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Officer

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14 November 2025

To: All Members of the Adults & Health Scrutiny Panel

Dear Member,

Adults & Health Scrutiny Panel - Thursday, 13th November, 2025

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

7. ACTION TRACKER (PAGES 1 - 14)

Report to follow.

Yours sincerely

Dominic O'Brien,
Principal Scrutiny Officer

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Adults & Health Scrutiny Panel – Action Tracker 2025-26

ACTIONS

MEETING 2 – 22nd Sep 2025

No.	ITEM	STATUS	ACTION	RESPONSE
12	Work Programme	IN PROGRESS	Scrutiny Review to be brought forward on communications with residents.	Scoping document submitted to Panel meeting on 13 th Nov 2025.
11	Joint Partnership Board	COMPLETE	The reestablishment of the Transport Inclusion group was raised as a concern. This issue was to be passed to the Culture, Community Safety & Environment Scrutiny Panel for monitoring.	Chair of the Community Safety & Environment Scrutiny Panel has been contacted and sent the details of this request.
10	Joint Partnership Board	COMPLETE	The Tottenham Pensioners Group supported by Cllr Peacock to be added to the list of JPB stakeholders.	This has been followed up and contact details exchanged.
9	Q1 Finance update	COMPLETE	The Panel requested information about the progress of savings proposals that had been agreed in previous years but were still in the process of being implemented. This information could be included from the Q2 finance report onwards or provided to the Panel as a separate update.	Request sent to Finance on inclusion of savings tracker for future quarterly finance updates.
8	Q1 Finance update	IN PROGRESS	The Panel noted that the graphs on service users and costs did not cover all age cohorts. It was explained that this was to cover the most relevant areas, but the Panel could request additional data if required.	Panel Members to specify any additional information that they wish to see.
7	Reablement (Q1 Finance update)	COMPLETE (ADDED TO)	The Panel requested details on the future model for reablement services. Jo Baty said that an options appraisal was being	Over the summer period external consultancy 31Ten did a health check review of the Haringey reablement service which is currently a Better Care Fund (BCF)

		WORK PROGRAMME)	worked through with progress expected 'in the next month or so'.	funded service operating a 'home first' model. The review outlined the strengths of the service and the areas for development, starting the exploration of the options for reablement in the future. The work was delayed due to an intense focus on the unforeseen closure of NRS Equipment service but is now back on track. Haringey's Reablement team is a service that plays a crucial role in helping people to maintain independence and longer-term wellbeing and has a key interface between health and social care. As such we want to ensure that the service reaches residents being discharged from hospital and in the community with the best potential for good outcomes. We also want to ensure that it is good value for money. We know that the BCFs are currently being reviewed and although there will not be any changes in 2026/2027- it will look differently thereafter. We would like to bring a full update to the panel in February 2026 which will give the opportunity set out clearly the purpose and aims of a future reablement model and an analysis of the options with recommendations.
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MEETING 1 – 30th Jun 2025

No.	ITEM	STATUS	ACTION	RESPONSE
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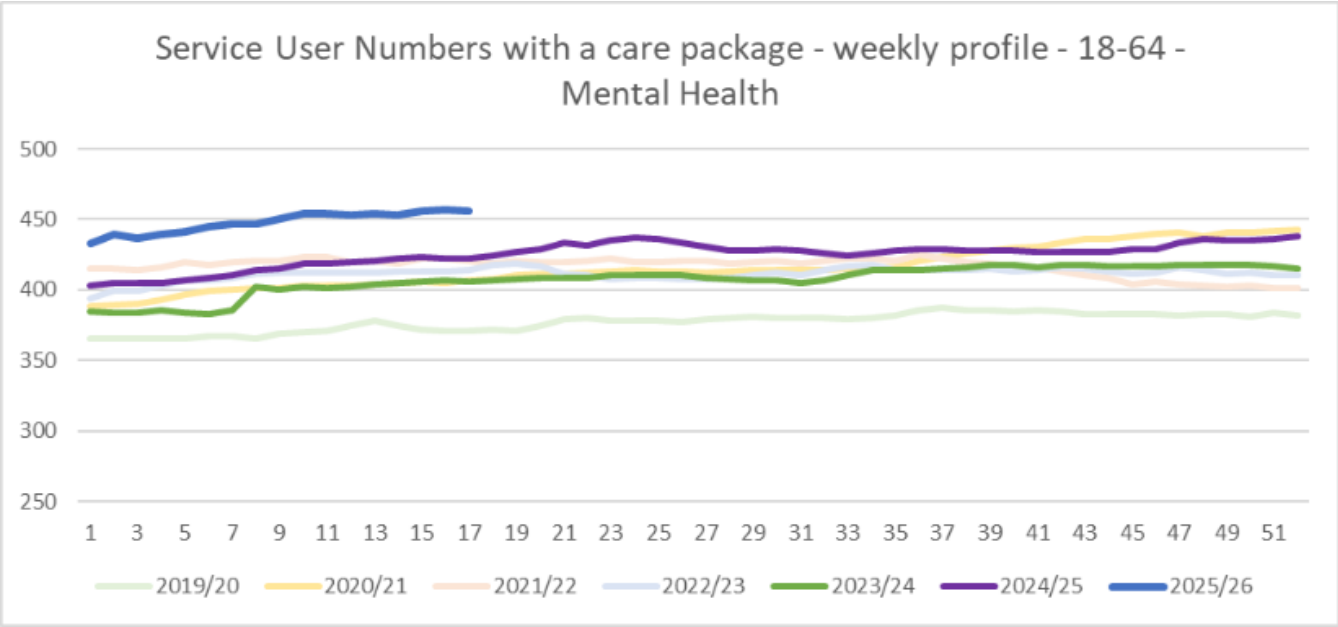
6	Work Programme	COMPLETE	Details requested on recruitment of co-optees to vacant position on the Scrutiny Panels.	A report including the details of the appointment procedure was discussed at the Overview & Scrutiny Committee meeting on 19th June 2025. This is provided as ATTACHMENT A . The next recruitment process, as outlined in the report, will be for the 2026/27 municipal year.
5	Cabinet Member Questions	INTERIM UPDATE ONLY. FULL REPORT NOT YET PUBLISHED.	Forthcoming ADASS report on Continuing Healthcare to be circulated.	ADASS Spring Survey 2025 – Continuing Healthcare (CHC) <i>(Wider report not yet completed or published)</i> Findings from the Spring Survey indicate significant pressures on councils linked to Continuing Healthcare (CHC): • Tightening eligibility and cost impacts – ○ 73% of Directors reported increased council overspends due to tighter CHC eligibility. ○ Almost half (49%) said fewer new people are qualifying for CHC. ○ 75% reported more requests for adult social care from people who previously qualified for CHC but no longer meet the criteria. • Increased disputes and complexity – ○ 61% of Directors reported an increase in disputes escalated to local resolution. ○ More specialist/complex care home placements are being transferred to councils, often involving self-funders. • Shift of responsibilities from NHS to social care – ○ Nearly three-quarters of Directors have seen an increase in delegated healthcare tasks carried out by social care staff.

				○ Four in five Directors are concerned that some essential daily healthcare is becoming means-tested for residents. ● Nursing care funding concerns – ○ Only 10% agree the NHS funded nursing care rate is sufficient to recruit and retain nurses in social care; 76% disagree. ○ Just 9% of councils say FNC funding covers the true cost of nurses in care homes. These figures highlight the growing financial and operational burden on adult social care as more healthcare responsibilities shift from the NHS to local authorities. Here is the link to the full Spring Survey Report, CHC can be found on pages 30-42. https://www.adass.org.uk/wp-content/uploads/2025/07/ADASS-Spring-Survey-Final-15-July-2025.pdf
4	Q3 Performance	COMPLETE	Canning Crescent - Final costs and projected future income for the project be provided.	Response: Currently the project will be delivered within the agreed budget as per the Member Signing report of £6,417,494, as approved in July 2025. Copy of the report: LINK The income for this project is currently being finalised due to ongoing rent negotiations. Further updates will be provided in the Autumn.
3a	Q3 Finance	COMPLETE	Panel noted that the GRAPH A and GRAPH B provided in response to Action Point 3 illustrated figures for the 18-64 age group. Further data on the 50-64 age group was requested.	We're continuing to develop the level of detail included in the individual service appendix of the Q2 Cabinet report, and there's room to include more information in future updates. The position from previous years was set out in the 2024/25 outturn report to Cabinet.

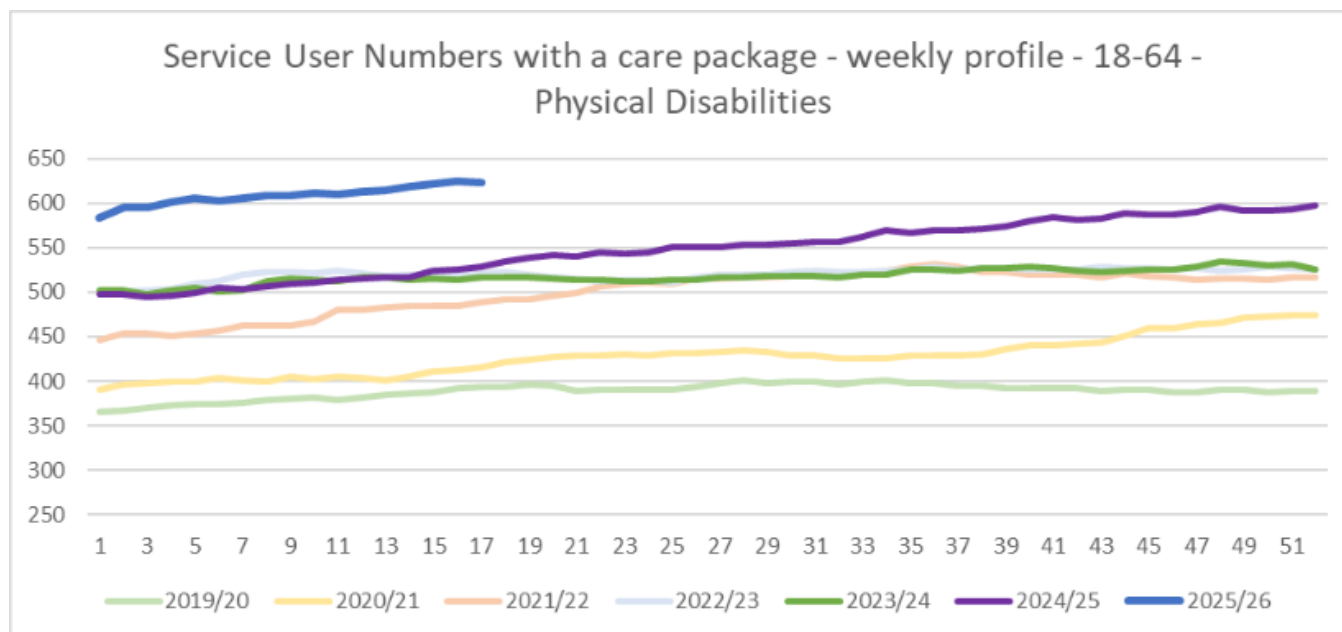
				For reference, here is a copy of the full 2024/25 outturn report. Please note that our current financial systems follow national reporting categories of 18–64 and 65+, so we don't separately track the 50–64 age group. The figures shared here are therefore intended as a high-level summary only. Going forward, we can provide separate and more detailed financial deep dive, to inform further discussion.
3	Q3 Finance	COMPLETE	Breakdown to be provided of the number of physical and mental conditions in younger adults with a care package. Context was the recent increase in the number of cases, with particular reference to the 50-64 age group.	Response: The increase on younger adults with a care package with both learning disability and mental health issues, relates, in part, to the work the Service undertook to address backlogs and thereafter the spike in numbers requiring support. Further work will be undertaken in August and September to understand other factors which may have impacted the increase. See GRAPH A and GRAPH B below for comparisons with previous years.
2	Adult Carers Strategy 2025-28	COMPLETE	Consideration to be given to including employment opportunities for carers in the KPIs.	Response: We can confirm that, following the Adult & Health Scrutiny Panel, this action was progressed and the proportion of working-age carers in employment has now been included as a local KPI under the Financial Resilience and Employment priority. This indicator is expected to show improvement over time, with the Personal Social Services Survey of Adult Carers in England identified as the data source.

1	Terms of Reference	COMPLETE	Remit for Adults & Health Scrutiny Panel to be strengthened to more accurately reflect the role of the Panel in the scrutiny of health services.	Remit and Scrutiny Protocol has been redrafted and was approved by the Overview & Scrutiny Committee on 22 nd July 2025.
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GRAPH A



GRAPH B



Issues to monitor/add to Work Programme

No.	ITEM	STATUS	ACTION	POSSIBLE FUTURE REPORT DATE
	Local Government & Social Care Ombudsman		Additional areas to scrutinise at the next meeting: - Explanatory paragraphs for each upheld complaint (available on Ombudsman website) - The Ombudsman made reference to the lack of a swift response from the Council to the Ombudsman and not just to the complaints.	December 2025
	Independence & Early Intervention (IEI) team		Priorities identified by the Panel at the Sep 2025 meeting: Building an understanding of what the role of Neighbourhood Connectors would be;	TBC

	(previously known as Connected Communities) (22 nd Sep 2025)		• How information about the new approach would be shared with local stakeholders that came into contact with residents with complex needs, such as GP practices; • Establishing a clear understanding of how the various funding sources would be brought together in a coherent and stable way, including the length of contracts that would be offered; • Ensuring the availability of up-to-date Haricare information to enable effective signposting resources for residents and professionals. • Ensuring that all Councillors were fully informed about the new approach and how to support residents to access the service. • That the responses to Councillor emails be considered as part of the redesign of systems as Councillors were not always kept updated.	
	Joint Partnership Board (22 nd Sep 2025)		Areas to monitor - identified by the Panel at the Sep 2025 meeting: • Efforts to encourage statutory partners to be actively involved with the reference groups including, health, public health, mental health and the local authority. • Wider partnership opportunities around funding, including health partners. • Monitoring progress towards outcomes. • Enabling all groups to be able to access the JPB and to contribute their opinions and expertise. • Establishment of a JPB website. • How the Council's volunteering offer could be used to bring in more skills and resources for the JPB.	TBC
	Maternity services (Work Programme - 30 th June 2025)		Future agenda item proposed: Provision of maternity services in NCL and the impact on Haringey residents.	2025/26 (Any)

	Q3 Performance (30 th June 2025)		Request for performance indicators to be linked to Scrutiny Panel remits in future reports.	N/A
	Q3 Finance (30 th June 2025)		Request for any future reports to include: • Details of number of care packages by cohort. • Details of forecasting conclusions. • Information about how savings impact on residents, for example if an Equality Impact Assessment had been carried out.	N/A
	Continuing Healthcare (30 th June 2025)		Consideration to be given to adding an item on this to the Work Programme.	2025/26 (Any)
	Adult Carers Strategy 2025-28 (30 th June 2025)		Suggestion that an item be held approximately 12 months (summer 2026) from the previous item. It was also suggested that carers involved in the co-production process could be invited to the meeting.	Summer 2026
Carried forward from 2024/25				
	Adult Improvement Board		Summary of key points discussed at the Adult Improvement Board to be circulated to Panel Members.	First update from meeting in May 2025 has been circulated.
	CQC Inspection		Item presented to Panel in March 2025. No date set for follow up report. Future updates on this issue to include: • Reports from Community Catalysts on a) the Joint Partnership Board and b) the Learning Disabilities Carer Forum • Training for managers on the ethos of improved communications. • Progress with the co-production work. • Progress towards the website improvements.	Provisionally scheduled for Dec 2025.

			• Progress on reducing Care Act assessment delays. • Details on how residents could have easier access to the information about their case, such as through a phone app for example.	
	Aids & Adaptations		Item presented to Panel in March 2025. No date set for follow up report. Future updates on this issue to include: • How the described improvements to communications (paragraph 4.6.2 of report) were working in practice. • Further details about the work of the project board and the Commissioning Coproduction group and progress against the Panel's previous recommendations. • Progress on innovative approaches using new technologies including AI. • Accurately capturing the voice of residents in the discussions on their case. • Improvements on contracts and commissioning, including through the Dynamic Purchasing System. • Monitoring and tracking of case progress, the use of the support plan as progress is made and how the resident is included in that process. Consideration to also be given to the possibility of joint scrutiny work with the Housing, Planning & Development Scrutiny Panel on the relevance of aids and adaptations to the bespoke housing programme.	No date set for follow up report.
	Savings Tracker		Item presented to Panel in December 2024. Panel to monitor: • AHC_SAV_013 – Direct Payments – Panel to consider further scrutiny on how information about Direct Payments was being communicated to residents.	Any finance item

			• AHC_SAV_018 – Grant Review (BCF-S75) – Pressures on both sides and the potential impact on joint commissioning to be noted as an ongoing risk. • AHC_SAV_021 – Supported Living Review – Panel to monitor review and ensure that support levels for clients were being maintained as the savings were being achieved. • New ways of working – Panel to consider receiving more information about this in 2025/26 e.g. Invest-to-save, recruitment/retention, digital transformation, assistive technology, multidisciplinary working around adults, housing and health.	
	Quality Assurance		Item presented to Panel in December 2024. Panel to monitor: - Shortage of care home places in Haringey. - Ongoing pressure on the sector.	2025/26 (Any)
	Safeguarding Adults Board annual report		Item presented to Panel in September 2024 with next item due in Sep/Dec 2025. Recommendation from the Panel on future reports: - progress on subgroup for implementation of SAR recommendations. - details of mechanisms to support practice improvement and safeguarding across the partnership and how changes in practice were impacting on the lives of residents. (Practice & Improvement subgroup) - that clarification be provided on where Violence Against Women & Girls (VAWG) is addressed through the Board and its subgroups.	Scheduled for Dec 2025
	Smoke-free strategy		Item presented to Panel in September 2024. It was suggested that a further update could be provided in 2025/26 on work in schools on vaping including the local research/seminar, PSHE education and links with mental health teams.	2025/26 (Any)
	Dementia services		Item presented to Panel in September 2024. It was suggested that a further update could be provided in 2025/26, including:	Provisionally scheduled for Feb 2026.

			• progress with dementia-friendly GP practices • number of dementia service users • progress on outreach work and 'centre of excellence' approach (replicating that of the Haynes Centre in the west of the Borough) in the centre and east of the Borough • progress on the named-person approach where service users/carers have a single point of contact for all details on care plans and other information	
	Health & Wellbeing Strategy		Item presented to Panel in July 2024. It was suggested that a further update would be appropriate in 12-18 months' time (by Jan 2026) Recommendations for consideration and clarifications requested for the next update were: • It was noted that social isolation was included under the Improving Mental Wellbeing theme, but it was recommended that this could also be included under Preventative Health theme given the link to dementia and other conditions. • There were some challenges acknowledged in how some outcomes could be realistically monitored, such as people accessing green spaces. • Further clarification was requested on how the outcomes, monitoring and reporting would fit within the governance structure. • Further detail would be required on how health policy would be able to link to and influence the Local Plan in relation to housing policy and what realistic outcomes could be achieved given the complexities in this area. • Further detail would be required on how on the future partnership working and community engagement would work in practice.	Provisionally scheduled for Feb 2026.

	OTHER TOPICS		Other topics arising for consideration as future agenda items included: • Gambling harms (and involvement of Safeguarding Adults Board). • Weight management initiatives. • Self-neglect and hoarding • Promotion of leisure services to improve health and wellbeing. (Joint with Culture, Community Safety & Environment Scrutiny Panel)	
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