

MINUTES OF THE MEETING OF THE ADULTS & HEALTH SCRUTINY PANEL HELD ON MONDAY 22ND SEPTEMBER, 2025, 6.30 - 10.05pm

PRESENT:

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

13. 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'.

14. APOLOGIES FOR ABSENCE

Apologies for lateness were received from Cllr Thayahlan Iyngkaran and from Cllr Lucia das Neves.

15. ITEMS OF URGENT BUSINESS

Dominic O'Brien, Scrutiny Officer, reported that the Overview & Scrutiny Committee had considered a Quarter 1 update report on the Corporate Delivery Plan at its meeting on 18th September 2025. One of the Key Performance Indicators (KPI) referred to in the report related to the number of complaints upheld by the Local Government & Social Care Ombudsman. Cllr Connor had requested that this issue be brought to the Scrutiny Panel for a response from officers/Cabinet Member. This would therefore be considered under Item 11 on the agenda.

16. 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 Felicia Opoku declared an interest in relation to any discussions about the proposed merger of Integrated Care Boards (ICB), noting that she worked closely with ICB colleagues in a professional capacity.

Helena Kania declared as interest in Item 8 as a former co-Chair of the Joint Partnership Board.

17. DEPUTATIONS/PETITIONS/ PRESENTATIONS/ QUESTIONS

None.

18. MINUTES

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

Referred to page 3 of the Supplementary Agenda Pack, Cllr Opoku noted that graphs had been provided in response to the request for a breakdown of the number of physical and mental health conditions in younger adults with a care package. The context of the request was that the number of cases in the 50-64 age cohort had recently increased. However, the graphs only displayed the case numbers for the broader 18-64 age cohort. She requested that a breakdown of case numbers for more specific age cohorts be provided. **(ACTION)**

Cllr O'Donovan asked about the progress of the report for the Scrutiny Review on Hospital Discharges. Dominic O'Brien responded that the final version of the report was scheduled to be submitted to the meeting of the Overview & Scrutiny Committee on 27th November 2025.

RESOLVED – That the minutes of the meeting held on 30th June 2025 be approved as an accurate record.

19. FINANCE UPDATE - Q1 2025/26

In opening this item, Cllr Connor informed the Panel that the Quarter 1 Finance Update report provided had originally been part of the agenda papers for the meeting of the Cabinet on 16th September 2025 and that the Panel was required only to consider the sections of the report that related to the areas within its remit, such as adult social care.

Jo Baty, Director of Adult Social Care, provided an overview of the report, informing the Panel that Adult Social Care had an overspend of £7.6m at the end of Quarter 1 of 2025/26. The report illustrated the higher demand for services between 2019 and 2025 with an increase of the number of older adults accessing services by 34% and younger adults by 30%. Over the same period, the weekly financial commitments had increased by 64% for older adults and 60% for younger adults. This reflected the pressures of the market and other factors such as difficulties with recruitment and retention of care staff. There was less choice within the market compared with 10 years previously and providers felt able to charge more, particularly for cases with more complex needs. The cost of residential placements for younger adults with learning difficulties was now around £1,800 per week which represented a 29% increase since 2020. A nursing placement for an older adult with a physical disability was now £1,315 per week, also an increase of 29% since 2020.

Jo Baty explained that the Council's response to rising costs included working with neighbouring Boroughs and sub-regional partners, for example with market management, maximising joint funding with health and looking at best practice with

early intervention and prevention. She added that the Integrated Care Board (ICB) had similar financial challenges and so the Council was proactively working with them on hospital discharge and admission avoidance. The Council was also working with care home providers to look at opportunities for collaboration and integrated workforce development.

With regards to savings, the full year target for Adult Social Care was just under £4m. There had been challenges in securing extra resources for commissioning staff which was needed because this was the engine room of Adult Social Care in working proactively with providers, implementing the care strategy and driving down costs.

Officers then responded to questions from the Panel:

- Referring to paragraph 6.18 of the report, Cllr Connor requested clarification about the Exceptional Financial Support (EFS) required by the Council. Sara Sutton, Corporate Director of Adults, Housing & Health, explained that, as at the end of Quarter 1, the Council was expecting to require the full £37m of EFS from the Government for 2025/26. The capital and the cost of the borrowing would have to be repaid over the longer-term. The rate of interest was clarified as 6.2%. Sara Sutton noted that this would create an additional budgetary pressure of an additional £2.91m that could otherwise have been used for other spending. She added that, overall, this represented a significant financial crisis which the Council was responding to with a range of measures including a financial recovery plan and significant spending controls.
- Referring to paragraph 2.4, Cllr Connor noted that the forecast cost of adult social care was expected to be £7.5m higher in 2025/26 than in 2024/25 with a rise in the number of support packages and asked about the forecasting for future years. Sara Sutton explained that the modelling generally involved three scenarios: the best case, the worst case and the most likely case. However, there would often be unexpected variations. She also noted that Haringey Council was not alone in this scenario with 80% of adult social care budgets across the country overspent according to the recent ADASS Spring Survey. The assumptions built into the modelling were being continually reviewed including on the anticipated cost of care, number of service users and number of complex cases. She added that the current overspend represented a 7.2% variance on the adult social care budget.
- Neil Sinclair, Head of Finance (People), commented further about the modelling, which had been used to set the budget for 2025/26 back in October 2024. Placement data had been used but some factors were still changing, including rising costs. Long-term trends were factored in but there were currently some unusual trends, including the increases in the number of older adults. This information was all fed into the budget model but there was a challenge in planning and building a forecast for the next financial year. Jo Baty added that it was also important to triangulate that information with qualitative data, including conversations with strategic partners such as Disability Action Haringey and the reference groups of the Joint Partnership Board in order to test assumptions about what service users were experiencing.
- Cllr Brennan noted that home care costs did not appear to have risen relative to other costs. Referring to the graphs in the report, Sara Sutton noted that some areas of home care showed a decrease, but that there were corresponding increases elsewhere such as Direct Payments and there was an increase in

home care costs for older people with physical disabilities. There was therefore a mixed picture based on different cohorts within Adult Social Care.

- Asked by Cllr O'Donovan for further details on the achievement of planned savings for 2025/26, Jo Baty said that:
 - Staffing savings had been achieved already.
 - Connected Communities was also on track.
 - The development of the community support model had taken a little longer, but a project was due to report in the middle of November with some efficiencies expected. Many things were still done manually by email or phone which could be more effective digitally and there was also potential to signpost residents more effectively. Overall, the community support model was on track but there was a lot of work to do before the end of the financial year.
 - On reablement, the Council was receiving support from 31ten Consulting to modernise the service and reablement model for the future with the efficiencies on track in this area.
 - The indicator for supporting living was amber so this was behind at present, but the view was that the savings still needed to be delivered. The commissioning team had oversight of supporting living contracts and recruitment was underway to provide additional capacity.

Neil Sinclair said that:

- On transitions, the targets had been set in the budget for 2024/25 over a 5-year period. A business case had been developed in July 2023 based on the number of children expected to transition to adult services over the next five years. That data had now been refreshed and more was now understood about costs. The savings target of £1.152m for 2025/26 had been based on a projected cost of £4.2m for that cohort of young people but the actual cost was now projected to be closer to £3.2m. The cost projections would continue to be refreshed to inform the savings potential for the next three to five years. Sara Sutton added that, in addition to the reduced costs from the modelling assumptions, there would still be other savings made in this area.

Sara Sutton said that:

- Across Adult Social Care, opportunities had been identified for early delivery of savings. This included bringing residents currently receiving out-of-Borough day provision, back in Borough due to capital improvements and increased capacity.
 - For some savings, such as the community support model, it was always known that some lead-in time would be required and so savings would not start to be delivered until the last quarter of the financial year.
- Asked by Helena Kania on the likely impact on residents of the spending reductions, Jo Baty said that early commitments had been made to utilise the commissioning co-production groups to join efficiencies with areas of improvement. In addition, proposals that changed the shape of services would require an equalities impact assessment to review how any changes would impact the different communities in Haringey. Wherever possible, the Council was attempting to get more value from investment through collaboration.

Helena Kania queried whether savings would be obtained through more explicit cuts, such as shortening the reablement package for example, and when information about this would be available. Jo Baty said that there were different models for reablement with an options appraisal being looked at currently. This would need to be worked through quickly with movement on how to progress expected in the next month or so. Cllr Connor suggested that, as these proposals were progressed, the Panel would expect to see clearer details on the anticipated impact of changes on residents. **(ACTION)**

- Cllr Peacock asked about community support for older people, commenting that some residents were not content with the monthly subscription service for the fall alarm system. Jo Baty said that a review of Connected Care was expected to report in about a month on the modernisation of the service.
- Cllr Opoku referred to the graphs under paragraph 1.5 on page 53 of the agenda pack and noted that the data for some cohorts were not included, particularly for over-65s. Sara Sutton explained that only the graphs most relevant to the drivers of spend had been included but that further data could be included in future reports based on feedback. It was requested that Panel members could specify any data that they wished to see at the next finance update. **(ACTION)**
- Cllr lyngkaran commented on the drivers for overspend and asked how the forecasting of the demand from the older age group was being captured. Neil Sinclair said that the trends varied and there had been a change activity because there had been a large increase in the last financial year in older adults with physical support needs coming through the system. This altered presumptions of the modelling. It was therefore necessary to keep looking at the data, although Office for National Statistics (ONS) data may not necessarily reflect health demographics in the Borough or the complexity of cases so there were a range of factors to account for when generating the projections. Sara Sutton acknowledged the risks in the budget of the Adults, Housing & Health Department due to the demand-driven nature of both Adult Social Care and Temporary Accommodation. The Department therefore worked closely with the Finance team on the forecast position and on incorporating the right amount of corporate contingency. There could also be unplanned events such as the recent issue of one of the Council's community equipment providers going into liquidation which had caused capacity issues and additional costs to the Council. There were other unknown factors for local government including future funding from national government which would have fundamental significance for the Council's budget.
- Cllr lyngkaran queried whether the additional funding for Adult Social Care in recent years had translated to better care for residents. Sara Sutton responded that Adult Social Care was on an improvement journey but there were also demand pressures and inflationary pressures so the aim was to strike the right balance between quality, cost of care and outcomes for residents. The Council was trying to meet its statutory duties within its financial envelope but this was becoming increasingly difficult and better services could be delivered with increased funding. Improvement Plans would be brought to Cabinet and then to Scrutiny for detailed discussion. She reiterated that this was a national issue and that only 16% of Directors of Adult Social Care across the country were confident that they could achieve their savings target in-year.

- Cllr Connor observed that the Housing, Planning and Development Scrutiny Panel had recently considered aids and adaptations and had involved developing a list of suppliers who provided specialist equipment and worked well with vulnerable residents. On that basis, she asked whether the procurement savings would impact on the Council's ability to use the best contractor available. Sara Sutton clarified that there were no direct savings associated with aids and adaptations because this was provided through a capital budget from the Disabled Facilities Grant (DFG). However, the aim was to spend the money in the best value-for-money way possible in order to maximise the work that could be carried out. She added that closer working between the Housing and Adult Social Care teams was one of the aims of the newly formed Directorate.
- Cllr Connor requested that information be provided on the progress of savings proposals that had been agreed in earlier years but were still in the process of being implemented. **(ACTION)**

20. JOINT PARTNERSHIP BOARD

A number of guests were introduced to the Panel:

- Pip Canons – CEO, Community Catalysts
- Natasha Benn – Interim Chair, Joint Partnership Board (JPB)
- Amanda Jacobs – JPB Member
- Lourdes Keever – JPB Member
- Cathy Stasny - JPB Member
- Dan Rogers – CEO, Public Voice CiC
- Jano Goodchild - Participation and Co-production Manager, Public Voice CiC
- Rachel Sanders – Project Officer, Public Voice CiC
- Phil Stevens – CEO, Disability Action Haringey

Dan Rogers, CEO of Public Voice CiC, began the introduction of the report, informing the Panel that Public Voice was a voluntary/community sector organisation contracted to facilitate the Joint Partnership Board (JPB). The JPB provided a forum where commissioners and advisers of services and residents worked together on service improvements and facilitated co-production. The JPB also facilitated a set of reference groups that represented seldom heard people, including a carers group, an older person's group and a disabled person's group. The reference groups developed their agendas and worked together on important issues. The Chairs/co-Chairs of the reference groups then worked together the JPB to discuss issues that were having an impact on the wider community and inequalities. In 2024, a number of JPB members requested a strategic review of the function of the JPB, including strengthening the governance of the Board and representation of the community.

Pip Canons, CEO of Community Catalysts, explained that they had helped to facilitate a process that would enable everyone to have their voices heard and to co-produce some priorities for action. Prior to Community Catalysts joining there had been an initial independent review carried out by the Public Health team. Community Catalysts were then asked to look at the findings of that review and involve the JPB reference groups to build on those recommendations. The process had been thorough with enthusiastic engagement which represented an opportunity to embed an important

citizen voice within the governance structure and help make improvements to services. The process looked at issues through a 'live well' lens and an 'age well' lens leading to specific recommendations:

- Improve and embed co-production principles and approaches.
- Governance and accountability – including stronger links with key governance structures within the Council and the NHS in order to effect real change.
- Improve functioning of JPB – by ensuring that it has the right structure, roles and resources to be fit for purpose and enable people to fully participate.
- Inclusion and wider community reach – it was felt that there was a particular gap around learning difficulties and mental health where additional engagement was required to ensure that these groups were represented. Reaching out to marginalised groups was also an important element of inclusion, such as by producing materials in the right formats and in appropriate languages.

A series of questions then followed from the Panel:

- Cllr Peacock commented that she was involved with the largest pensioners group in the Borough and suggested that this group be included in the engagement process as it had not been included in the list of JPB connections in the slides. Pip Canons explained that the illustration of connections had been put together as part of a workshop to map out the JPB members, reference groups and other connected organisations. However, they would ensure that the pensioners group was added to this. **(ACTION)**
- Helena Kania commented that the JPB was always about health needs, not just social care, and so she felt that NHS services and public health needed to be emphasised more clearly that was currently set out in the list of JPB priorities. Cllr Connor noted that page 175 in the main agenda pack made reference to *“explore NHS/partner attendance at reference groups”* and also to *“explore wider Council attendance at reference groups”*, emphasising the importance of having a strong ask on the involvement of relevant partners. Jano Goodchild, Participation and Co-production Manager, Public Voice CiC, commented that there had been some good health partnerships, but they had struggled recently following the recent changes at the ICB. However, there was now involvement through the Autism reference group, some of the Age Well team from the ICB were involved with the Older Person's reference group, and there were also connections through the Dementia reference group, including the Memory Clinic. There were ongoing discussions on the opportunities to raise the voices of residents through the neighbourhood structures. Cllr Connor proposed a recommendation from the Panel to strongly support the efforts to encourage statutory partners to be actively involved with the reference groups including, health, public health, mental health and the local authority. **(ACTION)**
- Lourdes Keever, JPB Member, emphasised the need to formalise co-production with the rest of the voluntary sector and for the JPB to do more of this. Cllr Connor added that the governance structure was an important part of this as it would enable the testing of co-production, the measuring of outcomes and appropriate support from the Council. She also noted the reference on page 173 of the agenda pack on the accountability of the JPB in the terms of reference to Adult Social Care, the ICB and the Adults & Health Scrutiny Panel. Lourdes Keever also noted the intention to link into the Health and Wellbeing Board.

- Natasha Benn, Interim Chair of the JPB, reported that there had been a focus on the practical requirements to achieve the objectives, including the links required for true co-production and the development of the historic relationships through the reference groups.
- Jano Goodchild, Participation and Co-production Manager at Public Voice CiC, informed the Panel that a task-and-finish group had been set up to work through the actions outlined in the Review. In addition, job descriptions had been developed for the chair of the JPB and the chairs of the reference groups (including the agreement of reimbursements), a code of conduct had been agreed and there had been discussions on enhancing the diversity of the reference groups.
- Jo Baty emphasised that the presence of eight reference groups provided a valuable infrastructure have long-term conversations with people who really understood what residents needed within each of those different groups. The aim was to build new voices and engage with new communities while maintaining strong relationships with those who had been involved for a long time. She felt that there had been progress on finding common ground between the Council's priorities and the JPB's priorities and the next stage would be to develop tangible actions and the Council being held to account on its improvement journey.
- Cllr Connor asked about improving the attendance levels of the Learning Disability and Mental Health reference groups. Lourdes Keever said that there had previously been some effective advocates for learning disabilities but recently there had not been the resource available to hire them. Natasha Benn added that the availability of funds was a crucial factor in enabling advocacy as well as meeting other accessibility needs such as BSL (sign language) support. Funding also impacted on communications requirements such as social media engagement and maintaining a website.
- Phil Stevens, CEO of Disability Action Haringey, commented that, having worked across a number of Boroughs, the JPB was unique and that there should be pride in what had been developed. He noted that the JPB could help to share insight across Council Directorates, but the only funding was being provided from Adult Social Care and that other Directorates could be asked to contribute given that the funding was currently inadequate. He explained that the reason that there was not currently a deaf reference group was because the expense of interpretation was so significant. Sara Sutton reiterated the financial challenges faced by the Council as discussed earlier in the meeting and explained that the source of the funding was the Better Care Fund (BCF) which was an integrated pot between health and adult social care. However, she acknowledged that there could be a bigger ask from health partners so there could be further conversations about exploring wider partnership opportunities around funding. Cllr Connor indicated that the Panel supported that approach. **(ACTION)**
- Amanda Jacobs, JPB Member, expressed concern that some groups of people in the Borough could not be included in the process due to the cost of involving them. On another matter, she explained that a group including some JPB members which had looked at Low Traffic Neighbourhood (LTN) issues, had now become a wider Transport Inclusion group which looked at various accessibility issues. This group had been disbanded without consultation in June with a view to a successor group being set up. However, progress on this

had since been halted. Cllr das Neves commented that she had previously attended some of these meetings and her understanding was that the group would be reformulated. She suggested that this concern could be formally raised with the Culture, Community Safety and Environment Scrutiny Panel which had responsibility for transport issues. Cllr Connor agreed that this concern would be passed on to the Chair of that Panel. **(ACTION)**

- Cllr Brennan queried whether there would be a formalised mechanism for engagement with the Council. Natasha Benn agreed that the aim was to identify key partners and establish a formal process to ensure that they were present at key meetings and events. This was already happening with some of the reference groups, though there were still some gaps. She added that support from the Panel in this regard would be welcome. Cllr Connor emphasised that the Panel was fully supportive of positive engagement and co-production. Cllr Lucia das Neves, Cabinet Member for Health, Social Care and Wellbeing, commented that she was supportive of the previous suggestion to link the JPB to the Health and Wellbeing Board which she chaired. She noted that this would be a thematic space to follow the Health and Wellbeing Strategy and to discuss cross-Borough issues.
- Lourdes Keever commented that Public Voice had done a lot of work on the 'theory of change' which she hoped would help to influence the outcomes that were arrived at and to develop monitoring processes based on co-production. Cllr Connor agreed with this, expressing the Panel's support for the monitoring of outcomes and suggesting that progress towards these outcomes could be brought back to the Panel at a future meeting. **(ACTION)**
- Cllr Iyngkaran commented that the Council had sometimes struggled to reach some communities in the Borough and asked if the JPB had ideas of how this could be achieved. Referring to the previous concerns about the prohibitive costs of engaging with certain groups such as the deaf community, he also asked what alternative methods of engagement had been considered. Jano Goodchild responded that this would be easier to assess when action plans and priorities had been established as this would provide clarity on which groups were not engaging. It would also be possible to bring in voluntary sector organisations to assist with engagement. Phil Stevens commented that, while it was possible in some cases to make adjustments that were culturally appropriate or suitable in terms of venue, it was necessary in the context of the deaf community to provide for their access needs in order for them to be able to engage. Natasha Benn added that going out into the community and engaging through a personal approach was key to engagement and understanding people's needs. She felt that the JPB had a wide reach already and they were attempting to increase this, but the fact remained that they were stretched and limited in terms of capacity. Sara Sutton commented that the Council could assist by facilitating links to the existing Community Networks. Cllr das Neves drew attention to the Community Health Champions which were deeply embedded in local communities and could be beneficial to the JPB engagement. Amanda Jacobs emphasised the importance of meeting accessibility requirements and reasonable adjustments, noting that BSL was a completely different language to spoken and written English. She felt that there was a lack of accessibility and inclusion expertise within the Council and said that she had personally rewritten some documentation as part of the work on the Transport Inclusion group even though this was not the responsibility of a

volunteer. Cllr Connor concluded by emphasising the importance of enabling all groups to be able to access the JPB and to contribute their opinions and expertise. She suggested that this was an area that the Panel should receive an update about as part of the next report. **(ACTION)**

- Asked by Cllr Connor what support the Council could provide to the JPB with online communications, Jo Baty said that there was a named officer for most of the reference groups but felt that this should be formalised which should lead to a better resourced set of reference groups. Sara Sutton added that it may be possible to use the Council's volunteering 'time credit' offer to bring in more skills and resources for the JPB. Cllr Connor commented that the establishment of a website was key and suggested that this should be a key action to monitor going forward. **(ACTION)** Amanda Jacobs emphasised the importance of developing the website alongside an accessibility guide.
- Asked by Cllr O'Donovan about the number of reference groups, Natasha Benn clarified that there was room for eight groups, with seven currently active. She added that even this was not sufficient to be truly representative but that it was important to adopt a practical approach, for example by considering how to redefine or fit more people into the existing reference groups. Cllr O'Donovan suggested that one area to consider was how to ensure that voices are passed up and heard for people who were unable to actually attend the meetings.

In closing the agenda item, Cllr Connor thanked all those who had joined for their attendance, reiterating the Panel's ongoing support for engagement and co-production. She looked forward to the next update report on how the JPB was progressing.

Areas for the Panel to monitor in future were:

- 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.

21. CONNECTED COMMUNITIES

In introducing this item, Sara Sutton explained that the report provided an update on the work to make savings but also to change the shape and nature of the Connected Communities service (which was now being named the Independence and Early Intervention (IEI) Team). The aim was to focus on integration and providing support for residents at the earliest stage. This should be seen as part of the overall change and transformation agenda.

Christina Andrew, Head of Resettlement, Migration & Inequalities, explained that the slides in the agenda pack set out the background to the restructure, the vision for the new service and the financial savings that had been made and also the consultation

process. The new team was based on a model of proactive support, aligning with the neighbourhood focus developing in adult social care through the localities model and the neighbourhood model being developed with health partners. The aim of the new team would be to reduce the need for adult social care packages, enable people to live independently in the community for as long as possible and to reduce the intensity of the packages where they were needed.

Christina Andrew said that there was also a focus on tenancy sustainment through a matrix management model with the housing team. Part of the funding for the service came through the Housing Revenue Account (HRA). The restructure process was in the final stages and there had been strong engagement throughout the consultation process from staff and the unions. The full £700k savings target had now been delivered, including by holding vacancies. 50% of the funding for the service was now through the Better Care Fund (BCF) meaning that there was now a significant contribution from health. There was an aim to complete integration of the service by the beginning of November with the team based in the Central locality.

Cllr das Neves commented that this saving had been a significant and challenging part of the previous year's budget process but that the changes were leading to the kind of services that the Council would like to see more of. She hoped that neighbourhood working and some of the developments coming forward in the NHS 10-year plan would complement this change. She also welcomed the new name of Independence and Early Intervention (IEI) Team as this would avoid confusion with other services nationally.

Cllr das Neves, Sara Sutton, Jo Baty and Christina Andrew then responded to questions from the Panel:

- Asked by Cllr Brennan whether Councillors would have a point of contact within the IEI Team for casework, Christina Andrew explained that there would be five new 'neighbour connector' roles in the new structure with a specific localities focus. Two each of these would be the East and Central areas, with the other one in the West area, reflecting the need in the Borough. It hadn't yet been established exactly where they would be based for drop-ins but this would be a key part of the model. The referral pathway would therefore be a combination of the 'front-door' of the service but also being based in accessible locations. Communications on where these locations would be was expected to begin in October. Sara Sutton added that there was a need to triage effectively so that resources were targeted on those with the greatest need. It was hoped that the range of changes including the 'front door' offer and the digital offer would improve overall access to services.
- Asked by Cllr O'Donovan where the resettlement and financial advice teams would be based, Christina Andrew said that the resettlement team would be moving over to Culture, Strategy & Communities but the operating model would not change. Sara Sutton said that, across the Council, there were a number of areas where financial inclusion and support was provided and the aim was to place that in one area. The team would move to the Benefits team where there were where there were already some income maximisation offers.
- Asked by Cllr O'Donovan how people would be easily able to find the right 'front door' to access services, Jo Baty said that it was important for staff to be well trained and supported to understand what the first contact should look

like, particularly in terms of kindness, compassion and professionalism. The social care staff would be working alongside the new team and this should feel like one service rather than separate teams. She added that it was also important to be agile in the space that Connected Communities had been and to signpost to the right service at the earliest opportunity as only around 40% of people who contacted the team were eligible for adult social care services. There was also the opportunity for staff to become trusted assessors by picking up on non-statutory elements of a social worker's role around low-level assessments, for example when someone needed some equipment.

- In response to a query from Cllr Iyngkaran about how best to signpost, Sara Sutton said that Members Enquiries would be the main route for this, as they tracked and monitored responses. She noted that there were some separate strands such as the Homelessness Prevention Hub which would be an appointment-based face-to-face service beginning later in the year. Cllr Iyngkaran expressed concerns about the poor performance of responses to Members Enquiries and the possibility that some cases would be missed. Cllr das Neves said that this would require a different conversation about Members Enquiries but that referrals to Connected Communities could make casework more complicated to monitor. It was therefore necessary to ensure that systems directed the right things to the right places. Sara Sutton pointed out that around 40% of the Connected Communities workload had been found to be dealing with failure demand in other services which was not driving the change and improvements needed. She added that there was a new corporate solution called 'Infreemation' which would be rolled out shortly and would allow for greater tracking of enquiries from Members. Cllr Connor requested that the responses to Councillor emails be considered as part of this redesign of systems as Councillors were not always kept updated. **(ACTION)**
- Cllr Connor suggested that the Haricare resources needed to be up-to-date and accessible in order to assist residents and professionals with signposting. Sara Sutton responded that this was being updated as part of the digital link to the 'front door' and that this would enable people to self-refer as well as being a valuable resource for professionals.
- On Neighbourhood Connectors, Sara Sutton clarified that their role would not be as frontline staff but in dealing with complex cases that required multi-agency coordination and collaboration. They would also work with health partners and the voluntary sector to ensure that the local picture was well understood and documented as part of the Council's information, advice and guidance.
- Asked by Cllr Brennan about digital inclusion for residents, Sara Sutton said that there were a number of active digital inclusion projects across the Council and health partners. This included supporting people to use the NHS app and sessions run by the GP Federation. Through the IEI work there would be signposting to a range of offers and opportunities.
- Natasha Benn observed that a more holistic approach to health and social care was now widely accepted and asked whether there would be a greater focus on nutrition, physical activity and physio for vulnerable people as part of this approach, in order to prevent people's health from deteriorating. Sara Sutton agreed that this linked to the elements about ageing well and also to the Council's Health and Wellbeing Strategy. This would be explored as part of a wider partnership approach to the neighbourhoods work. Asked by Natasha

Benn whether there would be funding to support this, Sara Sutton said that there was not a specific budget but there would be the resourcing budget for the staff and then part of the partnership work would involve looking at key priorities and how various resources should be aligned. She added that there was a lot of change in this area including conversations about how the ICBs might fund prevention in a different way. Cllr das Neves reflected on examples of local service users later becoming active volunteer participants in roles that helped others to develop their independence. Empowering people to take more control and have more independence was therefore a valuable element to this approach.

- Cllr O'Donovan highlighted the importance of the Key Performance Indicators (KPIs) on page 195 of the agenda pack, in particular the KPI on the proportion of residents supported to remain independent after 6 months.

Cllr Connor summarised some key priorities of the Panel that had emerged from the discussion as:

- Building an understanding of what the role of Neighbourhood Connectors would be;
- 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.

22. NEW ITEMS OF URGENT BUSINESS

Dominic O'Brien, Scrutiny Officer, explained that this item followed the consideration of a Quarter 1 update report on the Corporate Delivery Plan at the meeting of the Overview & Scrutiny Committee on 18th September 2025. A KPI in the report was:

Number of complaints upheld by the Local Government and Social Care Ombudsman per 10,000 population - *The Ombudsman investigated 61 complaints and 53 were upheld (87%). Adjusted for Haringey's population, this is 20.2 upheld decisions per 100,000 residents. The average for authorities of this type is 9.1 upheld decisions per 100,000 residents.*

It was also noted that further details about this was provided in the Annual Feedback & Resolutions report which was scheduled to be brought to the Overview & Scrutiny Committee on 20th October 2025. A report on the Council's response to the Ombudsman was provisionally scheduled to be brought to the Adults and Health Scrutiny Panel on 16th December 2025. However, the purpose of the current Urgent Business item was to have an initial discussion on the key points.

Sara Sutton commented that the number of upheld complaints related to the Council as a whole but reported that the specific adult social care data would also be made

available. It would then be possible to bring a more detailed analysis of this information to the Panel in due course. She noted that 70% of all contacts to the Ombudsman about Haringey were either outside of the jurisdiction or were closed. In addition, Haringey had achieved 100% resolution of the Ombudsman's recommendations arising from upheld complaints. However, she acknowledged that the number of upheld decisions in proportion to the population was high and the Annual Feedback & Resolutions report outlined a number of actions that the Council was taking to resolve this. An improvement plan was in place for the timeliness and quality of responses. Significant progress had been made over the past quarter in relation to statutory adult social care complaints with on-time performance increased by 29% compared to the previous year. The new Infreemation system referred to earlier in the meeting would enable improved tracking of Ombudsman cases.

Cllr O'Donovan noted that there were explanatory paragraphs for each case on the Ombudsman website and suggested that it would be useful to go through these paragraphs at the December Panel meeting to ascertain what lessons could be learned for the future. **(ACTION)**

Cllr das Neves assured the Panel that she read every Ombudsman report and also discussed them with senior officers when there was learning to be established. Jo Baty observed that there had historically been an email-based culture within the Council which could overcomplicate cases so there was a need to streamline the processes. She added that it would also be beneficial to have earlier conversations with residents because going to the Ombudsman should usually be a position of last resort. Sara Sutton added the importance of candour and transparency, apologising at the earliest opportunity when the Council had not got things right and identifying consistent themes in the upheld complaints.

Cllr Connor commented that the letter from the Ombudsman had made reference to the lack of a swift response from the Council to the Ombudsman and not just to the complaints. She suggested that this should be scrutinised in more depth at the December Panel meeting. **(ACTION)**

23. WORK PROGRAMME UPDATE

Cllr Connor noted that the next meeting of the Panel in November was on the 2026/27 Budget and that there were currently too many items pencilled in for the December meeting so these would need to be reduced.

In accordance with the Committee Procedure Rules, the Panel agreed to continue the meeting after 10pm in order to conclude the item under discussion.

The Panel discussed possible topics for its next Scrutiny Review which would need to be completed by February 2026. It was determined that a project on communications with residents should be brought forward, including digital communications and inclusion, the accessibility of information on the Council website and the Haricare resource. **(ACTION)** It was noted that the issue of communications had been frequently raised by residents, including through the Scrutiny Café consultation event.

24. DATES OF FUTURE MEETINGS

- 13th November 2025 (6.30pm)
- 16th December 2025 (6.30pm)
- 9th February 2026 (6.30pm)

CHAIR: Councillor Pippa Connor

Signed by Chair

Date