

MINUTES OF THE MEETING OF THE CABINET HELD ON TUESDAY, 14TH MARCH, 2017, Times Not Specified

PRESENT:

**Councillors: Claire Kober (Chair), Peray Ahmet, Jason Arthur,
Eugene Ayisi, Ali Demirci, Joe Goldberg, Bernice Vanier and Elin Weston**

Also Present - Councillor Morris

207. FILMING AT MEETINGS

The Leader referred to agenda item 1, as shown on the agenda in respect of filming at this meeting and Members noted this information.

208. APOLOGIES

There were apologies for absence from Councillor Strickland.

209. URGENT BUSINESS

There were no new items of urgent business. The Leader drew Members attention to the additional appendix to be considered with the Housing Support Transformation report at item 10.

210. DECLARATIONS OF INTEREST

There were no declarations of interest put forward.

211. NOTICE OF INTENTION TO CONDUCT BUSINESS IN PRIVATE, ANY REPRESENTATIONS RECEIVED AND THE RESPONSE TO ANY SUCH REPRESENTATIONS

There were no representations to consider.

212. MINUTES

The minutes of the Cabinet meeting held on 14th of February 2017 were agreed as an accurate record of the meeting.

213. MATTERS REFERRED TO CABINET BY THE OVERVIEW AND SCRUTINY COMMITTEE

There were no matters to consider.

214. DEPUTATIONS/PETITIONS/QUESTIONS

There were no deputations, petitions or public questions to consider.

215. AGREEMENT TO ENTER INTO PARTNERSHIP WITH ONSIDE, ALONG WITH AN IN PRINCIPLE DECISION ON A YOUTH ZONE SITE

The Cabinet Member for Communities introduced the report which sought approval to the development of a partnership with the charity OnSide, to take forward their proposal to create a Youth Zone, providing facilities and programmed activities for young people in Haringey. The proposal contributed to the wider vision to improve youth outcomes through participation, health and wellbeing and encouraging greater use for formal and informal recreation. The partnership would bring forward use of capital, revenue and private sector funding to provide a fully accessible facility, meeting the particular needs of young people in the borough.

In response to questions from Councillor Morris, the following information was noted:

- A number of potential sites had been explored, in both the east and west of the borough but this paper was seeking approval to the agreement with OnSide. The Council would continue working with OnSide to identify the Youth Zone site and there was current consideration of the Chestnuts site.
- The Cabinet Member for Communities referred to OnSide's good reputation and work with other boroughs which provided confidence that they would be able to work with the Council on specific needs of Haringey. A commitment to outreach work from other sites in the borough including, importantly, Bruce Grove had been made.

RESOLVED

1. To agree the development of a partnership with OnSide to take forward proposals for a Youth Zone in Haringey, subject to site identification agreeable to both the Council and OnSide and subject to planning approval and agreed heads of terms for a lease on a suitable Council site.
2. To give delegated authority to the Corporate Director of Children Services and Director Regeneration, Planning and Development after consultation with the Cabinet Member for Corporate Resources to approve the final details of the project and the terms in respect of the grant funding agreement, lease, facility mix, and connection to other site specific regeneration proposals and operational detail.
3. To note that there is a guaranteed revenue funding requirement of £250,000 pa for three years for the Youth Zone.

Reasons for decision

The proposed Youth Zone development will engage young people across the Borough in the creation of a unique facility that genuinely responds to their views and provides sustainable, 21st century youth provision significantly beyond the scale that the Council alone can deliver, which will make a positive difference to the experience of being a young person in Haringey. The proposed Council capital contribution of £3m towards the Youth Zone development will lever in a further £3m capital and ongoing revenue investment from the private sector of £750,000 per annum for the first three years of operation.

This project would also make a significant contribution to the Borough's vision – to work with communities to make Haringey an even better place to live through encouraging investment and creating opportunities for all to share in - a reality. Additionally, it will contribute significantly to each of our five corporate objectives enabling our young people to achieve their aspirations and growing our community assets to further demonstrate our ambition, innovation and collaborative approach.

One of the fundamental principles and attractions of OnSide's operation is the establishment of a standalone, locally reflective, charitable trust within the host borough, which is responsible for the operational delivery and financial viability of the venture. Under the guidance and direction of a high profile chair-person and private-sector, locally-led membership, these boards have the professional and financial connections to attract investment into the 'not for profit' operation and critically, the future of local young people. This model offers a sustainable, long-term funding model and a four-way partnership between the private sector, the authority, young people and the community – cementing future youth provision at a time of diminishing authority resources.

OnSide can evidence clearly the significant social impact that Youth Zones have by addressing disengagement, reducing school exclusions and unhealthy lifestyles and also shows a positive economic benefit for local and national government. On average, Youth Zones generate £2.03 of social value for every £1 spent on running these facilities, or £6.66 for every £1 invested by the local authority. As Haringey has negotiated a lower revenue contribution than other authorities, this return on investment would be closer to £12 for every £1 of Local Authority money spent to achieve a similar level of outcomes.

The benefits of Youth Zone extend beyond the financial and impact positively on education and employment outcomes for young people and improving health and wellbeing. In 2015, 92% of young people who complete the Youth Zone Get a Job programme, which focuses on giving young people the tools, motivation and aspiration to succeed in the future, progressed into paid employment or further study. 79% of parents surveyed reported that their child's involvement in Youth Zone had made family life more positive and 89% of young people reported feeling more self

confident as a result of their joining Youth Zones. Communities also benefit from the presence of Youth Zones, such as a reduction in anti-social behaviour since Youth Zones opened – in Manchester this dropped 13% in year 1 and 51% in year 2 of opening and in Oldham police reported a 40% reduction in anti-social behaviour involving young people.

Alternative Options

The options in this instance are limited. The Council had not considered developing a major purpose built youth facility in the borough before being approached by OnSide; therefore considering the proposal as presented, the options are limited as indicated below.

Option 1 - Do nothing. Reject the proposal and do not offer Council support. The impact of this would result in OnSide withdrawing its £3m investment offer into the borough (Including £1m Queen's Fund) and looking towards an alternative host authority. The opportunity to create sustainable youth provision in the borough would be lost.

This option is not recommended.

Option 2 - Support the proposal. Once a site has been identified and agreed by all parties, this would require the scheduled transfer of £3m capital grant from the Council to OnSide (50% of the capital build) as approved by Cabinet in June 2016. A further £250,000 per annum revenue contribution (25% of annual revenue costs) would be required from the Council for the first three years of operation. OnSide have committed to deliver 50% of the capital cost and 75% of revenue costs for the first three years.

This option is recommended.

It should be noted that there are considered to be three key risks to the recommended option:

- (i) OnSide decline any site offered and withdraw their capital funding offer to develop the project. This is considered to be a medium risk as OnSide need to calculate that the site being offered represents a realistic opportunity for them to create and establish a sustainable operation within their forecast timescales; should this be realised the Council would withdraw its grant offer.
- (ii) Revenue shortfall in from Year 4. This is considered to be a moderate risk; however the Haringey Youth Zone Board would be charged with securing on-going revenue support exploiting its network of supporters and potential funders.
- (iii) Project Failure. If the project failed at some point in the future and the local Trust dissolved the lease would be nullified and the building would become a Council asset/liability. The success of OnSide's Youth Zones elsewhere in the country suggests this is a low risk.

216. HOUSING SUPPORT TRANSFORMATION FRAMEWORK

The Cabinet Member for Finance and Health introduced the report which set out the findings of the Supported Housing Review.

The review had involved obtaining a range of stakeholder views, through quantitative and qualitative means, on current supported housing provision, support models, and built environments in the borough. This was in light of the changing housing and social care landscape which emphasised the need to modernise and diversify the housing support offer to the boroughs vulnerable residents.

The Cabinet Member for Finance and Health referred to the findings of the review, set out at page 64 of the agenda pack, which described: current service models as largely reactive, supported housing not being used in an efficient way, and indicated that best practice methods were not being utilised to maximise independence.

There were a total of 11 recommendations from the Supported Housing Review, some universal and others targeted around young people, mental health, learning disabilities and older people.

Completion of the review was the 1st phase of work, and there would be future decisions on the different client groups coming forward to Cabinet as and when the associated phases of work were completed.

The Cabinet Member for Finance and Health thanked the members working group and Gill Taylor, the project manager, for all their hard work over the last year in bringing the review and recommendations forward.

In response to questions from Councillor Morris, the following information was noted:

- There was still significant work to be taken forward, which was recognised and underpinned this framework, to achieve the required changes in supported housing. Therefore the savings figure associated with these changes was expected to evolve. However, there was likely to be savings as a result of the housing provision being better utilised.
- It was important to note that the savings were not just the priority but achieving the outcomes of greater independence and the prevention of crisis's before they occur for clients in supported housing which this framework would enable.
- The Assistant Director for Commissioning stressed that these were strategic priorities being followed in the framework and so were not dependent on agreement of the HDV. The Assistant Director continued to provide assurance of the alternative actions that could taken such as work with registered providers to find supported housing placements.

RESOLVED

1. To note and consider the introductory report from the Supported Housing Review Members Working Group set out in appendix 1.
2. To note and consider the data and intelligence collated as part of the Supported Housing Review, presented in the Needs and Gaps Analysis, set out in appendix 2.
3. To approve the vision, strategic principles and initial recommendations for housing support transformation set out below from 3.5 and explored further in the Recommendations Framework at appendix 3.
4. To agree that the transformation of housing support should be based on a vision of Haringey as a place 'where vulnerable residents can access flexible and personalised housing support services that maximise prevention, independence and inclusion within diverse mixed communities.'
5. To achieve this vision, Cabinet approved the strategic principles set out below. Using consistent principles to commission new services and support practices would create a more strategically relevant housing support offer that meets the diverse needs of different vulnerable groups with an overarching commitment to preventing homelessness and dependence.
 - 5.1 **Cross-cutting Prevention;** our housing support offer is genuinely preventative, offering support to at-risk groups at the earliest possible opportunity thereby reducing the social & financial cost of homelessness and housing crisis. Housing support services will offer multiple preventative interventions at individual and community levels; reducing demand on supported housing, preventing escalation of need and offering viable alternatives to residential care.
 - 5.2 **Community Inclusion;** our housing support offer reduces social exclusion, isolation, stigma and multiple disadvantage by putting people at the centre of the services they receive; to secure housing, work and wellbeing opportunities that bring diverse people and services together. Supported housing services and service users feel encouraged and equipped to work together to create volunteering, employment and relationship-building opportunities that outlast someone's stay in supported housing, building resilience in our communities and fostering good relationships between Haringey's diverse cultures, identities and experiences
 - 5.3 **Integrating Support & Care;** housing support is commissioned in broad pathways of integrated support and care that reduce dependence and increase independence in a safe, personalised and holistic way. To achieve this, the vital preventative function of housing-related support will be integrated with adult social care provision but preserved as a discrete service provision for some groups.

- 5.4 **Commissioning for the Future**; our housing support offer maximises the reach of funding and is flexible enough to meet the changing demographics and support needs of Haringey residents. Commissioning will deliver improved value for money, encourages innovative collaborations between the Council and its stakeholders and creates a housing support sector that is responsive to the changing political and economic landscape.
6. To ensure supported housing tenants were involved, informed and assured of the Council's commitment to improvement, Cabinet approved the development of a **Supported Housing Tenants Charter**. As well as detailing the explicit commitments and opportunities for supported housing tenants as part of the Housing Support Transformation work, the Charter would act as a pledge. As a pledge it would actively involve, empower and give a platform to under-represented groups such as the older LGBT community, vulnerable women and people with learning disabilities. It was agreed that the development of the Charter be created by the Housing Support Transformation Members Working Group in partnership with service users and supported by Council officers with final approval by the Cabinet Member for Housing, Regeneration and Planning.
7. To note that housing support transformation would require universal and targeted change. Cabinet agreed that the five universal recommendations and the twelve specific recommendations for the four priority client groups; young people, mental health, learning disabilities and older people, identified below, should be implemented by the Council in line with the proposals for delivery in appendix 3.

Universal	<p>7.1 To create the Supported Housing Tenants Charter outlined in 3.7 that sets a foundation for our commitments to supported housing service users affected by changes as part of this programme</p> <p>7.2 To amend the current social lettings quotas for people leaving supported housing to accurately reflect data on need and vulnerability</p> <p>7.3 To note that the Housing Strategy commitment to build new specialist housing should be rigorously explored for all new proposed development work in the borough to increase the available supply of supported housing</p> <p>7.4 That a commissioning practice should mandate improved and streamlined data collection and outcomes monitoring practices in supported housing as well as a commitment to provider collaboration that strengthens relationships between vulnerable people and their communities.</p> <p>7.5 To build on the proud LGBT history in Haringey by addressing the lack of data, professional training and visibility of the LGBT supported housing community, with particular focus on older and</p>

	younger people, people from BAME communities and those with disabilities.
Young People	<p>7.6 To commission an entirely new and integrated pathway of supported housing for homeless young people and care leavers, with a range of provision types, settings and support-levels that enable young people to build on their skills, interests and assets towards independent living.</p> <p>7.7 To create a specially designed resilience and independent living skills programme for young people in supported housing as a prerequisite to move-on, ensuring young people leave supported housing with the skills and confidence to never return, to reduce tenancy failure, boost employability and strengthen healthy and positive choice-making.</p>
Mental Health	<p>7.8 To create a peripatetic access and intervention team, aligned with locality mental health models, housing offices & support services; offering short-term tenancy sustainment interventions, medication support, pathway assessment and ongoing referrals/signposting for people at risk of homelessness or hospitalisation due to mental health conditions.</p> <p>7.9 To conduct a short and separate evaluation of the mental health supported housing pathway with specific focus on contributions to reducing hospital admissions, reducing delayed discharge from hospital, employability, skills and community contributions and reducing risk and offending behaviour</p> <p>7.10 To increase the capacity of the Housing First scheme, in recognition of the excellent outcomes and value for money it has demonstrated supporting adults with very complex mental health and homelessness histories</p> <p>7.11 To pilot the Psychologically Informed Environment approach to create a designated service for women with complex needs around trauma, substance use and homelessness.</p>
Learning Disability	<p>7.12 To remodel and rebalance the supported housing provision for adults with learning disabilities to create more supported housing for those with higher needs which is much needed as an alternative to residential care and to support adults with more complex and interconnected disabilities and health conditions</p> <p>7.13 To create a 10-unit social lettings quota for adults with learning disabilities as a route into independent living out of supported housing.</p> <p>7.14 To commission a specialist floating support scheme for those living independently, which enables people to build strong peer and community networks, pool resources and add value to the communities in which they live</p>

Older People	<p>7.15 To support Homes for Haringey to remodel the current supported housing offer for older people, moving to a hub and cluster approach with 8 open-access hub services spread equally between the east and west of the borough that will make better use of facilities as well as supporting older people in a more personalised way.</p> <p>7.16 To commit to building 200 units of Extra-Care provision in the borough by exploring the potential redevelopment of existing sheltered housing schemes for this purpose. This will start with in-depth appraisals of nine Council sheltered schemes as well as discussions with RSL's about other suitable sites in the borough.</p> <p>7.17 To increase the availability of floating support for older people to enable extended independence in the community and ensure earlier access to assistive technologies, adaptations and social inclusion activities</p>
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8. To note that specific delivery plans would be developed for the implementation of the above recommendations and to agree the Decision Roadmap proposed on pg.20 of appendix 3 as this sets out the indicative milestones for the first year of implementation. The roadmap sets out the following proposed milestones:

March 2017; following Cabinet approval, work on the transformation recommendations set out in this document will commence.

Autumn 2017; Officers to return to Cabinet with an update on progress, including details of proposed model of support in sheltered housing, the outcome of site appraisals completed on sheltered sites and the final designs of the young people's supported housing pathway. Dependent on the outcome of the site appraisals, this report will likely include a request for approval to formally consult with sheltered housing tenants.

Winter 2017/18; Officers to return to Cabinet with a request to agree the award of contracts for the newly designed young people's pathway and the outcome of the consultation with sheltered housing tenants.

Spring 2018; Officers to return to Cabinet with an update on project progress; implementation of the young people's pathway, remodelling of the learning disability supported housing offer and the revised model of support in sheltered housing.

9. To agree that the following supplementary areas of work, as recommended by the Supported Housing Review Members Working Group be completed:

Supplementary	<p>9.1 Assessment of opportunities for move-on from supported housing, exploring shared housing models, rent deposit schemes, tenancy resilience training and nominations into social housing properties.</p>
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	9.2 To support Homes for Haringey to improve the downsizing offer for under-occupiers in Haringey, to include exploration of seaside and country moves, incentive payments and home-sharing initiatives.
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Reasons for Decision

Cabinet is required to approve the recommendations from the Supported Housing Review set out in the Supported Housing Recommendations Framework.

Approval is required to support the delivery of the Council's strategic priorities for vulnerable adults as part of the Corporate Plan (2015-18) and commitments made in the Medium Term Financial Strategy (2017/18).

Approval is required to address the issues, gaps and opportunities identified by the Supported Housing Review, briefly outlined below and described in detail in appendices 2 and 3;

Young People – our current supported housing for young people and care leavers is not effectively contributing to our responsibilities as outlined by the Children Leaving Care Act (2000), Housing Act (Amended 2002) and the judgement in LB Southwark vs. G (2009). Additionally, the cohort of care leavers for whom we are responsible is due to increase as a result of the responsibilities outlined in the Children and Social Work Bill, due to be enacted in Autumn 2017. This will require local authorities to support care leavers not in education, employment and training until the age of 25 years old, a cohort who typically have a range of complex and interrelated issues and experiences who are commonly living in supported accommodation and frequently experience eviction, tenancy failure and debt as a result of gaps in available support and expertise. The current provision will not sufficiently deliver our new responsibilities and does not deliver best value or best practice. In recognising this the Council proposes to bring supported housing into its work to develop a strong care leaver offer in Haringey with support from successful bids to the Design Council and Department for Education (outcome pending). Failure to make changes to supported housing for young people will result in unsustainable future costs and a service which is unable to meet the needs of vulnerable members of the cohort as well as legal requirements to support a larger cohort. Approval is required to realise the opportunities identified by the Supported Housing Review which will significantly improve the quality of housing support as well as savings proposed in the Medium Term Financial Strategy (2017/18).

Older People – the population of older people in Haringey has changed significantly in recent years, with larger numbers of people aged over 75 years old with complex health and care needs and lower numbers of younger older people who are living independently until later in life. This has resulted in our sheltered housing offer no longer meeting their needs effectively. Data and intelligence collated by the Supported Housing Review shows clear unmet need and financial imperative for 200 additional units of Extra-Care housing as an alternative to residential and nursing care. Initial site-appraisals, conducted on all sheltered housing properties owned by the Council as part of the Review, identified nine potential sites where extra-care could be developed to bridge this gap. Engagement work with sheltered housing tenants also

identified that loneliness, poor health and social isolation were not being sufficiently addressed by the current models of support available and that under-used communal spaces provide opportunities to address this by creating hub services. Approval is required to ensure that housing support for older people is in line with the known needs of older people in the borough, and actively contributes to the early intervention and prevention of social care dependence, unplanned hospital admissions and financial savings in Adults Social Care.

Learning Disability – our current supported housing offer for people with learning disabilities has not been refreshed in some years and the support available is dated, expensive and not aligned with our strategic priorities. It has been identified as part of the Medium Term Financial Strategy (2017/18) that remodelling the supported housing for this cohort will create suitable alternatives to residential care for adults with severe disabilities and opportunities for independence for those currently stuck in supported housing due to lack of move-on options in the community. Approval is required to remodel supported housing for people with learning disabilities to deliver our commitment to choice and control set out in the Corporate Plan and to realise financial savings identified in the Medium Term Financial Strategy (2017/18).

Mental Health – the supported housing review identifies an increasing demand for mental health supported housing both through increased homelessness within this cohort and the need to find alternatives to residential care. Current mental health supported housing is struggling to adequately support the cohort in need, with referral and assessment delays, issues with acquiring suitable buildings and concerns about a small cohort of vulnerable women whose needs are not being addressed. In contrast, intensive Housing First support models recently piloted in the borough have been highly successful in reducing hospital admissions, care packages and interaction with the criminal justice system. Approval is required to introduce preventative support for this client group to manage demand for finite supported housing options, respond to early signs of crisis to prevent homelessness and hospitalisation and reduce the costs associated with repeat homelessness and complex trauma for vulnerable women.

Alternative Options Considered

The Council already has a range of commissioning plans for housing related support and supported housing. However, the Supported Housing review has found firm evidence of changing and unmet need for housing support in the borough. Additionally, and the Council must find alternatives to residential care and reduce temporary accommodation usage as a matter of urgency. Attempting to continue with unchanged supported housing provision would incur immediately unsustainable financial costs across social care and housing. Adult Social Care costs are expected to rise by 30% in the next two years and this will increase further if suitable alternatives are not found for the rising needs of the boroughs population. As an example, failing to address the unmet demand for Extra-Care housing incurs additional costs of around £26,000 per year per person for every unit of residential or nursing care used instead. With a shortfall of 200 Extra-Care units, making no changes at all, in this area alone, is clearly not an option.

The Council could also consider carrying out individual refreshes of existing service models and contracts, with the view to driving forward better quality and efficiency on

a service-by-service basis. However, the extent of local and national policy changes in recent years are such that this would not enable the Council to adequately meet the challenges it faces in supporting vulnerable residents. Further, this approach would fail to balance the full spectrum of client groups and needs against the available revenue funding and capital assets to make the best use of finite resources.

Alternatively, the Council could move forward without a strategic framework for housing support as there is no statutory requirement for a local authority to produce one. However, having a coherent commissioning framework and approach, founded in evidence of current and projected need, is considered best practice. Equally important is the articulation of how the Council will meet housing and social care challenges and deliver its objectives and priorities as set out in the Corporate Plan 2015-18.

The Recommendations Framework outlines a vision, principles and recommendations for change in housing support that aim to achieve the Council's priorities to support vulnerable residents. Alternative options were discounted where they:

- Would not be consistent with the data and intelligence about housing support need in the borough
- Would not have been consistent with the general tenor of feedback and engagement with service users, service providers and technical specialists
- Did not comply with current and forthcoming government legislation
- Would have represented policy choices that are unachievable given known and likely constraints

217. APPROVAL OF THE HARINGEY TRAVEL POLICY PROMOTING INDEPENDENCE, ENABLING MOBILITY.

The Cabinet Member for Children and Families introduced the report and policy which set out the eligibility criteria for Council funded travel. This had been developed in accordance with statutory responsibilities and affected children and young people, up to the age of 18 and Adults with learning disabilities and other disabilities. The policy had been developed in full consideration of statutory frameworks that might be applicable and with full consultation. The main aims of the policy were to provide clarity to children, young people and adults who may be eligible for funded Council travel and promote independence in travel for children, young people and adults affected by the policy.

In response to questions from Councillor Morris:

- The discussion at the Adults and Health Scrutiny Panel was related to the transport of clients to the Haynes day care centre and it had been agreed that the Council would continue to provide this mini bus service. But this decision was not taken in reference to the wider Travel Policy.
- As set out at the Cabinet meeting in December, the draft policy had been withdrawn as there were further statutory consultation to be completed and the

report had now been amended in light of further consultation responses being received from statutory bodies.

RESOLVED

1. To consider and take into account the feedback from the consultation undertaken which is set out at 6.4 and in Appendix 3;
2. To consider and take into account the equalities impact assessment of the proposals on protected groups at Appendix 2;
3. To consider and take into account the actions proposed in Appendix 2 to mitigate the impact of the policy on the protected groups; and
4. To approve the Travel Policy, Promoting Independence, Enabling Mobility, to take effect from 1st April 2017 attached at Appendix 1.

Reasons for decision

Through the Corporate Plan, the Council aims to give children the best start in life and to enable healthy and fulfilling lives for all residents. Council arrangements for travel support, which are not collated in a single policy, do not adequately reflect the current policy imperatives to maximise independence, promote personalisation and enable greater resilience.

The Council recognises that most service users can, with support, meet their own needs for travel to access services and can use public transport to develop independence and social and life skills. It further recognises that to enable children, young people and adults to be more independent often requires the provision of support through initiatives such as travel training and the development of community involvement. The Policy's core principle is to promote the principle of independence through such initiatives whilst ensuring that funded passenger transport is made available where, following assessment, it is deemed to be the only reasonable means of ensuring that the service user can be safely transported to an assessed service.

Alternative options considered

Continuing with the current arrangements for travel was considered but rejected as it would not have met the requirements set out either in the Children and Families Act 2014 or the Care Act 2014 in respect of transitions and the importance of travel to giving children the best start in life and enabling adults to lead healthy and fulfilling lives. Developing separate policies for children and young people and for adults was also rejected on similar grounds.

Following consultation, the Policy better reflects the strategic aims of the Council to promote independence for children, young people and adults with the appropriate levels of support and training. The Policy changes largely reflect the primary purpose of the Policy which is to ensure that children, young people and adults who may have mobility needs are able to access support in the most independent way.

218. NORTH TOTTENHAM TOWNSCAPE HERITAGE INITIATIVE - APPOINTMENT OF PRINCIPAL CONTRACTOR FOR PHASE 1 WORKS

The Leader of the Council introduced the report, which took forward agreement for a combination of Council, Heritage Lottery, and property owner funding to restore up to 28 historic shop fronts on White Hart Lane and the High Road.

This report was seeking approval to enter into a contract with Cuttle Construction Limited, the preferred bidder for Phase 1 of the North Tottenham Townscape Heritage Initiative.

In response to a question from Councillor Morris, Cabinet noted that the four historic buildings referred to were entirely different to this scheme. There was no financial contribution required from Spurs to this scheme which was a Heritage Lottery scheme.

RESOLVED

That in accordance with Contract Standing Order 9.07.1(d) Cabinet approves the award of the contract for Phase 1 of the North Tottenham THI to Cuttle Construction Limited for the contract sum of £673,845.

Reasons for decision

To enable the implementation and completion of repair and restoration works as part of the THI. In accordance with the grant agreement between the Council and HLF and the approved programme, Phase 1 works are required to start in July 2017 and be completed by December 2017.

Alternative options considered

To not appoint a contractor would mean the terms of the grant agreement between the Council and HLF not being met and potentially result in the loss of external investment in North Tottenham of over £1,468,000 from HLF and £304,000 from local property owners. The HLF grant must be spent by March 2020.

219. INVESTING IN THE REAL LETTINGS SCHEME TO ACQUIRE PROPERTIES FOR USE TO DISCHARGE HOMELESSNESS DUTY TO THE PRIVATE RENTED SECTOR

The Leader of the Council introduced the report, which sought Cabinet agreement to take forward joint investment in the Real Lettings Fund.

This decision would aim to provide longer-term sustainable homes, with high quality management and move on to support provided by St Mungo's. It would reduce the need to place homeless households in expensive and unsuitable emergency accommodation.

It would further involve a partnership with three other London Boroughs – Croydon, Lambeth and Westminster, with the Mayor of London also considering investing. The Fund would provide homes to be managed by St Mungo's, which were noted to have

an excellent record in supporting homeless people and assisting them to move on into settled housing.

The Leader expressed that this decision was not the whole or the only solution to the Council's homelessness challenge. But was one of a suite of proposals, described in the report that would start to produce better outcomes for homeless households and ultimately reduce costs for the Council.

The Leader asked Cabinet to note that the report recommended investing in the Fund, with 30% of that investment (£4.5 million) being Right to Buy receipts. Cabinet noted that, although Lambeth have invested in the fund using their RTB receipts, the Council had sought QC's advice as to whether this would be an appropriate use of these funds. This advice has now been received.

The Leader reported that the QC did not advise that the Council cannot use the funds in this way. He notes that he was not able to find any law or guidance specifically on this particular issue. Given the nature of the financial arrangements in this Fund, he advised that the Council should seek express consent of the Secretary of State to use the funds in this way. Officers would now seek to do this.

Consequently, Cabinet was asked to make the decision on whether to invest in the Fund contingent on the Secretary of State granting consent for making payments to the fund out of Right to Buy receipts as set out above.

Therefore the resolutions and decisions below were contingent on first receiving express approval from the Secretary of State to use the Right to Buy receipts for these purposes.

Subject to receiving express approval from the Secretary of State to using Right To Buy receipts Cabinet **RESOLVED**

1. To agree to the Council participating in the Fund as a limited partner and to invest a total sum of £15 million in the Fund for the purpose and objectives set out in section 6 of this report.
2. That this be funded from the capital budget for Temporary Accommodation Property Acquisition Scheme agreed by Full Council in the Capital Strategy in February 2017. Therefore this would be financed from the Council's own resources with £4.5m financed using Right to buy Receipts if permissible.
3. To agree to the Council entering into the nomination agreement with St Mungo's. This agreement was ancillary to the Fund and is intended to secure nominations for Haringey to 47 properties within Greater London for the lifetime of the Fund.
4. To give delegated authority to the Director of Regeneration, Planning and Development in consultation with the Section 151 Officer and the Cabinet Member for Housing, Regeneration and Planning, to approve the final terms and conditions and all documentation.

Reasons for Decision

Help the Council meet its statutory duty to provide accommodation to homeless households in accordance with the provisions of Part VII of the Housing Act 1996, by increasing the supply of accommodation into which the Council will be able to place them, ending their housing duty.

Improve the quality of accommodation into which the households are placed and improve the support provided to them.

Help reduce the costs currently accruing to the Council in meeting that duty and potentially provide a return on the capital invested.

Alternative Options Considered

Other options considered include:

Investing the £15 million in other means of acquiring stock

The Council could offer the £15 million as low (or no) interest loans to Housing Associations to build stock to which the Council could nominate homeless families. But this is unlikely to be attractive to Housing Associations because they are able to access relatively cheap borrowing fairly easily. Indeed Government low cost loan schemes have had very little take up in the sector.

The Council could offer it as grant to achieve the same end. If it did so using Right to Buy receipts it would not easily be able to combine it with other public funding, notably from the GLA, in the way that the Fund can combine these funds. If it did so using borrowing, it would be a questionable use of Council resources to borrow against its own assets to increase the asset base of any particular Housing Association.

The Council could also use these funds to acquire such stock itself for use to meet its statutory duties. This option is also being explored and could be delivered alongside the Real Lettings scheme, where the opportunity to acquire homes arises and where the viability is strong. The financing of such purchases would be considered separately and would need to address three main drawbacks, as set against the Real Lettings scheme. Firstly, there would not be the expertise of the Fund in acquiring and managing the stock, built up over the two previous funds that have acquired stock all over the capital. Secondly, were the stock owned directly by the Council in the HRA it would raise issues about the rents that could be charged and this may undermine the viability of the scheme. Thirdly, purchasing independently would not provide the Council with some of the protection provided by a wider portfolio should there be any housing market downturn. These do not rule out future initiatives in this direction, but are highlighted to stress the fact that the Real Lettings scheme offers a tested, relatively straightforward and immediately available route to acquire the use of housing stock.

There are a range of initiatives under way to reduce the cost of temporary accommodation, and to effectively prevent homelessness and the reliance on expensive nightly let temporary housing from the private rented sector (known as 'annexes'). This proposal is one of several approaches, supplementing the drive to produce greater numbers of better priced and sustainable homes, to either prevent homelessness or move people on from expensive temporary accommodation. These include:

- the drive to access greater numbers of Assured Shorthold Tenancy offers in the private rented sector, where homeless people are able to establish themselves in a settled home, no longer requiring the Council to owe them a homelessness duty;
- the conversion of existing Council buildings into more affordable temporary or emergency housing, as has recently occurred with the conversion of the Broadwater Lodge former care home into emergency accommodation for families;
- the consideration of new temporary homes being built, using modular technology and using temporary sites within and near to Haringey;
- the temporary use of Council housing that has been earmarked for future demolition, through regeneration schemes; and
- the consideration, as appropriate, of moves out of London to meet some temporary accommodation needs

Not making any such investment in new homes for temporary accommodation

The current cost of temporary accommodation to the Council, around £7m per annum as of Q3 2016, is unsustainable. This proposal will only go some way towards reducing these costs. However it is essential that the Council takes some action to increase supply of alternatives to expensive Temporary Accommodation, in addition to the programme in place to maximise homelessness prevention. If the capital is available to invest in a scheme with very low risk that will likely deliver substantial revenue savings alongside a medium term capital gain, the Council's financial position does not easily allow it to ignore that opportunity.

220. REGULATION OF INVESTIGATORY POWERS ACT (RIPA) 2000: USE WITHIN THE COUNCIL 2016/17 AND UPDATES TO THE COUNCIL'S POLICY

The Cabinet Member for Corporate Resources introduced the report which set out the details of the Regulation of Investigatory Powers Act (RIPA). This ensured that all public authorities were able to carry out covert surveillance on a statutory basis without breaching The Human Rights Act 1998, Article 8, the right to privacy. Elected members were required to review Haringey's use of RIPA and approve its policy.

The Cabinet Member advised that the Council makes very limited use of RIPA legislation – no applications have been made in 2016/17 but the Council needs to make sure that its policy and procedures complied with the Codes of Practice.

The Council was inspected on its use of RIPA in November 2016 which confirmed that the Council's procedures complied with Home Office guidance. The inspector made one recommendation that further training and guidance should be considered for those services that may use social media as part of their routine processes.

The policy had been updated at Section 6 – Social Networking Sites and Internet Sites. The previous version of the policy contained information on the use of social media (Facebook, Twitter, Whatsapp, Snapchat etc), but Section 6 now provided more detailed guidance on how to use social media within RIPA guidelines (at paragraph 6.2).

The updates to the policy with regard to the use of social media complied with guidance issued by the Home Office and the Office of the Surveillance Commissioner in 2016.

RESOLVED

1. To note the use of RIPA by the Council;
2. To approve the amended RIPA policy at Appendix 1 (updated at Section 6 – Social Networking Sites and Internet Sites) and agrees that the officers listed in the appendix to Appendix 1 be permitted to authorise directed surveillance and the use of covert intelligence under s.28 and S.29 of RIPA 2000 prior to judicial approval; and
3. To delegate responsibility for updating and maintaining operational procedures for RIPA, in line with the Council's approved RIPA policy, to the Assistant Director for Corporate Governance.

Reasons for decision

The Protection of Freedoms Act requires members to be advised about the use of powers under RIPA and to approve the Council's policy for the use of directed surveillance.

Alternative options considered

The Codes of Practice that cover RIPA require the Council to report the use of its powers under the Act and obtain member approval for its policy on the use of RIPA. This report fulfils the Council's requirements under the Codes of Practice. There are no alternative reporting or approval options available under the Codes of Practice.

221. EXTENSION AND VARIATION OF WHITTINGTON HEALTH SCHOOL NURSING CONTRACT

The Cabinet Member for Children and Families introduced the report which sought approval to the extension of the school nursing service contract along with a variation to the service specification.

The school nursing service contributed to the improvement of children and young people's physical, mental health and emotional well-being as measured by a range of outcomes set out within the Public Health Outcomes Framework. In addition, as part of the Corporate Plan Priority 1, the public health team had started a transformation programme with the school nursing service to implement the 5 – 19 year old Healthy Child Programme (HCP). This followed on from the successful implementation of the 0 – 5 year old HCP led by the commissioned health visiting service. The extension of this contract would enable the transformation work to be continued.

In response to a question from Councillor Morris, the vaccination programme would continue in schools but this would be provided by Vaccination UK.

RESOLVED

To approve, in accordance with Contract Standing Order 10.02.1(b) the following variations to the school nursing service contract:

1. Subject to the variation to the contract specification referred to in paragraph 3.1.2 below, the extension of the contract by 1 year, in exercise of the option to extend provided for in the original contract, for a second year value of £530,000.
2. a variation to the contract specification to omit the provision of the childhood immunisations and flu programme (accounting for £233,194 of the first year contract price) as a result of the discontinuation of the co-commissioning arrangement funded by NHS England when the section 256 agreement on that expires on 31st March 2017.

Reasons for decision

Cabinet approved in January 2016 the contract for the provision of a school nursing service. The contract length was for 1 year with the option to extend for 1 year.

The original contract required provision of the core school nursing service as well as of the school age vaccination and the child flu vaccination programme. The latter programme was included as a result of a co-commissioning arrangement under a section 256 agreement between the Council and NHS England which provided funding of £233,194. As this funding comes to an end with the expiry of the one-year co-commissioning agreement on 31st March 2017, it is proposed to omit the vaccination programme from the specification of this contract. The sole commissioning responsibility for the immunisation programme remains with NHS England, who have identified a new provider for the vaccination programme service. The core school nursing service will remain the same.

The extension and variation will enable the public health team to continue working with Whittington Health NHS Trust to maximise the efficiencies and progress the 5-19 year old transformation programme that is part of the Priority 1 Board activities for 2017/18. The transformation programme focuses on implementation of a universal Healthy Child Programme to reduce inequalities and achieve better outcomes for children, young people and their families.

Implementing the 5-19 year old HCP will enable Haringey to work towards the national agenda of wider integration across 0-19 years with alignment to the 0-5 year old universal Healthy Child Programme that is operating across the health visiting service, children's centres and children's services' early help offer.

The school nursing service delivers the mandated National Child Measurement Programme (NCMP) which is a statutory function within the Public Health Grant.

Haringey Council and Haringey Clinical Commissioning Group have entered into a partnership with Islington Council and Islington Clinical Commissioning Group. One of the workstreams is children and young people, led by Whittington Health NHS Trust. The workstream focuses on reducing A & E attendance, long term conditions (particularly asthma) and planning transition to adult services. Alongside this work stream the two public health teams are collaborating on reducing child obesity. As Islington's public health team commission Whittington Health NHS Trust to deliver their school nursing service, extending Haringey's school nursing contract will enable the two public health teams to work together to deliver efficiencies and innovation with the provider.

Alternative options considered

Currently NHS organisations are the main provider of school nursing services across the country. The market isn't competitive and is under-developed. When the service was tendered in 2015 there was good market engagement but only 1 bid was submitted which was from Whittington Health NHS Trust.

Since the last procurement no new market opportunities, in terms of new providers, has arisen. Extending the contract would enable Haringey to procure again later when the market may have developed further and include the 0-5 public health services, to allow for procurement of an integrated 0-19 year old service.

222. EXTENSION AND VARIATION OF THE 0-5 (HEALTH VISITING AND FAMILY NURSE PARTNERSHIP) CONTRACT

The Cabinet Member for Children and Families introduced the report which sought agreement to the extension of the existing 0-5 year old public health services contract along with a variation to the services deliverable under the contract. The contract included the provision of the health visiting service and the family nurse partnership programme and it was proposed to add to this coordination and delivery of the HENRY Programme.

The Leader highlighted the real progress made by the Council and Public Health team in moving to a universal model and being able to provide this service.

RESOLVED

1. To approve, in accordance with Contract Standing Order CSO 10.02.1(b), the following variation to the Council's health visiting and family nurse partnership services contract with the Whittington Health NHS Trust.
2. Subject to the variation to the contract specification referred to in paragraph below, the extension of the contract by 1 year at a cost of £4,832,029.
3. A variation to the contract specification to include a requirement to coordinate and deliver the HENRY Programme and to reduce the required capacity of the family nurse partnership programme.

Reasons for decision

Extending the contract will allow time to fully implement the national evidence based '4, 5, 6 model' (see section 6.2). The service has already implemented the 4 levels and the 5 mandated contacts and plans are already underway for the implementation of the 6 high impact areas¹.

The variation within the contract will be a revision to the specified services in two respects. Firstly, a requirement for co-ordination and implementation of the HENRY Programme will be added. This is a successful behaviour change programme for families focussing on healthy eating. The public health team has co-ordinated this programme for the last 3 years. It is now part of the health visiting team's mandatory training and will support implementation of one part of the 6 high impact areas – healthy weight.

The other variation to the specification will be to reduce the required capacity of the family nurse partnership programme. This is necessary as demand has reduced due to the fall in teenage pregnancies.

The contract extension will align the duration of the health visiting service and the family nurse partnership programme contract with that of the school nursing service contract. This will provide the opportunity to procure an integrated 0 – 19 year old service in the future.

Operationally, the 0-5 public health service is integrated within the wider offer for children and families and is embedded within the wider health pathways for children, young people and their families.

In Haringey, the CCG's commissioned children's community health services (except children's community nursing) are provided by Whittington Health NHS Trust. These are part of a block arrangement through the NHS standard contract.

Alternative options considered

Currently across the country NHS organisations are the main providers of health visiting services and the family nurse partnership programme. A number of Councils have gone out to market following the transfer of commissioning responsibility to local authorities in October 2015. This has led to mixed results as the market is under developed. As a result many Councils have either extended service provision with their current provider beyond the recommended 'sunset clause'². One Council in London has brought the service 'in-house', and others have placed them within their section 75 partnership arrangements with their Clinical Commissioning Groups (CCG).

Historically the provision of 0-5 public health services has been through the standard NHS local community providers. Since the transfer of responsibility for commissioning

¹ 6 high impact areas - transition to parenthood, maternal mental health, breast feeding, healthy weight, managing minor ailments and accident prevention, healthy two year olds and school readiness

² 'Sunset clause' – 18 month timeframe advised by NHS England during the transition planning for the transfer of commissioning responsibility to support stability within the NHS provider landscape

the 0-5 public health services to local Councils in October 2015, this position remains largely unchanged across the 32 London boroughs as 98% of all 0-5 public health services are delivered by the standard NHS community providers.

The children and young people services commissioned by Haringey Council and Haringey CCG provided by the Whittington Health NHS Trust are part of an integrated service offer therefore for the Council to procure one part of the overall children, young people and their family service provision from a different provider could destabilise the pathways in place for our families, leading to fragmentation and compromise the stability of the provider to deliver services and achieve the required outcomes for children, young people and their families. Moreover, there is a very limited market for these types of children's community services, which is already evidenced in Haringey. For example, in 2015 Haringey public health team tendered the school nursing service. Despite there being good market engagement initially with 8 expressions of interest from providers, only 1 bid was submitted which was from the incumbent provider Whittington Health NHS Trust.

Haringey's experience is not dissimilar to that of other Councils. A recent scoping exercise by the London Association of Directors of Public Health found that for 0 – 5 year old public health services:

- 90% have extended their existing contracts since the commissioning transfer providing time to consider new commissioning models e.g. 0-19 year old services,
- some Councils entered into section 75 arrangements with their local CCGs as a vehicle to facilitate an integrated service model (3 boroughs) and
- 10% went out to tender in 2016, 1 borough received no bid submission at the end of the tender process and plans to bring the 0-5 service "in-house".

223. COMMUNITY EQUIPMENT FRAMEWORK

The Cabinet Member for Finance and Health introduced the report which recommended use of a Framework Agreement with Medequip through the London Consortium being continued to provide an enhanced responsive equipment service delivery. This decision would provide the residents of Haringey with disabilities, the choice to remain in their own home as opposed to being a patient in a hospital bed.

RESOLVED

To award a call off order under the Framework Agreement for the provision of Community Equipment for four years, from 1st April 2017 to 31st March 2021 with the option to extend for a further two years to Medequip. With an estimated annual cost of £1.2 million in year one and £1.2 million in years two to four, equating to £5 million over the initial four year term.

Reasons for decision

The Framework Agreement has significantly enhanced service delivery and has been responsive to the increasing demands. Together with the partners in the Consortium the service has received a cost effective value for money service.

Haringey residents will continue to benefit from a responsive service whilst the service will benefit financially as this new Framework Agreement has secured several new benefits and improvements, including additional activity speeds to facilitate 7-day working. It is expected that the Framework Agreement will be accessed by 16 other boroughs in the London Consortium.

Haringey CCG will benefit from continued access to community health equipment through their current Access Agreement with Haringey Council.

The new contract is forecast to achieve savings for Haringey of 6.02% compared with the existing Framework. All else being equal with no change in demand, savings will range between 1.3% and 4.1% in the first year. A substantial proportion of the savings will come from lower cost equipment.

Alternative options considered

There is no alternative to the call off order as not to agree to this would result in the residents of Haringey not receiving personal care equipment to enable them to remain independent in their own homes, resulting in individuals moving into residential/long term care.

224. MINUTES OF OTHER BODIES

RESOLVED

- To note the minutes of the Corporate Parenting Advisory Committee on the 6th of February 2017 & Leader's signing on 14th of February 2017.

225. SIGNIFICANT AND DELEGATED ACTIONS

RESOLVED

To note the significant and delegated actions taken by directors in February 2017.

226. NEW ITEMS OF URGENT BUSINESS

None

227. EXCLUSION OF THE PRESS AND PUBLIC

RESOLVED

That the press and public be excluded from the remainder of the meeting as the items below contain exempt information, as defined under paragraph, 3 and 5 , Part 1, schedule 12A of the Local Government Act 1972.

228. EXEMPT CABINET MINUTES

To agree and sign the exempt minutes of the Cabinet meeting held on the 14th of February 2017.

229. NEW ITEMS OF EXEMPT URGENT BUSINESS

None