

# **MINUTES OF THE MEETING OF THE ADULTS & HEALTH SCRUTINY PANEL HELD ON TUESDAY 12TH DECEMBER 2023, 6.35 - 9.40pm**

## **PRESENT:**

**Councillors: Pippa Connor (Chair), Cathy Brennan, Thayahlan Iyngkaran, Mason and Sean O'Donovan**

### **34. FILMING AT MEETINGS**

The Chair referred Members present to agenda Item 1 as shown on the agenda in respect of filming at this meeting, and Members noted the information contained therein'.

### **35. APOLOGIES FOR ABSENCE**

Apologies for absence were received from Cllr Felicia Opoku, Cllr Sheila Peacock, Ali Amasyali and Helena Kania.

### **36. ITEMS OF URGENT BUSINESS**

None.

### **37. DECLARATIONS OF INTEREST**

Cllr Pippa Connor declared an interest by virtue of her membership of the Royal College of Nursing.

Cllr Pippa Connor declared an interest by virtue of her sister working as a GP in Tottenham.

Cllr Mary Mason declared an interest as a Trustee of the Bridge Renewal Trust.

### **38. DEPUTATIONS/PETITIONS/ PRESENTATIONS/ QUESTIONS**

None.

### **39. MINUTES**

The minutes of the previous meeting were approved as an accurate record.

**RESOLVED – That the minutes of the meeting held on 16<sup>th</sup> November 2023 be approved as an accurate record.**

**40. SCRUTINY OF THE 2024/25 DRAFT BUDGET / 5 YEAR MEDIUM TERM FINANCIAL STRATEGY (2024/25 - 2028/29)**

Neil Sinclair, Head of Finance (People), introduced the report for this item, reminding the Panel that some of the finance tables illustrated details for the whole of the Adults, Health and Communities service but that, where possible, the information provided focused on details relating only to the Panel's remit which was mainly adult social care and health services.

Neil Sinclair explained that significant financial pressures were ongoing across the service and that an overspend of around £20m was forecast in the current financial year. This position would not be sustainable going forward and so planning to deal with these pressures was required, including addressing the rising costs of delivering services across adult social care. Significant savings had been identified to reduce the financial gap and the budget papers reflected the position so far, but further work would need to be undertaken to deliver a balanced budget. A review of the capital programme had also been undertaken but no new capital schemes for Adults and Health were put forward in the papers.

Cllr Lucia das Neves, Cabinet Member for Health, Social Care and Wellbeing, noted that she had recently attended a national care conference and that it was clear that pressures were being felt across the country in terms of delivering more services for more people, higher interest rates and the cost of living crisis but without the required reform or financial support from the government. In this context, an injection of funds had been provided in the Haringey budget to help stabilise the budget while being realistic about the challenges faced.

The Cabinet Member and officers then responded to questions from the Panel:

- Asked by Cllr Brennan for clarification on the new growth figures in the table on page 19 of the agenda pack and the wide variation in the figures for each year, Neil Sinclair explained that the 2024/25 adjustment represented the upfront rebalancing of the budget as previously described and would remain in place in subsequent years but the challenge in the years beyond 2024/25 would be to manage ongoing rising demand and cost pressures. This position could change over the medium term but represented their current best estimate of the funding required to manage future costs. The Panel noted that, as set out in paragraph 5.10 of the main report, a total of £25.5m of growth was being invested from 2024/25, including £20.4m for adult social care but that further savings were also required going forward.
- Cllr Mason expressed concerns about the possible impact of future cost pressures on the quality of care as contracts were negotiated, also noting that

many care sector staff were already underpaid. Neil Sinclair responded that, for example, domiciliary care contracts with providers would need to include uplifts to take into account national/London-wide requirements on the National/Living Wage. There was therefore a balance required between managing the market effectively and addressing the Council's financial challenges. Cllr Mason accepted this but suggested that further information was required to reassure residents that the quality of care would not be reduced. **(ACTION)** Cllr das Neves commented that the specific proposals had been based on what was realistic and reasonable, including improvement projects, and did not directly impact on quality of care (e.g. staff reductions) but would be happy to discuss any individual proposals that there were concerns about. She also noted that the Council had spent over £5m in the current financial year on paying provider uplifts. Beverley Tarka added that the Care Quality Commission inspected and regulated safety and quality and that the Council only placed residents with providers that had a good or outstanding rating. The quality assurance team also made interventions when an existing provider experienced a decline in their rating, as had been discussed at the Panel's previous meeting. She also added that much of the savings were based on being able to do things more efficiently and effectively, as assessed through benchmarking data and learning/sharing with other local authorities, so this would not impact negatively on the quality of care.

- Asked by Cllr Connor about the Council's policy on providers paying the London Living Wage, Beverley Tarka said that the London Living Wage was paid to all home care providers but not to care homes. Care homes were commissioned to provide care based on the assessed needs of individuals and the appropriate support package was agreed.
- Noting the £20.8m in-year forecast overspend set out in paragraph 5.9 of the report, Cllr Connor asked what more could be done to balance the budget if additional funds were not provided by the government. Neil Sinclair said that there was an ongoing process of working closely with other services in the Council to ensure that other savings opportunities and approaches to managing revenue were identified ahead of final budget proposals.
- Asked by Cllr Connor about the possible use of reserves to balance the budget, Neil Sinclair said that the current intention was to find new savings and to maintain reserves at a level appropriate for a local authority of Haringey's size.
- Cllr Lyngkaran noted that some proposed savings related to commissioning efficiencies but that, according to the savings tracker, previous efficiencies had not yet been fully achieved. Beverley Tarka explained that these were stretch targets and that the parts of these that had not been achievable had been wrapped into the MTFs going forward, either by being written off or mitigated by newly identified savings. An example of the work in this area so far had included coming together with commissioners across NCL to agree pricing for

- placements in residential homes to reduce long-standing competitiveness for placements between local authorities.
- Cllr Mason requested further details about the removal or deferment of capital schemes as described in paragraph 5.13 of the report. Beverley Tarka explained that there had been a pause on all capital projects to have an effective review. There had been higher figures projected for the Osborne Grove Nursing Home development compared to the previous analysis and the business case had not stacked up in terms of the outcomes the Council was looking for. This project had not been removed from the programme but a new business case had been developed. Cllr das Neves added that the Bourgoyne Road scheme had been deferred and that it was dependent on a GLA grant which would need to be made available before this could proceed. She added that there was also a plan to look at supported living capital work in partnership with the housing team. However, the impact of higher inflation and interest rates was that it was necessary to manage capital projects in a different way and that some projects may take longer to develop.
  - Cllr Connor requested further details about the Minimum Revenue Position (MRP) and Capital Financing Requirements. Neil Sinclair explained that the MRP was the estimated cost of repaying debt and interest to support the existing capital programme. The Capital Financing Requirement was an assumption about how much future borrowing needs were expected to be. Asked for clarification about the current estimated Capital Financing Requirement for 2023/24, Neil Sinclair confirmed that this was just over £1.3bn as set out in Table 8.5 of the Cabinet report and that the MRP for 2023/24 was just over £18.6m as set out in Table 8.8 of the Cabinet report.
  - Cllr Brennan expressed concern that delaying capital projects could end up costing more money due to the delay to the resulting service improvements. Beverley Tarka said that careful consideration had been given about what to defer and that, with the accommodation-based options, they had been working closely with housing colleagues to meet the needs of clients with specific needs.
  - Asked by Cllr lyngkaran what assumptions had been made on the budget in terms of future interest rates and inflation, Neil Sinclair said that the assumptions were made based on the projections for these going forward, that interest rates were widely expected to fall in the medium term and this was used to as part of the calculation for the MRP and Capital Financing Requirement. For adult social care, an inflation factor of 4% had been used to calculate future costs. Employee cost inflation was based on future pay awards and general price inflation (CPI/RPI). Cllr lyngkaran requested that further details on the specifics on this calculation be provided to the Panel. **(ACTION)** Asked by Cllr Mason about the variation in interest rates between individual loans, Neil Sinclair acknowledged that borrowing and refinancing of loans would vary depending on when this took place and would typically

depend on the rate set by the Public Works Loan Board. Cllr das Neves added that the recent changes to inflation and interest rates could impact on existing business cases as they had raised costs to the Council in some areas and also raised costs for partners involved with projects.

- Cllr Connor noted that, according to paragraph 6.1 of the report, adults aged 18-64 now accounted for 55% of total forecast spend and asked about plans to deal with this increased need for support. Beverley Tarka responded that there had been a particular focus on joint work with Children's Services to improve transitions with Adult Services working with individuals even before the age of 14 to respond to their needs and so this was part of the plans in development to manage these costs.
- Asked by Cllr Connor about sources of external funding referred to in the report that would not necessarily recur in future years (including Lottery funding and ICB support for hospital discharge), Beverley Tarka said that conversations were continuing on health funding across the NCL area as a particularly challenging winter was expected but no new government funding was currently expected.
- Referring to Table 7.2a on page 19 of the agenda pack, Cllr Connor noted that £19.257m of new growth was allocated for Adults, Health & Communities in 2023/24, £12.7m of which was attributed to future inflationary pressures and transitions and £3m of which was allocated to Temporary Accommodation but that this left around £3.56m unaccounted for. Neil Sinclair explained that the £19.257m comprised of a combination of the various adjustments that had been applied including growth as well as adjustments to savings. Also, the total figure included Adults, Health & Communities as a whole while the appendices provided to the Panel only contained details related to the Panel's Adults & Health remit.
- Referring to Table 7.1a on page 18 of the agenda pack, Cllr lyngkaran queried the variations in the levels of service growth between the different financial years in the table. Neil Sinclair explained that this related to what had been approved in February 2023 based on service pressures at that time but that Table 7.2a on page 19 then provided significant additional funding through the new growth proposals to further address the overall budget gap. Table 7.2c on page 19 then set out the total planned growth for 2024/25 to 2028/29.
- Asked by Cllr lyngkaran why there was no further projected growth from 2027/28 onwards, Neil Sinclair said that it was challenging to make accurate projections that far in advance so the focus was on the next three financial years.
- Referring to the savings tables on pages 20 and 21, Cllr Connor queried whether the proposed savings were achievable and the potential risk of needing to write some of these off in future years. Neil Sinclair said that there had been a robust approach to the identification of savings across the Council and that the targets had been challenged and reviewed, but acknowledged that

any savings target included the risk of not being fully delivered which could create in-year pressures. Current in-year savings which could not be delivered had been accounted for in terms of the planning and forecasting going forward, as previously discussed.

- Asked by Cllr Brennan for clarification on the Council's Cash Limit, Neil Sinclair explained that this was based on assumptions about the current cost of services including planning assumptions such as inflation and growth.
- Referring to Table 7.3 of the Cabinet report, Cllr Connor noted that the figures in the 'Future Savings to be Identified' line grew significantly in future years and asked about the potential impact of this on Adults & Health services. Neil Sinclair acknowledged that, in order to write a balanced budget, further savings would need to be identified across the Council including from Adults & Health.
- Cllr Mason referred to the Edwards Drive capital scheme which, according to page 24 of the agenda pack, would now be delivered via the housing delivery programme and asked whether the impact of housing benefit would have an impact on the scheme, but Beverley Tarka said that this level of detail was not currently available.
- Asked by Cllr Connor for clarification on the terms used in Table 8.3 on page 23 of the agenda pack, Neil Sinclair explained that, if a business case was based on generating reductions to revenue costs then this was referred to as self-financing.

The Panel then asked questions about the specific proposed included in Appendices 3 to 6.

### **APPENDIX 3 – MTFS Savings Tracker (2022/23 – 2025/26)**

- Asked by Cllr Iyngkaran for clarification on the whether savings were new or existing, Beverley Tarka explained that some were ongoing over a period of time and Cllr das Neves added that some savings may be marked as red or amber because they were taking longer than anticipated and that some might continue for longer because it was going well and could be stretched further.
- Cllr O'Donovan requested further details on the progress of proposal AHC\_SAV\_003. Beverley Tarka explained that this related to aged client debt where processes hadn't previously been as efficient as they could be. However, this had started late in the year and so it wasn't anticipated that the intended level of savings for this year would be reached but this would continue in future years where the anticipated levels of savings were outlined in Appendix 3.

### **APPENDIX 4 – New Revenue Growth Proposals**

- Asked by Cllr O'Donovan for clarification on the line that read "Connected Comms – mainstream?", Neil Sinclair clarified that this related to previously approved growth to support the Connected Communities programme. It was

agreed that further details about this funding would be provided to the Panel in writing. **(ACTION)**

## **APPENDIX 5 – New Revenue Savings Proposals**

### **AHC24 SAV 008 - (0-19 years Public Health Nursing Services efficiencies)**

- Asked by Cllr Mason how many people were expected to be impacted by proposal Will Maimaris, Director for Public Health explained that this referred to health visiting and school nursing. He added that health visiting was a universal service and that there were 3,376 children born in Haringey in 2021 which was nearly 800 fewer than five years previously. The total value of the contract was over £5m and the savings around £300k which, at around 5% of the contract was a smaller proportion than the downward trend in the population change. However, the levels of need for some children may be higher in some parts of the Borough and therefore require more input from a health visitor. Cllr das Neves added that it was important for the Council to apply the same rules to providers when commissioning a service as the Council would apply to itself around managing the budget to ensure best value for public money.
- Cllr O'Donovan requested clarification about the 2-year period for the savings. Will Maimaris explained that discussions would be beginning with the provider and a notice period required for changes to the contract so the full amount could not be applied in the first year.
- Asked by Cllr Connor about the monitoring of the contract, Will Maimaris said that there were a number of performance indicators, for example on the proportion of families visited, and these were moving in the right direction. There was also dialogue with the provider on how to mitigate any changes in the contract.
- Cllr Iyngkaran queried whether the birth rate was expected to stabilise or continue to fall. Will Maimaris said that the general trend was downwards though it had flattened in the previous 12 months. He added that these trends tended to be monitored by Children's Services but modelling could also be useful in this context, but that need was an important element for consideration and not just the numbers.
- Cllr Mason expressed concern about the possible impact on children where the mother was particularly vulnerable as there would be an overall decrease in the number of health visiting hours and sought reassurance that all children and mothers who needed support would still receive the same level of support that they would have received before this change. Will Maimaris commented that, while it was never possible to fully mitigate a risk, they would be working with providers on efficiencies and performance on all contracts and had also invested in a vulnerable parent programme which was being expanded. After further discussion it was agreed that further details should be provided to the Panel on how these risks would be mitigated. **(ACTION)**

### **AHC24 SAV 009 - (Sexual Health MTFS)**

- Cllr Connor noted that this saving related to greater use of local pharmacies to access services but expressed concern that local pharmacies were often very busy with long queues and that capacity was being stretched with pharmacies pushed to provide more services. Will Maimaris responded that the local Pharmaceutical Needs Assessment had recently been updated and had concluded that the pharmacy provision in Haringey was adequate and appropriate for the needs of the population. He added that the feedback from residents was that they generally found pharmacies to be a good way of accessing sexual health services but acknowledged that it was important to keep monitoring this.
- Cllr Mason expressed concerns about the potential impact on more vulnerable people, including younger women who may be deterred from accessing services such as this in a public setting and sought reassurance that they would still be able to access services in other ways. Will Maimaris explained that there was a Sexual Health Strategy and a Needs Assessment in which young people were identified as one of the risk groups. There was also some young person specific service provision in the borough which was not pharmacy based. In addition, there were sexual health services in London that anyone could access, including at Archway and North Middlesex Hospital. Finally, there was specific community-based outreach services aimed at BAME communities which were innovative and offered services such as HIV testing in a culturally appropriate way. However, there was an overall trend towards accessing services via pharmacies. Cllr das Neves added that, while some people might feel reticent about using local services, they had the option of going elsewhere in London which they may feel was more confidential and Haringey would then pay for that service.

#### AHC24 SAV 010 - (Continuing Healthcare)

- Asked by Cllr Brennan about the evidence to support this proposals, Vicky Murphy, Service Director for Adult Social Services explained that Haringey had a low number of Continuing Healthcare cases compared to other areas and that the proposal to embed Continuing Healthcare into Adult Social Care was a large piece of work supported by specialists with experience in this area so she was optimistic that this could be achieved. Data on this was available if required. **(ACTION)**
- Cllr Connor commented that residents often found it difficult to access Continuing Healthcare (which was NHS funded) and asked whether this was likely to change in future. Vicky Murphy responded that a training company had recently been brought in to support social workers and social care assistants to be part of the assessment process and that the offer to support residents in this area if they met the criteria had been strengthened internally.

#### AHC24 SAV 011 - (Direct Payments)

- Cllr Mason observed that a key issue about direct payments was about people having the confidence and support to use them and also ensuring coordination between the different services being accessed. Vicky Murphy said that the



support offer that was previously in place through Disability Action Haringey had been strengthened to enable people to be better supported through the process.

- Asked by Cllr O'Donovan whether people would still have the option of being referred directly to a provider, Beverley Tarka confirmed that there was always a choice.

#### AHC24 SAV 012 - (Strength Based Working)

- Cllr Brennan requested further details on how the savings would be made. Beverley Tarka explained that there was some client level data and trends which reflected that, despite the context with increased demand, the cost of care with older people was being maintained. This could be correlated with a shift in the way that practitioners support individuals, including through an increased use of assistive technology and strength-based approaches. Data on this was available if required. **(ACTION)** Cllr Mason welcomed this but observed that there was a deficit in the number of support groups in certain areas on the Borough. Beverley Tarka said that the department had a lead officer who had been doing consultative work on co-producing outcomes in the West, East and Central areas of the Borough as part of the shift towards localities working which included research on informal carers and support. This would enable a response as part of a refreshed carers strategy. Vicky Murphy added that there would be a carers section based with the localities team in each area, improved responses to the carer surveys and a new Co-Production Board with carers attending. Cllr Mason requested that further information be provided on what was being offered and in which areas. **(ACTION)** Cllr Connor emphasised the need to keep in mind that the local voluntary sector needed to be properly supported if the Council was looking to make savings but also expected the voluntary sector to support those who need care. Cllr Connor requested that further information be provided to the Panel to ensure that the local voluntary sector was not being put under excessive strain. **(ACTION)** Beverley Tarka said that Jess Crowe, Director of Culture, Strategy and Engagement, led on voluntary sector issues, but added that Reach & Connect had been a successful programme in coordinating with the voluntary sector to jointly support people in need of support. Cllr das Neves added that there was now a Community Chest fund in Haringey supported by the Borough Partnership and health partners to fund voluntary and community based initiatives in a range of areas.

#### AHC24 SAV 013 - (Use of public health growth)

- Asked by Cllr Iyngkaran for clarification on the figures for this item, Will Maimaris explained that the figures were specific because they represented a rise of £292k in the amount received from central government in 2024/25 which would go towards improving public health outcomes for residents.

#### AHC24 SAV 014 - (Supported Living Review)

- Cllr Connor commented that, while she supported the aim of the proposal, she queried whether it would be possible to increase the level of provision for sufficient one-to-one care in order to make the savings. Vicky Murphy responded that the work earlier this year on the reablement service and only supporting pathways relevant to adult social care had freed up significant capacity in the market for domiciliary care and so this would enable the right level of provision.
- Asked by Cllr Mason about the suitability and quality of housing, Vicky Murphy said that supported living housing was a different market from Council housing and was not the same as getting support from a Council service but that they were working with housing colleagues on how the offer could be strengthened. Some vulnerable residents had been successfully brought into supporting housing, including some who were previously being supported outside of the Borough.
- Cllr Connor concluded that no further information was required on this proposal but that the Panel would keep a watching brief on how it progressed.

#### AHC24 SAV 015 - (Service Audit)

- In response to a query from Cllr Mason about the potential impact of the savings on the local voluntary sector, Beverley Tarka explained that residents receiving services were entitled to a statutory review annually which could sometimes reduce costs by identifying more suitable alternative services. The review could also maximise the income for a particular individual or family by ensuring that they receive the current benefits. The savings were based on trends of the net output of these annual reviews. Vicky Murphy added that the review would check on services available and what was in the individual's support plan. It was also an opportunity to think about the use of technology to meet the needs of individuals, including the use of tablets or online shopping.
- Asked by Cllr Lyngkaran how this approach would be different from what was already being done, Vicky Murphy responded that they were on a journey to support practitioners to work with the strength-based approach in an in-depth way that may not previously have been done. Beverley Tarka added that there had been considerable investment in training staff to do things differently.
- In response to a query from Cllr O'Donovan about ensuring that people received the benefits to which they were entitled, Beverley Tarka said that there had been a particular initiative in recent years to help more people to receive Pension Credit and Cllr das Neves added this was an ongoing issue as there were new eligible people in the Borough each year.
- Cllr Connor commented that she had thought that a lot of these efficiencies had already been implemented in previous years. Beverley Tarka said that previous initiatives had related to carrying out initial financial assessments earlier, while this initiative was about more efficient annual reviews.
- Cllr Connor suggested that the Panel should continue to monitor the progress of this initiative as part of its work programme, including how this would be embedded with the usual turnover of staff and what the hidden costs might be such as the costs of more training or longer assessment processes. Cllr Mason

added that there remained question marks over the large estimated size of the saving and Cllr Connor suggested that further evidence was required on how this would be achieved. **(ACTION)**

#### AHC24 SAV 016 - (Mental Health Service Review)

- Cllr O'Donovan noted that when this item had previously been discussed, he had seen an executive summary of the review and suggested that this be shared with the Panel. **(ACTION)**
- Cllr Brennan requested further details on what steps were being taken to focus on the locality model. Cllr das Neves responded that this was an extensive area of work with three locality hubs across the Borough bringing together staff to deliver services with a different kind of model. While it was acknowledged that the Panel had previously discussed locality working, Vicky Murphy said that she would be happy to provide a future update report to the Panel for review as there had been considerable recent progress and collaboration with partners, Connected Communities and the local voluntary sector. Sara Sutton, Assistant Director for Partnerships and Communities, added that recent developments included collaboration with primary care providers, the Community Chest initiative, healthy neighbourhoods programmes and NHS talking therapies in more community settings. These collaborations took a much more localised approach to the needs of the area and enabled more preventative work.
- Asked by Cllr Connor about the work to address high-cost cases, Vicky Murphy said that this was a continuation of work that had started last year with a number of residents with mental health issues brought back into supported living in-Borough. One strand involved working with housing colleagues to find suitable accommodation with some one-to-one support for people with lower levels of need and the other strand involved using a provider for both accommodation and wrap-around care.

#### AHC24 SAV 017 - (Grant Review BCF/S75)

- Cllr das Neves informed the Panel that the Better Care Fund was a national funding stream to support health and social care integration and was being redesigned following an external review. Haringey had around £7.8m in the plan and were looking at opportunities to redirect some of the spend from the wider system back into adult social care.
- Cllr Connor asked about the possible risk of not being able to achieve this as it was dependent on a review undertaken with the ICB. Cllr das Neves responded that the Better Care Fund had defined purposes but that there was a possibility on the table to think about how that was used together. Neil Sinclair clarified that the £7.8m in the plan was the local authority's share of the Better Care Fund so did not rely on the ICB directly to repurpose these funds. Beverley Tarka suggested that it would be useful to send the Panel some further written information about the ongoing review and how the funding was used. **(ACTION)**

The Panel then briefly discussed the format of the agenda papers that had been received. Cllr Mason suggested that a short piece of introductory text for each table to explain how they related to one another would be useful in future reports. **(ACTION)** Cllr Connor suggested that some additional explanation on the capital budget should be included in future, including the impact on the revenue budget in terms of interest being paid. **(ACTION)**

Summarising the discussion, Cllr Connor commented that the financial situation was clearly very difficult with a substantive amount of savings required to achieve a balanced budget and that the risks associated with this situation had been highlighted. She informed the Panel that the recommendations proposed by the Panel would be submitted to the Overview & Scrutiny Committee for approval.

### **RESOLVED:**

The recommendations to be submitted to the Overview & Scrutiny Committee were agreed as follows:

- The Panel seeks assurances from Cabinet that the pressures on the Adult Social Care budget would not impact negatively on the quality of care as new contracts were negotiated.
- The Panel seeks assurances from Cabinet that the local voluntary sector would be properly supported in their provision of services to support those who need care and not put under excessive strain as a consequence of budget savings. (New Revenue Savings Proposal - AHC24\_SAV\_012 - Strength Based Working)
- The Panel welcomed the updated format of the budget scrutiny papers and suggested a couple of further minor amendments for future years:
  - a) A short piece of introductory text for each table (in the main report) to explain how they related to one another.
  - b) Additional explanatory text on the capital budget appendix, including the impact on the revenue budget in terms of interest incurred.

The requests for additional information were agreed as follows:

- The Panel requested further details on how inflation (including employee cost inflation) had been factored into the projected costs for adult social care.
- In relation to the proposal on funding for Connected Communities in Appendix 4, the Panel noted that the information provided was limited and requested that more substantive details be provided.
- Further details to be provided to reassure the Panel that vulnerable parents and children would not experience a decrease in level of support following the overall reduction in the number of Health Visiting hours. (New Revenue Savings Proposal - AHC24\_SAV\_008 - 0-19 years Public Health Nursing Services efficiencies)

- Further evidence to be provided to demonstrate that these savings could be achieved. (New Revenue Savings Proposal - AHC24\_SAV\_010 - Continuing Healthcare)
- The Panel was informed that costs were being reduced through assistive technology and strength-based approaches and that data was available to support this. Relevant data to be provided. (New Revenue Savings Proposal - AHC24\_SAV\_012 - Strength Based Working)
- On the issue of locality working, the Panel requested details of support groups available in each of the three locality areas in the Borough. (New Revenue Savings Proposal - AHC24\_SAV\_012 - Strength Based Working)
- The Panel suggested that question marks remained over the large, estimated size of the proposed saving and requested more detailed information about how these would be achieved. (New Revenue Savings Proposal - AHC24\_SAV\_015 - Service Audit)
- Executive summary of the Mental Health Service Review to be shared with the Panel. (New Revenue Savings Proposal - AHC24\_SAV\_016 - Mental Health Service Review)
- The Panel was informed that there was an ongoing review being undertaken with the ICB on the Better Care Fund which included £7.8m of Haringey Council funds. Further details to be provided about the ongoing review and how the funded would be used. (New Revenue Savings Proposal - AHC24\_SAV\_017 - Grant Review BCF/S75)

#### 41. WORK PROGRAMME UPDATE

Dominic O'Brien, Scrutiny Officer, informed the Panel that the items scheduled for the next meeting on 22<sup>nd</sup> February 2024 included an update on aids and adaptations and a Cabinet Member Questions session with room for one more item to be determined.

It was noted that modern slavery was an item to be scheduled for a future meeting and Cllr Mason proposed that Police training as this issue should be considered as part of this item. **(ACTION)**

#### 42. DATES OF FUTURE MEETINGS

- 22<sup>nd</sup> February 2024

CHAIR: Councillor Pippa Connor

Signed by Chair .....

Date .....