

## NOTICE OF MEETING

# ADULTS & HEALTH SCRUTINY PANEL

**Tuesday, 17th December, 2024, 6.30 pm - George Meehan House,  
294 High Road, N22 8JZ**

(To watch the live meeting, click [here](#) or watch the recording [here](#))

**Members:** Councillors Pippa Connor (Chair), Cathy Brennan, Thayahlan Iyngkaran, Mary Mason, Sean O'Donovan, Felicia Opoku and Sheila Peacock

**Co-optees/Non Voting Members:** Helena Kania

Quorum: 3

### 1. FILMING AT MEETINGS

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### 2. APOLOGIES FOR ABSENCE

### 3. ITEMS OF URGENT BUSINESS

The Chair will consider the admission of any late items of urgent business (late items will be considered under the agenda item where they appear. New items will be dealt with as noted below).

### 4. DECLARATIONS OF INTEREST

A Member with a disclosable pecuniary interest or a prejudicial interest in a matter who attends a meeting of the authority at which the matter is considered:

(i) must disclose the interest at the start of the meeting or when the interest becomes apparent, and

(ii) may not participate in any discussion or vote on the matter and must withdraw from the meeting room.

A member who discloses at a meeting a disclosable pecuniary interest which is not registered in the Members' Register of Interests or the subject of a pending notification must notify the Monitoring Officer of the interest within 28 days of the disclosure.

Disclosable pecuniary interests, personal interests and prejudicial interest are defined at Paragraphs 5-7 and Appendix A of the Members' Code of Conduct.

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

To consider any requests received in accordance with Part 4, Section B, Paragraph 29 of the Council's Constitution.

## **6. MINUTES (PAGES 1 - 16)**

To approve the minutes of the previous meeting.

## **7. ACTION TRACKER (PAGES 17 - 26)**

To review progress against action points from previous meetings in 2024/25.

## **8. APPOINTMENT OF NON-VOTING CO-OPTED MEMBER (PAGES 27 - 30)**

To consider the appointment of a new non-voting co-opted member of the Panel.

## **9. QUALITY ASSURANCE/CQC OVERVIEW**

To provide details of recent quality assurance activity carried out in Haringey.

Report to follow.

## **10. SAVINGS TRACKER (PAGES 31 - 32)**

To review the Savings Tracker 2024/25 (Q2) which includes details of previously agreed savings relevant to Adults & Health. This item was deferred from the previous meeting.

## **11. CABINET MEMBER QUESTIONS**

An opportunity to question the Cabinet Member for Health, Social Care & Well-being, Cllr Lucia das Neves, on developments within her portfolio.

**12. WORK PROGRAMME UPDATE (PAGES 33 - 38)**

To provide an overview of the 2024-26 work programme for the Panel and for any amendments to be proposed and considered.

**13. NEW ITEMS OF URGENT BUSINESS**

To consider any items admitted at item 3 above.

**14. DATES OF FUTURE MEETINGS**

- 10<sup>th</sup> Feb 2025 (6:30pm)

Dominic O'Brien, Principal Scrutiny Officer  
Tel – 020 8489 5896  
Email: dominic.obrien@haringey.gov.uk

Fiona Alderman  
Head of Legal & Governance (Monitoring Officer)  
George Meehan House, 294 High Road, Wood Green, N22 8JZ

Monday, 09 December 2024

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**MINUTES OF THE MEETING OF THE ADULTS & HEALTH  
SCRUTINY PANEL HELD ON THURSDAY 14TH NOVEMBER 2024,  
6.30 - 10.00pm**

**PRESENT:**

**Councillors: Pippa Connor (Chair), Cathy Brennan, Thayahlan Iyngkaran,  
Mary Mason, Sean O'Donovan & Felicia Opoku**

**Co-opted Members: Helena Kania**

**24. 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'.

**25. APOLOGIES FOR ABSENCE**

Apologies for absence were received from Cllr Sheila Peacock.

**26. ITEMS OF URGENT BUSINESS**

None.

**27. 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 Thayahlan Iyngkaran declared an interest as a consultant radiologist and a deputy medical director.

Helena Kania declared an interest as a co-Chair of the Joint Partnership Board.

**28. DEPUTATIONS/PETITIONS/ PRESENTATIONS/ QUESTIONS**

None.

**29. MINUTES**

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

**RESOLVED – That the minutes of the meeting held on 19th September 2024 be approved as an accurate record.**

**30. ACTION TRACKER**

Cllr Connor noted that she had requested further information regarding the response to action point 4 on Continuing Healthcare (CHC), specifically on why the CHC funding for patients in Haringey appeared to vary from other areas of the country. A response on this had not yet been received.

**31. APPOINTMENT OF NON-VOTING CO-OPTED MEMBER**

Dominic O'Brien, Scrutiny Officer, updated the Panel that, following further conversations with the proposed new non-voting Co-opted member, the current intention was to bring the report on the appointment to the next meeting of the Panel on 17<sup>th</sup> December 2024.

**32. SCRUTINY OF THE 2025/26 DRAFT BUDGET / 5-YEAR MEDIUM TERM FINANCIAL STRATEGY (2025/26 - 2029/30)**

An introduction to the reports for this item was provided by Neil Sinclair, Head of Finance (People). Referring to the report for the Cabinet meeting earlier in the week, Neil Sinclair explained that:

- The opening position for the planning of the revised Medium Term Financial Strategy (MTFS) was a budget gap of around £14m.
- In addition to this, the increased pressures for 2025/26, mainly in Adults and Children's services and housing demand, totalled around £39.6m of which around £15.1m was in Adult Social Services (see Table 1 in the Cabinet report).
- New savings and management actions had been identified to reduce the budget gap, but the revised budget gap was now £32.1m (see Table 5) and so further work was required across all services to be able to deliver a balanced budget.
- It was noted that the pressures on demand-led services were not fixed and had changed since the assumptions that were made in setting the 2024/25 budget the previous year. Demand for services and market prices were constantly moving (particularly due to inflation uplifts) and there were significant challenges in estimating future demand and costs.
- Based on current estimates, the cumulative total budget gap would be £132.8m by 2029/30 (see Table 6).
- Some headline figures on additional funding for local government had been provided by the Government at the Budget in October 2024 but information about the detailed financial settlement for Haringey was not yet available.

- A number of changes had been made to the Council's capital programme to reflect reduced affordability (see Table 7). This impacted on some schemes related to Adults & Health.

The Panel then asked questions about the budget gap and the impact of the budget pressures which were set out in Appendix 1:

- Cllr Connor asked how the risks of the budget gap could be mitigated and how the pressures in Adult Social Care could be addressed. Neil Sinclair said that, from a finance point of view, there was a recognition that the pressures were not steady or stable and so they had improved the modelling for this to provide the best estimate possible to support decision making by the service. Beverley Tarka, Director of Adults, Health & Communities, responded that the pressures in high-demand services were an area for the whole Council to address. The overall approach was therefore to interrogate every line of spend for the Council, establish improved efficiencies and ways of working and also transformational work which could take some time to bed in.
- Asked by Cllr Iyngkaran how demand was predicted and what the current trends were, Beverley Tarka explained that there had been a significant increase in recent years for over-65s, both in terms of number of cases and also the complexity of care needs, which was similar to national trends. The forecasting in the previous year had not taken account of the Council's significant waiting list for Care Act assessments and there had been a concerted effort recently to reduce the backlog leading to a spike in cases. Forecasting accuracy had since been improved. In relation to younger adults with statutory needs, she said that there was a positive picture with people living longer. People were coming into the service, usually at the age of 18, and required services for a significant period of time which was a challenge. Some areas could also be a niche market which meant that providers could aim to negotiate at a high cost and so, by the five North Central London (NCL) boroughs coming together, it helped to manage the pricing. Neil Sinclair added that data sets, including those produced by the Office for National Statistics, were examined to understand population trends and complexity needs.
- Cllr Connor asked what confidence the Panel could have with the future projections. Beverley Tarka said that a benchmarking exercise of statistical neighbours was carried out on unit costs of care, in which Haringey performed well. This was based on the previous year, so increasing costs then had to be factored in. One provider in particular had increased its charges by 36% when their contract came to an end, which the Council was not in a position to pay, so there were commissioning challenges in terms of the reaction of the market to higher overall costs. The NCL arrangements were helping to manage the market challenges. There had also been conversations with housing colleagues about addressing accommodation supply for younger people with support needs as this was an area that could drive up costs.
- Cllr Mason raised the issue of early intervention and prevention and about the Housing teams working together with Children's and Adult Social Care. Cllr Lucia das Neves, Cabinet Member for Health, Social Care & Wellbeing, noted that there had been significant recent structural changes in the Council to

improve this and to reduce silos and miscommunication. She added that every area of the Council was under pressure and so, as fast as the Council could build, it was still not enough and so this was a core challenge which required a focus on improving living conditions for people with the highest need. Beverley Tarka added that there were some excellent examples of early intervention and prevention in Haringey but reiterated that currently the adult social care budget was not sufficient to meet statutory obligations and so it was extremely challenging to fund this kind of work.

- Cllr O'Donovan noted that £600m of additional funding for adult social care had been earmarked by the Government in the recent Budget and queried how this was likely to be used. Cllr das Neves responded that, while any additional funding would be not be difficult to allocate given the existing shortage of funds for statutory services, the Budget had also created additional pressures for service providers with the increase in employers' National Insurance and the increase to the National Minimum Wage which was likely to be a factor when contracts were renewed. She added that some additional funding had been earmarked for the NHS and so she was interested in how this could be used collaboratively at a local level.
- Cllr O'Donovan requested details about funding for co-production work and for services to support people, particularly in times of crisis. Cllr das Neves responded that there were some important initiatives ongoing which were not very expensive including warm spaces, Reach & Connect, befriending support, the Council Tax reduction scheme and the use of the Household Support Fund for pensioners in need of winter fuel support. These were all important in terms of keeping people well and out of hospital. She added that some resources had been allocated to looking at how co-production could be improved and that there was a commissioning co-production group which would be involved in ideas for how to make savings and to deliver services in different ways.
- Cllr Connor referred to Table 1 in the Cabinet report (page 155 of the agenda pack) which stated that the additional forecast service pressures for 2025/26 were £15.1m, but that in 2026/27 this dropped to just £930k before rising significantly again in subsequent years. Neil Sinclair explained that the £15.1m addressed the budget gap for 2025/26 but then there was a new baseline for 2026/27 with funding of £6.57m built into the MTFS for that year. This meant that only £930k of additional funding was required for 2026/27 based on the current modelling. Thereafter, other increases in costs and inflation factors were built into the modelling which accounted for the further pressures. Cllr Connor queried whether the 2026/27 figures were realistic, noting that drawdown of reserves had been required in previous years when pressures had been higher than originally forecast. Neil Sinclair reiterated that they were aiming to address the budget gap based on the modelling being undertaken to ensure that the right budget envelope was used as the starting point. Cllr Connor acknowledged this but expressed concerns that the current forecast for 2025/26 represented a risk. **(RECOMMENDATION)**
- Cllr Connor referred to Table 2 in the Cabinet report (page 158 of the agenda pack) which showed significantly different levels of savings in different years. Neil Sinclair responded that the savings total reflected the profile of individual



savings which came on stream with different timings and speeds of delivery. The individual savings were set out in full in Appendix 2. Beverley Tarka added that this exercise was carried out every year based on the best information available but that the savings could change if circumstances also changed.

- Cllr Connor queried the current situation with “invest to save” projects that may be in progress. Beverley Tarka explained that the case had been made for the establishment of a Change Board which had a programme management team to support the analysis, delivery and monitoring of progress associated with “Category A” projects.
- Cllr Iyngkaran referred to paragraph 8.14 of the Cabinet report (page 168 of the agenda pack) which stated that the focus was to identify efficiencies that improved processes with no impact on outcomes for residents and queried whether this was realistic. Beverley Tarka responded that this related to the cross-cutting efficiencies and also the process of looking at all spending line-by-line. Service reductions related only to non-statutory services as statutory services were essential. Cllr das Neves reiterated that the delivery of statutory services was a whole Council responsibility so it was necessary for all parts of the Council to consider how things could be done in a more effective and efficient way.
- Cllr Mason queried the knock-on impact to Council services of budget pressures in the NHS. Beverley Tarka observed that hospital discharge was the dominant narrative but that there also needed to be a significant emphasis on admissions avoidance through early intervention and prevention and that this was a national discussion. Another important area was Continuing Healthcare and the challenges of working in partnership to ensure that residents with high health needs got a fair outcome despite the budget pressures. She also noted that there had been a statement from the Government about funding flows and that it was important to work in partnership to enable funding to flow from the NHS to the community and also to grow the evidence base for preventive work from enables admissions avoidance. She also confirmed that this was relevant to mental health, noting that mental health social workers now worked under the local authority.
- Cllr Mason asked about the communications strategy with service user groups regarding the proposed savings. Cllr das Neves agreed with the importance of this and reported that an information campaign had recently started to explain where the Council spends money and that this would develop further as the consultation was published. It was also important to continue to talk about the positive impact of adult social care on people’s lives.
- Cllr Brennan spoke about more people remaining in their own homes rather than in care homes and queried whether this could be causing people to be more likely to be eligible for social care funding rather than NHS funding. Beverley Tarka responded that there were strict criteria for Continuing Healthcare assessments but that this would not be dependent on where people reside. Cllr das Neves added that it could be difficult for individuals and their families to know what eligibility they had for NHS funding.
- Cllr Brennan highlighted the importance of carers coffee mornings and Beverley Tarka concurred, noting that it was a high-value, low cost activity, that

the Council had been funding these for many years and would continue to do so.

The Panel then asked questions about the Cross-Council savings which affected all Departments as set out in Appendix 2:

Staffing Efficiencies (page 177 of agenda pack)

- Cllr Connor noted that this saving involved a 5% reduction in staffing budgets across all Directorates and queried whether this would put greater pressure on service delivery in adult social care. Beverley Tarka said that Adult Social Care had high levels of agency staff which could be less cost efficiency than permanent staff. There had therefore been a drive to reduce the number of agency staff to achieve savings, though there were challenges in the market to do this. There was also a programme of apprenticeships and social work training to enable career progression for people as permanent staff from an early stage. Jo Baty, Interim Director of Operations, added that there had been some analysis of staffing which had found that some agency staff were in business critical roles and it was hoped that they could be moved onto temporary contracts where appropriate. In addition, the implementation of the localities model was about making services more efficient and effective at grassroots level so the intention was to protect roles there because that would bring more efficiencies further down the line.
- Helena Kania queried why the reductions were set at 5% across the board as the potential to do this could vary in different services, particularly when the delivery of statutory services needed to be protected. Beverley Tarka said that this had been a personal suggestion from herself based on detailed information about the cost of agency staff, the spans of control of managerial staff and vacancy factors so she was confident that this would not have an impact on service delivery.
- Cllr lyngkaran requested further details of the strategy to convert agency staff to non-agency staff as this was particularly challenging to achieve. Beverley Tarka responded that this had been an ongoing area of work for some time and that agency staff represented over 25% of the workforce in this area. She acknowledged that some staff were 'career agency staff' who would not want to become permanent staff, some of whom had already left. However, others wanted to convert to permanent contracts but that did take some time to achieve due to the need for assessments and HR processes. She was confident that this process, combined with the apprenticeships/training and wider recruitment, would lead to a higher proportion of permanent staff. Cllr das Neves added that there were various reasons why people would want to work in Haringey and were positive about the vision and values of Haringey. Cllr lyngkaran suggested that the Panel should monitor progress in this area including the number of agency staff that moved over to permanent contracts.

**(RECOMMENDATION)**

## Digital Transformation (page 178 of agenda pack – under Culture, Strategy & Engagement savings)

- Asked by Helena Kania about the impact of savings related to the digital transformation budget on adult social care. Sara Sutton, Assistant Director, Partnerships & Communities clarified that this was about a transformation programme to improve the front door offer and to improve efficiency of services with Adult Social Care which would deliver savings rather than being about cuts. In terms of the impact on residents, the Council would focus on a partnership and collaborative approach across Directorates and partners in the voluntary and community sector to focus on digital inclusion for residents who may face barriers to digital access.

## Leisure Services Means Tested Discounting (page 182 of agenda pack – under Environment & Resident Services savings)

- Cllr O'Donovan noted that this proposal involved means-testing discounting for leisure services membership rather than a blanket discount for customers aged over 65 and highlighted the benefits to health of gym membership, particular for over-65s, in view of the previous conversations about prevention. He suggested that there could be joint scrutiny work in future about how the health and well-being service could have an input into the promotion of leisure services. Cllr Connor noted that this could be added to the Panel's work programme. **(ACTION)**

The Panel then asked questions about the savings specific to Adults, Health & Communities as set out in Appendix 2:

## Connected Care Review (page 181 of agenda pack)

- Asked by Cllr Connor for further details about how this saving would be achieved, Beverley Tarka explained that Connected Care was a 24-hour emergency service provided by the Council for older, vulnerable people. There were three aspects to the service:
  - Assistive technologies (which was in the process of moving from analogue to digital).
  - The installation of equipment in people's homes.
  - A monitoring and response service.

Beverley Tarka reported that the service had been operating at a loss of around £800k per year and that, based on benchmarking of practice in other Boroughs, there were other delivery models that could be more efficient and cost effective. This review was therefore intended to deliver these savings through an improved model. Cllr Connor queried why the existing budget was highlighted as £200k. Neil Sinclair clarified that this figure represented the current revenue budget available for the service but that, as it was running at a loss of £800k, this was a pressure on the wider Adult Social Care budget.

- Cllr Connor suggested that the Panel should be provided with details of the implementation of this project at a later date as there was a risk that moving to a different model would not fully reverse the loss-making position.

**(RECOMMENDATION)**

Day Opportunities Commissioning Review (page 181 of agenda pack)

- Asked by Cllr Connor for further details on what services would be impacted by this saving, Beverley Tarka explained that this proposal was at an early stage but that it was for a commissioning review of existing learning disability and mental health day services to examine how to deliver a more cost-effective, high quality offer in an area that currently involved a spend of around £7.5m. However, this did not involve a reduction in the day opportunities offer. On the figures, Neil Sinclair said that this involved some broad assumptions about how the service could be delivered at a lower cost.
- Asked by Cllr Connor about the implications for Clarendon Recovery College, Beverley Tarka explained that the service was expected to move to Canning Crescent in the future and so this would be an ideal opportunity to develop a new business model for the service. The service involved support such as therapeutic sessions and a cleaning/hoarding service.
- Cllr O'Donovan queried how the review would be funded given that there was a zero figure in the table for 2025/26. Beverley Tarka clarified that no savings were anticipated in 2025/26 but that there would be a co-produced approach to this, involving the Commissioning Co-Production Board that was already in place.
- Cllr Mason proposed that the Panel should have sight of the outcomes of the Review. **(RECOMMENDATION)**

Integrating Connected Communities (page 181 of agenda pack)

- Asked by Cllr Connor for further details on this saving, Cllr das Neves said that the Connected Communities programme had been interrupted and changed by the need to respond to the Covid-19 pandemic and the proposal was to look at how the service was being delivered now, particularly in relation to prevention and other issues discussed earlier in the meeting. Sara Sutton added that, with the localities approach, there was an opportunity to look at fully integrating the Connected Communities model into the Adult Social Care structures. The work delivered through the localities model was supporting those most at risk of needing care and support so was a way of targeting early intervention and prevention. She added that the team collaborated with voluntary and community sector organisations, some of which were commissioned by the Council. There was therefore an opportunity within these arrangements to refocus some of the work to ensure the right funding flows from the NHS to support early intervention and prevention in the community.
- Cllr Mason noted that the existing budget for this service was £750k, but that the saving for 2025/26 was listed as £700k. Sara Sutton explained that Connected Communities was funded from various sources such as the Better

Care Fund, so the saving quoted could be realised and repurposed elsewhere. Cllr Connor queried what percentage of the overall budget the £750k represented. Neil Sinclair confirmed that the £750k represented the General Fund contributions but there were other sources of funding in addition to this. Sara Sutton explained that some elements of the funding were agreed on an annual cycle and some of this was not yet known for 2025/26, but the overall budget for 2024/25 was £1.2m. This included funding for the financial support team currently based within Connected Communities which would be retained but in a different part of the organisation.

- Cllr Opoku requested clarification on whether the funding from additional sources would continue after the transfer. Sara Sutton confirmed that it would continue with the funding being repurposed for use within adult social care.
- Asked by Cllr Connor whether the transfer would involve staffing reductions, Sara Sutton confirmed that it would and that part of this involved the adjustment to management spans of control as previously mentioned. Mitigations included that some individuals were taking up social work apprenticeships and that some were on fixed term contracts which would end.
- Cllr Connor queried how this information would be presented in the public consultation. Beverley Tarka said that this was in development and acknowledged that the details of this proposal would need to be broken down and made more accessible. **(RECOMMENDATION)**
- Asked by Cllr Mason for further details of where the savings would be made, Sara Sutton said that the resources would be integrated into the adult social care structure which wouldn't mean further reductions, but that the opportunity the savings were about the management spans of control.
- Asked by Cllr Mason how the model would be co-produced, Jo Baty said that there were two main avenues for this. One of these was the existing stakeholder and residents/service user groups represented through the Joint Partnership Board and then the localities model also provided an opportunity to talk to people in geographical settings. Sara Sutton added that there was now alignment in terms of primary care to locality and some community services so there were conversations about what integrated neighbourhood teams would look like and how it would support co-production and achieve better outcomes. Cllr Mason suggested that local Councillors should be consulted on this approach in specific areas as they knew their neighbourhoods and would be able to put the teams in touch with different groups. Ashe also recommended that details of developments in this area should be brought to the Panel at a later date. **(RECOMMENDATION)**
- Cllr O'Donovan emphasised the importance of keeping the best of the things that Connected Communities provided, for example referring people to specialist advisers on employment/education or helping with mediation on housing and other issues. He also noted that there were informal community organisations that did great work but were not necessarily in contact with the Council and should be spoken to as part of the co-production approach. Beverley Tarka highlighted that the repurposed version of Connected Communities would not have the full range of tasks that it did in the past such as on housing advice as the focus would be on prevention to help with reducing

pressure on Adult Social Care. Cllr O'Donovan therefore suggested that, as this would represent a loss in terms of the advice sector and the support available in certain areas, the local community and voluntary sector needed to be made aware of this as there could be extra pressure on their services as a consequence. **(RECOMMENDATION)**

- Cllr Connor highlighted a risk of the savings not being achieved in 2025/26 given that co-production work was required as part of this and could take some time. Beverley Tarka responded that this was a straightforward reduction from the General Fund and did not involve a commissioning exercise with a co-produced outcome. The co-production work would be a focus on the preventative activities that would impact on the bottom line for Adult Social Care.

Cllr Connor commented that there was very limited information available in the papers on what the savings proposals actually involved and that this led to the need for additional discussion at the meeting in order to understand them. She recommended that there should be more detailed explanations in the budget scrutiny papers in future years. **(RECOMMENDATION)**

The Panel then asked questions about reductions to the Capital Budget as set out in Appendix 3:

Osborne Grove Nursing Home (page 185 of agenda pack)

- Cllr O'Donovan observed that the Panel had previously emphasised the importance of keeping the co-production group informed and was pleased that details of the financial position had been provided to them in writing by the Interim Director of Operations. He also asked whether a meeting would be held with them. Jo Baty acknowledged that it would be important to meet and communicate with them and anticipated that this could take place early in the New Year. This was welcomed by the Panel which emphasised that this dialogue should continue. **(RECOMMENDATION)**
- Cllr O'Donovan asked about the future of the Osborne Grove site, noting that it was currently being used as a homeless shelter. Cllr das Neves acknowledged that the cut in the capital funding for the project was painful, not least because the current Leader of the Council had initiated the project in a previous role as Cabinet Member for Adult Social Care. This decision had resulted from a stringent look at the budget. The current financial position meant that projects such as this needed to be removed from the budget for the MTFS period. This did not mean that the idea for the project had gone away altogether but the current financial circumstances were very challenging. She added that very few Boroughs in the whole country were running a nursing home and that this was about the structures of how social care and nursing care was delivered nationally. The current use of the site as a homeless shelter was a positive one and would continue until around 2026 but no decisions had been made about the site after then.

Wood Green Integrated Care Hub (page 185 of agenda pack)

The Panel noted that the Hub was an NHS-led project and that, as the NHS had decided not to proceed with the scheme, the Council contribution would no longer be required. Cllr Connor informed the Panel that she had asked a question about this at a recent meeting of the Joint Health Overview & Scrutiny Committee and was expecting to receive a written reply.

There were no questions raised by the Panel on this item.

Locality Hub (page 185 of agenda pack)

- Cllr Connor requested that further details be provided on why the cost of the scheme had been lower than expected. Sara Sutton said that this related to the Neighbourhood Resource Centre. The capital budget originally allowed for consideration of what other hubs may be required and what capital works would be needed to deliver that. However, the current financial position meant that this would be removed from the budget at this point.
- The Panel expressed concerns that this had been a key plank of the initiative to provide integrated Council services and improve the experience of residents but would now not be progressing. The Panel queried how residents would be able to access the new localities approach with no hubs in the centre and west of the Borough.
- Following further discussion, the Panel recommended that further efforts be made to join up services across the Borough and to include the existing locality hub in this while not increasing the capital spend through the development of additional new locality hubs. **(RECOMMENDATION)**

Savings Tracker 2024/25 (page 193 of agenda pack)

The Panel then asked questions about the Savings Tracker for 2024/25 as set out in Document B, Part 1:

- Cllr Connor noted that many of the RAG indicators were rated as Amber and asked what level of confidence there was that the savings would be achieved in full. Beverley Tarka explained that the Change Board regularly monitored and reviewed these savings and mitigated them where performance was below expected rates. The targets were challenging but all efforts were being made to mitigate the shortfalls on the tracker.
- Asked by Cllr Brennan what impact any failure to achieve savings would have on the budget shortfall, Beverley Tarka explained that it wouldn't have an impact because the current projections assumed that all savings would be achieved. Where there were shortfalls, mitigations were being put forward as alternative ways of meeting them.
- Asked by Cllr Brennan when these savings were expected to be achieved, Beverley Tarka said that these savings were regularly monitored and there was still confidence that they would be achieved by the end of the financial year due to this work and the mitigations. However, this could not be 100% guaranteed because the figures were regularly changing. Cllr das Neves added that some

areas might underperform and others overperform and that this might form part of the mitigations.

- Cllr lyngkaran expressed concern about the apparent approximation of some of the projected figures with several displayed as being achieved at a rate of exactly 50%. Neil Sinclair acknowledged that, in some cases, the expectation was that only half of the savings would be achieved. Beverley Tarka commented that she was more familiar with more detailed figures rather than these approximations. Cllr lyngkaran said that the Panel needed to see more accurate figures. Cllr Mason added that it was also unclear what date the savings achieved so far were measured from. Cllr Connor proposed that an updated version of the savings tracker should be brought to the next meeting of the Panel which would be held on 17<sup>th</sup> December 2024. This was agreed by the Panel. **(RECOMMENDATION)**

### Savings Tracker 2025/26 to 2028/29 (page 197 of agenda pack)

Asked to clarify the savings table, Neil Sinclair explained that this set out the multi-year savings during the MTFS period that had been previously approved at the setting of the Budget in March 2024 for the 2024/25 budget.

Cllr Connor commented that the lack of explanatory text for each savings in either Part 1 or Part 2 of the savings tracker presented difficulties for the Panel in scrutinising the individual items. She requested that further details be provided when the revised documents were brought to the Scrutiny Panel meeting on 17<sup>th</sup> December. Dominic O'Brien, Scrutiny Officer, suggested that this information could be provided from the reports/minutes from the previous meetings when these savings had originally been scrutinised. Cllr Opoku suggested that any overlap/impact between savings agreed in a previous year and savings proposed this year should also be made clear.

### **Recommendations**

Cllr Connor summarised the recommendations of the Panel on the draft budget:

### **General – pressures and savings**

- The Panel highlighted the risk from the high level of additional pressures to the Council budget, particularly in relation to the extra £15.1m of pressures in the Adult Social Services budget.
- The Panel highlighted the forecast pressures in Adult Social Services for 2026/27 as this was only £930k (Table 1 of the Cabinet report) compared with much higher levels in the other years of the MTFS. The Panel considered that there was some risk of the pressures being revised upwards at the Budget setting process next year, thereby increasing the budget gap at that time.
- The Panel expressed concerns about the higher level of proposed new savings in 2026/27 (Table 2 of the Cabinet report) compared to other years of the MTFS and the potential risk of this impacting on the services that residents received.
- The Panel expressed concerns about the details received about some service providers attempting to raise the cost of services commissioned by the Council at rates that were considerably higher than inflation. The Panel recommended that the Council should be robust in its approach to the procurement from



service providers and vigilant against the risk of being overcharged for services, particularly when compared to the cost of services provided in similar neighbouring boroughs.

### **General – format of budget scrutiny papers**

- The Panel expressed concerns that there was very limited information available in the budget scrutiny papers on what the specific savings proposals actually involved and that this led to the need for additional discussion at the meeting in order to understand them. The Panel recommended that there should be more detailed explanations in the budget scrutiny papers in future years.

### **Savings – Cross-Council**

- In relation to staffing efficiencies, the Panel recommended that it should monitor progress on the numbers of agency staff that were moved over to permanent Adult Social Services contracts and an overall reduction in the proportion of agency staff used by Adult Social Services.

### **Savings – Adults, Health & Communities**

- Connected Care Review: The Panel requested that it should be provided with details of the implementation of this project at a later date as there was a risk that moving to a different model would not fully reverse the loss-making position.
- Day Opportunities – Commissioning Review: The Panel requested that it should be provided with details of the outcomes of the review.
- Integrated Connected Communities: The Panel requested that local Councillors be consulted on the approach to integrated neighbourhood teams, in particular about local groups that could be linked into the teams.
- Integrated Connected Communities: The Panel recommended that relevant organisations in local community and voluntary sector should be made aware of the reduction in scope of the Connected Communities work (in areas such as employment, education and housing advice) as this could add further pressure to organisations that provided advice and support to residents.
- Integrated Connected Communities: The Panel recommended that the details of this proposal be broken down and made more accessible when presented as part of the forthcoming public consultation on the Budget.

### **Capital Programme**

- Osborne Grove Nursing Home: The Panel sought reassurance that the Council would continue to engage and communicate with the co-production group for Osborne Grove including through a meeting with them which was anticipated to take place in the New Year.
- Locality Hubs - Given the limitations on the capital budget which meant that the development of additional new locality hubs could not go ahead, the Panel recommended that further efforts be made to join up services across the Borough and to include the existing locality hub in this.

### **Savings Tracker 2024/25**

- The Panel requested that an updated version of the savings tracker should be brought to the next meeting of the Panel which would be held on 17<sup>th</sup> December 2024. Consideration should be given to what further supporting data could be added, including any figures used by the Change Board to monitor and review the savings.

### **33. WORK PROGRAMME UPDATE**

Dominic O'Brien, Scrutiny Officer, informed the Panel of changes to the agenda for the next meeting on 17<sup>th</sup> December 2024, after officers from Adults, Health & Communities had advised that the report on the CQC inspection was not yet expected to be available. The item on Quality Assurance would go ahead as planned and the Savings Tracker for 2024/25 would also now be added after having been deferred earlier in the evening. One additional item would need to be added to the agenda. In addition to these items, it may also be possible to consult the Panel on the second round of budget savings proposals but the timescales for this were not yet clear.

Cllr Brennan suggested that, in addition to the Savings Tracker, it would be useful to review what proportion of proposed savings from previous year had actually been achieved. Cllr Connor noted that information on this was provided to the Panel on a year-by-year basis and that unachieved savings had typically been mitigated in the past, including through the use of reserves. However, a more detailed study of this could be considered as a potential area of future work. **(ACTION)**

Cllr O'Donovan highlighted the difficulties in scrutinising multi-year savings that had been agreed in previous years and were still ongoing as part of the MTFS. Dominic O'Brien agreed that there was insufficient detail on these in the agenda pack for the meeting but noted that the additional narrative text on each of these would be available in the agenda papers from previous years, so could possibly be referred to when the Savings Tracker was considered at the next meeting on 17<sup>th</sup> December 2024. Cllr Connor added that the format of the Savings Tracker had been clearer in previous years. **(ACTION)**

Cllr Mason highlighted the need to consider the impact on services of further overspends this year on next year's budget. In addition, she was not satisfied that the level of cuts that had been proposed in this year's budget would not have a direct impact on service delivery. It was agreed that this could be added as a recommendation and/or put to officers as a question when the second round of savings were proposed later in the budget-setting process. **(ACTION)**

Cllr O'Donovan highlighted the need for further discussions about the cuts to leisure services, perhaps on a joint basis across Panels. Cllr Connor noted that Cllr Buxton may be taking this forward as a future agenda item at the Overview & Scrutiny Committee so would check the next steps for this and report back. **(ACTION)**

Cllr Connor noted that it had recently been agreed by the Panel that an update should be requested on the progress of previous recommendations from the Scrutiny Review on Sheltered Housing. This was ahead of a proposed new Working Group of the Panel which would be visiting a number of sheltered housing blocks in the Borough to ascertain the current issues and concerns. **(ACTION)**

**34. DATES OF FUTURE MEETINGS**

- 17<sup>th</sup> Dec 2024 (6.30pm)
- 10<sup>th</sup> Feb 2025 (6.30pm)

CHAIR: Councillor Pippa Connor

Signed by Chair .....

Date .....

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## Adults & Health Scrutiny Panel – Action Tracker 2024-25

### MEETING 3 – 14<sup>th</sup> Nov 2024

No.	ITEM	STATUS	ACTION	RESPONSE
28	Work programme items	<b>Added to work programme</b>	Items were proposed for addition to the Work Programme: <b>Leisure Services</b> – While this is not directly under the remit of the Panel, it was suggested that there could be some joint scrutiny work on how the AHC Department could have an input into the promotion of leisure services to improve health and wellbeing. <b>Budget</b> – Some detailed work on what proportion of proposed savings from previous years were actually achieved and how they have been mitigated, including through the use of reserves.	Added to Work Programme.
27	Budget 2025/26	<b>IN PROGRESS</b>	All budget recommendations are compiled in a table for submission to the OSC in Jan 2025 and then, if approved by OSC, to the Cabinet in Feb 2025.	

### MEETING 2 – 19<sup>th</sup> Sep 2024

No.	ITEM	STATUS	ACTION	RESPONSE
26	Safeguarding Adults Board annual report	<b>Added to work programme</b>	Consideration to be given to receiving a future report on gambling harms.	Added to Work Programme.
25	Safeguarding Adults Board annual report	<b>COMPLETE</b>	Individual case to be referred to appropriate officer.	Case has been referred to relevant teams with Vicky Murphy's business manager copied in.

24	Safeguarding Adults Board annual report	<b>Update due in Sep/Nov 2025</b>	<p>Recommendation from the Panel on future reports:</p> <ul style="list-style-type: none"> <li>- progress on subgroup for implementation of SAR recommendations.</li> <li>- 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 &amp; Improvement subgroup)</li> <li>- that clarification be provided on where Violence Against Women &amp; Girls (VAWG) is addressed through the Board and its subgroups.</li> </ul>	Recommendations have been provided to Dr Adi Cooper ahead of next year's report.
23	Smoke-free strategy	<b>COMPLETE</b>	Recommendation from the Panel – that the practice of chewing tobacco to be included in the strategy and wording to include “tobacco products”.	The Public Health team have confirmed that this recommendation will be taken forward and added to the tobacco control strategy and action plan.
22	Smoke-free strategy	<b>Update to be requested in 2025/26</b>	Update to be provided to Panel on work in schools on vaping including the local research/seminar, PSHE education and links with mental health teams.	Added to Work Programme.
21	Dementia services	<b>Update to be requested in summer 2025</b>	<p>Update to be provided to Panel in approximately 9 months on:</p> <ul style="list-style-type: none"> <li>- progress with dementia-friendly GP practices</li> <li>- number of dementia service users</li> <li>- 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</li> <li>- 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</li> </ul>	Added to Work Programme.

20	Dementia services	<b>COMPLETE</b>	Recommendation from the Panel – that input be provided to Universal Care Plan for expansion to include dementia patients.	Response from Tim Miller: There is work occurring across London to promote and expand the use of UCP targeting those likely to be using urgent and crisis hospital care. Residents with dementia may have Universal Care Plan's (UCPs), as would other suitable residents seen by care teams who use the UCP – e.g. care home teams and end of life teams. The Memory Service itself has viewing access to UCP, so are aware of people's UCPs. Once the service transforms to a diagnosis-to-end of life service, it does aspire to completing the UCP for every patient – which is expected by 2027.
19	Dementia services	<b>COMPLETE</b>	Recommendation from the Panel - for the Public Health team to provide support to promote dementia-friendly actions at GP practices.	Response from Director for Public Health – “ <i>The Haringey Public Health Team is part of the Age Well Board in Haringey. Through this board we are contributing to the efforts to make Haringey dementia friendly including supporting participation of GP practices.</i> ”
18	Dementia services	<b>IN PROGRESS</b>	Feedback from Panel to be provided on condition of toilets at Toms Club at Chestnuts Community Centre.	a) Details have been provided to Chestnuts Community Centre. Response awaited.
17	Dementia services	<b>COMPLETE</b>	Feedback from Panel to be provided on suggestion to advertise the Singing for the Brain sessions at Tottenham Hotspur Stadium more prominently.	Response b) - Details on the Singing for the Brain Group at Tottenham Hotspurs have been widely shared with the Dementia Friendly Haringey network. The group is also listed in our updated leaflets which have been recently shared and are available to view on our Dementia Friendly Haringey webpage <a href="https://new.haringey.gov.uk/health-wellbeing/health-services-support/mental-health-wellbeing/dementia-friendly-haringey">https://new.haringey.gov.uk/health-wellbeing/health-services-support/mental-health-wellbeing/dementia-friendly-haringey</a>

				Officers will also follow up with Spurs and Alzheimer's Society to look at how we can further advertise the group.
16	Co-opted members	<b>COMPLETE</b>	Update to be provided on recruitment process.	Report to be brought to November 2024 meeting.
15	Minutes	<b>To be included in future papers</b>	Action tracker to be included in agenda papers for all future meetings.	Action tracker included from November 2024 meeting onwards.

## **MEETING 1 – 30<sup>th</sup> Jul 2024**

<b>No.</b>	<b>ITEM</b>	<b>STATUS</b>	<b>ACTION</b>	<b>RESPONSE</b>
14	Cabinet Member Questions	<b>COMPLETE</b>	Response to be provided to the Joint Partnership Review of the Haringey Opportunities Project.	<p><b>Background for Haringey Opportunities Project (HOP)</b></p> <p>The Haringey Opportunities Project (HOP) is a day opportunities and community service based in Tottenham, N17. It is designed to support adults aged 18+ with severe learning disabilities and autism. Officially launched on 12th August 2021, the project provides a structured environment where individuals can engage in both centre-based activities and opportunities for community involvement.</p> <p>The service accommodates individuals with varying levels of need, ranging from those requiring intensive support to those needing less. Centre404 is the commissioned Positive Behaviour Support (PBS) provider for the service, with the current contract running until 30th June 2025. Due to delays in the initial launch, which was postponed from April 2020 to August 2021, the contract was extended to allow for further improvements and a comprehensive service review.</p> <p><b>Service Review and Improvement Plan</b></p>



			<p>The primary objective of the review was to evaluate Centre404's performance against its contractual commitments and assess the overall quality of service delivery, both at the centre and within the broader community. The review was designed to identify gaps and areas requiring improvement to ensure the service meets the agreed outcomes for individuals with severe learning disabilities and autism.</p> <p>Following the review, key findings and identified areas for improvement were communicated to Centre404. In response, a detailed improvement plan was developed, targeting the specific concerns raised during the review. To ensure continuous improvement and compliance, progress is being closely monitored on a monthly basis. This monitoring includes both scheduled and unscheduled commissioning visits, allowing for a thorough evaluation of service delivery and timely identification of any issues.</p> <p>The results of the HOP review were first presented to the Commissioning Co-production Group, where a summary of the improvement plan was also shared. It was agreed that the full review report would next be submitted to the Severe and Complex Autism and Learning Disability (SCALD) Reference Group for further discussion and input.</p> <p>As part of the preparations for a potential re-commissioning of the service, which is scheduled to end in June 2025, the Commissioning Co-production Board has endorsed the formation of a dedicated working group to oversee the redesign process. This working group will likely include members of SCALD, ensuring a collaborative approach that integrates the perspectives and experiences of family members of current service users. Their involvement is critical to shaping a service that reflects the needs and expectations of the individuals and families it supports.</p>
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				By incorporating the insights of key stakeholders and maintaining rigorous oversight, the improvement plan and working group will guide the ongoing transformation of HOP, ensuring it continues to deliver high-quality, person-centred services in the future.
13	Health & Wellbeing Strategy	<b>Feedback to be considered and also addressed in next update report</b>	<p>Recommendations for consideration and clarifications requested for the next update were:</p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• There were some challenges acknowledged in how some outcomes could be realistically monitored, such as people accessing green spaces.</li> <li>• Further clarification was requested on how the outcomes, monitoring and reporting would fit within the governance structure.</li> <li>• 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</li> </ul>	Added to Work Programme.

			<p>outcomes could be achieved given the complexities in this area.</p> <ul style="list-style-type: none"> <li>Further detail would be required on how on the future partnership working and community engagement would work in practice.</li> </ul>	
12	Health & Wellbeing Strategy	<b>To be added to 2025-26 Work Programme</b>	Panel to be provided with a further update in 12-18 months.	Added to Work Programme.
11	Health & Wellbeing Strategy	<b>COMPLETE</b>	Further detail was requested on why life expectancy was lower than other parts of the Borough in the Stroud Green ward.	Response from Will Maimaris: "I checked the raw data for this and this revealed an error in what we presented in the map. Life expectancy in Stroud Green Ward for 2016-20 was 79.8 for males (compared to Haringey average of 80.0) and 84.1 for females (compared to Haringey average of 84.6). So, life expectancy is not significantly different from the borough average, and the shading on the map should have been one shade lighter than it was for both females and males for this ward. Please accept my apologies for this error."
10	Health & Wellbeing Strategy	<b>COMPLETE</b>	Information to be circulated about the ABC Parenting programme which provides peer support for new mothers.	<p>ABC parents has been started by clinicians at North Middlesex Hospital aimed at new mums in Haringey and Enfield to support with parenting from a health and wellbeing point of view but also for mothers to build informal networks that can support them.</p> <p>Further details: <a href="https://www.northmid.nhs.uk/abcparents/">https://www.northmid.nhs.uk/abcparents/</a></p>
9	Health & Wellbeing Strategy	<b>COMPLETE</b>	An update was requested on the current status of the ageing and frailty project.	<ul style="list-style-type: none"> <li>The GP Federation are now implementing an Ageing Well (AW) programme across Haringey and Enfield on creating age-friendly environments through the collaboration of local individuals, businesses, and</li> </ul>

				<p>organisations within the borough. They are training AW Friends, Champions and Experts to seed expertise across the boroughs.</p> <ul style="list-style-type: none"> <li>Age Well festival run by Public Voice in collaborative with partners will be held 21st September in Bruce Castle Park from 12pm to 5pm. The festival will be a day of creative, active and wellness activities for residents to take part in along with music and dance performances to enjoy on the main stage. Link below for more information: <a href="https://new.haringey.gov.uk/events/haringey-age-well-festival-2024">https://new.haringey.gov.uk/events/haringey-age-well-festival-2024</a></li> <li>The West Frailty project is continuing to gather self-assessments from older residents using an adjusted clinical frailty assessment tool – the findings will be analysed and learning identified in due course.</li> </ul>
8	Continuing Healthcare	<b>COMPLETE</b>	Data was requested on CHC assessments for people in care homes.	<p>The responses to action points 2 to 8 are all addressed in <b>ATTACHMENT A1</b>.</p> <p>Additional information has also been provided in relation to action points 2 and 3 – please see <b>ATTACHMENTS A2 to A6</b>.</p> <p>Follow up information on action point 6 was requested by the Panel from the ICB. The response is currently being awaited.</p>
7	Continuing Healthcare	<b>COMPLETE</b>	Information was requested on the work being carried out by the ICB on upscaling awareness of CHC across NCL.	
6	Continuing Healthcare	<b>IN PROGRESS</b>	Information was requested on why CHC figures in Haringey/NCL was significantly lower than the national average.	
5	Continuing Healthcare	<b>COMPLETE</b>	Data on health inequalities and ethnicity relating to the recipients of CHC in Haringey was requested.	
4	Continuing Healthcare	<b>COMPLETE</b>	Clarification was requested on the funding for advocacy services for	

			residents undertaking the assessment process.	
3	Continuing Healthcare	<b>COMPLETE</b>	<p>The information provided to residents should:</p> <ul style="list-style-type: none"> <li>- Make clear that the recording of assessments can be requested.</li> <li>- Make clear how decisions could be challenged and explain the process for this.</li> <li>- Provide details on financial assessment/eligibility and ensure that residents are clear about any financial contribution that may be required from them.</li> </ul>	
2	Continuing Healthcare	<b>COMPLETE</b>	The Panel emphasised that clear written information should be provided to residents/families/carers/advocates prior to any assessment or checklist taking place so that they were clear about the process and the questions that would be asked.	
1	Minutes	<b>COMPLETE</b>	Update to be provided on liaison with the Osborne Grove co-production group.	Verbal update provided at Panel meeting on 19 <sup>th</sup> September 2024. A further meeting with the co-production group was expected in February 2025.

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**Report for:** Adults and Health Scrutiny Panel - 17<sup>th</sup> December 2024

**Title:** Appointment of Non-Voting Co-opted Member

**Report authorised by:** Ayshe Simsek, Democratic Services & Scrutiny Manager

**Lead Officer:** Dominic O'Brien, Principal Scrutiny Officer

**Ward affected:** All

### **Report for Information**

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

- 1.1 The purpose of this report is to seek formal approval of the appointment of a non-voting co-opted Member to the Panel.

#### **2. Cabinet Member Introduction**

- 2.1 N/A

#### **3. Recommendations**

- 3.1 That Evelyn Trimmingham be appointed as a non-voting co-opted Member of the Panel.
- 3.2 That the non-voting co-opted Members of the Panel for the remainder of the 2024/25 Municipal Year be confirmed as Helena Kania and Evelyn Trimmingham.

#### **4. Reasons for decision**

- 4.1 The Council recognises the valuable contribution that co-optees can make to the scrutiny process. Paragraph 3.1 of Part Four, Section G (Overview & Scrutiny Procedure Rules) of the Council's Constitution states that each Scrutiny Panel shall be entitled to appoint up to three people as non-voting co-optees.

#### **5. Alternative options considered**

- 5.1 The Panel could decide not to make any new appointments to its membership.

#### **6. Background Information**

- 6.1 Within the current structure of scrutiny in Haringey, there is one overarching Overview and Scrutiny Committee and four advisory panels, these being:
- Adults & Health
  - Children & Young People
  - Climate, Community Safety & Environment

- Housing, Planning & Development

6.2 The specific functions for any Scrutiny Panels established is outlined in Article 6 of the Constitution at 6.3 (b) and 6.3 (c). The procedure by which this operates is detailed in the Scrutiny Protocol:

- The OSC shall establish four standing Scrutiny Panels, to examine designated public services.
- The OSC shall determine the terms of reference for each Scrutiny Panel.
- If there is any overlap between the business of the Panels, it is the responsibility of the OSC to resolve the issue.
- Areas which are not covered by the four standing Scrutiny Panels shall be the responsibility of the main OSC.
- The Chair of each Scrutiny Panel shall be a member of the OSC, as determined by the OSC at its first meeting.
- It is intended that each Scrutiny Panel shall be comprised of between 3 and 7 backbench or opposition members and be politically propionate as far as possible.
- Each Scrutiny Panel shall be entitled to appoint up to three non-voting co-optees. The Children and Young People's Scrutiny Panel membership will include the statutory education representatives of OSC.

6.3 Haringey Council's Protocol for Non-voting Co-opted Members states that "Non-voting co-optees are intended to bring an additional element of external challenge to the work of the scrutiny panels. By bringing a diverse spectrum of experience and adding a different perspective to many items, they are expected to add value to scrutiny by performing the following roles:

- To act as a non-party political voice for those who live and/or work in Haringey; and
- To bring specialist knowledge and/or skills to the Overview and Scrutiny process and bring an element of external challenge by representing the public.

6.4 It is expected that appointed non-voting co-optees will:

- Attend formal meetings of the Panel, which are usually held in the evening.
- Attend additional meetings and evidence gathering sessions such as site visits.
- Prepare for meetings by reading the agenda papers and additional information to familiarise themselves with the issues being scrutinised.
- Prior to meetings consider questions they may wish to put to Cabinet Members, officers, and external witnesses.
- Help the Panel to make practical suggestions for improvements to services.
- Assist in the preparation of reports and the formulation of recommendations.
- Contribute to the development of the annual scrutiny work programme.
- Establish good relations with members, officers and other co-optees.
- Abide by the relevant sections of the Council's Constitution in terms of the rules and procedures for Overview and Scrutiny; and



- Keep abreast of key issues for the authority and bear these in mind when scrutinising services and making recommendations for improvement.

- 6.5 Evelyn Trimmingham met with the Chair of the Panel in July 2024 to discuss her relevant skills, knowledge and expertise, the role of the Scrutiny Panel and the importance of Adults and Health services to the residents of the borough. She is a member of the Housing Ombudsman Resident Panel and Chair of the Parent/Carer Panel for Haringey Family Hubs and describes these roles as helping to bring forward the voices of residents, ensuring that their needs are met with effective and empathetic solutions and shaping services that directly impact our community.
- 6.6 The appointment of Non-voting Co-opted members requires formal approval by the Panel and their role is guided by the Protocol for Non-Voting Co-opted Members.
- 6.7 Should the Panel approve Evelyn Trimmingham's appointment, this would bring the number of Non-voting Co-opted members of the Panel to two out of a possible maximum of three. The Panel's other Non-voting Co-opted member is Helena Kania, who has contributed to scrutiny in Haringey since 2003.

## **7. Statutory Officers Comments**

### **Legal**

- 7.1 Under Section 21 (6) of the Local Government Act 2000, an Overview and Scrutiny Committee has the power to appoint one or more sub-committee to discharge any of its functions. The establishment of Scrutiny Panels by the Committee falls within this power and is in accordance with the requirements of the Council's Constitution.
- 7.2 The Local Government Act 2000 made provision for the co-option of non-elected members to Overview and Scrutiny to bring additional expertise and skills to scrutiny work and to increase public engagement with scrutiny.

### **Equality**

- 7.3 The Council has a public sector equality duty under the Equalities Act (2010) to have due regard to:
- Tackle discrimination and victimisation of persons that share the characteristics protected under S4 of the Act. These include the characteristics of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex (formerly gender) and sexual orientation;
  - Advance equality of opportunity between people who share those protected characteristics and people who do not;
  - Foster good relations between people who share those characteristics and people who do not.

- 7.4 The Panel should ensure that it addresses these duties by considering them within its work programme as well as individual pieces of work.

**8 Use of Appendices**

- 8.1 None.

## Savings Tracker 2024-25

Directorate: Adults, Health &amp; Communities

Period: 6

Red	Saving fully/partially unachievable
Amber	Saving achievable but full/partial slippage required
Green	Saving met in full and on time

MTFS Savings Ref	Cabinet Decision Date	New or Existing	Saving proposal	Saving / Management Action	2024/25 Original Savings Target £'000s	2024/25 Projected Full Year Savings £'000s	2024/25 Savings (surplus)/ shortfall £'000s	RAG Status (Delivery of 2024/25 Saving)	Comment on Delivery RAG Status	Actions plans to mitigate shortfall
	10/11/2022	Existing	Amendments to Existing Savings	Saving	486	0	486	Green	Part of a budget adjustment agreed in setting the 2023/24 budget, to adjust or write off non deliverable ASC savings in 2023/24 by £4.654m but reprofile savings of £0.486m that were expected to be delivered in 2024/25 from earlier years.	Care placement budget has been adjusted, no further action required
AHC_SAV_001	07/02/2023	Existing	Improved processes and practices to ensure that residents receive the right level of care	Saving	850	0	850	Red	Part of the improved processes and practices project and forecasted red from the start as the target is so large. In part aligned with the Continuing Health Care project, to ensure that care and support needs are funded appropriately	The analysis of potential duplication in activity that will enable more accurate identification of savings.
AHC_SAV_004	07/02/2023	Existing	Contract reviews	Saving	500	50	450	Red	Originally, this savings proposal focused on potential savings linked to Better Care Fund contracts. However, due to protracted negotiations with our health partners, this has not been possible. Consequently, the proposal has been refocused on adult social care contracts for the provision of care and support. Due to resource constraints within the Commissioning Team, there has been a delay in starting this work.	However, a proposed plan and resources are which will enable the work to commence in the New Year has been developed which is subject to approval, with anticipated in-year savings of £50k and a profile of savings for future years.
CYP24_SAV_008	06/02/2024	New Saving	Transitions	Saving	673	300	373	Red	Slow to start up due to delays with recruitment, which has limited progress and as a result full proposed savings will not be achieved. However, since then it has been agreed that work on planning, commissioning and supporting the wider transitions cohort will be developed in a Corporate workshop in January 2025.	Resources are in place and work to be undertaken in the accordance with the Plan and discussions underway as to how we can scale-up this work for the totality of the transitions cohort and fully engaging Commissioning, Housing and Economy in identifying savings opportunities.  The savings profile set out in the original business case are being updated to reflect resources now in place and an updated knowledge of the costs of young people in scope.
AHC24_SAV_021	06/02/2024	New Saving	Supported Living Review	Saving	300	0	300	Red	This has been incorporated into the Contract Review Project. As per previous comment. Once again, due to resource constraints within the Commissioning Team, there has been a delay in starting this work. However, a plan and resources are now in place to commence this work in the New Year 25/26.	However, a proposed plan and resources are which will enable the work to commence in the New Year 25/26, has been developed and which is subject to approval.
AHC24_SAV_012	06/02/2024	New Saving	Strengths Based Working	Saving	350	0	350	Red	Part of the Improved Processes and Practices Project and forecasted red from the start as the target is so large. In part aligned with the Continuing Health Care project, to ensure that care and support needs are funded appropriately.	The analysis of potential duplication in activity that will enable more accurate identification of savings.
AHC24_SAV_019	06/02/2024	New Saving	Mental Health Service Review	Saving	200	88	112	Amber	We externally commissioned an independent review of the Mental Health Services, the review highlighted significant evidence to support that Haringey is a massive outlier nationally for funding between the age of 18 -65, this has been a long-standing issues. We have now implemented a Locality model, bringing Mental Health Social Workers back into localities, still aligned to the Mental Health Trust. However more controls are being put in place to control Mental Health spend, additionally the review team are focusing on the high-cost placements, to ensure we are reviewing costly/out of borough packages of care and bring back into a local provision of care.	Improved opportunities for placement cost decision making with in-house Mental Health Team and Locality based working supporting this.
AHC24_SAV_018	06/02/2024	New Saving	Grant Review (BCF/S75)	Saving	200	0	200	Red	It was not possible to negotiate with the Integrated Care Board to realise this saving	Mitigating assumptions have been reprogrammed to identify alternative saving streams
AHC24_SAV_013	06/02/2024	New Saving	Direct Payments	Saving	800	310	490	Amber	It has challenging on existing agency contracts to convert to Direct Payments with the focus shifted to new placements to promote the offer. Extensive targeted work, with residents and practioners has taken place and is ongoing in regards to Direct Payments to promote choice and control and independent living. This is in part supported by an enhanced offer from Disability Action Haringey working alongside Locality teams, giving training and development to Adult Social Care staff.	It is still expected to see a long term increase in the use of Direct Payments, and as a result the savings profile will be revised.
AHC24_SAV_011	06/02/2024	New Saving	Continuing Health Care	Saving	1,200	2,200	-1,000	Green	As part of the reprofiling the savings target has been increased to £2.2m. The resource has been extended to continue delivery of the work. A significant proportion of these savings has been realised from non-CHC reviews. The focus of the project will expand to ensure that the knowledge and competency derived from the project is incorporated into business as usual. This will also include a focus on existing processes that result in increased demand through the front door.	The focus of the project will expand to ensure that the knowledge and competency derived from the project is incorporated into business as usual. This will also include a focus on existing processes that result in increased demand through the Front Door to Adult Social Care.
<b>Totals</b>					<b>5,559</b>	<b>2,948</b>	<b>2,611</b>			

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## Adults and Health Scrutiny Panel

### Work Plan 2024 - 26

<b>1. Scrutiny review projects;</b> These are dealt with through a combination of specific evidence gathering meetings that will be arranged as and when required and other activities, such as visits. Should there not be sufficient capacity to cover all of these issues through in-depth pieces of work, they could instead be addressed through a “one-off” item at a scheduled meeting of the Panel. These issues will be subject to further development and scoping. It is proposed that the Committee consider issues that are “cross cutting” in nature for review by itself i.e. ones that cover the terms of reference of more than one of the panels.		
Project	Comments	Status
<b>Hospital discharge</b>	To review delays to hospital discharge in Haringey. Evidence sessions for this Review have now been completed.	Report to be published shortly.
<b>Sheltered Housing</b>	It has been proposed that a working group will be established to visit sheltered housing in the Borough and ascertain the current issues and concerns.	
<b>Digitalisation and communications with residents</b>	To review the current arrangements for communication processes and systems for residents presenting with complex needs involving a multidisciplinary team including: <ul style="list-style-type: none"><li>• How the team communicates between one another regarding the actions needed to facilitate care for the resident.</li><li>• How the team communicates with the resident and family members, how it provides a single point of contact, plan of actions and timeframe for these actions.</li><li>• How the team communicates with Council Members who request details about the actions and the timeframes for these actions to be carried out.</li><li>• What systems are in place to facilitate the above to take place.</li></ul>	ToR approved

2. <b>“One-off” Items;</b> These will be dealt with at scheduled meetings of the Panel. The following are suggestions for when particular items may be scheduled.	
<b>Date</b>	<b>Agenda Items</b>

<b>2024-25</b>	
<b>30 July 2024</b>	<ul style="list-style-type: none"> <li>• Cabinet Member Questions – Adults &amp; Health</li> <li>• Haringey Health &amp; Wellbeing Strategy 2024-29</li> <li>• Continuing Healthcare</li> </ul>
<b>19 September 2024</b>	<ul style="list-style-type: none"> <li>• Haringey Safeguarding Adults Board (HSAB) Annual Report</li> <li>• Dementia services</li> <li>• Smoke-free Strategy</li> </ul>
<b>14 November 2024 (Budget Meeting)</b>	<ul style="list-style-type: none"> <li>• Scrutiny of 2025/26 Budget and MTFS</li> </ul>
<b>17 December 2024</b>	<ul style="list-style-type: none"> <li>• Quality Assurance/CQC Overview</li> <li>• Savings Tracker 2024/25</li> <li>• Cabinet Member Questions – Adults &amp; Health</li> </ul>

<b>10 February 2025</b>	<ul style="list-style-type: none"> <li>• Preparedness for a future pandemic</li> <li>• CQC Inspection</li> </ul>
<b>2025-26</b>	
<b>June/July 2025</b>	<ul style="list-style-type: none"> <li>• Cabinet Member Questions – Adults &amp; Health</li> <li>• Dementia update</li> <li>• VACANT</li> </ul>
<b>September 2025</b>	<ul style="list-style-type: none"> <li>• Haringey Safeguarding Adults Board (HSAB) Annual Report</li> <li>• Quality Assurance/CQC Overview</li> <li>• VACANT</li> </ul>
<b>November 2025</b>	<ul style="list-style-type: none"> <li>• Scrutiny of 2026/27 Budget and MTFS</li> </ul>
<b>December 2025</b>	<ul style="list-style-type: none"> <li>• Health and Wellbeing Strategy update</li> <li>• VACANT</li> <li>• VACANT</li> </ul>
<b>February 2026</b>	<ul style="list-style-type: none"> <li>• Cabinet Member Questions – Adults &amp; Health</li> <li>• VACANT</li> <li>• VACANT</li> </ul>

To be allocated

Issues arising from scrutiny consultation exercise:

- **Communications with residents**
- **Impact of Housing Conditions on Health and Wellbeing**
- **Autism Strategy 2021-2031**
- **Support for Carers**

Issues arising from previous work programme or follow up from current work programme:

- **Leisure Services** – While this is not directly under the remit of the Panel, it was suggested that there could be some joint scrutiny work on how the AHC Department could have an input into the promotion of leisure services to improve health and wellbeing.
- **Budget** – Some detailed work on what proportion of proposed savings from previous years were actually achieved and how they have been mitigated, including through the use of reserves.
- **Osborne Grove Nursing Home**
- **Health & Wellbeing Strategy** – Last update provided in July 2024. Next update suggested for late 2025/early 2026. A number of recommendations for issues to be included in the next update was specified in July 2024.
- **Gambling harms**
- **Dementia services** – Last update provided in September 2024. Next update suggested for summer 2025. A number of recommendations for issues to be included in the next update was specified in September 2024.
- **Smoke-free Strategy** - Last update provided in September 2024. Further update suggested for 2025/26 on work in schools on vaping, PSHE education and links with mental health teams.
- **Continuing Healthcare** – Last update provided in July 2024.
- **Modern Slavery** (including training for Police)
- **Adult Social Care Commissioning and Co-production Board** – Previous update in November 2023, next update anticipated 6-9 months later.
- **LGA Peer Review** – Further update to be scheduled. Previous update was in June 2023. Strategic plan is expected to be in place by Jan 2024.
- **Workforce reform agenda** – Further update to be scheduled. Previous update was in June 2023. At the previous update it was noted that the 30% vacancy rate in Adult Social Care represented a risk and so it would be useful to monitor staff turnover and the vacancy rate at the next update on this issue.



- **Integrated Care System (ICS)** – At a meeting in July 2022 it was suggested that a further report be brought to a future meeting including details on: a) the development of the co-design/co-production process; and b) the communications/engagement process for the next suitable new project.

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