2.2. External Workforce:**
- 3.2.2.1. Providers who were part of the self-assessment process fed back many positive comments about colleagues, and they tended to highlight individuals with whom they worked well and about whom they had positive feedback.
  - 3.2.2.2. However, Providers also noted struggles with some aspects of engaging with the Council and with their own workforce, around recruitment, retention and pay. Although not an explicit aim of this self-assessment, commissioning changes will need to consider the resources of the external workforce and its statutory role in managing the provider market as it seeks to meet the needs of the wider population.

### 3.3. Residents and Community

- 3.3.1. The views of residents and the community were not directly sought as part of the self-assessment process, so the findings expressed here will reflect on the extent to which staff and external colleagues thought the Council is responsive to the needs of Haringey's residents and social care clients.
- 3.3.2. Colleagues highlighted the fact that there's no clear commissioning strategy, or other strategies which internal/external colleagues could use as a roadmap for their work. They noted the lack of regular forums with providers, service users, or carers, which makes consultation and co-production challenging, though there are some networks and good contacts within the VCS. One group noted that the carers' database needs to be updated.
- 3.3.3. Providers noted that they have issues with dealing with practical things with the Council, like knowing whom to contact with particular queries; getting paid on time; understanding how they can work better with the Council and what the Council needs them to provide to meet the community's needs better. They stated that they're willing to work with the Council to help establish and deliver its priorities once published.
- 3.3.4. Work was undertaken post-Covid that highlighted the impact of Covid on the borough and the issues that came up for residents during this period, and this provides some context of the local needs, and can be built upon.
- 3.3.5. Staff noted pockets of great, innovative work such as the Inequalities Fund and the Community Chest, but would like to see consistent, joined-up working with health, providers and the VCS.
- 3.3.6. Staff would like to be able to build upon the pockets of innovation and good practice that they have seen and delivered. Innovation, joint-working and co-production will need to be part of any future commissioning development plan.

### 3.4. Foundations and Information:

- 3.4.1. Staff identified some areas that would improve their ability to commission effectively and strategically, rather than reactively and under time-pressure. While these areas were not identified as being non-compliant, it is worth considering the impact that these gaps might have under future inspection frameworks.
- 3.4.2. Strategic direction is not clear, and this is having an impact on staff understanding their roles and responsibilities in the larger context of place-based

commissioning, which would be a desirable long-term aim of Haringey.

- 3.4.3. Staff noted that a reliable and accurate contracts register needs to be developed, as the current one has over 2,000 contracts on it. Contracts that are not of a significant value are not held centrally by legal, but are dispersed throughout the local authority.
- 3.4.4. Colleagues have also noted that data is not easily accessible or reliable, and it needs to be captured in order to inform current and longer-term needs of the community. Though not explicitly noted in the self-assessment, current IT hardware, software and systems are not always helpful to staff in their work, and this will need to be considered within a commissioning development plan.
- 3.4.5. Although many participants in the self-assessment, including providers themselves, noted the positive relationships that they have with Haringey, regular provider forums and community engagement by different departments (commissioning, procurement, operations for example) is needed, to help providers understand the strategic intentions of the borough and be able to think about how they might help meet the local authority's needs.
- 3.4.6. Meaningful co-production and feedback from service users and carers was also identified as something that colleagues want to build into their day-to-day work but are finding difficult under the current pressures and circumstances.
- 3.4.7. Joint-commissioning arrangements, while providing pockets of innovation and support, are not consistently meeting the local social care needs of Haringey residents, and need review.
- 3.4.8. Feedback from colleagues indicated that local needs and providers are not well-understood, and residents are often placed out-of-borough if they need access to accommodation and support. It was also noted that the residential care market is not developed enough to meet local needs, for example, and that this needs to be addressed.
- 3.4.9. Regular opportunities for quality assurance were also highlighted as being a gap, due to resources. Quality Assurance currently has to be risk-based rather than a proactive and collaborative function.
- 3.4.10. Staff did highlight the benefits of the strong arrangements through the Haringey Borough Partnership that have allowed for progression in asset-based commissioning and strength-based practice. They also noted that innovation is supported (but not always with long-term funding), and that elected members and staff are willing to carry a degree of risk in order to try new things and make things

better.

3.4.11. In addition, the NCL ASC Programme of co-commissioning with other local authority partners have developed and implemented strategic and practical approaches to current needs, such as a consistent and fair approach to the annual inflationary uplift process to ensure a fair cost of care is paid to providers.

3.4.12. Continuation of this Programme will support this project's aims. These are all real strengths that can be leveraged.

### 3.5. Finance:

3.5.1. The financial landscape was not a predominant feature of the commissioning self-assessment, but it was present – it was acknowledged that financial pressures are having an impact on the pressures of the job, and that it is also putting pressure on procurement processes. The DPS used was highlighted as a constraint and a mechanism that is not working as well as it should.

3.5.2. Longer-term financial support for innovative projects was highlighted as a need, as it is difficult to encourage innovation with providers if the funding is not there beyond 12 to 18 months.

3.5.3. Colleagues representing finance noted their frustration at the lack of support for achieving even a 1% saving, which if applied across the entire Council would achieve budgetary targets.

3.5.4. Governance structures were also viewed as problematic, but it was difficult to ascertain if feedback was indicating that there's "too much" or "not enough" governance.

3.5.5. Overall, comments appear to indicate that governance starts too late, so that valuable conversations and advice from senior people can't happen until it's too close to a deadline, and then any required changes to a proposal delay the implementation of a service further.

## 4 Recommendations

4.1. The self-assessment process highlighted the following key messages:

- The need for better strategic direction and reliable data
- The opportunity to continue developing strengthened co-commissioning relationships, co-production and innovation.

4.2. The recommendations are as follows:

**4.2.1. Workforce:**

**4.2.2. It's proposed that Haringey implements the following priorities:**

- 4.2.2.1. Ensure that the internal workforce has the technological skills, knowledge and tools to do the job. This is about providing staff with basics like the right IT and systems and access to data to do their roles, and professional development opportunities (formal and informal) to develop in their roles.
- 4.2.2.2. Ensure the internal workforce is equipped to manage the needs of the Adult Social Services legislative and aspirational requirements of Haringey's population, working jointly with the ICB as needed.
- 4.2.2.3. Ensure that the employee journey leads to long-term retention of motivated staff
- 4.2.2.4. Support the development of the external workforce, so they are ready to deliver the current and future needs of Haringey residents

**4.3. Residents and Community**

**4.3.1. It was highlighted repeatedly that there is not consistent engagement, co-production and consultation of residents in Haringey, but there is a clear desire on the part of the workforce for this to improve and to have consistent contribution and engagement of the community. The following recommendations are proposed to improve this area:**

- 4.3.1.1. Engage the local community across all areas of the commissioning cycle, piloting smaller projects to leverage longer-term
- 4.3.1.2. Ensure prevention of need and provision of services meets the population's requirements through a well-understood and implemented commissioning cycle
- 4.3.1.3. Evaluate outcomes and satisfaction (separately) across several areas of work, internally and externally through pro-active Quality Assurance

**4.4. Foundations and Information**

**4.4.1. Haringey need to establish a baseline of data and develop strategic direction from it. This will involve creating a Commissioning Development Plan that will identify the information, data and strategies needed, and the resource required to put it in place. This foundation information will ensure that staff have reliable**



**frameworks from which to work and will result in an improvement of regulatory compliance, data quality, and a strategic direction being formalised and implemented. This will include, but is not limited to the following:**

- 4.4.1.1. Create a Commissioning Development Plan as a result of what the Self-Assessment identified that builds the foundational commissioning models towards the Information, Insight and Innovation model.
- 4.4.1.2. Improve the Governance pathway so that it is clearly understood by all and used to facilitate service delivery
- 4.4.1.3. Provide the necessary resources to create the baseline information needed (strategies, register, etc), as identified through the self-assessment process.
- 4.4.1.4. Draft strategies for commissioning as a whole, and specific areas as needed and identified through OMT. Ensure that this results in knowledge of needs of the local population being understood across the organisation. This will include, but is not limited to, the following actions:
  - 4.4.1.4.1. Update the Market Position Statement
  - 4.4.1.4.2. Update a comprehensive and accurate Contracts Register
  - 4.4.1.4.3. Evaluate relevant areas of Adult social services against the Borough Plan 2019-2023 and any successor documents and identify and address any gaps
  - 4.4.1.4.4. Update the Equalities Impact Assessment(s) across Adult Social Services, and cascade it for implementation across more specific projects as needed
  - 4.4.1.4.5. Develop and implement a Quality Assurance Framework for Adult social services, which will address compliance against the Health and Care Act 2022 and result in an action plan (inspection preparedness)

## **4.5. Finance**

- 4.5.1. Identify and implement cost savings where possible; consider in-sourcing, appropriate commercial approaches, reducing processing time
- 4.5.2. Develop an accountable, stable commissioning process that works with procurement and finance to deliver value-for-money on all Adult Social Services contracts.
- 4.5.3. Review current contracting mechanisms, such as the DPS, to see if it is working and modify arrangement as required

- 4.5.4. Identify other contracting options that can be leveraged going forwards
  - 4.5.5. Measure impact of spending locally (versus spending out-of-borough)
  - 4.5.6. Ensure local suppliers are ready to meet needs and engage in competitive bidding (market engagement, market development, training and support)
  - 4.5.7. Establish and cascade the financial markers / targets / budgets for this year and beyond, based on the corporately agreed budget
- 4.6. If a strategic direction can be agreed and implemented, then we are confident that the Council will be in a much stronger place to meet its current and future challenges for its residents.

## **5 Next Steps**

- 5.1. Sign-off of the Recommendations
- 5.2. Create a Commissioning Development Plan which will address issues related to workforce, residents and community, compliance/information and finance.
- 5.3. Put in place the resources needed to implement the Commissioning Development Plan

## Appendix I – Themed comments across the 9 aspects

### WORKFORCE

- We have some really good people with the skills we need.
- Staff are really approachable and helpful when called upon.
- People work really hard to support residents.
- The good staff are quickly overwhelmed by an increasing work load.
- Staff need to understand their roles and responsibilities and how they fit together across the commissioning cycle.
- We don't have commissioning managers, we have contract managers.
- People don't have the headspace or capacity to think and be more innovative.
- Procurement should be doing more networking and proactively bringing ideas in, sharing information and knowledge (see bullet above).
- Communication across the piece is an issue.
- Need to be on the front foot with the basics and proactive not reactive.
- People are hampered in their role by inefficient systems and processes but also by a lack of clear policies.
- The people are our greatest strength.
- We need round pegs in round holes.
- Some evidence of siloed working across whole system
- There is potential for real progress if learning was shared more widely and systematically across the whole system.
- Commissioning, procurement and contract management all play a key role in ensuring that we have successful outcomes and these need to be more closely aligned to ensure that we can achieve these.
- Accountability and responsibility is not always clear.
- We need to consider the wider care workforce and how to support it to help the Council deliver its priorities; recruitment within the care sector and also access to social work and clinical specialists to develop care workforce skills is needed.
- The vision and values of senior leadership is evident.
- A consistent approach to commissioning and behaviours across teams and specialisms, backed up by knowledge and understanding of best practice is needed.
- Changes to ICB and movement of responsibility and accountability unhelpful for joined-up working.

## RESIDENTS AND COMMUNITY

- We are not consistently engaging the community and the market, which means we are not consistently developing co-produced strategies, approaches and services for residents.
- We are not always aware of who are local providers are and what assets we can draw upon; we are not working consistently with the market to develop it
- We don't scope how we manage the needs of residents in several areas
- We need to focus on our ability to help people stay local
- We don't work with providers to develop the market and what meaningful activities are available.
- We could engage by developing forums and mechanisms for regular feedback
- For some residents, commissioning is a mystery and people don't understand how or what the process is or what is really involved. There is a lack of transparency.
- We need to improve communications with residents and the sector so that getting where we need to go is co-produced and there is buy-in and support.
- Sometimes, there is a disconnect between what commissioners think is happening and what is happening on the ground.
- There appears to be real disconnect in some of the ways of working. HRS and social care very confusing though this is moving forward.
- We need to learn from the pockets where co-production has happened really well and we need to learn from those areas.
- We need joint training plans (commissioning and Procurement) to explore innovation elsewhere and work through how these models might be applied locally.

## FOUNDATIONS AND INFORMATION

- Haringey's values have been published, and its vision and values need to be developed and widely shared internally and externally. This will give people a direction and behaviours to use as guides.
- We are lacking strategic documents and information across the Council, for both staff and residents. Strategies need to be co-produced with residents, family carers and the provider and VCS markets and other partners.
- There is a need to embed the commissioning cycle in all areas of the Council. For example, there's a lack of annual scoping or reflective practice regarding contracts (the "plan" and "review" elements of the commissioning cycle).
- Regarding market management, it's thought the Council isn't doing this as well as it could; staff don't understand each other's areas and it's not clear what areas of the market require input and development. We need a set of contracting and enabling tools and approaches.
- Quality assurance needs to be developed so it's clear how and to whom staff should share concerns about providers. A move away from risk-based assurance needs to be implemented, as risks change over time and may not be picked up.

- We need to develop the contract management function to serve residents and ultimately understand the value-for-money of what we do.
- We can build upon some good practice, such as the aging-well strategy, and how it has defined how to work with the aging population, partners and individuals to help older people stay fit and well.
- There's a lot of capacity within Haringey and a lot of people doing really progressive/supportive work in enabling people to self-manage.
- A big issue is around how pieces are connected and fit together; the strengths-based model may support pulling all of the parts together around a clear goal. Greater system-alignment is needed.
- Commissioning areas are too separate. We have to work closer together to ensure alignment and share what is working.
- There are good relationships but there's not a lot of joint working.
- Governance has a high threshold for decision reports leading to speed of process, but this needs to balance risk and follow guidelines.
- The basics of commissioning need to be in place to create a platform to innovate and increase partnership working.
- We need a partnership approach to bringing commissioning, operations and transformation strategy and plans together under the HBP structure to achieve consistency and economies of scale.

## **FINANCE**

- Funding challenges across the partnership make delivery challenging in several ways.
- Backlog of unresolved issues, unpaid bills could create a significant budget challenge.
- Stronger relationship between finance and commissioning would improve budget management and ensure major issues linked to the market are tackled in a more strategic way.
- Clarity about who holds what budget for commissioning activity would support any work on accountability, roles and responsibilities.
- A definitive contract register, agreed approach to contract monitoring and links to future commissioning activities/approaches would enable better use of resources.
- DPS does not always assure best value in the long run and a review of its success would be beneficial.
- An agreed strategic commissioning plan should enable LBH to match its financial resources to the strategic intent and ambition of the LA and where appropriate partners.
- Externally, there is a perceived disconnect between brokerage and finance which can be frustrating.

- **Payments to external providers are not always made in a timely fashion, putting a strain on service delivery.**
- **Short-term nature of funding undermining the stability of the system. For example, short timescales to spend means short cuts to solutions and makes co-production difficult. A long-term funding strategy is needed.**
- **Joint-work between commissioners, audit and procurement to agree a risk-based approach to securing services that supports innovation and satisfies management of risk for the organisation would be beneficial.**

## Appendix II – Self Assessment Scoring

### Self-assessment

Give your place an instinctive score on how you are doing in terms of each 8 aspects of commissioning, then revisit this after working through the questions and aspects /100

### Questions

Score your place on each question, but do not simply average your results – look at the overall pattern you are seeing.

### Factors in place that constrain or enable

Which of these factors most hold back your ability to work in this space? Which most support you? Think about both your level of understanding of the factors, and the factors themselves. The aspects that hold you back or enable you to work on this aspect of commissioning will be picked up in your commissioning development plan.

### Whole system design

Question	Observations	Self-assessment score /100
How are we working as a whole, place-based system?	As this infers that all parts – health, housing, transport, social care and beyond are working together, and that doesn't seem to be happening consistently, can't give this a high score.	20
Do we understand need and capacity as a whole?	Would assume that this isn't understood, though there is evidence of some more joined-up working across different parts.	22
Is the whole system coherent? Do we have a plan as a whole system?	Plan unclear and lacks coherence.	15
Are we putting social and environmental justice at the heart of the system?	I think, the values-base of all interviewed indicates that this is at the heart of what they do and what they want to do, but not always achievable because of fire-fighting.	50
Can we shift the dial to strengths, enabling, prevention and early intervention?	I think this is the basis of the operational commissioning / social work functions already, as well as	55

	health in terms of older people (for example – as recorded in interviews). Now need to be able to do this strategically.	
Are we learning as a whole system?	Not yet, and in order to do this, need to encourage and embed helpful behaviours across the system. That said, people are keen to learn and have engaged in this process for starters.	<b>30</b>
Can we work systematically at a strategic, operational, and individual level?	Not yet, this needs a lot of development but there are pockets of innovative and good practice to build on.	<b>25</b>

**Factors in place that constrain or enable**

<b>Factor</b>	<b>Most constrainin g</b>	<b>Most enabling</b>	<b>Observations</b>	<b>Score /100</b>
Levels of health and age distribution of the population		X	Younger population so can hopefully make an impact early on	
Wage rates and employment market				
Other geo-demographics of your place – characteristics, location, and density of population	X		Divide between one half of the borough and the other and diverse needs across it	
Understanding underlying need and what is actually shaping behaviour or demand		X	Some recent work e.g. learning from covid has helped give a view	
What matters to people and communities – local views about wellbeing and care		X	Need to build on this but there are examples of engaging well with community via VCS e.g.	



Geographical marginality and isolation				
Transport ease and accessibility		X		
Levels of deprivation	X		Pockets of it, and not consistent across borough so might make it more challenging to tackle?	
Population changes				
Amount, quality, and accessibility of green spaces				
Urban design				
Funding and structures of the council and partners (and how they link together, or don't)				
Degree of health and care integration and at what spatial level	X		Concerns about erosion of long-standing relationships as ICBs come into place and health restructures	
Land value and planning issues				
Workforce and workforce planning	X		Repeatedly highlighted	
Pressure to provide standardised services (discussion of 'postcode lotteries' etc)				
Payment funnelled through providers, not place, in ICS models	X		Reference to out-of-borough placements instead of funding local provisions	

### Relationships and organisation across the system

Question	Observations	Self-assessment score /100

Do we have effective governance?	I'm very unclear – comments on governance either suggesting there's too much, too little, or that it's not coming at the right time to have the conversations about ideas that are needed.	<b>30</b>
Are we learning from the past?	There's learning and then getting stuck in the past, and because there's reference to staff churn, hard to have learning from past if people who lived through it have left. However, there is reference to both things that go well and things that don't so learning is being sought out. Covid learning seems to have happened, which is positive.	<b>40</b>
Can we look at the knock-on effects of our setup and our decisions?	Not consistently, though there are examples of this happening.	<b>45</b>
Do we have effective collaboration, partnership, and challenge across all key groups: commissioners, providers, politicians, communities, etc?	No – seems that providers want more of a view of what Haringey want. And it seems that people don't feel commissioning / procurement etc are working well with operational colleagues etc.	<b>24</b>
Are all stakeholders engaged with open communication?	I'm not sure there's an issue with open communication, but there's not enough communication generally by the sounds of it.	<b>25</b>
Are we learning about and working on our relationships?	Yes! I think this exercise is confirmation of that.	<b>50</b>
Are we optimising our results by responding appropriately to the maturity level of our relationships?	Possibly – tough to gauge.	<b>45</b>

**Factors in place that constrain or enable**

<b>Factor</b>	<b>Most constrainin g</b>	<b>Most enabling</b>	<b>Observations</b>	<b>Score /100</b>
Politician / partner politics				

Governance	X		Unsure if this is about too much or too little	
Formal partnerships	X			
Existing and historic relationships		X		
Different values that organisations and places put on commissioning				
Ethics and values of the organisation itself and people in it – culture		X		
Level of trust and involvement (not just engagement) of citizens / community				
Culture / behaviour development		X	Opportunity here to use relaunch of values to talk about culture / behaviour	
Incentives driven by funding streams	X		Shrt-term funding of “innovation” means it doesn’t last	
Trust / relationships / culture – open and honest vs judgemental and punitive or avoidant				

### Capacity, capability and confidence

Question	Observations	Self-assessment score /100
How effective are we at building the capability of people to support themselves?	Patchy – right values, but not always the right engagement of people supported, families and support providers to make this real. Need for connecting good pieces of work highlighted.	30

How effective are we at supporting carers, family, neighbours, place, community to help support people?	Patchy – some felt okay, others felt more needed to be done in terms of support and feedback loop	<b>30</b>
How effective are we at building capacity and capability in providers from all sectors and sources (voluntary, community, faith-based, social enterprise, private, and public)?	Some evidence that there's good work going on in this area, but not consistent. Comments that VCS relationships stronger than provider market.	<b>24</b>
How consistently are we taking an enabling, strengths-based, 'Good Help' approach?	Approach is there but perhaps delivery of the outcome of good help is not.	<b>40</b>
Do we engage with providers as partners and collaborate with them?	Yes with VCS and no with private providers. Not consistent. Some evidence of good practice highlighted however. Unclear if provider forums happen, but providers do approach Haringey.	<b>20</b>
Effective balance of collaboration and contestability	Possibly because of some pockets of good working relationships, but much more to do.	<b>45</b>
Do we take an effective co-commissioning approach with others to build markets and unlock potential?	This seems to be a no, except in the case of Covid and the VCS and there was a good innovative piece of work done during this time. Also some good work highlighted via BCF and older people's services.	<b>30</b>
Are we taking an asset-based commissioning approach?	No, but only because understanding of the whole market seems unclear.	<b>49</b>
Do we have strong market insight?	No or yes, but not shared with org (so therefore it's a no!)	<b>50</b>
Do we have strong market making and market management capability?	No – DPS cited a lot as a hindrance rather than a help. Management has strengths but market-making a gap.	<b>50</b>
Do we have strong understanding of current delivery models and quality?	Yes overall, but perhaps not enough time to do anything about it.	<b>48</b>
Are we providing funding and support that takes a long-term	Mixed info, so overall conclude no.	<b>19</b>

view and looks at impacts including social justice?		
Are we taking into account the local economic impact of our spending?	I think impact needs to be measured	<b>15</b>
Are we actively supporting workforce development?	This seems unclear – some good work being done but not consistent.	<b>45</b>

**Factors in place that constrain or enable**

<b>Factor</b>	<b>Most constrainin g</b>	<b>Most enabling</b>	<b>Observations</b>	<b>Score /100</b>
Asset and provision mapping				
Potential for funding models to better support capacity and capability		X	Comments about good innovations due to funding in other feedback.	
Major costs and pressures	X			
Local provision strengths/weaknesses				
Cost and quality of care	X			
States of the community and voluntary sector		X	Good relationships that need to be built upon and widened.	
State of the market				
Levels of service user / carer / advocate satisfaction				
Understanding current configuration of interventions and practice				
Workforce development				

**User and outcome centred**

<b>Question</b>	<b>Observations</b>	<b>Self-assessment score /100</b>
Are we commissioning in a way that drives real change on the ground, as measured by real	Unclear, as there's pockets / descriptions of good / poor practice.	<b>30</b>

impact reported by citizens and communities?		
Are we taking outcomes-led approaches, learning from real change on the ground reported by citizens and communities?	<p>Yes and no, I think this is more of a strength than people realise.</p> <p>From the Adult social services Survey in Haringey 2021-22: 68.3% of service users stated that they have control over their daily life; a 5.4% decrease when compared to the 2019-20 results, putting Haringey below London, national and statistical neighbours averages.</p>	<b>40</b>
Do we have real engagement with and understanding of actual needs, including active identification of unmet needs?	<p>Unsure, as it's not clear what forums / community engagement regularly takes place.</p> <p>Living through lockdown report includes reference on p2 to all the groups incorporated.</p>	<b>35</b>
Is equity at the heart of our commissioning approach, seeking to identify real needs rather than our belief about what is needed?	I think this is the case, as it seems people are values-based, but unclear how it translates into the commissioning approach	<b>45</b>
Do we have co-production at all stages of the commissioning cycle?	I think this is likely to be a big gap at present.	<b>20</b>
Do we have a commitment to co-producing analysis, design, decision-making, delivery, and governance with all users, stakeholders, and especially excluded groups?	I think if this was presented to people and a way to get to what "good" would look like was provided, then people would commit, but it's not there at the moment.	<b>15</b>
Do we look at the whole experience of need and care from the citizen side, as opposed to our service, assessment, and process silos?	<p>Unclear.</p> <p>Greater coordination and consistency. In various ways the reference groups felt that services, communication,</p>	<b>18</b>

	information and advice should be centralised between the NHS and Haringey Council to facilitate clearer and more tailored communication, guidance and service provision. [Living through Lockdown]	
Are we making access to care clear and accessible to all including self funders?	The website isn't the easiest, but it isn't bad either. There's easy read for LD for example, but not consistently	<b>40</b>
Are we influencing the approach of the whole council and partners in a way consistent with user and outcome centred working?	<p>Very hard to judge this, as it's pockets of good practice, not a consistent, Council-wide approach yet.</p> <p>The Joint Partnership Board (JPB) was set up in 2017 to ensure that vulnerable groups in Haringey have a voice in the way NHS services and social care are provided for them. Public Voice, which runs and manages Healthwatch Haringey, was commissioned by Haringey Council to establish and support the running of the Joint Partnership Board and its reference groups.</p>	<b>25</b>

**Factors in place that constrain or enable**

<b>Factor</b>	<b>Most constrainin g</b>	<b>Most enabling</b>	<b>Observations</b>	<b>Score /100</b>
How success is defined in your place – supporting citizens, ticking the right boxes, keeping costs down etc	<b>X</b>			
Leadership and bravery of local system leaders		<b>X</b>		
The aspirations of your local leaders, especially political leaders		<b>X</b>		

Local political ideology or vision (and interaction with national or wider scale ideologies)	X		Reference to “in-sourcing” as problematic	
How goals and targets are set for interventions	X		Needs strengthening?	
Outcome-focused vs time-and-task approaches	X		Want outcomes but pay by time and task	
Use of technology to support care	X		<p>From the Adult social services Survey in Haringey 2021-22: 62.3% of service users stated that it was easy to find information and advice about support, a 5.2% decrease when compared to the 2019-20 results. Haringey is below London, national and statistical neighbours averages.</p> <p>Digital exclusion is commonplace amongst vulnerable groups and therefore digital access (internet and email) cannot be relied on either as a means of communication or of accessing help and support.</p>	



			It is strongly felt that more work should be done to enable those currently unable to access services digitally. [Living through lockdown]	
Levels of coproduction – feasible and aspirational		X	Willingness?	
Level of education of community about specific conditions and people			Carer's database. It is understood that the Council's carers database is not up to date. Additionally, there is an issue with unidentified carers in Haringey. [Living through Lockdown]	
Focus on supporting wider enabling public health outcomes, like fitness and tackling obesity				
How funding is connected to individuals and outcomes				

### Information, insight, and innovation

Question	Observations	Self-assessment score /100
Do we have an ambitious and clear adaptive route map for change?	There are some strategies in place, but some are missing	40
Do we practice active learning and insight development?	I think people want to, but are totally swamped.	30
Do we have a culture of innovation, experiment and	There are really positive stories of innovation and pockets of brilliance, but just need it to be consistent.	45

learning from failure (and success)?		
Do we commission from a values-driven position, taking responsibility for outcomes while avoiding the 'heroic' mode of 'fixing everything' in favour of an enabling approach where people feel involved and part of designing and implementing things that matter to them?	First half, seems yes, second half seems to need improvement in terms of involvement and implementation	<b>45</b>
Are we using approaches that harness complexity and an appreciation of whole systems?	Doesn't seem so	<b>24</b>
Do we work across different paradigms as appropriate, based on multiple perspectives?	Limited work like this	<b>24</b>
Do we have an understanding of and great leadership of transformational change?	Think this seems to be developing in terms of tackling this strategically. Seems to have senior buy-in.	<b>50</b>
Are we able to connect small-scale tests of change with larger strategic bets?	Not yet – but think this might be possible because people can identify the smaller wins very easily and the models to follow.	<b>45</b>
Are quality, social value, and value for money evaluated proportionately, and evidence-based?	Patchy	<b>30</b>
Do we have and share data from across the whole system, including unmet needs?	Unclear, seems patchy	<b>30</b>
Do we seek external challenge, peer review, coaching, development, and reflective practice?	Yes!	<b>55</b>
Are we powerfully advocating for commissioning and leading by example?	Yes, this seems to be the case	<b>55</b>

**Factors in place that constrain or enable**

<b>Factor</b>	<b>Most constraining</b>	<b>Most enabling</b>	<b>Observations</b>	<b>Score /100</b>
Skills bases, experience and confidence of commissioners and key stakeholders/decision-makers	X			
Ability to innovate		X		
Quality of data analytics	X			
Communications, advocacy and influencing	X			
Capacity and resources in the spaces above	X			
Reputation of commissioners and commissioning				
Position of commissioners in formal and informal hierarchies				
Clarity about what 'commissioning' means to us	X			
Opportunity or not to design commissioning loops from information gathering through decision making, to commissioning and learning from outcomes				
Level of understanding of the market				
Understanding of place				
Understanding of unmet need compared to gaps in the system				
Of provision and outcomes				
History of the market/area – levels of change and engagement				
Longer-term view of changes in the environment, citizen, provider markets				
Understanding of different funding streams, spending conditions and incentives				

**Managing the policy and compliance landscape**

<b>Question</b>	<b>Observations</b>	<b>Self-assessment score /100</b>
Are we understanding and complying with the core constraints and enablers of commissioning through active engagement with existing and current legislative and inspection requirements?	The fact this assessment has happened indicates that preparation for inspection is underway.	<b>60</b>
Do we have strong analysis and performance management, presented honestly and effectively?	Unclear	<b>30</b>
Do we understand how to manage compliance and get permission to extend capabilities – explain why we might get better outcomes if we do things differently, jointly focus on why things should be done, not ticking boxes etc?	Unclear	<b>30</b>
Do we have a proactive and dynamic risk appetite approach?	Yes, this was highlighted several times	<b>65</b>
Are we creating effective, good practice policy and guidance?	Unclear	<b>30</b>
Are we playing an active role in shaping council, place, and national policy?	Unclear, but unlikely based on feedback.	<b>24</b>

**Factors in place that constrain or enable**

<b>Factor</b>	<b>Most constraining</b>	<b>Most enabling</b>	<b>Observations</b>	<b>Score /100</b>
Interpretation of the Care Act and other statutory requirements		<b>X</b>	<b>This could be enabling but</b>	

			<b>unsure if it is at present</b>	
Understanding of funding levels and drivers of cost	<b>X</b>			
Implications of our Medium Term Financial Strategy / long term financial situation	<b>X</b>		<b>Very unknown in current climate</b>	
Approach to the Market Sustainability White Paper?		<b>X</b>		
Clear equalities policy for commissioning	<b>X</b>		<b>Last one on internet is 2019/20?</b>	
Strong understanding and strong use of the Social Value Act		<b>X</b>		
Implications of inspection regime		<b>X</b>	<b>Acutely aware of need to embrace this</b>	
Understanding of other relevant legislation				
Clear local commissioning strategy and policy	<b>X</b>			
Shared approach across council	<b>X</b>			
Shared approach across place	<b>X</b>			

### Commissioning process

<b>Question</b>	<b>Observations</b>	<b>Self-assessment score /100</b>
Are you balancing meeting urgent financial and other priority requirements with thinking about long-term impacts?	No – anecdotally it's about short-term reaction, and cannot focus on long-term	<b>45</b>
Does your commissioning process support good competition, collaboration, commercials, clarity of contracting and transactional improvement?	It appears that providers are waiting on invoices to be paid; DPS cited on several occasions as wanting; unclear if there is a contracts register	<b>15</b>

How do you relate your timeliness of engagement in your strategic commissioning process? Do you balance time on specification, contract management, learning etc?	No, not consistently	<b>20</b>
Do you have a positive approach to procurement that focuses on proportionality and outcomes?	Once procurement is happening I don't think there's a feeling that it's disproportionate, but more engagement with procurement about possibilities earlier might be needed	<b>40</b>
Are you using a broad range of evidence to inform commissioning and contributing your own insight through reflection and evaluation?	Data has been highlighted as an issue, but there is a lot of qualitative evidence that was highlighted as sources of reflection and the MPS is underway.	<b>60</b>
Does your process have a strong focus on Nolan Principles, social value, equity, ethics, and openness?	People's values came through, but it's about how they're implemented through a process that's unclear.	<b>45</b>
Are you able to maintain a strong commissioning process even in joint and share commissioning and shared arrangements?	Unclear.	<b>30</b>

#### Factors in place that constrain or enable

Factor	Most constrainin g	Most enabling	Observations	Score /100
Risk appetite		X		
Flexibility or alignment in terms of different commissioning teams in the same 'place' following the same approach	X			
Flexibility of procurement approach – enabler, or fixed constraint?	X		<b>Unclear what the approach is!</b>	
Ability to de-commission to free up resources for unmet needs	X			

'Permission' to be innovative/use different approaches		X		
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**Models and tactics**

<b>Question</b>	<b>Observations</b>	<b>Self-assessment score /100</b>
Are we investigating innovative delivery and funding models that deliver demand reduction, reduced costs and increased impact, used appropriately?	Innovation, yes, but funded short-term so momentum not being built upon any successes.	<b>24</b>
Are we engaging effectively with disruptive technology?		<b>35</b>
Are we taking and encouraging a partnership approach to workforce challenges?	No – in that there appears to be a lot of knowledge lost as workforce moves on and issues of communication between teams, and understanding of role and function of teams.	<b>20</b>
Are we undertaking measurable supply chain optimisation?	Doesn't seem this would be measured if it's happening?	<b>N/A</b>
Do we have a strong focus on Social Value?	Yes, but unclear how well it's implemented based on feedback.	<b>40</b>
Do we have a proactive approach to cost of care, with genuinely proportionate unit costs and reducing demand for high-cost care?	I think there's a focus on high-cost care, but on a case-by-case basis.	<b>45</b>
Do we have supplier relationships not focused on costs but on quality, improvement, and outcomes?	Yes, but based on feedback elsewhere, it's patchy, though good evidence of partnership working to improve services in some places.	<b>35</b>
Is there appropriate aggregation and joining up between models?	(I'm finding this score interesting, because I don't see how this is possible based on the feedback)?	<b>55</b>
Are we reducing waste and user journey failures?	Unclear.	<b>30</b>

**Factors in place that constrain or enable**

<b>Factor</b>	<b>Most constrainin g</b>	<b>Most enabling</b>	<b>Observations</b>	<b>Score /100</b>
Current funding models	Y			
Workforce issues	Y			
Supply chain management				
Waste in delivery models	Y			
Joining up between models				
Potential for (dis)aggregation				
Digital and technical capability				
Opportunity to bring in different funding streams				