

NOTICE OF MEETING

Well-Being Strategic Partnership Board

THURSDAY, 14TH MAY, 2009 at 19:00 HRS - CIVIC CENTRE, HIGH ROAD, WOOD GREEN, N22 8LE.

MEMBERS: See membership list set out below.

AGENDA

1. APOLOGIES AND SUBSTITUTIONS

To receive any apologies for absence.

2. URGENT ITEMS OF BUSINESS

The Chair will consider the admission of any items of Urgent Business. (Late items will be considered under the agenda item where they appear. New items will be dealt with Item 17 below).

3. DECLARATIONS OF INTEREST

Members of the Board must declare any personal and/or prejudicial interests with respect to agenda items and must not take part in any decision in relation to these items.

4. MINUTES (PAGES 1 - 12)

To confirm the minutes of the meeting held on 2 March 2009 as a correct record.

5. CONFIRMATION OF CHAIR AND VICE-CHAIR FOR 2009/10

To confirm the Chair and Vice-Chair for 2009/10.

6. APPOINTMENT OF REPRESENTATIVE TO THE HARINGEY STRATEGIC PARTNERSHIP FOR 2009/10

To appoint a representative from the Well-Being Strategic Partnership Board to the Haringey Strategic Partnership for 2009/10.

7. TERMS OF REFERENCE AND MEMBERSHIP: 2009/10 (PAGES 13 - 24)

8. WELL-BEING STRATEGIC FRAMEWORK

This report will be sent to follow.

9. EXPERIENCE STILL COUNTS 2009-12 (PAGES 25 - 142)

10. DRAFT USER PAYMENT POLICY (PAGES 143 - 150)

11. MENTAL WELL-BEING IMPACT ASSESSMENTS: HARINGEY TIME BANK (PAGES 151 - 198)

12. TRANSFORMING SOCIAL CARE -PUTTING PEOPLE FIRST

A verbal update will be provided.

13. WELL-BEING SCORECARD: EXCEPTION REPORTING (PAGES 199 - 206)

14. DRAFT CORE STRATEGY PREFERRED OPTIONS CONSULTATION MAY 2009: 'A NEW PLAN FOR HARINGEY 2011-2026' (PAGES 207 - 214)

15. IMPLEMENTATION OF HARINGEY'S DRAFT HOUSING STRATEGY: 2009-19 (PAGES 215 - 270)

16. THREE MINUTE UPDATE FROM PARTNERS

To receive a brief update from Partners of the most prevalent issues effecting their organisation.

17. NEW ITEMS OF URGENT BUSINESS

To consider any new items of Urgent Business admitted under Item 2 above.

18. ANY OTHER BUSINESS

To consider any items of AOB.

19. DATES OF FUTURE MEETINGS

To note the dates of future meetings set out below:

- 24 September 2009
- 8 December 2009
- 25 February 2010

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Xanthe Barker
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6 May 2009

SECTOR GROUP	AGENCY	NO. OF REPS	NAME OF REPRESENTATIVE
Local Authority	Haringey Council	9	Cllr Bob Harris (Chair) Mun Thong Phung Councillor John Bevan Councillor Dilek Dogus Councillor Gideon Bull Margaret Allen Eugenia Cronin* John Morris Lisa Redfern
	Haringey Teaching Primary Care Trust	6	Judy Allfrey Tracey Baldwin Penny Thompson Cathy Herman Marion Morris Richard Sumray (Vice-Chair)
Health	North Middlesex Hospital trust	1	Claire Panniker
	BEH Mental Health Trust	1	Michael Fox
	Whittington Hospital Trust	1	David Sloman
Community Representatives	Community Link Forum	3	Abdool Alli Angela Manners Faiza Rizvi
		1	Sue Hessele
	HAVCO	2	Robert Edmonds Naeem Sheikh
Education	College of North East London	1	Paul Head
Other agencies	Haringey Probation Service	1	Mary Pilgrim
	Metropolitan Police	1	Dave Grant
Total		26	

** Jointly appointed by the Council and Primary Care Trust*

MINUTES OF THE HARINGEY WELL-BEING PARTNERSHIP BOARD (HSP)
MONDAY, 2 MARCH 2009

Present: Councillor Bob Harris (Chair), Margret Allen, Abdool Alli, Councillor John Bevan, Eugenia Cronin, Councillor Dilek Dogus, Keith Edmunds, John Forde, Michael Fox, Angela Manners, John Morris, Lisa Redfern, Naeem Sheikh, Richard Sumray.

In Attendance: Xanthe Barker, Will Evans, Eve Pelekanos, Helena Pugh, Susan Oti.

MINUTE NO.	SUBJECT/DECISION	ACTON BY																		
OBHC117	<p>APOLOGIES AND SUBSTITUTIONS</p> <p>Apologies for absence were received from the following:</p> <table border="0"> <tr> <td>Tracey Baldwin</td> <td>Keith Edmunds substituted</td> </tr> <tr> <td>Councillor Gideon Bull</td> <td></td> </tr> <tr> <td>Robert Edmonds</td> <td></td> </tr> <tr> <td>Dave Grant</td> <td>John Forde substituted</td> </tr> <tr> <td>Paul Head</td> <td></td> </tr> <tr> <td>Cathy Herman</td> <td></td> </tr> <tr> <td>Sue Hessle</td> <td></td> </tr> <tr> <td>Marion Morris</td> <td></td> </tr> <tr> <td>Mun Thong Phung</td> <td>(represented by Margaret Allen & Lisa Redfern)</td> </tr> </table>	Tracey Baldwin	Keith Edmunds substituted	Councillor Gideon Bull		Robert Edmonds		Dave Grant	John Forde substituted	Paul Head		Cathy Herman		Sue Hessle		Marion Morris		Mun Thong Phung	(represented by Margaret Allen & Lisa Redfern)	
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Marion Morris																				
Mun Thong Phung	(represented by Margaret Allen & Lisa Redfern)																			
OBHC118	<p>DECLARATIONS OF INTEREST</p> <p>Councillor Dilek Dogus declared a personal interest in Item 7 as she was an employee of the Barnet Haringey and Enfield Mental Health Trust.</p>																			
OBHC119	<p>URGENT BUSINESS</p> <p>RESOLVED:</p> <p>That partners should be invited to provide an update on the current financial outlook for their respective organisations under agenda Item 16.</p>																			
OBHC120	<p>MINUTES</p> <p>RESOLVED:</p> <p>That the minutes of the meeting held on 12 December 2008 be confirmed as a correct record.</p>																			
OBHC121	<p>COMMUNITY ENGAGEMENT FRAMEWORK</p> <p>The Board received a report and presentation setting out the role of the new Community Engagement Framework (CEF) and how it was being</p>																			

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developed.

It was noted that there were three key reasons for establishing a CEF:

- To reaffirm the HSP's commitment to community engagement
- To promote and share partnership understanding of principles and community engagement
- To identify and prioritise areas for development

There were several national and local drivers for forming the CEF including the Local Government and Involvement in Public Health Act and Local Area Agreement (LAA) targets.

The Board was advised that the HSP Performance Management Group (PMG) had established a multi agency sub group to lead on the delivery of the CEF.

The first phase of the consultation process had now concluded and the second phase was due to commence on 5 March. This would include publishing the consultation document on the Council's website and circulating it to Voluntary and Community Sector groups for feedback. A questionnaire would also be circulated seeking specific comments in relation to the vision, definition and principles of the CEF.

During the second phase of consultation each of the Thematic Boards would also be provided with an opportunity to discuss and comment on the draft CEF.

It was noted that the third phase would take place in the Autumn and would focus primarily on the development of the Action Plan.

Members of the Board representing community groups were encouraged to complete the online questionnaire and the Board was advised the closing date for submission was 21 April.

The Board discussed the CEF and it was noted that engagement and empowerment were particularly relevant to the Well-Being agenda. It was contended that effective engagement with communities could offer real health benefits and help address health inequalities and this should be a primary driver for the CEF.

It was suggested it would be useful if the 'Making a Positive Contribution' sub-group looked at ways of linking into the CEF and officers agreed to take this forward.

In response to a query the Board was advised that the list of suggested engagement mechanisms was not exhaustive and was intended to provide a 'snap shot' rather than a description of all of the actions being taken to engage with the local community.

It was noted that although the CEF provided a framework for engagement it may not be obvious to the public what it was intended to

Helena
Pugh

Helena
Pugh

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	<p>achieve. It was suggested that this should be set out more explicitly within the document.</p> <p>There was also agreement that there needed to be stronger collaboration between partners to ensure that duplication was minimised and that existing mechanisms for engagement were used as effectively as possible.</p> <p>RESOLVED:</p> <ol style="list-style-type: none"> i. That the report and presentation be noted. ii. That the points raised above be taken forward by the Head of Corporate Policy. 	<p>Helena Pugh</p> <p>Helena Pugh</p>
<p>OBHC122</p>	<p>COMPREHENSIVE AREA ASSESSMENT</p> <p>The Board received a presentation on the forthcoming Comprehensive Area Assessment (CAA).</p> <p>An overview was given of the scope of the CAA and it was noted that this was comprised of two key strands:</p> <p><u>Area Assessment</u></p> <p>This strand would consider how effectively local public services delivered local priorities, economic prospects, community safety and potential for future improvement.</p> <p><u>Organisational Assessment</u></p> <p>The second strand would consider the use of resources and performance management and how the Council delivered value for money through the combined use of resources and performance management.</p> <p>It was noted that Partners would be inspected by their own inspection regimes and that these would liaise with the Audit Commission.</p> <p>In assessing this four key themes would be considered:</p> <ul style="list-style-type: none"> • Management of finances • Governing business • Managing resources • Managing performance <p>In terms of the Area Assessment the following key areas would be focussed upon:</p> <ul style="list-style-type: none"> • How well do local priorities express community needs and aspirations? • How well are the outcomes and improvements needed being 	

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	<p>delivered?</p> <ul style="list-style-type: none"> • What are the prospects for future improvements? <p>It was noted that the Local Authority would be required to produce and publish an Annual Summary, which would include an overview of key priorities, overall successes, challenges and future prospects. It was envisaged that these would form a tool for members of the public wanting to obtain an overview of the Borough.</p> <p>In addition to this a system of red and green flags would be used to indicate areas where arrangements were considered inadequate to deliver improvement or where exceptional or innovative practice was demonstrated.</p> <p>The Board was advised that that the CAA would take a more holistic approach to assessing performance and would gather evidence over the course of a year rather than focussing on a limited period.</p> <p>In terms of the specific implications for the Well-Being Strategic Partnership Board, it was noted that the NHS World Class Commissioning framework would be aligned to the CAA and that the NHS would be assessed against this. The respective Ofsted and Care Quality Commission inspections of Adult Learning and Adult Social Care would also be considered within the CAA.</p> <p>The Board discussed the report and presentation and was advised that in addition to the sources listed above the Place Survey and other relevant surveys would be used as evidence by the CAA team.</p> <p>RESOLVED:</p> <p>That the presentation be noted.</p>	All to note
OBHC123	<p>MENTAL CAPACITY ACT -DOLS IMPLICATIONS</p> <p>The Board received a presentation setting out the implications of the Deprivations of Liberty Safeguards, which formed part of the Mental Capacity Act 2007 and will come into force in April 2009.</p> <p>It was noted that the these measures were intended to prevent arbitrary decisions being made that would deprive vulnerable people in hospital and care homes of their liberty. Staff working in the sector were being prepared for the implementation of the new measures via training and briefing sessions.</p> <p>The Board was advised that under the Act Local Authorities and Primary Care Trusts were now able to enter into a range of shared operational and administrative arrangements that were intended to assist them in carrying out duties placed on them by the Deprivation of Liberty Safeguards. It was confirmed that under the new partnership arrangements Local Authorities and Primary Care Trusts would be able to carry out any of their functions on each others behalf.</p>	

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	<p>In response to a query it was confirmed that where services were commissioned to other organisations they could be assessed by the commissioning body.</p> <p>The Board was advised that the Local Authority had begun to look at putting systems in place to capture data and there was agreement that there should be discussion between NHS Haringey and the Local Authority to determine whether a joint approach could be formulated.</p> <p>RESOLVED:</p> <ul style="list-style-type: none"> i. That the presentation be noted. ii. That there should be discussion between the NHS and the Local Authority to determine whether a joint approach to could be formulated for capturing data in relation to the Deprivation of Liberty Safeguards. 	<p>Keith Edmunds/ Lisa Refern</p> <p>Keith Edmunds/ Lisa Refern</p>
<p>OBHC124</p>	<p>REHABILITATION AND INTERMEDIATE CARE STRATEGY</p> <p>The Board considered a report that provided an update on progress of the development of the Intermediate Care and Rehabilitation Strategy.</p> <p>It was noted that the Strategy had been identified as a priority area for development in the Primary Care Trust's (PCT) Investment Plan and as a result an external review of the existing Strategy had been commissioned, the results of which were set out in the report.</p> <p>In response to a query, as to whether funding would be available to Voluntary and Community Sector groups under the Strategy, the Board was advised that investment was already committed under existing contracts. As the initiative was being led by the Department for Health the PCT did not have the usual flexibility to consult with the Voluntary and Community Sector.</p> <p>In terms of the recommendation that Greentrees on the St Ann's site could be improved in terms of efficiency the Board was advised that options for increasing the number of beds available were being considered with a view to raising the number of people who could be treated at any one time.</p> <p>The Board was advised that the Strategy focussed on the delivery of primary care rather than mental health. However, there were areas such as primary care for the elderly where there would be cross over.</p> <p>There was agreement that once contracts had been agreed further information should be circulated to the Board along with the overarching Investment Strategy.</p>	<p>Keith Edmunds</p>

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	<p>RESOLVED:</p> <ul style="list-style-type: none"> i. That the progress made in relation to the Strategy be noted. ii. That once contracts had been agreed further information should be circulated to the Board along with the overarching Investment Strategy. 	Keith Edmunds
OBHC125	<p>ALCOHOL STRATEGY IMPLEMENTATION PLAN UPDATE AND PRESENTATION ON ANALYSIS OF THE HOSPITAL EPISODE STATISTIC DATA</p> <p>The Board received an information report setting out progress in relation to the Alcohol Strategy Implementation Plan. A presentation was also given that provided statistical data relating to alcohol related hospital admissions.</p> <p>It was noted that one of the contributing factors towards alcoholism was often boredom and a lack of prospects. It was suggested that work should be carried out with local communities to ensure that there were volunteering and training opportunities for local people. This was particularly relevant in the current economic climate where people may be vulnerable to redundancy and experiencing additional pressures, due to financial problems.</p> <p>The Board was advised that this was recognised as being an important issue and that measures were included within the Action Plan to address this. In addition work was being carried out with primary care providers to ensure that all of the pathways into care were able to recognise and appropriately refer patients with alcohol problems.</p> <p>It was acknowledged that there were conditions where alcohol consumption was a contributory factor, rather than the primary cause of an admission, and this meant that it was often difficult to gauge how an admission should be classified. Consequently any statistical information arising from this may provide a distorted picture.</p> <p>It was noted that the rate of chronic admissions were not included within the data and it was suggested that in order for the data to be as comprehensive as possible a broader context should be provided.</p> <p>RESOLVED:</p> <p>That presentation and report be noted.</p>	Susan Oti
OBHC126	<p>SUMMARY OF HARIACTIVE REPORT</p> <p>The Board received a report that provided an update on the HariActive Programme.</p> <p>The Programme contributed towards four of the Local Area Agreement (LAA) National Indicators (NI's) within the Board's responsibility:</p>	

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	<ul style="list-style-type: none"> • NI 8 Adult Sport and Physical Activity Participation • NI 6 Participation in Volunteering • NI 56 Tackling Childhood Obesity • NI 57 Children and Young People's Participation in High Quality Physical Education and Sport • NI 119 Overall Health and Well-Being (Local Target) • NI 139 Healthy Lifestyle Expectancy (Local Target) <p>It was noted that proxies were now being formed to measure targets that had an annual indicator in order to enable the Board to measure progress against throughout the year.</p> <p>In response to a query, as to how the level of people who participated in physical activity three times a week or more was measured, the Board was advised that this information was taken from the Active People Survey. This was based on responses received from one thousand people from across the Borough and had been accepted by GOL as a sufficient means of obtaining data.</p> <p>The Board was advised that coaching opportunities arising as part of the Olympics would be picked up in the Club and Coaching Volunteering Programme and that the Enterprise Partnership Board was considering the wider economic legacy that the Olympics presented for the Borough.</p> <p>RESOLVED:</p> <p>That the report be noted.</p>	All to note
OBHC127	<p>USER PAYMENTS POLICY</p> <p>RESOLVED:</p> <p>That the report be deferred until the next meeting.</p>	Helen Constantine/ Xanthe Barker
OBHC128	<p>UPDATE ON JOINT STRATEGIC NEEDS ASSESSMENT (JSNA)</p> <p>The Board received a report that provided an update on progress in relation to the Joint Strategic Needs Assessment (JSNA).</p> <p>It was noted that the first phase of Haringey's JSNA had been published in August 2008 and that this had identified where there were gaps in knowledge. At present four under pinning needs assessments were being undertaken as part of the JSNA to assess the needs of:</p> <ul style="list-style-type: none"> • Mental Health • Sexual Health • Vulnerable Children and Young People • Population Projections and Future Need 	

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	<p>The Board was advised that a Steering Group consisting of representatives from across the Partnership had been established to guide the JSNA. At present the Steering Group was developing a business case for a web-based data platform for sharing and reporting data to the Partnership.</p> <p>RESOLVED:</p> <p>That the report be noted.</p>	All to note
OBHC129	<p>WELL-BEING RISK REGISTER</p> <p>The Board received a report that provided an update in relation to the Well-Being Strategic Partnership Board Risk Register.</p> <p>At its previous meeting the Board had requested that clarification and additional information had been sought in two areas: clarification of the risk attached to NI 8 and the inclusion of financial risk element. The Board was advised that these issues had now been addressed and that this was set out in the report.</p> <p>An overview was provided of the methodology attached to the Risk Register and how it would be monitored and reported on to the Board.</p> <p>It was noted that the sub-groups beneath the Board were considered within the Register and that their SMART objectives were being assessed in terms of risk.</p> <p>Concern was expressed that there was additional financial risk attached the potential loss of the Reward Based Grant that had not been considered. The Board was advised that the budget had been calculated on the assumption that this would not be achieved.</p> <p>RESOLVED:</p> <ul style="list-style-type: none"> i. That the changes in relation to NI 8, as set out in the report, be noted. ii. That the financial risks set out in the report be noted. iii. That the Risk Register be adopted. 	
OBHC130	<p>AREA BASED GRANT</p> <p>The Board received a verbal update in relation to the Area Based Grant (ABG).</p> <p>It was noted that the Supporting People Programme would not be subsumed by the ABG in 2009/10. However, it was likely that this would be included within the ABG in future years; in order to provide stability the HSP Performance Management Group (PMG) had agreed to</p>	

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	<p>'passport' through funding to the Programme in 2010/11.</p> <p>The Board discussed the ABG and there was agreement that the two year period agreed would offer a better degree of certainty for organisations and that this was a positive measure. Concern was raised that smaller organisations may not be as engaged or as aware of the criteria for receiving continued funding and it was suggested that additional ways of engaging with these groups should be considered.</p> <p>In response to a query it was clarified that there would be a review of the projects funded by the ABG after eighteen months and that this was seen as being good practice.</p> <p>It was noted that the Enterprise Partnership Board had produced a Commissioning Prospectus that set out the criteria for funding and provided a framework and guide for organisations bidding for this. There was agreement that the Board should develop a commissioning model to provide clarity and consistency.</p> <p>RESOLVED:</p> <p>That the verbal update provided be noted.</p>	All to note
OBHC131	<p>WELL-BEING SCORECARD</p> <p>The Board received the Well-Being Scorecard which set out performance against Local Area Agreement (LAA) targets during the Third Quarter of 2008/09.</p> <p>The Chair noted that Haringey was currently rated as fifteenth out of the sixteen London Boroughs surveyed in terms of delayed transfers of care and he expressed his concern at the position. He requested that colleagues from NHS and the Council should meet as a matter of urgency to discuss how this could be addressed jointly.</p> <p>RESOLVED:</p> <p>That the performance during the Third Quarter be noted.</p>	<p>Keith Edmunds/ Lisa Refern/ Margaret Allen/ David Sloman</p> <p>All to note</p>
OBHC132	<p>NEW ITEMS OF URGENT BUSINESS</p> <p><i>As agreed under Item 3 partners were invited to provide an update on the current economic outlook for their respective organisations:</i></p> <p><u>NHS Haringey</u></p> <p>The Board was advised that in order to take forward the recommendations contained within the Health Care for London report NHS London had agreed that historic deficits across London PCTs would need to be addressed. Consequently the deficit was being spread across the PCTs. In order to achieve the savings required it had been necessary to 'top slice' the budgets across London.</p>	

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	<p>A body consisting of Chief Executives, Chairs and Executive Directors of PCTs would consider business cases put forward by PCTs with the largest deficits, setting out why they should additional funding, which would be subsidised by other PCTs.</p> <p>In addition to these savings all PCTs were also being asked make efficiency savings of 0.8% during the next financial year.</p> <p>The Primary Care Strategy was developing rapidly and the next stage of consultation would begin in June.</p> <p>The Board was advised that the PCTs budget was still in flux at present and until it had been finalised the PCT was unable to provide partners with details. However, once it had been finalised details would be circulated.</p> <p><u>Council</u></p> <p>The Chair advised that the Council's budget had now been set and that details of this were publicly available.</p> <p><u>Mental Health Trust</u></p> <p>At present the MHT was consulting with NHS Haringey on changes to Mental Health provision in the Borough.</p> <p>An update would be provided at a future meeting on the progress of the Trusts application for Foundation status.</p> <p>RESOLVED:</p> <p>That the updates provided be noted.</p>	<p>Helen Constantine/ Xanthe Barker</p> <p>All to note</p>
<p>OBHC133</p>	<p>ANY OTHER BUSINESS</p> <p>No items of AOB were raised.</p>	
<p>OBHC134</p>	<p>DATES OF FUTURE MEETINGS</p> <p>Members of the Board were asked to note the provisional dates set for the new Municipal Year 2009/10:</p> <ul style="list-style-type: none"> • 14 May, 7pm • 1 October, 7pm • 8 December, 7pm • 25 February, 7pm <p>It was noted that once these had been formally agreed the Board would be advised.</p>	<p>All to note</p>

COUNCILLOR BOB HARRIS

Chair

The meeting closed at 9.15pm.

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haringey strategic partnership

Meeting: Well-Being Strategic Partnership Board

Date: 14 May 2009

Report Title: Terms of Reference and Membership: 2009/10

Report of: Mary Connolly, HSP Manager, Haringey Council.

Summary

The first meeting of the year provides a timely opportunity for the Board to confirm its Membership and update its Terms of Reference for the forthcoming year.

The current Terms of Reference are attached at Appendix 1. The Boards current Membership is attached at Appendix 2. Each partner organisation should now formerly confirm the names of the individuals appointed to the Board.

The Board should also note that Council's Cabinet will appoint Councillors to the HSP and each of the Thematic Boards on 16 June. Therefore, until then, the Councillors appointed to the Board by the Cabinet in 2008/09 remain in place.

Recommendations

- i. That the Board confirm its membership for 2009/10.
- ii. That the Board Terms of Reference for 2009/10.

For more information contact:

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APPENDIX 1

WELL-BEING PARTNERSHIP BOARD (WBPB) Terms of Reference

Agreed 2 June 2008

1. Purpose

Local residents, statutory, voluntary, community and commercial organisations all have a role to play in improving well-being. This includes access to health and care services; access to appropriate leisure and educational services; access to employment; and opportunities for a healthier lifestyle.

Haringey's **Well-being Partnership Board (WBPB)** will lead in promoting and delivering a Healthier Haringey for **all people aged 18 years and over in Haringey** by:

- improving the health and quality of life of people who live and work in Haringey and reducing health inequalities
- setting a strategic framework, including outcomes and objectives, through which joint priorities can be delivered and through which statutory responsibilities can be carried out
- agreeing joint, overarching priorities for the wider well-being agenda through an annual statement which will guide the work of the Board in the light of the most recent information and developments

2. Rationale

The WBPB is a strategic body forming part of the Haringey Strategic Partnership (HSP). The HSP has established six priority outcomes which are set out in the Sustainable Community Strategy. The WBPB contributes to all six outcomes and has adopted them as its priorities:

Sustainable Community Strategy Priorities	Well-being Partnership Board Outcomes
People at the heart of change	Improved quality of life Making a positive contribution Freedom from discrimination or harassment Maintaining personal dignity and respect
An environmentally sustainable future	Improved quality of life Economic well-being
Economic vitality and prosperity shared by all	Improved quality of life Economic well-being
Safer for all	Improved quality of life Freedom from discrimination or harassment
Healthier people with a better quality of life	Improved health and emotional well-being Improved quality of life Increased choice and control Freedom from discrimination or harassment Maintaining personal dignity and respect

Sustainable Community Strategy Priorities	Well-being Partnership Board Outcomes
Be people and customer focused	Making a positive contribution

The WBPB will address the need to:

- shift from the narrow focus of treating illness to promotion of the broader concept of well-being, in line with the requirements of the Department of Health's 2006 White Paper *Our Health, Our Care, Our Say*
- create a sustainable framework for local action on health and well-being, so that partnership working is strengthened and there is greater clarity over who is responsible for agreeing and delivering local health and well-being targets, in line with the requirements of the Department for Communities and Local Government's 2006 White Paper, *Strong and Prosperous Communities* and the associated Local Government Involvement in Public Health Bill.

The WBPB also meets the requirements of the Health Act 1999 which specifies a formal duty of partnership between health organisations and local authorities. It is subject to government policy guidance and directives.

The Board is the umbrella body to statutory and non-statutory partnerships and sub groups that fall within its remit.

3. Outcomes, objectives and targets

<i>Our Health, Our Care, Our Say (OHOCOS) Outcome</i>	WBPB Objective	Key Performance Indicators
Improved health and emotional well-being	To promote healthy living and reduce health inequalities in Haringey	<ul style="list-style-type: none"> • Reduce health inequalities between the local authority area (Haringey) and the England population by narrowing the gap in age, all-cause mortality (LAA Target) • Increase physical activity in the borough (LAA Target) • Increase the number of smoking quitters in N17 (LAA Target) • Clients receiving a review (PAF D40) • Support the reduction of housing related delayed discharges from hospital as part of the Joint Mental Health Strategy 2005-08 (LAA)
Improved quality of life	To promote opportunities for leisure, socialising and life long learning, and to ensure that people are able to get out and about and feel safe and confident inside and outside their homes	<ul style="list-style-type: none"> • Increasing the number of older people attending day opportunities programmes (LAA Target) • The number of physical visits per 1000 population to public libraries (CPA C2c PLSS 6) • Increase adult education take-up • The percentage of items of equipment and adaptations delivered within 7 working days (BVPI 56) • The number of those aged 18 and over helped to live at home (PAF C29; C30; C31; C32) • Increase the number of breaks received by carers (LAA Target) • Reduce the proportion of adults saying they are in fear of being a victim of crime (LAA Target) • Households receiving intensive homecare per 1,000 population (PAF C28 BVPI 53)
Making a positive contribution	To encourage opportunities for active living including getting involved, influencing decisions and volunteering	<ul style="list-style-type: none"> • Increase the number of people recorded as or reporting that they have engaged in formal volunteering on an average of at least two hours per week over the past year (LAA Target) • Increase the number of volunteers recruited as part of day opportunities for older people (LAA Target)
Increased choice and control	To enable people to live independently, exercising choice and control over their lives	<ul style="list-style-type: none"> • The number of adults and older people receiving direct payments at 31 March per 100,000 population aged 18 or over (PAF C51) • Acceptable waiting times for assessments (PAF D55 BVPI 56) • Acceptable waiting times for care packages (PAF D56 BVPI 196) • Increasing the proportion of vulnerable single people supported to live independently, who as a result do not need to be accepted as homeless and enter temporary accommodation (LAA Target)

3. Outcomes, objectives and targets

Our Health, Our Care, Our Say (OHOCOS) Outcome	WBPB Objective	Key Performance Indicators
Freedom from discrimination or harassment	To ensure equitable access to services and freedom from discrimination or harassment	<ul style="list-style-type: none"> • Percentage of adults assessed in the year whose ethnicity was 'not stated' in RAP return A6 (key threshold) • Percentage of adults with one or more services in the year whose ethnicity was 'not stated' in RAP return P4 (key threshold)
Economic well-being	To create opportunities for employment and to enable people to maximise their income and secure accommodation which meets their needs	<ul style="list-style-type: none"> • Increase the number of residents on Incapacity Benefit for 6 months or more helped into work of 16 hours per week or more for at least 13 weeks (LAA Target) • Increase the number of people from priority neighbourhoods helped into sustained work (LAA Target) • Improve living conditions for vulnerable people ensuring that housing is made decent, energy efficient and safe (LAA Target)
Maintaining personal dignity and respect	To ensure good quality, culturally appropriate personal care and prevent abuse of service users occurring wherever possible and to deal with it appropriately and effectively if it does occur	<ul style="list-style-type: none"> • Availability of single rooms (PAF D37) • Numbers of relevant staff in post who have had training in addressing work with vulnerable adults. • Written guidance on personal and/or sexual relationships between people who use in-house or purchased care services

4. Core business

The WBPB will:

- Carry out all statutory duties required by government including formally approving Section 31 partnership agreements and confirming the statutory transfer of funds between agencies
- Respond, as a partnership, to new government initiatives, directives and legislation
- Contribute to the implementation and review of the Community and Neighbourhood Renewal Strategies and to monitor progress on agreed actions
- Monitor and review our overarching Well-being Strategic Framework (WBSF) based on the seven *Our Health, Our Care, Our Say* (OHOCOS) outcomes to help us shift from the narrow focus of treating illness and providing care to vulnerable people and towards the promotion of well-being for all
- Work with the other local thematic partnerships to champion the priorities of the WBSF, and to ensure there is joint ownership and delivery of the framework
- Agree the structure and terms of reference of sub groups and Partnership Board falling within the well-being structure
- Monitor the implementation of projects delegated to the well-being sub groups
- Consider, comment on and endorse, as appropriate, strategic documents from other Partnership Boards or sub groups in the well-being or wider HSP structure that require a joint multi-agency well-being response
- Monitor the effectiveness of the Partnership Boards and sub groups and other joint planning arrangements within its structure through receipt of an annual report or other agreed mechanisms
- Monitor progress on Local Area Agreement (LAA) targets
- Refresh and agree future LAA targets and priorities in line with the Sustainable Community Strategy and the WBSF
- Actively engage service users and carers, with specific emphasis on traditionally hard to reach groups, and give support to enable participation from all relevant stakeholders
- Actively encourage the contribution of all stakeholders to the wider well-being agenda, e.g. leisure, environment, housing, community safety, regeneration, education and children's services, ensuring that well-being activities are appropriately considered in their planning, including other HSP theme partnerships
- Share information, best practice and experience
- Share performance management frameworks where appropriate and possible
- Integrate, wherever appropriate, the plans and services of partner organisations including the use of Health Act 1999 flexibilities
- Account for actions and performance through regular reports to the HSP via the joint commissioning group which manages finance and performance of the WBPB

5. Operational Protocols

Membership

The membership of the Well-being Partnership Board will:

- Be related to the agreed role of the Partnership with the flexibility to co-opt members for a specified time to meet specific requirements
- Be reviewed annually
- Have the authority and resources to meet the aims and objectives of the Terms of Reference
- Possess the relevant expertise to deliver the Terms of Reference
- Be responsible for disseminating decisions and actions back to their own organisation and ensuring compliance
- Will nominate a member to represent it on the HSP Board

Chair

The WBPB will select a chair from either Haringey Council or Haringey Teaching Primary Care Trust – on rotation – at the beginning of each municipal year.

Vice Chair

The WBPB will elect a vice chair from either Haringey Council or Haringey Teaching Primary Care Trust – whichever is not currently providing the chair – at the beginning of each municipal year.

Deputies and representation

Partner bodies are responsible for ensuring that they are represented at an appropriate level. Where the nominated representative is unable to attend, a deputy may attend in their place.

Co-opting

The Partnership may co-opt additional members by agreement who will be the full voting members of the Board.

WBPB Membership

Agency	Number of representatives
Local Authority to include representatives from: Urban Environment, Safer Communities, Children and Young People and Adult, Culture and Community Services	9
Haringey Teaching Primary Care Trust (HTPCT)	6
North Middlesex University Hospital NHS Trust	1
Whittington Hospital NHS Trust	1
Barnet, Enfield and Haringey Mental Health Trust	1
Haringey Association of Voluntary and Community Organisations (HAVCO)	2
Community Link Forum representatives	3
Voluntary/Community sector representative	1
Haringey Police	1
Haringey Probation	1
College of North East London	1
TOTAL	27

Well-being Chairs Executive (WBCE)

The WBPB is supported by an executive group consisting of the Chief Executive of the HTPCT, the Director of Adult, Culture and Community Services of Haringey Council, chairs of sub groups, as outlined below, and policy support. The WBCE meets monthly and its responsibilities include:

- agenda setting for the quarterly WBPB which will then be agreed by the chair and vice chair of the WBPB
- finance and performance management of the WBPB sub groups.

Sub Groups of the Haringey Well-being Partnership Board

The WBPB and the WBCE will be supported by subsidiary bodies known as outcome-focused sub groups and a joint commissioning group with responsibility for finance and performance.

Other sub bodies may be established by the Board as it evolves.

Meetings

- Meetings will be held four times a year with additional, special meetings if required
- A meeting of the Well-being Partnership Board will be considered quorate when at least six members are present, providing that two representatives each of the Council and the Teaching Primary Care Trust, including the following, are in attendance:
 - one Councillor, Haringey Council
 - one Non Executive Director, Haringey Teaching Primary Care Trust
- Attendance by non-members is at the invitation of the chair
- The agendas, papers and notes will be made available to members of the public when requested, but meetings will not be considered as public meetings
- Members will elect a chair and vice chair from Haringey Council and Haringey Teaching Primary Care Trust – on rotation – at the beginning of each municipal year
- Members will develop and agree protocols for the conduct of members and meetings

These representatives are responsible for disseminating decisions and actions required back to their own organisation, ensuring compliance with any actions required and reporting back progress to the HSP.

Agendas

Agendas and reports will be circulated at least five working days before the meeting, after the agenda has been agreed by the chair and vice chair. Additional late items will be at the discretion of the chair.

Partner action

Representatives will provide a link with their own organisation regarding reporting back and instigating partner action.

Interest

Members must declare any personal and/or pecuniary interests with respect to agenda items and must not take part in any decision required with respect to these items.

Absence

If a representative is absent for three consecutive meetings the organisation/sector will be asked to re-appoint/confirm its commitment to the partnership.

APPENDIX 2

SECTOR GROUP	AGENCY	NO. OF REPS	NAME OF REPRESENTATIVE
Local Authority	Haringey Council	9	Cllr Bob Harris (Chair) Mun Thong Phung Councillor John Bevan Councillor Dilek Dogus Councillor Gideon Bull Margaret Allen Eugenia Cronin* John Morris Lisa Redfern
	Haringey Teaching Primary Care Trust	6	Judy Allfrey Tracey Baldwin Penny Thompson Cathy Herman Marion Morris Richard Sumray (Vice-Chair)
Health	North Middlesex Hospital trust	1	Claire Panniker
	BEH Mental Health Trust	1	Michael Fox
	Whittington Hospital Trust	1	David Sloman
Community Representatives	Community Link Forum	3	Abdool Alli Angela Manners Faiza Rizvi
		1	Sue Hesse
Education	HAVCO	2	Robert Edmonds Naeem Sheikh
	College of North East London	1	Paul Head
Other agencies	Haringey Probation Service	1	Mary Pilgrim
	Metropolitan Police	1	Dave Grant
Total		26	

* Jointly appointed by the Council and Primary Care Trust

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Meeting: Well-Being Strategic Partnership Board

Date: 14 May 2009

Report Title: Experience Still Counts 2009-2012

Report of: Mun Thong Phung, Director Adult, Culture and Community Services

Purpose

The purpose of this report is to set out the Haringey Strategic Partnership's (HSP) strategy for improving the quality of life for older people in the borough, with an accompanying delivery plan, for the period 2009-2012.

Summary

The HSP's Experience Still Counts strategy is the outcome of an extensive review undertaken from September to December 2008 of the original Experience Counts strategy. As before, older people in Haringey have been the key drivers in its development. They have been consulted throughout the process and their input, along with that of the HSP lead officers, has resulted in a set of revised priorities and key initiatives that will move the strategy forward from 2009 to 2012.

Experience Still Counts 2009-2012 continues to be aimed at:

- Active and independent older people: some of whom may have completed their career in paid employment or fulfilled their child rearing responsibilities; others may still be working or have caring responsibilities. Some older people remain active and independent into late old age; others may not.
- Older people who are vulnerable: some of whom may have ill health or long-term conditions such as diabetes and dementia, or social care needs, or a combination of both.

The updated delivery plan retains the ten outcomes chosen by older people as key to improving their quality of life and an updated list of key priorities involving around 55 lead officers from organisations across the HSP.

The strategy will continue to be monitored through the Older People's Partnership Board as part of the HSP and key priorities reviewed annually.

The strategy covers all aspects of older people's lives represented by the ten outcomes set out below. Not all older people will identify with all of the outcomes all of the time, however, most will identify with at least one of them.

Priorities to achieve each of the following outcomes have been identified for 2009-2012:

- Being respected
- Keeping informed
- Staying healthy
- Being active
- Choosing work
- Feeling safer
- Having a safe, comfortable and well-maintained home
- Living with support
- Getting out and about
- Making the most of your income

The ten outcomes contained within the strategy have resulted, as before, in a complex programme of actions for the delivery plan. In order to reduce the quantity and complexity of this plan, many of these actions have been realigned to existing and developing strategies in order for them to progress and be monitored in the relevant place. Wherever these overlaps have been identified, the action has been removed from the Experience Still Counts delivery plan and this has been explained under the relevant outcome in the strategy.

This has ensured that:

- Priorities identified by older people are not overlooked in the development of other strategies
- We have avoided duplicating initiatives in our delivery plan where they are priorities in other Council strategies, such as the Carers Strategy and Housing Strategy (both currently under development).

Legal/Financial Implications

The draft strategy incorporates policy changes from 2005 when the original Experience Counts strategy was approved as well as extending the strategy until 2012.

A significant number of the initiatives detailed in the attached strategy will have resource implications. Initiatives must not commence without first identifying funding, whether from existing resources or alternative funding streams. This will be closely monitored via the monthly budget management process.

Recommendations

That Cabinet endorse and approve the revised and updated strategy, Experience Still Counts 2009-2012, and its accompanying delivery plan to enable older people and service planners to work together to make an independent life an option for as many people as possible.

For more information contact:

Name: Liz Marnham
Title: Strategic Planning and Policy Officer, Adult, Culture and Community Services
Tel: 020 8489 3914
Email address: liz.marnham@haringey.gov.uk

Background

Within 20 years, half of the adult UK population will be over 50. One in four children born today will live beyond 100. The future challenges of an ageing society are significant and public perceptions about ageing need to change now. The lives of older people need to be thought of as 'our lives' not 'their problem'.

Older people – as citizens, volunteers and service users – are an important resource for local action to tackle social isolation and support independent living. Service planners need to understand, engage and mobilise their older community to plan or deliver services tailored to the needs of their older population and mobilise the potential in the wider community, giving scope for self-help and volunteering.

Although older people use public services and provide positive contributions to society as volunteers, employees and unpaid carers, they face discrimination in many areas of their life.

The aim of this HSP strategy is to tackle discrimination and to promote positive attitudes towards ageing so that, by 2012, older people are enabled to be as informed, active, healthy and independent as possible and empowered citizens at the heart of the community.

It takes a holistic view of the lives of older people and therefore links with the following Council Plan priorities:

- Creating a better Haringey: cleaner, greener and safer
- Encouraging lifetime well-being at home, work, play and learning
- Promoting independent living while supporting adults and children when needed
- Delivering excellent, customer focused, cost effective services

It also links with Sustainable Community Strategy priorities and the Well-being Strategic Framework outcomes. These links are set out in Appendix B of the Experience Still Counts strategy (page 65).

This is a strategy based on partnership working across the HSP. The attached delivery plan outlines which organisations have the lead for each of the key initiatives.

An equalities impact assessment was completed alongside the consultation process which resulted in the revised and updated strategy. This has ensured that emerging issues for older people were considered as part of the review.

Key themes that emerged through the EIA process include:

- Older people want to be more involved in service planning and decision making processes
- More work is needed by services to ensure information reaches 'hard-to-reach' communities
- Improved access to some healthcare services (such as footcare)
- Improved culturally appropriate facilities for the provision of, for example, leisure activities and day opportunities
- Ensure income maximisation including welfare benefits
- More work in ensuring neighbourhoods feel safe, as well as a safe and secure home environment
- More personalised social care system
- Improved access to public facilities such as public toilets and transport.

These themes are captured in the main strategy document, and are integral to the delivery plan that we have updated. These will be monitored through the Older People's Partnership Board.

Following on from the good practice identified in the development of the original Experience Counts, older people living in Haringey have again been the key drivers in the review and update that has culminated in Experience Still Counts.

Officers from across the HSP have been consulted throughout the process to ensure that the strategy and its delivery plan were able to match expectation with resources.

Haringey's corporate consultation process and guidance has been used throughout.

A full outline of the development and consultation process can be found in Appendices D and E of the Experience Still Counts strategy (page 74).

The Experience Still Counts Strategy and associated delivery plan for 2009-2012 were agreed at Cabinet on Tuesday 21 April 2009.

Appendices

- Experience Still Counts strategy 2009-2012
- Experience Still Counts delivery plan 2009-2012



Experience Still Counts:

**Haringey's strategy for
improving the quality of
life for older people**

2009-2012

The Haringey Strategic Partnership was created in April 2002. It is a partnership of local public agencies, community groups and businesses which aims to improve public services and address key issues in the borough through partnership working.

The shared vision for the future of Haringey and the Haringey Strategic Partnership priorities are set in the new Sustainable Community Strategy 2007-2016:

“A place for diverse communities that people are proud to belong to”

The priorities of the new Sustainable Community Strategy are:

- People at the heart of change
- An environmentally sustainable future
- Economic vitality and prosperity shared by all
- Safer for all
- Healthier people with a better quality of life, and
- People and customer focused

The Haringey Strategic Partnership has also developed a Local Area Agreement which provides a substantial part of the delivery mechanism for the Sustainable Community Strategy. Our Local Area Agreement is an agreement with Central Government that sets out our priorities for Haringey over the next three years. It focuses on some of the most pressing issues for Haringey such as unemployment, poor housing conditions, health inequalities and low educational attainment.

Members of the Haringey Strategic Partnership:

- Haringey Council
- Metropolitan Police
- NHS Haringey
- Job Centre Plus
- Local Businesses
- New Deal for Communities
- College of North East London
- Middlesex University
- Haringey Association of Voluntary and Community Organisations
- Community Empowerment Network
- Race Equality Joint Consultative Council
- Faith Communities
- Greater London Authority
- Members of Parliament
- Registered Social Landlords

The Haringey Strategic Partnership has also worked with the following organisations in the development of *Experience Still Counts 2009-2012*:

- Age Concern Haringey
- Barnet, Enfield and Haringey Mental Health Trust
- Haringey Adult Learning Service
- Haringey Forum for Older People
- Homes for Haringey
- London Fire Brigade
- Metropolitan Care and Repair
- Victim Support Haringey
- Sixty Plus

This strategy is available on request in community languages, Braille, on tape, in large print and in a format accessible to people with learning disabilities **(translation panel to be added as back cover).**

If you have any comments or suggestions or would like further copies of this strategy please contact the Co-Chairs of the Older People's Partnership Board:

Patrick Morreau
Vice Chair
Age Concern Haringey

Lisa Redfern
Assistant Director
Adult Services
Haringey Council

Address: Adult, Culture and Community Services
Haringey Council
40 Cumberland Road
Wood Green
London N22 7SG

Tel: 020 8489 2326

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Executive summary

The original **Experience Counts** strategy 2005-2010 was developed by the Haringey Strategic Partnership. Its purpose was to tackle discrimination and to promote positive attitudes towards ageing in Haringey so that 'older people are enabled to be as informed, active, healthy and independent as possible and empowered citizens at the heart of the community'.

During 2008, older people were, once again, the key drivers in the review of the strategy and its delivery plan. A three-month consultation involved older residents and staff from across the Haringey Strategic Partnership. Following this extensive root-and-branch review, the Well-being Chairs Executive recommended that an updated and revised strategy be launched to cover the period 2009-2012, coinciding with the Transforming Social Care and Personalisation programme.

The revised strategy, **Experience Still Counts 2009-2012**, continues to be aimed at:

Active and independent older people: some of whom have completed their career in paid employment or fulfilled their child rearing responsibilities; others may still be working or have caring responsibilities. Some older people remain active and independent into late old age; others may not.

Older people who are vulnerable: some of whom may have ill health or long-term conditions such as diabetes and dementia, or social care needs, or a combination of both.

The updated delivery plan retains the ten outcomes chosen by older people as key to improving their quality of life and an updated list of key priorities involving around 55 lead officers from organisations across the Haringey Strategic Partnership.

The strategy will continue to be monitored through the Haringey Strategic Partnership and the Well-being Strategic Framework with key priorities within each outcome reviewed annually.

The strategy covers all aspects of older people's lives represented by the ten outcomes set out below. Not all older people will identify with all of the outcomes all of the time, however, most will identify with at least one of them. Priorities to achieve each of these outcomes have been identified for the period 2009-2012.

1. **Being respected:** To ensure that older people are respected and valued
2. **Keeping informed:** To ensure that older people have accurate information on which to base their decisions
3. **Staying healthy:** To promote healthy living
4. **Being active:** To create opportunities for being active including getting involved, volunteering, socialising and life-long learning
5. **Choosing work:** To create opportunities for employment
6. **Feeling safer:** To create safer communities
7. **Having a safe, comfortable and well-maintained home:** To ensure that older people have a safe, comfortable and well-maintained home (and garden) which meets their needs
8. **Living with support:** To enable older people to live independently with support for as long as possible in their own homes
9. **Getting out and about:** To ensure that older people are able to get out and about, including being able to use public transport
10. **Making the most of your income:** To enable older people to maximise their income

Welcome to the strategy by the Haringey Forum for Older People

We are delighted that so many Forum members have participated actively, representing older people in Haringey and working together to develop the vision, outcomes and priorities of this updated strategy. The participants in this review are all committed to making a difference to the lives of Haringey's older people.

“Getting involved in Experience Counts again, and contributing to the consultation and focus groups has been a way of using our skills and experience for the benefit of everyone. We were very pleased to have the opportunity to give our views and represent those of vulnerable older people and the diverse community groups to which we belong,” said Abdool Alli, Chair, Haringey Forum for Older People.

The Haringey Forum for Older People, launched in 2002, now has over 800 members. As well as playing a major role in driving forward the review of *Experience Counts*, they have also been involved in a number of consultations on issues of importance to older people over the past year. They are also represented on the Older People's Partnership Board.

We are looking forward to seeing older people's lives improve.

Abdool Alli	Lloyda Fanusie	Gwenda Owens
Mrs Kamla Ahluwalia	Rita Fernandes	Lyn Parchment
Ms Rita Batzias	Mrs Hazel Griffith	Mr Vic Parchment
Celia Bower	Lauritz Hansen-Bay	Andrew Petrou
Maureen Carey	Barbara Hill	Mary Ramgoolam
Gwen Cole	Naomi McIntosh	Janet Shapiro
Verlyn Cowell	Stephanie Jones	Kay Singh
Ethelyn Critchlow	Mrs Jean McKoy	David Singh
Maureen Dewar	Pamela Moffatt	Zeedy Thompson
Stella Doritis	Patrick Morreau	Eileen West
Fred Ellis	Mrs Gloria Omotoso	

Foreword

We hope that this strategy will continue to help empower people to plan for a healthy older age, as well as making it easier for people to access information and services in the borough.

Older people continue to be the key drivers for this strategy and the great strength of this document is that it does not belong to any one organisation but to the whole community. We are all working together to make its vision a reality. There's something in here for everyone and we know that together our '**Experience Still Counts**'.

As Older People's Champions, our role, along with other representative boards, is to play an important role in assessing and evaluating the effect of local services on older people's lives. Councils that have successfully engaged their older communities have appointed a champion who ensures that the voices of the older community are heard.¹

Haringey's Champions for Older People

Age Concern Haringey and Older People's Champion (West)

Pamela Moffatt

Age Concern Haringey and Older People's Champion (East)

Verlyn Cowell

Haringey Council

Councillor Sheila Peacock

Councillor Catherine Harris

NHS Haringey

Catherine Herman

The National Service Framework 2001 for Older People established champions responsible for ensuring that older people become and remain a priority within their organisation and supporting the implementation of the National Service Framework.

The Champions are responsible for making sure that older people have access to information about local services as well as rooting out age discrimination in access to treatment and services.

¹ *Don't stop me now: Preparing for an ageing population (Audit Commission, July 2008)*

A message from the Well-being Partnership Board

Dear Reader,

It's hard to believe that *Experience Counts* is now four years old. A great deal has been achieved during that time, with contributions from across the Haringey Strategic Partnership, and it is time to acknowledge that ***Experience Still Counts***. We would like to take this opportunity to thank all those who have begun to make a difference to the quality of life for older people in Haringey, and for the hard work and dedication they have put into making this a strategy that really does make a difference.

A great deal of work has already taken place, and there is still more to be done. The strategy demonstrates the vital importance of asking local people what it feels like to live, work and play in Haringey. For this reason we continue to value the guidance and opinions of older people in Haringey and their continuing contribution to making this strategy happen.

The strategy and its delivery plan are undoubtedly made stronger because of its key drivers – older people themselves – and because it is based on the principles of working together in partnership.

The Well-being Partnership Board is very pleased to present ***Experience Still Counts***, the outcome of a review which takes us forward to 2012.

Best wishes

Councillor Bob Harris
Chair, Haringey Well-being Partnership Board and Cabinet Member for Adult Social Care and Well-being

Richard Sumray
Vice Chair, Haringey Well-being Partnership Board and Chair, NHS Haringey

Haringey's **Well-being Partnership Board** leads in promoting and delivering a Healthier **Haringey for all people aged 18 years and over in Haringey.**

Local residents, statutory, voluntary, community and commercial organisations all have a role to play in improving well-being.

This includes access to health and care services; access to appropriate leisure and educational services; access to employment; and opportunities for a healthier lifestyle.

What other people have said about Experience Counts 2005-2010

“The Council and its partners have a strategic approach to services for older people that goes beyond health and social care ... which clearly articulates an ambitious vision that addresses quality of life issues and has a good balance and emphasis on independence and wellbeing for older people at various stages of their life.”

Haringey's Comprehensive Performance Assessment, 2006

Experience Counts puts Haringey in the “top division” because of the way it networks across partner organisations in close liaison with older people. It also gives respect and value to older people’s contributions to the strategy.

London Older People's Advisory Group, 2005

Introduction

Within 20 years half of the adult UK population will be over 50. One in four children born today will live beyond 100. According to the Office for National Statistics mid-2007 figures, nationally there are now more pensioners than there are children under the age of 16.²

This is a significant demographic change that has not been seen before.³ The change brings both opportunities and challenges and there is a need for all those working with older people to make an independent life an option to as many people as possible.

The future challenges of an ageing society are significant:⁴

- Between 2006 and 2031 the UK population will grow from 60.6 million to 71 million
- Over 65s will increase from 9.7 million in 2006 to 15.8 million in 2031, from 16 to 22 per cent of the population
- Over 85s will increase from 1.2 million to 3.9 million over that period, yet half will have some form of disability
- The ratio of women to men aged over 90 will fall from 3:1 to 2:1
- 100+s will increase dramatically, but most will have dementia
- Working-age taxpayers will be a smaller proportion of society
- Extended families are more likely to live away; some will lose contact
- Only a tenth of the 1940s generation was childless; a fifth of the 1980s generation will be

Public perceptions about ageing need to change. The lives of older people need to be thought of as 'our lives' not 'their problem'. Central government should lead this change nationally by tackling the current crisis, which is impeding progress. Local government should lead locally, by providing services which bring people together, particularly across generations. Publicly funded media should support this by raising the profile of the current challenges, opportunities and collective responsibilities surrounding ageing.⁴

² In Haringey, the figures show the number of people aged 65+ continues to exceed the number of 0-15 year olds by 18,700

³ Don't stop me now: Preparing for an ageing population (Audit Commission, July 2008)

⁴ Never too late for living: Inquiry into services for older people (All Party Parliamentary Local Government Group, July 2008)

Background to the strategy

Introduction

Older people – as citizens, volunteers and service users – are an important resource for local action to tackle social isolation and support independent living.⁵ Service planners need to understand, engage and mobilise their older community in order to:

- plan or deliver services tailored to the needs of their older population;
- mobilise the potential in the wider community, giving scope for self-help and volunteering opportunities.

Although older people use public services and provide positive contributions to society as volunteers, employees and unpaid carers, they face discrimination in many areas of their life. These include:

- negative attitudes from society, the media, employers, professionals and service providers
- policies which do not take account of their needs
- barriers which prevent them being listened to, consulted or involved in ways that matter
- physical barriers such as a poorly designed environment and transport system

Recognising and tackling this discrimination will ensure that older people are valued and have access to mainstream public services which respond appropriately to their changing needs. They have a right to access services irrespective of their personal circumstances or background.⁶

Local initiatives since 2005

Areas that develop a cross-cutting strategy have more robust and sustainable approaches to their older communities.⁵ Councils that have relied solely on pilot funding, without an overarching strategic approach, struggle to sustain initiatives.

Haringey's Well-being Strategic Framework (2007-2010) aims to promote a healthier Haringey by improving well-being and tackling health

⁵ Don't stop me now: Preparing for an ageing population (Audit Commission, July 2008)

⁶ This includes their age, disability, ethnicity, gender, religion or sexual orientation.

inequalities. Overall, people in Haringey are living longer than they did 20 years ago but too many local people are still dying prematurely. There are also big variations between different parts of the borough in how long people live. Local residents, statutory, voluntary, community and commercial organisations all have a role to play in improving well-being. This includes:

- access to health and care services
- access to appropriate leisure and educational services
- access to employment, and
- opportunities for a healthier lifestyle.

The framework was developed in partnership between Haringey Council, NHS Haringey and Haringey Association of Voluntary and Community Organisations. It is based on the seven outcomes for improving well-being being set out in the Department of Health's White Paper, ***Our Health, Our Care, Our Say***:

- Improved health and emotional well-being
- Improved quality of life
- Making a positive contribution
- Increased choice and control
- Freedom from discrimination and harassment
- Economic well-being
- Maintaining personal dignity and respect

Our latest ***Local Area Agreement 2008-11*** sets out priority improvement areas that the Haringey Strategic Partnership will focus on over the next three years. This includes a number of targets relevant to older people including NI 6 Participation in regular volunteering. The new Performance Framework is focused on improving outcomes for local people rather than on processes and inputs.

National initiatives since 2005

Securing Good Care for Older People (Sir Derek Wanless, 2006) modelled future demand for social care for older people, setting out six funding options for social care including new and improved means-testing; free personal care along the lines of the Scottish model and social insurance based on entitlements. The report advocated a partnership model which would provide a basic, minimum level of care to everybody, end means-testing and offer incentives for people to save for their own future care needs.

The Employment Equality (Age) Regulations 2006 made it unlawful to discriminate against workers, employees, job seekers and trainees because of their age by:

- deciding not to employ someone
- dismissing them
- refusing to provide them with training
- denying them promotion
- giving them adverse terms and conditions
- retiring an employee before the employer's usual retirement age (if there is one) or retire an employee before the default retirement age of 65 without an objective justification.

The Department of Health launched its White Paper, **Our Health, Our Care, Our Say**, in January 2006. Its vision was that, through reconfiguration of services, realignment of health and social care systems and wider service inclusion, everyone in society should be empowered to make a positive contribution and have a right to control their own lives through:

- preventative services
- earlier intervention
- choice and a stronger voice
- reducing inequalities
- improved access
- support

Its seven outcomes for health and social care were subsequently adopted by the Haringey Well-being Partnership.

In December 2007, the seven outcomes of **Our Health, Our Care, Our Say** were clarified through the **Putting People First** concordat, a joint protocol between the government, NHS, Local Government Association, Association of Directors of Adult Social Services, the Commission for Social Care Inspection, and others. This has been described as the most radical reform of social care since the Community Care Act 1990. It marks the launch of the Transforming Social Care programme, and includes within its remit:

- a single community-based support system of health and well-being
- partnership between local government, primary care and community-based health provision

- replacing paternalistic, reactive care of variable quality with a mainstream system focused on prevention, early intervention, enablement, and high quality personally tailored services.

In February 2008, the Department of Communities and Local Government published ***Lifetime Homes, Lifetime Neighbourhoods: A National Strategy for Housing in an Ageing Society***, setting out the government's plans to ensure that there is enough appropriate housing available in future to relieve the predicted unsustainable pressures on homes, health and social care.

In July 2008, Professor Lord Ara Darzi published ***Healthcare for London: Framework for Action***, recommending changes to take place over the next ten years and bringing health care closer to home.

The Audit Commission's July 2008 document, ***Don't stop me now***, reviewed progress from ***Opportunity Age***, identifying the following key messages:

- the population is ageing and the older population is becoming more diverse
- few councils are well prepared for the additional diversity in their populations
- central government's ***Opportunity Age*** initiative has had limited impact
- councils have a leadership role to create an environment in which people can maintain a good quality of life as they age
- all councils need to understand their older communities and shape both universal and targeted services accordingly, and
- increased awareness, better engagement and innovation could help many older people without significant expenditure.

The All Party Parliamentary Local Government Group published the results of its inquiry into services for older people, ***Never too late for living***, in July 2008. The report makes the following points:

- public perceptions about ageing need to change – the lives of older people are 'our lives' not 'their problem'
- we need, as a nation, to agree on what we can rely on as we get older and make sure that the outcomes are publicly known, and that local areas should set out how they will be delivered, led by local authorities
- health and social care need to work much more closely together if services for older people are to improve dramatically – with local authorities taking the lead in joint commissioning

- we need a much more rational approach to preventing ill health in older people and supporting their independence – which means giving priority to a holistic range of services that keep people active and involved in their communities, rather than having to have acute treatment or residential care.

In February 2009, the Department of Health published ***Living Well With Dementia***, a national five-year strategy focusing on three key themes: raising awareness, early diagnosis and intervention, and improving the quality of care.

Developing World Class Primary Care in Haringey, NHS Haringey's primary care draft strategy, was published in June 2007 and is due to be finalised in summer 2009.

From 1 April 2009, Corporate Performance Assessments and most rolling programmes of inspection will be replaced by a new performance assessment framework – ***Comprehensive Area Assessments***. These reports will be published from November 2009 and include an area assessment of how well public services are delivering better results for local people on local priorities such as health, economic prospects and community safety and how they are to improve in the future.

Experience Still Counts addresses these issues as well as incorporating the principle expressed in the Department of Health's White Paper, ***Our Health, Our Care, Our Say*** (2006):

At the same time as giving people greater choice and control over the services they use, we also need to ensure that everyone in society has a voice that is heard. When people get involved and use their voice they can shape improvements in provision and contribute to greater fairness in service use.

Aim

The aim of this strategy continues to be **to tackle discrimination and to promote positive attitudes towards ageing** by:

- ensuring that the diversity of all Haringey's communities and the different aspirations of individual older people are valued and responded to appropriately
- planning services for older people which take into account their needs, views and preferences
- strengthening working relationships between organisations which support older people

Vision

We are committed to our **vision** for Haringey that, by 2012:

'Older people are enabled to be as informed, active, healthy and independent as possible, and empowered citizens at the heart of the community'.

This vision will be applied to any service that an older person in Haringey comes into contact with. We will ensure that organisations communicate better with each other and with older people themselves.

Outcomes 2009-2012

This strategy has ten outcomes for improving the quality of life for older people in Haringey. As ageing does not happen uniformly, people will have different priorities at different times of their lives. Not all older people will identify with all of the outcomes all of the time. However, most will identify with at least one of the outcomes and others may identify with them all. The outcomes are:

- 1 Being respected
- 2 Keeping informed
- 3 Staying healthy
- 4 Being active
- 5 Choosing work
- 6 Feeling safer
- 7 Having a safe, comfortable and well-maintained home
- 8 Living with support
- 9 Getting out and about
- 10 Making the most of your income

Who the strategy is for

This strategy is aimed at:

Active and independent older people: some of whom have completed their career in paid employment or child rearing; others may still be working or have caring responsibilities. Some older people remain active and independent into late old age; others may not.

Older people who are vulnerable: some of whom may have ill health or long-term conditions such as diabetes and dementia, or social care needs, or a combination of both.

Older people, as defined by government, are those aged 50+. But there are many people in their 70s and 80s who do not consider themselves to be old and who object to being labelled as such. The statutory retirement age is 65, and older people's social care services are for those aged 65+. It is therefore difficult to satisfy everyone with a simple answer to "how old is an older person?" Many people would agree, therefore, that old age is a state of mind rather than a fixed chronological point.

Links with other relevant strategies and frameworks

This strategy continues to build on our responsibilities contained within the Local Government Act 2000. This gives the Haringey Strategic Partnership the power to promote the economic, social, and environmental well-being of local communities through the Sustainable Community Strategy. The vision of Haringey's Sustainable Community Strategy to 2016 is:

“A place for diverse communities that people are proud to belong to.”

This is an overarching strategy with detailed service specific plans and strategies underpinning it. To find out about our plans to meet the outcomes, contact the people identified in Appendix A. The links between ***Experience Still Counts***, ***Haringey's Well-being Strategic Framework*** and the ***Sustainable Community Strategy*** are set out in Appendix B.

This is a large and complex strategy. We have, therefore, streamlined the delivery plan for ***Experience Still Counts*** by avoiding duplication and overlap with other strategies already in existence or currently in production. Details of where overlaps were identified are set out in the chapter entitled ***Our Outcomes and Priorities***. These areas will be monitored by the relevant strategy.

Haringey's older people

Haringey's population of older people is highly diverse (further details in Appendix C). It includes people from a wide age range and from different ethnic and socio-economic backgrounds who have very different day to day experiences.

Demographic trends in Haringey show that:

- the number of people over 50 is increasing – from 48,295 in 2001 to 55,286 in 2021.⁷
- life expectancy varies across the borough with those in the west living longer than those in the east
- there are more older women than older men
- the percentage of older people from black and minority ethnic groups is increasing – particularly in the east of the borough
- over half of people aged 50+ own their homes – this varies greatly from 38% in White Hart Lane ward to 78% in Alexandra ward
- older people in the borough feel they are less healthy than those in London and England
- admission to mental health services is high and varies greatly across the borough
- the employment rate of people aged 50 and over is disproportionately low compared with the rest of the population

Scope of strategy

This strategy covers all aspects of older people's lives represented by the ten outcomes. The original delivery plan covered the period 2005-2008. The intention was to produce a revised delivery plan to take the strategy through to 2010; however, much has happened in the past four years and the revised and updated strategy and delivery plan – ***Experience Still Counts*** – will take us through to 2012 with a number of new and ongoing priorities. The strategy continues to lay the foundation for rethinking our approach to improving the quality of life for older people. The key priorities identified within each outcome will be reviewed on an annual basis and will inform future plans.

Further information on development and consultation in relation to this strategy can be found in Appendices D and E.

⁷ GLA 2007 round population projections, PHP high

Our outcomes and priorities

1. Being respected

To ensure that older people are respected and valued

We are committed to increasing respect of older people and supporting their involvement across Haringey by:

- Recognising the contribution that older people can make and making use of their experience and skills
- Communicating with older people in a variety of ways and ensuring that all voices are heard
- Working to identify and remove discrimination based on age

According to major reports published in 2008, public perceptions about ageing need to change. Our ageing population is increasingly diverse: stereotypes about older people are misleading, so information is needed about the diversity of local people.

All councils need to understand their older communities and shape both universal and targeted services accordingly. Engagement is needed with older people to commission, design and deliver both mainstream and targeted services.

At a recent visit of the Haringey Forum for Older People to a day centre, a staff member commented: "We're really pleased you've come to talk with our users. They talk with us, but it also seems helpful to our users that they've got independent people to talk with like yourselves. They seem to be more confident to raise some of their anxieties with you, for example, about personalisation issues".

"Having a voice means 'Listen to me. Respect me. Let me put my point across. Take me seriously.'"

"We urgently require a place to hold our meetings with financial support to pay for the venue so that we can organise activities."

"It's very important to have the opportunity to speak specifically about older people's own experience."

"Ageism is still prevalent; not everyone enjoys being called 'luvvie' or 'dear'."

"Compared with other boroughs, Haringey is best, but we still need more ethnic staff in Haringey offices like libraries and leisure centres."

Achievements 2005-2008

- Area-based grant funding has enabled the work of the Haringey Forum for Older People to develop. The membership has risen from 300 in 2005 and currently stands at over 800. The Forum has a regular programme of activity involving members making a positive contribution through consultation and campaigns.
- A review of the role of the Older People's Partnership Board is ongoing; the Board now has two co-chairs, one of whom is a resident.

Priorities for delivery plan 2009-2012

1.1 To promote and encourage appropriate respect of all older people

- Investigate the feasibility of carrying out an older person's customer journey as part of the Personalisation programme
- Work with Customer Call Centres to improve older people's contact experience, developing standards of customer care for older people at all major Council service access points
- Promote the roles of Dignity in Care Champion and Older People's Champion by clearly defining and promoting the roles, and by involving them in developing services for older people

1.2 To increase opportunities for the involvement and representation of older people in the decision making process

- Develop policies for Service User and Carer Involvement and Service User and Carer Payment
- Increase older people's attendance at Area Assemblies by ensuring that meetings are accessible
- Review the role of the Older People's Partnership Board to ensure representation across all services of older people in the decision-making process
- Provide support for older people's groups, such as the Haringey Forum for Older People

1.3 To reduce age discrimination

- Develop an action plan to identify key areas of work to ensure that older people receive equal treatment from local health services

Older people identified equalities issues as one of their priorities. Equalities are a key element of our response to the needs and requirements of all residents, employees and partners, monitored through

the Equalities Public Duty Scheme. They are not therefore duplicated as separate actions for the delivery of ***Experience Still Counts***.

2. Keeping informed

To ensure that older people have accurate information on which to base their decisions

Like everyone, older people want to know what is going on in their local area so that they can make the most of services, activities and facilities.

Increased awareness, better engagement and innovation can help many older people without significant expenditure. Marketing and promoting existing services to older people can increase take-up and support independent lives.

We are committed to making better use of information to understand our communities so that we can target resources where they will have the biggest impact. This will include engaging with the older community to understand the priorities for the area and providing tailored information on local services. We are committed to mapping out what is available locally that will provide for quality of life and make sure that there is a simple way for anyone to find out about these services.

Older people can also play a key role in developing better information about the services available in an area. Ensuring that information is not solely available via a website is essential.

We are responding to the vital need for universal information, advice and advocacy. This should be the glue of a care system that functions well and delivers choice and control to older and disabled people, their families and carers. This support is critical both to effective early intervention and prevention, and to enable people to access and manage longer-term or complex services.

“It is very important to have an advice and information base where users can raise their voices and have things explained in their language.”

“Information is very important to find out what’s available. Information about activities and volunteering opportunities should be advertised in local papers, library noticeboards and Haringey People.”

“Information about activities and services is still not reaching hard-to-reach groups. It is hard for them to get the information they need.”

“We need information about activities run by all local groups, not just statutory services and in certain wards.”

Achievements 2005-2008

- To help increase the delivery of quality marked independent advice services, the Haringey Association of Voluntary and Community Organisations delivered 20 training sessions and workshops to prepare voluntary and community organisations to work towards the Community Legal Service quality mark. Eight community organisations received a quality mark. Eleven organisations were trained and equipped to work towards achieving the *Practical Quality Assurance System for Small Organisations* quality mark.
- To help keep older people informed of events, A *What's On* calendar of events across the borough for all groups is available in libraries and is published on the website at: www.haringey.gov.uk/whatsonsearch.htm. Events are also publicised in the *What's On* pages of *Haringey People*, delivered free of charge to all residents. *Haringey People* was shortlisted in the journalism category of the Good Communication Awards 2008. In the 2008 Annual Residents Survey, older people cited Haringey People as their preferred way of keeping up to date.

Priorities for delivery plan 2009-2012

- 2.1 To ensure that older people feel supported by reliable, authoritative and friendly advice, information and advocacy services**
- Produce a comprehensive Haringey Advocacy Strategy
 - Provide wide-ranging information at public access points throughout the borough in liaison with the Libraries Service where it is already an established part of core business
 - Continue to increase delivery of quality marked independent information and advice services
- 2.2 To ensure that information is accessible, up-to-date, and available in different formats (including paper, online and in community languages)**
- As part of the Personalisation programme, consider ways of developing the Council's website further to improve access to services for people aged 50 and over
 - Hold an annual celebratory event or programme for older people
 - Continue to develop the Older People's Guide to Local Services

Older people identified a number of issues around the provision of advice, information and advocacy services as priorities. Where these issues overlap with key elements within Haringey's Community Engagement Framework, the Framework will be responsible for their delivery and monitoring. They are not therefore duplicated as separate actions for the delivery of ***Experience Still Counts***.

3. Staying healthy

To promote healthy living

Our society is ageing but not necessarily healthily. By 2031, people over 65 years will show increases in high and moderate care needs by 54 and 53 per cent respectively, with only a 44 per cent increase in those with no care needs. Healthy life expectancy may increasingly have to be the focus for health and social care.

Partnerships are fundamental to effective local intervention. The current debate about the future of care and support should not be restricted to health and social care but to older people's services holistically, taking into account all the elements of well-being.

It has been recognised that spending on services that promote well-being in later life, other than social care, is likely to save money in the longer term. However, mechanisms for evaluation need to be developed.

Preventative care is still an issue, with recognition of the need for more opportunities such as exercise classes to improve balance and prevent falls, and basic non-medical footcare services.

Haringey has one of the highest mental health admission rates in London, particularly in the east of the borough. Nationally, it is accepted that one quarter of people aged 85 and over will develop dementia.

“The elderly should be able to have foot care and not be expected to pay.”

“The idea of polyclinics is OK, but not if it means closure of existing GP surgeries. They also need to be accessible for everyone, in central locations with good door-to-door transport links.”

“I find it difficult to get an appointment to see the doctor.”

“We need more help at swimming pools, especially for disabled people.”

“We don't get to see our own GP, even after making an appointment with them. We see a stranger. Sometimes we feel rushed and unimportant because the time allocated is not enough.”

Achievements 2005-2008

- Libraries, leisure centres and NHS Haringey offer an established programme of weekly activities through Fit for Life, Health for Haringey and Health in Mind. Walking programmes and exercise classes range from jogging to chair-based exercises via yoga, pilates and gardening, for example, under the Health in Mind - Walk your Way to Health initiative co-ordinated through NHS Haringey:
 - Seven health walks have been established across the three wards.
 - 38 volunteer health walk leaders have been trained
 - Around 235 people attend the walks each month, and 100 people for at least three months.
- Half-year figures up to 2 December 2008 for the Haringey Leisure Centres Active Card show:
 - Active Card Membership for 65+ was 1,205 (2007-08: 1,128)
 - There were 21,562 visits by people aged 65+ usage (compared with 19,625 during 2007-08).
- Free swimming is available to those aged 60+ from 1 April 2009, linked to the Department for Culture, Media and Sport's national initiative, and locally to our HariActive Programme.
- Lay people within the community were trained to become Community Nutrition Assistants to provide advice on healthy eating to older people in their own community languages. The programme was developed using Area Based Grant funding in 2007-08 with eight students receiving accreditation.
- Healthy eating programmes for people aged 50+ were developed in three deprived wards: Noel Park, Northumberland Park and Bruce Grove. By the end of 2007, 207 people from a range of ethnicities had attended the Shape Up and the Cook and Eat programmes. A drop-in session in 2007 followed up progress and in 2008 a further round of programmes ran in the three wards.

Priorities for delivery plan 2009-2012

3.1 To keep older people informed about their choices for a healthier lifestyle

- Encourage older people to eat healthily and regularly in hospital, intermediate care and at home
- Support to stay healthy through a range of healthy living activities, advice and information

- Develop a preventive footcare service
- Address inequalities in healthcare at the point of delivery
- Promote smoking cessation services and education to prevent people starting smoking

3.2 To encourage older people to use leisure services

- Continue to develop a healthy activity programme for older people in leisure centres and other venues

3.3 To strengthen mental health services for older people

- Develop an Older People's Mental Health Strategy to be in place by the end of 2009

Older people identified the need for a number of strategies to keep them informed about choices for a healthier lifestyle:

- actions relating to sexual health will be monitored by the Sexual Health Strategy
- the Active for Life GP referral scheme encouraging older people to take up physical activity and the Health in Mind health walks will be monitored by NHS Haringey through the Area Based Grant funding process

Because these issues are being monitored elsewhere, they are not therefore duplicated as separate actions for the delivery of ***Experience Still Counts***.

4. Being active

To create opportunities for being active including getting involved, volunteering, socialising and life-long learning

Many older people are ready and willing to contribute to community life: local authorities and their partners can help in mobilising this resource.

Voluntary organisations recognise that older people bring a wealth of skills and expertise to volunteering. By passing on your skills and learning you can make a difference to people's lives. Volunteering is also a good way to make new friends and improve general levels of health and fitness.

Leading or volunteering community-based initiatives has quality of life benefits for those involved, as well as maximising the economic potential in this group.

Volunteers play a key role in helping people with low level problems living in the community through befriending and networking schemes.

Achievements 2005-2008

- Six Trans-Age Action courses recruited and trained 53 older volunteers at Age Concern Haringey. 48 Trans-Age Action volunteers (aged 50 to mid 80s) were placed in 26 schools and six community settings, the majority of which are situated in or serve the most deprived neighbourhoods. Seven Trans-Age Action intergenerational events took place, including four workshops in secondary schools.
- Information on life-long learning for people aged 50 and over is available in libraries. More than 20 drop-in sessions are now being held in a number of libraries including Wood Green and Marcus Garvey. Attendance has increased by more than ten per cent with increased levels of satisfaction recorded in the Residents Survey.
- The Haringey Adult Learning Service has delivered two information and computer technology courses (email and internet) for the University of the Third Age. 280 learners (530 enrolments) aged 50+ attended a

“Get young and old together – integrate them through older people visiting schools.”

“We need culturally appropriate facilities for the provision of leisure activities, day opportunities, for utilising our time fruitfully, getting enjoyment and peace.”

“There are opportunities for social activities, but transport and feeling safe are always an issue in the evenings.”

“Learning opportunities are there but you have to pay for most classes. Only beginner classes are free.”

Haringey Adult Learning Service computer course during the academic year 2006-07. Silver Surfer and First Byte sessions are run in libraries at least once a week.

- Standard Pension Discounts of 50% apply on all courses that are not offered free of charge. Registered carers and library members receive an additional 10% discount.
- 871 people aged 50+ enrolled on Haringey Adult Learning Service courses in 2007-08 out of an overall service total of 3,439, with the highest take-up in information, computer and digital technology courses. Learner satisfaction surveys indicated a high degree of satisfaction (although these did not target age-specific groups).

Priorities for delivery plan 2009-2012

4.1 To create opportunities for taking up recreational activities

- Continue to develop non-sport related recreational and social activities for people aged 50 and over involving agencies such as Age Concern Haringey, Sixty Plus scheme, community centres and health agencies through running older people's drop-in groups in Haringey libraries
- Run reminiscence groups around the borough to enable older people to share their life experiences

4.2 To increase opportunities for life-long learning

- College of North East London and Haringey Adult Learning Service to work with older people to establish life-long learning needs and preferences, including University of the Third Age

4.3 To support the use of computers by older people

- Expand opportunities for older people to work with computers

4.4 To increase the take up of English as a second language courses by older people

- Monitor take-up and delivery of English for Speakers of Other Languages classes / family learning courses by older people

Older people identified the need for a number of strategies to keep them informed about opportunities for being active:

- actions relating to volunteering will be monitored by the forthcoming Volunteering Strategy

- a programme for preparing Council staff for retirement will be delivered and monitored by the Council's People Plan.

Because these issues are being monitored elsewhere, they are not therefore duplicated as separate actions for the delivery of ***Experience Still Counts***.

5. Choosing work

To create opportunities for employment

Older people would like to be able to choose whether to work or not, and to have a range of suitable job opportunities.

For at least a generation, unemployment locally has exceeded national and regional averages. Eight per cent of people in Haringey aged 50-59 who are willing and able to work are unemployed. This is double the London and England rates of four per cent.

Regardless of age, it can take time to find another job for those who are out of work, whether voluntarily or through redundancy. However, older people have a wealth of experience in the workplace which is highly valuable, and those knowledge and skills can help in finding new jobs.

Specialist programmes and resources are available to people aged 50 and over to help find work or learn new skills. For example, New Deal 50 plus is a Jobcentre Plus programme that offers support and advice for people over 50 to find work. It also offers training and help to those who are finding it difficult to get a job or work that pays a decent wage.

Companies now face substantial financial penalties if their employment practices fail to comply with laws on age discrimination. Forced retirement before the age of 65 and age discrimination in recruitment, promotion and training are banned. Employers also have to consider requests from their employees to work after the age of 65.

Age Positive is a government campaign aimed at tackling age discrimination and promoting age diversity in the workplace.

“The tax and benefit system can be a disincentive to people taking on paid work after retirement.”

“Older people are means-tested so there’s no incentive to work.”

“Older people’s views and experiences for better living should be used to promote inclusion and there should be more opportunities for them to share their skills.”

Achievements 2005-2008

- The Wood Green Library Business Lounge has now been established, a comfortable lounge area from which the libraries provide a range of comprehensive business information services to support small and medium businesses in the borough. The lounge offers start-up help, as well as facilities to grow and develop business by offering:
 - dedicated one-to-one business advice and support
 - company information
 - market research
 - meeting rooms
- As part of an initiative to introduce policies and promote awareness about working carers and carer-friendly practices for unpaid carers, an invitation was included with Haringey Council payslips in October 2007 for staff who are unpaid carers to 'get connected'. Forty people responded, all of whom were provided with individual advice and information and Haringey carers referred for carer's assessment.

Priorities for delivery plan 2009-2012

5.1 To deliver programmes to help people aged 50+ into employment and training, monitoring take-up and outcomes of training opportunities

- Coordinate job brokerage provision for older people, raising awareness of the Haringey Guarantee Scheme and Job Centre Plus New Deal
- Continue to provide work placements and supported employment opportunities for older people with disabilities
- Run refresher skills services and courses for people aged 50 and over

5.2 To promote awareness of advice, information and support services to help people aged 50+ into training and employment

- Increase promotion of skills development, information, advice and guidance and job search activities for HALS and CONEL courses and services, targeting people aged 50 and over

Older people identified a number of needs around choosing work:

- the need to help carers who want to work into training and employment by introducing policies and promoting awareness about working carers and carer-friendly practices in NHS Haringey or Haringey Council. This will be monitored through the forthcoming Carers Strategy.

- the Council's People Plan will monitor the profile of its staff in employment and training, including figures and the proportion of the workforce they represent; and lead by example to tackle issues of discrimination of people aged 50 and over by employers.

Because these issues are being monitored elsewhere, they are not therefore duplicated as separate actions for the delivery of ***Experience Still Counts***.

6. Feeling safer

To create safer communities

Many older people worry about their safety when they leave their home and sometimes even when they are at home.

Haringey's Safer Communities Partnership has published its priorities and main areas of activities for 2008-11. The work rests on many years of collaboration and consultation which have provided a better understanding of the causes of crime and the impact of our interventions.

The trend for recorded crime in Haringey has fallen by 22% since 2003 and concern about crime in the borough fell recently from 54% to 46% - its lowest level since 2000. The number of local people benefiting from drug treatment services, domestic violence support and action by our Anti-Social Behaviour Team is higher than ever.

Police Safer Neighbourhood Teams are well established in all wards and are working well with locally based Council services. A high level of public satisfaction with this model has been reported. However, it is recognised that there are still many challenges. It is also acknowledged that many crimes go unreported and improving confidence will be a priority.

The partnership has also reconfirmed its commitment to prevention and early intervention along with a balanced and proportionate approach to enforcement. This will need continued public support and co-operation to find better solutions to problems at the neighbourhood level.

"Mugging problems come in spates. People worry about coming home from the bus."

"Crime prevention has been expanded with Neighbourhood Watch and the Safer Neighbourhoods Team which is a deterrent for young people. But the back streets are still ignored."

"We need more advice about how to deal with bogus callers."

"I am frightened of young people in the streets with dogs. Prostitution and drugs also make people feel unsafe but we don't know what the police are doing about it."

Achievements 2005-2008

- In 2007-08, Metropolitan Care and Repair visited 197 older clients who had been burgled to help reduce the likelihood of repeat burglary. None subsequently had repeat burglaries.
- The Metropolitan Police Service distributed over 3,000 timers in the last year across Haringey. 1,000 of these have been at events specifically targeted at the 60+ group.
- In 2007-08, the Fire Service made home fire safety visits and fitted smoke alarms in the homes of 503 people aged 60+. In the same year, Sixty Plus helped 144 people to get smoke alarms.
- There is now a Safer Neighbourhoods presence in all wards, with a full team either in place or being recruited to. This is now Metropolitan Police Service policy and all wards in London have a dedicated team.

Priorities for delivery plan 2009-2012

6.1 To safeguard vulnerable adults

- Focus on working across multi-disciplinary agencies and with partners to ensure that the safeguarding policy and procedures are embedded
- Ensure that research with adult social care users and carers is subject to ethical review and approval

6.2 To provide access to crime prevention services for older people who have been victims of crime

- Routinely refer older people to schemes offering professional advice and support
- Provide and install equipment to assist with future prevention

6.3 To provide access to crime prevention services for older people who have not been victims of crime

- Publicise contact details for crime prevention advice as widely as possible
- Provide and install equipment to assist in crime prevention
- Programme of preventative advice, support and information
- Programme of outreach work and visits to hard-to-reach and seldom-heard groups using community networks, neighbourhoods and public events in parks

6.4 To create a working partnership of problem-solving advisers and older people

- Continue to roll out a problem-solving methodology in partnership with front-line services to resolve local crime, disorder and environmental issues
- Establish a one-stop audience-appropriate menu of services from which residents can make an informed choice to improve safety and security inside and outside the home

6.5 To make older people feel safer outside their homes

- Improved security in sheltered housing schemes

6.6 To make older people feel safer inside their homes

- Home fire safety checks

Older people identified a need to create a partnership of problem-solving advisers and older people by:

- continuing to commission Metropolitan Care and Repair to provide specific burglary prevention and support services to older people, and
- recruiting a neighbourhood crime and justice coordinator to deliver a programme of community engagement, increasing confidence in criminal justice agencies and addressing fear of crime.

These issues are being monitored through the **Safer for All** strategy within Safer Communities; they are not therefore duplicated as separate actions for the delivery of **Experience Still Counts**.

7. Having a safe, comfortable and well-maintained home

To ensure that older people have a safe, comfortable and well-maintained home (and garden) which meets their needs

Having a safe, comfortable and well-maintained home is crucial to a person's quality of life. Older people can often find themselves living in accommodation that they struggle to maintain to a decent standard without help. Often that means some basic support such as assistance with small repairs to reduce health and safety hazards.

The government has now allocated more money for 'handyman' help to carry out repairs in older people's homes. This will be available to local authorities across England to help them develop or expand their local handyman services over the next two years.

The ageing of the population will be one of the greatest housing challenges of the 21st century. The Department for Communities and Local Government has recognised this in ***Lifetime Homes, Lifetime Neighbourhoods: A National Strategy for Housing in an Ageing Society*** which sets out the government's response to this challenge. It includes their plan to create Lifetime Homes in Lifetime Neighbourhoods and to ensure that there is enough appropriate housing available in future to relieve the forecasted unsustainable pressures on homes, health and social care services. Planners should see life-long accessibility as essential to all new building.

“The over 60s should get help with repairs, especially those with a disability.”

“After an operation, I received very good help from the council and the adaptations to my bathroom were carried out straight away.”

“I waited a whole week for a new boiler with no action from the council.”

“Wardens leave supported accommodation at 4pm, so residents don't feel safe after 4pm and at weekends. Buildings with a concierge are much safer.”

Achievements 2005-2008

- In 2007-08, Metropolitan Care and Repair provided gardening support for 200 older residents. It worked on 18 carers' gardens for Haringey Adult Services and cut and trimmed 318 hedges.

Priorities for delivery plan 2009-2012

7.1 To increase access to affordable schemes that provide low level home maintenance and gardening support to older people

- Develop a low cost membership scheme for older people who are homeowners and private tenants to help with repairs, domestic services and gardening
- Expand and develop handypersons' minor repair and gardening services for homeowners and private tenants
- Explore the potential for establishing a home shopping service

7.2 To improve the quality of housing, particularly for vulnerable older people who need assistance in keeping their property in good repair

- Develop a communications plan to ensure vulnerable older people who are tenants or owner occupiers know where to get help with housing related issues such as home and garden maintenance
- Identify homes in the private sector in need of major repair which are occupied by older homeowners

Older people identified a need to plan for changing housing needs which will be monitored through Haringey's **Housing Strategy** which is currently in development and which includes consultation with older people:

- through the development of an older people's housing needs plan based on research to find out the type of support older people need in their homes (such as Community Good Neighbour schemes, floating support and sheltered housing)
- by bringing sheltered housing schemes up to Decent Homes standard suitable for older people's needs

Older people also identified the need for affordable warmth. This will be monitored through the **Affordable Warmth Strategy** due for completion in autumn 2009.

8. Living with support

To enable older people to live independently with support for as long as possible in their own homes

There are times in everyone's life when they need help and support. Some people need support because they have ill health or a disability; often friends or family provide that help and support. However, sometimes support is needed from agencies such as the Council, health service, the voluntary or independent sector.

Well-planned, targeted services support independent later life. These will include services aimed at tackling social isolation, helping build social networks, and providing low level support in the home. They play a crucial role in preventing the onset of social isolation and physical and mental deterioration.

Local statutory agencies and the community and voluntary sector need to work together to make the best use of local resources, with appropriate provision for ageing black and minority ethnic populations.

People increasingly expect services that are right for them, and not just be given what happens to be available. Social care and health must progressively work more closely together to ensure that services for older people are more flexible, personal and cost-effective.

The ***Individual Budgets Evaluation Network (IBSEN)*** pilot programme tested new ways of giving people who use social care services a greater say in the assessment of their needs; better understanding of how resources are allocated to meet those needs; and greater flexibility in using resources to meet individual needs and priorities.

“I believe that lack of funds stops home care being a first rate service: that is not helpful to service users.”

“The social care system needs improvement. We need a better, fairer, more personalised social care system in residential homes, sheltered housing and home care which meets cultural needs.”

“It's very difficult for carers to have to fight for services. It's not fair that carers should be at the end of their tether before they can get help. This threatens the health of the carer and affects the person cared for.”

“Home carers' time should be monitored so it's clear how long they spend with each client.”

Achievements 2005-2008

- Waiting times were reduced for small items of occupational therapy equipment. In 2007-08 we exceeded the national best performance target of delivering 97.8% of small equipment within seven days. An occupational therapy clinic, based at the Winkfield Resource Centre, opened in March 2005 and sees around 12 to 18 people every week. This has improved the assessment and delivery of small items of equipment to disabled people, enabling them to live independently in their own homes and improving their quality of life.
- Falls prevention work was developed, with a coordinator post – funded by the Delayed Transfer of Care pooled budget – supporting Accident and Emergency departments at two local acute hospitals. A Falls Prevention Care Pathway was agreed and an Accident and Emergency falls register developed. Staff use a Falls Risk Assessment Tool (FRAT) to screen older people who have fallen or who are believed to be at risk of falls. Those scoring three or more are referred to the Integrated Community Therapy Team (ICTT) for specialist assessment and intervention. A Supporting People commissioned service, Sixty Plus, helped 43 people in 2007-08 with serious mobility problems. They also referred 162 people at risk of falls, offering falls prevention advice, helping them to access aids and other services to prevent falls.

Metropolitan Care and Repair's Hospital Homelink service helped 52 people in 2006-07 to be discharged safely into their own homes, and 67 clients in 2007-08. Metropolitan Care and Repair deals specifically with the home environment. On every visit it conducts a full Home MOT service to check and examine not only safety issues relating to trips and falls but also security and maintenance of the home. In 2006-07, 45 security audits on the homes of older people were completed, and 48 in 2007-08. This included an assessment of the risk of falls and home hazards. Tottenham Green Leisure Centre and residential care homes hosted falls prevention exercise classes.

- The *Essential Guide for Carers in Haringey* was launched in May 2007, a comprehensive guide to carers' services. An information pack and tracking system for carers' assessments was introduced in the Disabled Children's Team.
- The Home Care Night Service was successfully developed, helping 12 people at any one time to live at home. In the last year, 17 people were supported by this service which won the regional Department of Health's Health and Social Care Queen Mother's Award for The Care of Older People in 2006.

- Following the adoption of Haringey's Community Care Strategy, three of the Council's residential care homes for older people have been refurbished to a high standard, including landscaping of gardens. The newly-built Osborne Grove Nursing Home opened on 10 March 2008. Intermediate care units are now registered for dementia at Cranwood and for mental health at Broadwater Lodge. The sale of Cooperscroft was completed in 2006. The home continues to provide good quality care and Haringey Council has a contract with the providers.
- The Black and Minority Ethnic Carers Support Service was contracted to provide culturally appropriate sitting services to the value of £102,400 a year.

Priorities for delivery plan 2009-2012

8.1 To strengthen community-based services

- Increase the number of intermediate care options available (including through the rapid response team and services which prevent a person having to go into hospital)
- Further develop the Falls Prevention Programme

8.2 To promote choice and control

- Publicise availability of AskSara (self-assessment, rapid access) service for offering help, support and advice on health, home and daily activities
- Develop an End of Life Care Strategy for Haringey residents
- Promote the use of individual budgets and direct payments as widely as possible
- Expand the use of medicines prescription charts which make it easier to know when to take your medication

8.3 To develop day opportunities for older people

- Ensure that day opportunities services in Haringey are provided equitably to meet the full range of cultural needs, with access to social and recreational activities and services that promote and support older people to remain as independent as possible and able to exercise choice and control in how their individual support needs will be met
- Further develop the mobile and housebound library service for people who find it difficult to visit local libraries

8.4 To improve the quality of home care services

- Develop flexible, round-the-clock, outcome-based, client-centred home care initiatives as part of the Personalisation programme

8.5 To provide high quality co-ordinated services across health, housing, social care and the voluntary sector that reflect the cultural diversity of people in Haringey

- Monitor the progress of schemes piloting a generic approach through the Common Assessment Framework

Older people identified a number of needs for unpaid carers. These issues will be monitored through the forthcoming Carers' Strategy; they are not therefore duplicated as separate actions for the delivery of ***Experience Still Counts***.

9. Getting out and about

To ensure that older people are able to get out and about, including being able to use public transport

Older people report that getting around Haringey on foot or by public transport can be difficult. According to 2001 figures (Projecting Older People Population Information), there were 7,558 older people living alone in Haringey without transport.

Public transport is a key concern for many older people. In urban areas, fear of anti-social behaviour and crime are the chief concerns. In all areas, older people say that bus drivers are not mindful of their needs.

Mainstream services such as transport need to reflect the changing nature of society just as much as services directed at old age. Solving transport problems requires partnership working between the Council, transport providers and the older community.

“For many people, including a significant number of older people, public toilets are a ticket to an active life. Is this an exaggeration? As we get older we often need to use the toilet more often and with greater urgency. This means that when we leave home, we depend on the availability and accessibility of public toilets whether provided by local authorities, business or shops. If there aren’t any available or open, we stay at home – on a bladder lease. Just how long can you last?”
Healthy Ageing Programme, Help the Aged (May 2008)

“The criteria for using Dial-a-Ride should be reviewed so that it can be used to attend leisure activities on a regular basis, including making sure people get safely inside their homes.”

“Better training for bus drivers to prevent falls when they brake too sharply, or arm injuries when they close the doors too early; and they always need to stop in the same place to help blind passengers.”

“Schoolchildren do not allow frail, older people to sit on the allocated seats.”

“Using buses is difficult when there are too many buggies on board.”

“We need better access to public toilets when we are out and about.”

Achievements 2005-2008

- A community transport scheme was developed and is now working in the borough (based at the Selby Centre). The uptake has been very good.
- Better information is available about public conveniences. Full details of their locations, including maps, are on the Haringey Council website at www.haringey.gov.uk/publictoilets. All public conveniences have now been modified and comply with the requirements of the Disability Discrimination Act. Public conveniences are now in most of our libraries.

Priorities for delivery plan 2009-2012

9.1 To ensure spotless, smart and safe streets that everyone can use

- Develop and implement a work programme for the Haringey Mobility Forum
- Monitor the cleanliness and maintenance of streets
- Continue to monitor the quality of roads and pavements, publicising results to show how this has informed planning
- Continue to resurface all classified roads to reach top UK quartile for quality
- Continue to improve footways, prioritising those in the worst condition and those where most trip accidents occur, including keeping the pavements clear, so that people are able to walk freely
- Continue to improve street lighting replacing the oldest first and prioritising areas with high crime rates and road accidents

9.2 To further develop the community transport service

- Further develop the community transport service (to include Council, NHS Haringey, the voluntary sector, Haringey Mobility Forum and user feedback)

9.3 To improve the quality of service provided by public transport companies

- Improve standard of bus stops via ongoing quarterly meetings with Transport for London and Public Transport Liaison
- Encourage Transport for London to provide better and more frequent transport to and from local hospitals

- Involve Transport for London and Council officers with older people's events in order to provide information and receive feedback
- Encourage London Buses to improve quality of services via ongoing quarterly meetings with Transport for London and Public Transport Liaison
- Seek to work with local bus companies to involve older residents in bus driver training via ongoing quarterly meetings with Transport for London and Public Transport Liaison

9.4 To implement the borough-wide strategy to improve access to public conveniences across the borough

- Pilot a Community Toilet Scheme to encourage cafés, pubs, and other private enterprises to let the public use their toilets without obligation
- Produce and distribute a list of all accessible public conveniences with their opening hours
- Develop a plan for existing unused public conveniences based on the outcome of the Community Toilet Scheme pilot
- Install accessible toilets in three more public libraries – Highgate, Alexandra Park and Stroud Green

10. Making the most of your income

To enable older people to maximise their income

Having sufficient income makes the difference between a poor and good quality of life. It is increasingly likely that as people are living longer, they will have to work beyond the current retirement age of 65 and will need to plan for this. Anxiety about budgeting and avoiding debt are key issues for older people.

At the beginning of 2009, the government confirmed that the UK is now officially in recession. Fuel bills continue to rise, and interest rates, for those who have savings, are at an all-time low while finding employment – for all age groups – is increasing difficult with the number of redundancies rising.

Age Concern's national figures show that:

- 16% of single older men and 22% of single older women, before housing costs, are in poverty
- 13% of single older men and 17% of single older women, after housing costs, are in poverty, compared to 19% of all pensioners before housing costs, and 17% of all pensioners after housing costs.
- Two million pensioners, before housing costs, and 1.8 million after housing costs are in poverty.

Poverty is defined as living in a household where the income is less than 60 per cent of the median income of the population as a whole. Sixty eight per cent of pensioner households depend on state benefits for at least 50% of their income.

Achievements 2005-2008

- A very successful partnership outreach event took place in Autumn 2008 which will be further developed and repeated.

“We are not happy with means-testing and the Council Tax is very hard on our budget. We find it difficult to meet all the expenses of bills.”

“Financial problems and paying bills are greatest for those in the middle, that is, those not earning loads but not in poverty.”

“We need more clarity on what happens if we have to go into full-time care.”

“I don't rely on the council, I depend on friends.”

“It wasn't a struggle to pay for the care I needed once I received Attendance Allowance.”

- The *Reaping the Benefits* project was set up last year, offering benefit checks and debt counselling to residents in three of the most deprived wards in the borough, Northumberland Park, Noel Park and Bruce Grove. A small team of two specialist Citizens' Advice Bureaux staff with more than 50 years' experience between them has generated over £551,000 in extra benefits for residents that would otherwise have gone unclaimed so far in 2008-09.
- Our benefits and local taxation team has provided benefits take-up and awareness advisory sessions around the borough. Advice has been given to over 600 people, around 38% of whom were advised that they may be entitled to some additional benefits.

Priorities for delivery plan 2009-2012

10.1 To ensure that comprehensive pensions advice is widely available

- Continue to promote information about accessing good quality and reputable independent financial advisors to older people
- Continue to distribute *The Pensioners Guide*

10.2 To provide comprehensive advice on the full range of benefits and entitlements and increase take-up of these

- Develop the *Claim It* campaign to further strengthen the local working partnership between Benefits and Local Taxation, Department for Work and Pensions, Job Centre Plus, Employment and Skills Team, Finance Assessment Team, voluntary sector and benefits agency to provide comprehensive benefits services
- Lobby central government about the inflexibility of the tax credit/benefits system for older people

Older people identified a number of needs around making the most of their income:

- The Benefits Service will monitor the provision of comprehensive advice on benefits and entitlements and evidence of take-up;
- The forthcoming Carers Strategy will monitor unpaid carers and benefits.

They are not therefore duplicated as separate actions for the delivery of *Experience Still Counts*.

Monitoring the strategy

The Older People's Partnership Board – co-chaired by an older resident and membership of which includes older people – will monitor the implementation of this strategy as part of the Haringey Well-being Strategic Framework and Haringey Strategic Partnership.

There is a delivery plan to accompany ***Experience Still Counts*** which describes the priorities for 2009-2012 for each outcome and shows how we will measure that we have achieved them.

We plan to measure whether older people's quality of life has improved through:

- monitoring the priorities and initiatives in this strategy
- revisiting the Haringey Forum for Older People
- working with local groups and organisations representing and consisting of older people

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Your guide to local services: services for older people in Haringey 2006 (Haringey Council, Age Concern Haringey and NHS Haringey, online version 2006)

Glossary

Active Card

The Active Card is Haringey's Leisure Pass. It entitles older residents to savings in all of the Council's leisure centres.

Adult Services

Adult Services, formerly known as social services, helps people who need extra support, or vulnerable people, to live as independently as possible. We do this by working with health services, voluntary groups and private care organisations.

Area Assemblies

An Area Assembly is where local residents can contribute ideas on how the Council can improve the area in which they live. At the meetings, residents can talk directly with councillors.

AskSara

An online self-assessment, rapid access service offering help, support and advice on health, home and daily activities.

College of North East London (CONEL)

A vocational college, based in the heart of Tottenham, offering a wide range of courses.

Common Assessment Framework (CAF)

The Department of Health is currently consulting on how to share information more effectively as part of multi-disciplinary assessment and care planning. The proposal is to create a framework to ensure that the right information is shared at the right time across health and social care services in order to improve the quality of an individual's care and support arrangements.

Community Good Neighbour schemes

Groups of flats or bungalows for independent and active older people who are based in the local sheltered housing scheme. They keep a general eye on tenants' well-being and offer advice with day-to-day problems.

Comprehensive Area Assessments (CAA)

From 1 April 2009, the Corporate Area Assessment will replace the Corporate Performance Assessment and most rolling programmes of inspection. It will look at how well local public services are delivering

better results for local people on priorities such as health, economic prospects and community safety and how they can improve.

Comprehensive Performance Assessment (CPA)

An Audit Commission assessment. It categorised a Council's performance as 'Excellent', 'Good', 'Fair', 'Weak' or 'Poor'. See also **Comprehensive Area Assessments**.

Decent Homes standard

All property owned and managed by the Council must meet the Decent Homes standard. To meet the standard, property must have reasonably modern facilities, be warm and weatherproof.

Delayed transfer of care

Experienced by a hospital inpatient who is ready to move on to the next stage of care but is prevented from doing so for one or more reasons.

Dignity in Care

A Department of Health campaign aiming to end tolerance of indignity in health and social care services through raising awareness and inspiring people to take action. Haringey has its own Dignity in Care Champion, Councillor Catherine Harris.

English for Speakers of Other Languages (ESOL)

Courses designed to help people improve their English so that they can get more out of life. It will help those who want to study, improve their job chances, or apply to become a British citizen.

The Falls Prevention Care Pathway

A guide for staff on when and how to identify older people at risk of falls using a falls risk assessment tool and the referral options for those older people needing further specialist assessment and interventions.

First Byte

Weekly computer training sessions held in Haringey libraries to help anyone, of any age, understand computers and learn to use them with confidence.

Floating Support Services

Floating support services provide housing related support to people in their own homes to prevent them having to move to specialist supported or sheltered housing.

GP Referral Scheme

Active for Life is a partnership scheme between NHS Haringey and Haringey Council's Sport and Leisure Services. It is a programme designed to help inactive people become more physically active.

Haringey Adult Learning Service (HALS)

The service works in close partnership with the Learning and Skills Council, local schools, libraries, employers and other local learning, voluntary and community organisations to offer a variety of courses in venues around the borough and at different times of the day and week. Concessionary rates are available for older people.

Haringey Association of Voluntary and Community Organisations (HAVCO)

Haringey's local council for voluntary service, launched in 2003, aims to serve Haringey's voluntary and community sector by promoting, representing and supporting its diverse needs.

Haringey Forum for Older People (HFOP)

An opportunity for older people to discuss issues that matter to them with each other, and with officers and service managers, which plays an active role in consultations. The Forum welcomes all older people from all backgrounds and is an excellent way of meeting new people.

Haringey Strategic Partnership (HSP)

The overarching forum for partnership development in the borough. It is responsible for the Community Strategy, which sets out the priorities for improving the quality of life in Haringey.

Home care

Personal care to enable people to stay in their own home for as long as possible. Help is given to bath, wash, dress, prepare food, and help people with other daily living activities.

Integrated Community Therapy Team (ICTT)

Provides specialist assessment and intervention for people aged 65+ who score three or more during a falls risk assessment.

Intermediate care

Intermediate care or short-term rehabilitation is used to describe a broad range of services to promote faster recovery from illness (often when people are recuperating from being in hospital) and maximise independent living. The service is usually offered for a period of up to six weeks.

Job Centre plus

Provides help and advice on jobs and training for people who can work and financial help for those who cannot.

Local Area Agreement 2008-11 (LAA)

Sets out priority improvement areas that the Haringey Strategic Partnership will focus on over the next three years.

Metropolitan Care and Repair

Services to improve the housing living conditions of older and disabled people.

New Deal 50 Plus

A Jobcentre Plus programme offering support and advice for people over 50 to find work. It also offers training and help for people finding it difficult to get a job or work that pays a decent wage.

NHS Haringey

The organisation responsible for planning, developing and providing health care services to local people.

Personalisation

The Department of Health's White Paper, ***Our health, our care, our say*** confirmed that people want support when they need it, and they expect it quickly, easily and in a way that fits into their lives. To make this happen, the Department of Health is providing funding to help the social care sector achieve a shared vision: personalisation. This includes a strategic shift towards early intervention and prevention which will be the cornerstone of public services. This means that every person who receives support, whether provided by statutory services or funded by themselves, will be empowered to shape their own lives and the services they receive in all care settings. Local authorities, government departments and partners from independent, voluntary, and community organisations will all play a vital role in transforming social care services, taking into account housing, benefits, leisure, transport and health needs. It forms a part of the Government's **Transforming Social Care** agenda.

Partnership Boards

Responsible for developing strategies and plans for the main service areas. For example relevant agencies, organisations and older people are represented on the Older People's Partnership Board. A senior

Council officer and an older person jointly chair the meeting. Meetings take place every six to eight weeks.

Safeguarding Adults

In Haringey there are vulnerable adults who are unable to care for themselves without support. They have a right to receive this support free from abuse and neglect, yet not all of them do. The Council works closely with NHS Haringey, the Metropolitan Police and other organisations to protect people from abuse and neglect. If you have any concerns about yourself or someone you know, contact 020 8489 1400 (office hours) or 020 8348 3148 (evenings, weekends and bank holidays). If you think the danger is immediate, call the police on 999.

Scrutiny Review

Scrutiny Reviews are investigations by Councillors into areas of policy or delivery of Council services on issues of concern to the Council.

Sheltered Housing

Sheltered housing is for older people or people with disabilities who live independently as tenants, but who occasionally need advice and support. All schemes have a scheme manager based locally.

Silver Surfers

Groups which aim to allow older people (anyone aged 50 and over) to find out how the internet and email can enhance their lives.

Sitting services

Sitting services provide respite for unpaid carers by having someone look after the person they care for in their own home.

Sixty Plus

A free service run jointly by Hornsey Housing Trust and Novas Group and funded by Haringey Council's Supporting People Programme which offers advice, help and support in your own home on issues such as health and well-being, housing, finances and benefits and local activities.

Supported Housing

Includes sheltered housing, shared homes and supported hostels where facilities are shared. Some also provide a 24-hour alarm service. Some schemes provide floating support to people living in Council, private sector and housing association properties, where the workers and managers may not be based locally.

Transforming Social Care

See **Personalisation**.

University of the Third Age (U3A)

Self-help, self-managed life-long learning cooperatives for older people no longer in full-time work, providing opportunities for members to share learning experiences in a wide range of interest groups and to pursue learning not for qualifications, but for fun.

Well-being Strategic Framework (WBSF)

A framework developed in partnership between Haringey Council, NHS Haringey and Haringey Association of Voluntary and Community Organisations. It is based on the seven outcomes for improving well-being set out in the Department of Health's White Paper, ***Our Health, Our Care, Our Say***.

Well-being Chairs Executive (WBCE)

A monthly meeting of the chairs of the Well-being Outcome Focused sub-groups reporting to the Well-being Partnership Board, and chaired by the Director of Public Health.

Well-being Partnership Board (WBPB)

Leads in promoting and delivering a Healthier Haringey for all people aged 18 years and over in Haringey. It is one of the thematic boards sitting under the Haringey Strategic Partnership.

APPENDIX A: Contacts for each of the outcomes identified in the strategy

Outcome	Contacts
Being respected	
Sean Burke	Head of Neighbourhood Management, Haringey Council Tel: 020 8489 4928
Anne Daley	Head of Commissioning, South East Haringey, NHS Haringey Tel: 020 8442 5783
Robert Edmonds	Director, Age Concern Haringey Tel: 020 8885 8357
Paul Knight	Programme Coordinator, Personalisation, Haringey Council Tel: 020 8489 3084
Bernard Lanigan	Manager, Older People's Assessment and Care Management, Haringey Council Tel: 020 8489 3771
Philippa Morris	Head of Organisational Development and Learning, Haringey Council Tel: 020 8489 1088
Susan Oti	Assistant Director of Public Health, Adults and Older People, NHS Haringey Tel: 020 8442 6000
Lisa Redfern	Assistant Director, Adult Services, Haringey Council Tel: 020 8489 2326
Carla Segel	Business Support and Development Manager, Customer Services, Haringey Council Tel: 020 8489 2034
Naeem Sheikh	Chief Executive, Haringey Association of Voluntary and Community Organisations Tel: 020 8880 4035
Manuela Toporowska	Development Officer, Haringey Forum for Older People Tel: 020 8885 8358
Janette Wallace- Gedge	Consultation Manager, Haringey Council Tel: 020 8489 2914
Keeping informed	
Anne Daley	As above
Robert Edmonds	As above
Paul Knight	As above

Outcome	Contacts
Bernard Lanigan	As above
Barbara Nicholls	Head of Commissioning, Adult, Culture and Community Services, Haringey Council Tel: 020 8489 3328
Naeem Sheikh	As above
Sue Southgate	Manager, Integrated Care Team, Haringey Council Tel: 020 8829 2415
Manuela Toporowska	As above
Staying healthy	
Vanessa Bogle	Public Health Strategist – Long Term Conditions, NHS Haringey Tel: 020 8442 6878
Anne Daley	As above
Diana Edmonds	Head of Libraries, Archives and Museum Service, Haringey Council Tel: 020 8489 2759
Robert Edmonds	As above
Debbie Morgan	Service Manager, Drugs Advisory Service Haringey Tel: 020 8489 4011
John Morris	Assistant Director, Recreation Services, Haringey Council Tel: 020 8489 5602
Barbara Nicholls	As above
Susan Oti	As above
Mathew Pelling	Commissioning Manager, Haringey Council Tel: 020 8489 3340
Len Weir	Service Manager, Older People Tel: 020 8489 2338
Debbie Wilkins	Service Manager, Nutrition & Dietetics, NHS Haringey Tel: 020 8442 6000
Being active	
Pat Duffy	Head of Haringey Adult Learning Service, Haringey Council Tel: 020 8489 2566
Jan Dunster	Assistant Director, Learner Information and Support, College of North East London Tel: 020 8442 3144
Diana Edmonds	As above
Robert Edmonds	As above

Outcome	Contacts
Debbie Nichols	Manager, Sixty Plus Tel: 020 8275 4305
Naeem Sheikh	As above
Manuela Toporowska	As above
Len Weir	As above
Choosing work	
Paul Clarke	Programme Manager, Haringey Guarantee Scheme, Haringey Council Tel: 020 8489 2940
Steve Davies	Head of Human Resources, Haringey Council Tel: 020 8489 3172
Pat Duffy	As above
Jan Dunster	As above
Phyllis Fealy	Manager, Job Centre Plus, Edmonton and Wood Green Tel: 020 8899 3262
Nigel Redmond	Head of Human Resources, NHS Haringey Tel: 020 8442 6345
Martin Tucker	Regeneration Manager (Employment and Skills), Haringey Council Tel: 020 8489 2932
Feeling safer	
Margaret Allen	Assistant Director, Commissioning and Strategy, Haringey Council Tel: 020 8489 3719
John Brown	Borough Commander, London Fire Brigade Tel: 020 8885 2274
Jean Croot	Head of Safer Communities Unit Tel: 020 8489 6934
Steve Fallon	Manager, Metropolitan Care and Repair Tel: 020 8829 8315
Jackie Goodwin/ Toyin Olusoga	Neighbourhood Housing Manager, Homes for Haringey Tel: 020 8489 1279
Tessa Newton	Manager, Victim Support Haringey Tel: 020 8888 9878
Debbie Nichols	As above
Steve Russell	Service Manager, Housing and Health, Urban Environment, Haringey Council Tel: 020 8489 5196
Jonathan Williams	Chief Inspector, Head of Safer

Outcome	Contacts
	Neighbourhoods, Wood Green Police Station Tel: 0300 123 1212
Having a safe comfortable and well maintained home	
Diana Edmonds	As above
Steve Fallon	As above
Bernard Lanigan	As above
Debbie Nichols	As above
Mathew Pelling	As above
Nick Powell	Head Of Housing Strategy, Development and Partnerships, Haringey Council Tel: 020 8489 4774
Steve Russell	Service Manager, Housing and Health, Urban Environment, Haringey Council Tel: 020 8489 5196
Len Weir	As above
Living with support	
Anne Daley	As above
Diana Edmonds	As above
Steve Fallon	As above
Bernard Lanigan	As above
Barbara Nicholls	As above
Debbie Nichols	As above
Mathew Pelling	As above
Lisa Redfern	As above
Sue Southgate	As above
Pauline Taylor	Head of Medicines Management, NHS Haringey Tel: 020 8442 6000
Len Weir	As above
Getting out and about	
Niall Bolger	Director of Urban Environment, Haringey Council Tel: 020 8489 4523
Joan Hancox	Head of Sustainable Transport, Haringey Council Tel: 020 8489 1777
Dinesh Kotecha	Head of Property Services, Haringey Council Tel: 020 8489 2101
Beverley Taylor	Assistant Director, Frontline Services, Haringey

Outcome	Contacts
	Council Tel: 020 8489 1785
Manuela Toporowska	As above
Making the most of your income	
Jim Brady	Benefits & Local Taxation Manager, Haringey Council Tel: 020 8489 3804
Robert Edmonds	As above
Bernard Lanigan	As above
Imelda Mullins	Deputy Director, Age Concern Haringey Tel: 020 8801 2444
Mathew Pelling	As above
Marcus Power	Finance Assessment Manager, Haringey Council Tel: 020 8489 3913
Manuela Toporowska	As above

APPENDIX B: Links with other strategies and frameworks

Experience Still Counts Outcomes	Well-being Strategic Framework Outcomes	Sustainable Community Strategy Priorities
1. Being respected	<ul style="list-style-type: none"> • Freedom from discrimination or harassment • Maintaining personal dignity and respect 	<ul style="list-style-type: none"> • People at the heart of change • Safer for all • Healthier people with a better quality of life
2. Keeping informed	<ul style="list-style-type: none"> • Increased choice and control 	<ul style="list-style-type: none"> • Healthier people with a better quality of life
3. Staying healthy	<ul style="list-style-type: none"> • Improved health and emotional well-being 	<ul style="list-style-type: none"> • Healthier people with a better quality of life
4. Being active	<ul style="list-style-type: none"> • Improved quality of life • Making a positive contribution 	<ul style="list-style-type: none"> • People at the heart of change • An environmentally sustainable future • Economic vitality and prosperity shared by all • Safer for all • Healthier people with a better quality of life • Be people and customer focused
5. Choosing work	<ul style="list-style-type: none"> • Improved health and emotional well-being • Economic well-being 	<ul style="list-style-type: none"> • An environmentally sustainable future • Economic vitality and prosperity shared by all
6. Feeling safer	<ul style="list-style-type: none"> • Improved quality of life 	<ul style="list-style-type: none"> • People at the heart of change • An environmentally sustainable future • Economic vitality and prosperity shared by all • Safer for all • Healthier people with a better quality of life
7. Having a safe,	<ul style="list-style-type: none"> • Improved quality of life 	<ul style="list-style-type: none"> • People at the heart of change

APPENDIX B: Links with other strategies and frameworks

Experience Still Counts Outcomes	Well-being Strategic Framework Outcomes	Sustainable Community Strategy Priorities
comfortable and well-maintained home		<ul style="list-style-type: none"> • An environmentally sustainable future • Economic vitality and prosperity shared by all • Safer for all • Healthier people with a better quality of life
8. Living with support	<ul style="list-style-type: none"> • Increased choice and control 	<ul style="list-style-type: none"> • Healthier people with a better quality of life
9. Getting out and about	<ul style="list-style-type: none"> • Improved quality of life 	<ul style="list-style-type: none"> • People at the heart of change • An environmentally sustainable future • Economic vitality and prosperity shared by all • Safer for all • Healthier people with a better quality of life
10. Making the most of your income	<ul style="list-style-type: none"> • Economic well-being 	<ul style="list-style-type: none"> • An environmentally sustainable future • Economic vitality and prosperity shared by all

APPENDIX C: Setting the scene for this strategy

Introduction

Haringey has a population of 224,700 (2007 mid-year estimates) people, about half of whom are from Black and Minority Ethnic groups. This includes a high proportion of asylum seekers and refugees. An estimated 193 languages are spoken in the borough.

There are a greater number of people who classify themselves as White in the more affluent west of the borough, while black African and black Caribbean communities are concentrated in the less affluent east. Residents of Asian origin are concentrated in the middle of the borough.

For at least a generation, unemployment locally has exceeded national and regional averages. Eight per cent of people in Haringey aged 50-59 who are willing and able to work are unemployed. This is double the London and England rates of four per cent.

Population distribution

In 2001 there were 48,295 older people (aged over 50) in Haringey, making up approximately 22% of the total population. 45% (21,841) were male and 55% (26,454) were female. There is a higher proportion of older people living in the west of the borough, particularly in Fortis Green, Highgate, Alexandra and Muswell Hill wards.

By 2011, approximately 20.8% of the Haringey population is expected to be aged 50 and over, increasing to just over 22% by 2021. The number of people aged 50 and over will rise from 49,295 in 2001 to 55,286 in 2021.

The same pattern is evident in London as a whole. In 2001 approximately 27% of the population was aged 50 and over in London. There are expected to be fewer older people by 2011 (25.7%) but this will rise again to the current London figure of 27.8% by 2021.⁸

⁸ Greater London Authority 2007 round population projections, PHP high

Table 1 The proportion of population aged 50 and over by ward, Haringey 2001 (%)

Ward	2001	2011	2021
Alexandra	25	26	28
Bounds Green	24	20	22
Bruce Grove	21	18	19
Crouch End	23	22	25
Fortis Green	26	25	25
Harringay	20	18	18
Highgate	26	23	22
Hornsey	22	19	20
Muswell Hill	27	26	29
Noel Park	23	19	18
Northumberland Park	20	18	18
St. Ann's	22	22	24
Seven Sisters	20	20	20
Stroud Green	18	20	22
Tottenham Green	21	18	19
Tottenham Hale	20	20	22
West Green	21	22	23
White Hart Lane	22	23	27
Woodside	23	20	28
Haringey	22	21	22
LONDON	27	26	28

Source: 2001 Census Area Theme Table CT002 and 2007 round of Greater London Authority demographic ward projections

Ethnic distribution

In 2001 the proportion of people aged 50 and over from Black and Minority Ethnic⁹ groups in Haringey was approximately 26% in 2001 (compared to 38% for the whole Haringey population). The distribution varies by ward with Black and Minority Ethnic groups concentrated in the east of the borough.

⁹ Definition of Black and Minority Ethnic includes people of Mixed, Asian or Asian British, Black or Black British, and Chinese and other ethnic groups

Table 2 The proportion of population aged 50 and over by ward, Haringey 2001 (%)

Ward	White Ethnic groups 2001	Black and Minority Ethnic groups 2001
Alexandra	90	10
Bounds Green	78	22
Bruce Grove	54	46
Crouch End	89	11
Fortis Green	92	8
Haringay	71	29
Highgate	91	9
Hornsey	80	20
Muswell Hill	92	8
Noel Park	70	30
Northumberland Park	64	36
St. Ann's	65	35
Seven Sisters	63	37
Stroud Green	76	24
Tottenham Green	59	41
Tottenham Hale	63	37
West Green	68	32
White Hart Lane	82	18
Woodside	73	27
Haringey	75	25
LONDON	84	16

Source: 2001 Census Area Theme Table CT003

Greater London Authority projections¹⁰ estimate the proportion of people aged 50 and over from Black and Minority Ethnic¹¹ groups in Haringey will grow from 26% in 2001 to approximately 32.4% by 2011. This represents an increase of 19% in the proportion of older people from Black and Minority Ethnic groups. Conversely, the proportion of older people who are of White Ethnic origin is expected to fall from 74% in 2001 to 67.6% in 2011. This represents a fall of seven per cent in the proportion of older people who are of White Ethnic origin (Table 3).

¹⁰ Greater London Authority Ethnic group projections 2001 round - central projection

¹¹ Definition of Black and Minority Ethnic includes people of Mixed, Asian or Asian British, Black or Black British, and Chinese and other ethnic groups

Table 3 The proportion of population aged 50 and over by ethnic group (%)

Area	White Ethnic groups 2001	Black and Minority Ethnic groups 2001	White Ethnic groups 2011	Black and Minority Ethnic groups 2011
Haringey	74	26	67.6	32.4
London	84	16	64.9	35

Source: GLA ethnic group projections 2007 round

Housing information

The 2001 Census showed that 58% of people aged 50 and over in Haringey were owner-occupiers. 73% of residents in Muswell Hill and 78% in Alexandra wards owned their homes whilst only 38% of residents in White Hart Lane and 40% in Northumberland Park did so (Table 4).

In 2001, the proportion of older people who rent from the Council and rent from Registered Social Landlords (21% and nine per cent respectively) is similar to the borough as a whole (20% and 11% respectively). However, older people in Haringey are much less likely to be private renters. Only nine per cent of older people in the borough are private renters, just under half the Haringey average of 20%.

Haringey's older people are significantly less likely to be in an overcrowded¹² household than residents in the borough as a whole. Thirteen per cent of older people are in an overcrowded household compared with 27% of Haringey's total population. But older people in Haringey are more likely to be in an overcrowded household than older people in London (10%) and more than three times more likely to be in an overcrowded household than older people in England (4%).

The Council has 1,500 sheltered housing units, representing approximately eight per cent of the total Council housing stock. All of these units provide low level support.

¹² An overcrowded household is one where there is at least one room too few

Table 4 People aged 50 and over who are owner occupiers by ward, Haringey 2001 (%)

Ward	All people aged 50 and over	No.	%
Alexandra	2,636	2,061	78.19
Bounds Green	2,658	1,503	56.55
Bruce Grove	2,462	1,443	58.61
Crouch End	2,456	1,586	64.58
Fortis Green	2,964	2,004	67.61
Harringay	2,143	1,464	68.32
Highgate	2,667	1,809	67.83
Hornsey	2,243	1,055	47.04
Muswell Hill	2,743	2,010	73.28
Noel Park	2,595	1,271	48.98
Northumberland Park	2,570	1,047	40.74
St. Ann's	2,819	1,574	55.84
Seven Sisters	2,626	1,491	56.78
Stroud Green	1,904	1,072	56.30
Tottenham Green	2,481	1,063	42.85
Tottenham Hale	2,559	1,313	51.31
West Green	2,507	1,477	58.92
White Hart Lane	2,627	1,008	38.37
Woodside	2,631	1,632	62.03
Haringey	48,291	27,881	57.74
LONDON	1,908,291	1,253,095	65.67

Definition of owner occupied includes owns outright, owns with a mortgage or loan or shared ownership (Source: 2001 Census Area Theme Table CT002).

Health and social care information

A key health inequality target is to increase life expectancy. In Haringey, life expectancy has continued to rise along with national trends.¹³ Life expectancy for women has remained higher than the national average since 1996, whilst life expectancy for men has remained below the national average. The average life expectancy for men ranges from 70 years in parts of Tottenham to 78 years in parts of the west of the borough. This variation is in line with other data that demonstrates substantially higher levels of multiple deprivation in the east of the

¹³ Source: Haringey Health Report 2003

borough. However, difference in life expectancy between women in the east and in the west of the borough is not so great.

Approximately 41% of older people in Haringey had a limiting long-term illness according to the 2001 Census.¹⁴ Using this measure, Haringey's older population is generally less healthy than older people in London (38%) and England (38%).

The results are similar for permanent sickness and disability. Twelve per cent of older residents in Haringey are either permanently sick or have a disability, while nine per cent of older residents in London and nine per cent of older residents in England are either permanently sick or have a disability. Haringey has one of the highest mental illness admission rates in London, particularly in the east of the borough.

In 2007-08, 84% of service users aged 65 and over received community-based services to enable them to remain in their own homes. This is almost 15% of the total number of people aged 65 and over in the borough.

In terms of the provision of unpaid care¹⁵, there are no significant differences between older people in Haringey and older people in London and England. Thirteen per cent of older people in Haringey provide unpaid care, which is slightly lower than the figures for London (14%) and England (16%).

Access to Transport

Using access to at least one car or van as a measure of mobility, older people in Haringey are not only relatively less mobile than people in the borough as a whole but also older people in London and England. Only 56% of older people in Haringey have access to at least one car or van compared to 61% in Haringey as a whole, 63% in London and 72% in England.

Haringey Council provides transport from a person's home to day services (and vice versa) and also enables service users to access other community opportunities throughout the day. This transport is only provided for service users who are unable to walk or take public transport (Chronically Sick and Disabled Persons Act 1970).

¹⁴ A limiting long-term illness, health problem or disability that limits a person's daily activities or the work they can do. This also includes problems relating to old age.

¹⁵ The term 'unpaid care' covers any unpaid help, looking after or supporting family members, friends, neighbours or others because of long-term physical or mental ill health or disability or problems relating to old age.

Crime data

All crime (measured per 1,000 residents) has fallen steadily overall in Haringey over the last three years. Year on year the rate has fallen by 8% (from 136.7 to 125.4 crimes per 1,000 residents). However, Haringey still has a slightly higher overall crime rate than the London average and councils from within its most similar group.

Comparing Haringey's performance over the last six months compared to the previous twelve months shows a progressively improving trend that suggests partnership action is having an effect.

Recent crime statistics show victims of crime are disproportionately young, the peak age being 30 years old with two thirds (65.3%) of victims aged between 19 and 44. Only 7% of victims were aged over 60, despite this age group making up 13.4% of the population in Haringey.

The Haringey Residents Survey 2007-08 shows crime – one of the major concerns for Haringey residents – fell by 8% compared to the previous year; specifically older residents (60+) had the lowest concern over crime (39%) compared to younger groups.

APPENDIX D: Development of the strategy

Experience Still Counts started at the point where ***Experience Counts*** ended: with older people as the key drivers in the development of a revised and updated strategy for improving the quality of life for older people in Haringey.

Following a consultation between September and December 2008, a refreshed and renewed set of priorities and key initiatives has been developed for each of the ten outcomes, with identified lead officers, resources and targets. The Older People's Partnership Board and the Well-being Chairs Executive recommended that the new delivery plan be aligned with the Well-being Strategic Framework, linking revised priorities and actions to the Well-being Strategic Framework's seven outcomes and incorporating relevant National Indicators. This will enable the Older People's Partnership Board to monitor the strategy through the Well-being Strategic Framework.

At the Well-being Chairs Executive in January 2009, it was agreed that the revised strategy be relaunched, under the new name of ***Experience Still Counts*** to cover the period 2009-2012.

An Equalities Impact Assessment was produced alongside the development of the strategy, including achievements to date and future planning in the context of the equalities profile of older people in Haringey.

The support of the Haringey Forum for Older People has been invaluable throughout this process. Supported by their Development Officer, Forum representatives gave their expertise and time in order to play a significant role in planning for the renewed, revised and reinvigorated ***Experience Still Counts*** strategy.

A Policy Officer, with help from a Policy Support Officer, coordinated the review and attended all the consultation meetings, working with older people and with lead officers across the Haringey Strategic Partnership to collect, collate and analyse the information which has fed into this strategy.

APPENDIX E: Consultation undertaken about this strategy

At the start of the review process, a verbal report was presented at the Older People's Partnership Board in February 2008. The Board agreed to support the review and update of the strategy. An update was presented to the Board in October and December 2008 and again in January 2009.

Progress reports also went to the Well-being Chairs Executive meetings of March, July and November 2008 and again in January 2009 where recommendations were agreed and endorsed.

Contact was made with lead officers for each of the 176 key initiatives to plot progress and achievements against the 2005 delivery plan. This included staff from the Council, health, voluntary and community sector, police, local adult education colleges, the Pensions Service, Job Centre Plus and the private sector.

The consultation was conducted using Haringey Council's ***Have Your Say Haringey***, the corporate calendar designed to let the public know about consultations which are currently taking place. The consultation ran from September to December 2008. It was planned in partnership with a small project group which included representatives from the Haringey Forum for Older People, Older People's Partnership Board, Council, health and voluntary sector.

The following documents were collated and distributed as part of the consultation process for each of the ten outcomes:

- **Achievements 2005-2008:** based on progress reports from all the lead officers across the Haringey Strategic Partnership
- **Ongoing work:** initiatives that require further work
- **New initiatives:** an opportunity for older people and lead officers to have their say on new and changing priorities for older people

The documentation was presented and discussed at the launch of the review of ***Experience Counts*** on 10 September 2008. All participants were given full packs of information to take home for further consideration. The information was also made available on Haringey's website at: www.haringey.gov.uk/review_experience_counts.htm

The event was attended by individuals and representatives of the following groups:

- Age Concern
- Campbell Court Tenants Association
- Greek Cypriot Elders
- Haringey Alzheimer's Society
- Haringey Association of Voluntary and Community Organisations
- Haringey Forum for Older People
- Haringey Mobility Forum
- Haringey Wheelchair Users Group
- Islamic Culture Centre
- Older People's Partnership Board
- Older People's Reference Group which played a key role in the original 2004 consultation
- United Reformed Church Disabled Group
- Young at Heart.

Thirty-two older people plus a number of lead officers from across the Haringey Strategic Partnership attended, took part in discussions and fed back on the progress of **Experience Counts** to date; their views were also sought on the next steps for the strategy. Tables representing the ten outcomes of **Experience Counts** were facilitated by Haringey Forum for Older People representatives working with staff from partnership organisations.

Councillor Catherine Harris, Haringey's first Dignity in Care Champion, opened the day and took part in a number of outcome-specific discussions.

Feedback from the event was collated and incorporated into the first draft of a revised delivery plan for each outcome. This included feedback from the Haringey Forum for Older People's event in July 2008. Older people were again asked how they wanted to deal with the feedback. As a result, a series of ten focus groups – one for each outcome of the strategy – met during November and December to study the feedback from the consultation. Each focus group consisted of older people who helped facilitate at the September event alongside lead officers from partnership organisations.

Following each of the focus groups, relevant lead officers were contacted and asked for final input in order to finalise the updated delivery plan for 2009-2012.

In February, the draft of the revised strategy and delivery plan was circulated for comment and feedback to:

- Older People's Partnership Board
- Well-being Chairs Executive
- All those who participated in the consultation process
- Chair, Haringey Well-being Partnership Board and Cabinet Member for Adult Social Care and Well-being
- Vice Chair, Haringey Well-being Partnership Board and Chair, NHS Haringey

The revised strategy was also discussed at:

- Chief Executive's Management Board, Haringey Council: March 2009
- Cabinet Advisory Board: March 2009
- The Primary Care Trust Board: March 2009
- Cabinet: April 2009
- Haringey Well-being Partnership Board: May 2009

Feedback from older people who participated in the consultation process has been extremely positive.

APPENDIX F: How we involve and consult with older people in Haringey

We involve and consult older people in a number of ways including:

- Area and Neighbourhood Assemblies
- Carers Partnership Board
- Haringey Association of Voluntary and Community Organisations
- Haringey Forum for Older People
- Older People's Partnership Board
- Pensioners' Action Groups
- Research Governance Framework Panel
- Service User Groups
- Surveys (such as the annual residents' survey)
- Tenants' and Residents' Groups and Forum
- Volunteering
- Well-being Partnership Board and its Making a Positive Contribution sub-group



Experience Still Counts:

**Haringey's strategy for improving the
quality of life for older people**

Delivery Plan 2009-2012

OUTCOME 1: BEING RESPECTED To ensure that older people are respected and valued				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATORS 2009-2012	LEAD	WBSF OUTCOME
1.1 To promote and encourage appropriate respect of all older people				
1.1(i) Investigate feasibility of an older person's customer journey as part of the Personalisation project: <ul style="list-style-type: none"> Completed review of customer journeys to improve our customer experience, including older people Clear and audience-appropriate information about care system Clear pathways to care Older people consulted over preferred method of communicating information 	Personalisation Programme Within Haringey Council's existing resources	NI 130: Social care clients receiving Self Directed Support per 100,000 population Targets: tbc	Carla Segel , Business Support and Development Manager, Customer Services, HC Paul Knight , Project Manager, Personalisation, HC	Increased choice and control
1.1(ii) Work with Customer Call Centres to improve older people's contact experience, developing standards of customer care for older people at all major council service access points: <ul style="list-style-type: none"> Staff training includes session run by older people Easier access to preferred language Longer time allocation for enquiry More effective training on attitudes and responses Easier access to someone with specialised knowledge who answer queries Older people present training sessions on how to work with older residents effectively 	Within Haringey Council's existing resources	NI 140: Fair treatment by local services Baseline: 60.4% (2008 Place Survey) 2009-10: 62.6% 2010-11: 65% 2011-12: tbc	Carla Segel , Business Support & Development Manager, Customer Services, HC Philippa Morris , Head of Organisational Development & Learning, HC	Maintaining personal dignity and respect
1.1(iii) Promote role of Dignity in Care Champion: <ul style="list-style-type: none"> Clearly define role Publicise role to community via Haringey People and events Involve Champion in older people's initiatives Champion attends service user events and forums to discuss and promote dignity in care, including the Haringey Forum for Older People and supported housing events Champion to host a Safeguarding Adults event in 2009 Provide an external challenge to the Safeguarding Adults Board Launch a council-wide safeguarding statement to promote awareness and the diversity of safeguarding 	Within Haringey Council's existing resources	NI 140: Fair treatment by local services Baseline: 60.4% (2008 Place Survey) 2009-10: 62.6% 2010-11: 65% 2011-12: tbc	Lisa Redfern/Patrick Morreau , Co-Chairs, OPPB	Maintaining personal dignity and respect
1.1(iv) Review the role of the Older People's Champion: <ul style="list-style-type: none"> Champion's role reviewed and agreed by Older People's Partnership 	Within Haringey Council's	NI 140: Fair treatment by local	Patrick Morreau/Lisa Redfern , Co-Chairs,	Making a positive

HC = Haringey Council

HAVCO = Haringey Association of Voluntary and Community Organisations

OUTCOME 1: BEING RESPECTED To ensure that older people are respected and valued				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATORS 2009-2012	LEAD	WBSF OUTCOME
<ul style="list-style-type: none"> Board Champion to be non-political and independent Champion has clear understanding of role and is seen to be involved Role well publicised 	existing resources	services Baseline: 60.4% (2008 Place Survey) 2009-10: 62.6% 2010-11: 65% 2011-12: tbc	Older People's Partnership Board	contribution
1.2 To increase opportunities for the involvement and representation of older people in the decision making process				
1.2(i) Develop policies for Service User and Carer Involvement and Service User and Carer Payment: <ul style="list-style-type: none"> Development linked to Haringey Strategic Partnership's Community Engagement Framework Established framework for reward and recognition of service users and carers who have been invited to contribute to service planning and development with an initial pilot scheme Haringey Council Consultation Strategy updated with clear lines influencing decision making established across all partners A single agreed consultation training package accessed by staff across partnership organisations All consultation/public meeting encourage involvement by using day and community settings to help reach seldom-heard groups, offering transport, translation and other enabling services Consultations allow time on agenda for older people to participate fully Consultations routinely use established groups such as HFOP and others Clear understanding of roles of LINKs and Community Link Forum 	Within existing resources - all	NI 4: % of people who feel they can influence decisions in their locality Baseline: 40.5% (2008 Place Survey) 2009-10: 42.9% 2010-11: 45.1% 2011-12: tbc	Naeem Sheikh/Robert Edmonds , Co-Chairs, Making a Positive Contribution sub-group Janette Wallace-Gedge , Consultation Manager, Communications and Consultation Unit, HC Anne Daley , Head of Commissioning, South East Haringey, NHS Haringey	Making a positive contribution
1.2(ii) Increase older people's attendance at Area Assemblies by ensuring that meetings are accessible: <ul style="list-style-type: none"> Continue to develop opportunities for ensuring representation of older people at area assemblies Continue to use accessible venues, eg pensioners clubs Ensure that agendas are not too tightly packed so that older people have time to have their say Information on public transport routinely provided Nominated lead in each area assembly for older people's issues who links to HFOP and other local community groups 	Within Haringey Council's existing resources	NI 4: % of people who feel they can influence decisions in their locality Baseline: 40.5% (2008 Place Survey) 2009-10: 42.9% 2010-11: 45.1% 2011-12: tbc	Sean Burke , Head of Neighbourhood Management, HC	Making a positive contribution

HC = Haringey Council

HAVCO = Haringey Association of Voluntary and Community Organisations

OUTCOME 1: BEING RESPECTED To ensure that older people are respected and valued				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATORS 2009-2012	LEAD	WBSF OUTCOME
<ul style="list-style-type: none"> Rolling programme to focus on involvement of seldom heard groups Daytime and evening meetings routinely offered Provision of transport for those unable to safely attend meetings Special themed meetings on older people and their needs Accessible information on Making a Difference funding 	<p>Within Haringey Council's existing resources</p>	<p>NI 4: % of people who feel they can influence decisions in their locality Baseline: 40.5% (2008 Place Survey) 2009-10: 42.9% 2010-11: 45.1% 2011-12: tbc</p>	<p>Patrick Morreau/Lisa Redfern, Co-Chairs, Older People's Partnership Board</p>	<p>Making a positive contribution</p>
<p>1.2(iii) Review role of the Older People's Partnership Board to ensure representation across all services of older people in decision-making process:</p> <ul style="list-style-type: none"> Sustained programme of regular quarterly meetings Reviewed and updated terms of reference Membership reviewed and changes implemented 	<p>Within existing resources with additional funding through Area Based Grants and Making a Difference</p>	<p>NI 7: Environment for a thriving third sector Baseline: 18.9% (third sector organisations survey 2008) 2009-10: 3% increase (21.9%) 2010-11: 3% increase (24.9%) 2011-12: tbc</p>	<p>Bernard Lanigan, Service Manager, Older People's Assessment and Care Management, HC Manuela Toporowska, Age Concern Haringey Development Officer</p>	<p>Making a positive contribution</p>
<p>1.2(iv) Provide support for older people's groups e.g. Haringey Forum for Older People:</p> <ul style="list-style-type: none"> Clear definition of "support" Evidence that older people's groups continue to meet regularly and contribute to service planning Help in finding potential venues Active involvement of older people representatives in Leisure User Groups Accessible information on potential funding streams such as Area Based Grant, www.funderfinder.org.uk Financial support for all groups reviewed through Area Based Grants process 				
<p>1.3 To reduce age discrimination</p>				
<p>1.3(i) Develop an action plan to identify key areas of work to ensure that older people receive equal treatment in planning local health services:</p> <ul style="list-style-type: none"> Development of strategy that builds on the Health Equality Audit 2007 for reducing inequalities in healthcare for seldom-heard groups Joint strategic needs assessment to reflect needs of particular community groups NHS Haringey will explore via the Training and Education Programme, 	<p>Within NHS Haringey's existing resources</p>	<p>NI 140: Fair treatment by local services Baseline: 60.4% (2008 Place Survey) 2009-10: 62.6% 2010-11: 65%</p>	<p>Susan Ottiti, Associate Director of Public Health, Adults and Older People</p>	<p>Freedom from discrimination or harassment</p>

OUTCOME 1: BEING RESPECTED To ensure that older people are respected and valued			
KEY INITIATIVES	RESOURCES	NATIONAL INDICATORS 2009-2012	LEAD
and Estates and Facilities Department: - Access to services with hearing loop facility, visual alert system - Deaf awareness training for NHS staff - Email and text message and access to book appointment for hearing impaired - Practical BSL users and provision of interpreters - Customer service training for NHS staff – older people sometimes feel they are being “written off” - Inclusion of older people in consultations - Choice of healthcare options - Affordable healthcare, eg feet, dentists, opticians		2011-12: tbc	

OUTCOME 2: KEEPING INFORMED To ensure that older people have accurate information on which to base their decisions			
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD
2.1 To ensure that older people feel supported by reliable, authoritative and friendly advice, information and advocacy services 2.1(i) Produce a Haringey Advocacy Strategy that: <ul style="list-style-type: none"> • Meets the aspirations of Haringey service users and carers • Meets the requirements of personalisation • Provides a strategic framework for the implementation of both of the above as well as a financial and operational framework • Further develops patient advocacy projects at the North Middlesex University and Whittington Hospitals for assessment • Evidence outcomes for people who have used advocacy services • Reaches out to seldom-heard groups and individuals via voluntary, community and faith groups, universal services (eg GPs and hospitals), adult learning classes • Develop a new one-stop integrated access team for signposting to both direct access universal services and, for those needing it, self-directed support • Ensure that all vulnerable older people have access to welfare rights 	Personalisation Programme	NI 140: Fair treatment by local services Baseline: 60.4% (2008 Place Survey) 2009-10: 62.6% 2010-11: 65% 2011-12: tbc	Barbara Nicholls , Head of Commissioning, ACCS Sue Southgate , Manager, Integrated Care Team, HC Anne Daley , Head of Commissioning, South East Haringey, NHS Haringey Paul Knight , Programme Coordinator, Personalisation, HC

OUTCOME 2: KEEPING INFORMED To ensure that older people have accurate information on which to base their decisions				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
<p>advice and advocacy</p> <p>2.1(ii) Provide wide-ranging information at public access points throughout the borough in liaison with Libraries Service where it is already an established part of core business:</p> <ul style="list-style-type: none"> Information communication plan devised and agreed between health, council, voluntary and community sector and other strategic partners Effective sharing of information across partnership Named contacts at information points including Customer Service Centres to ensure information is in stock and up to date Consider ways of providing access to services across the borough, eg some CAB or Age Concern sessions to be held in alternative premises eg community venues 	Personalisation Programme	NI 140: Fair treatment by local services Baseline: 60.4% (2008 Place Survey) 2009-10: 62.6% 2010-11: 65% 2011-12: tbc	Paul Knight , Programme Coordinator, Personalisation, HC	Increased choice and control
<p>2.1(iii) Continue to increase delivery of “quality marked” independent information and advice services:</p> <ul style="list-style-type: none"> Market development of service provision for self-directed support started in 2009-10, including a commitment to Quality Assurance covering all service providers – private, voluntary and in-house Investigate potential funding/staffing resource to continue this initiative Established potential interest across a range of voluntary sector information and advice services Accredited organisations proven to give extra value Range of “quality marked” standards relevant suited to a range of need eg Matrix 	<p>Pending identification of resources.</p> <p>May be linked to Personalisation Programme</p>	NI 14: Reducing avoidable contact: Minimising the proportion of customer contact that is of low or no value to the customer	<p>Naeem, Sheikh, Chief Executive, HAVCO</p> <p>Paul Knight, Programme Coordinator, Personalisation, HC</p>	Increased choice and control
2.2 To ensure that information is accessible, up to date, and available in different formats (including paper, online and in community languages)				
<p>2.2(i) As part of the Personalisation programme, consider ways of developing the council's website to further improve access to services for people aged 50 and over:</p> <ul style="list-style-type: none"> Extended online reporting of problems Online referrals can be made for all older people's services See new one-stop integrated access team [2.1(i)] 	<p>Within Haringey Council's existing resources</p>	NI 140: Fair treatment by local services Baseline: 60.4% (2008 Place Survey) 2009-10: 62.6% 2010-11: 65% 2011-12: tbc	<p>Bernard Lanigan, Service Manager, Older People's Assessment and Care Management, HC</p> <p>Paul Knight, Programme Coordinator, Personalisation, HC</p>	Increased choice and control
<p>2.2(ii) Hold an annual celebratory event or programme for older people:</p> <ul style="list-style-type: none"> Haringey Forum for Older People to provide outline of potential programme/ideas to Assessment and Care Management Service 	<p>Within Haringey Council's existing</p>	NI 4: % of people who feel they can influence decisions in	<p>Manuela Toporowska, Development Officer, Haringey Forum for Older</p>	Increased choice and control

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OUTCOME 2: KEEPING INFORMED				
To ensure that older people have accurate information on which to base their decisions				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
<ul style="list-style-type: none"> Linked to commemorative day, eg UK Older People's Day – 1 October Accessible venue with good transport links Programme meets requirement to reach seldom-heard individuals Promote in Haringey People 	<p>resources.</p> <p>Apply to Safer Communities and Fire Service for extra funding and/or support</p>	<p>their locality</p> <p>Baseline: 40.5% (2008 Place Survey)</p> <p>2009-10: 42.9%</p> <p>2010-11: 45.1%</p> <p>2011-12: tbc</p>	<p>People</p> <p>Bernard Lanigan, Service Manager, Older People's Assessment & Care Mgmt, HC</p>	
<p>2.2(iii) Continue to develop the Older People's Guide to Local Services:</p> <ul style="list-style-type: none"> As part of the Personalisation programme, explore potential funding source for a printing the Guide Haringey Forum for Older People to input ideas for content and structure Identified contact for ensuring that information is updated regularly or at least once a year Information to be web-based to ensure the information is stored centrally and is easily updated Establish annual programme for updating topics and content which involves older people Hold at least one paper reference copy in each library 	<p>Within existing resources - all</p> <p>Transforming Social Care Board will consider contributing when self-directed support is to be implemented in older people's services in 2010</p>	<p>NI 14: Reducing avoidable contact: Minimising the proportion of customer contact that is of low or no value to the customer</p>	<p>Paul Knight, Programme Manager, Personalisation, HC</p> <p>Robert Edmonds, Director, Age Concern</p> <p>Manuela Toporowska, Development Officer, Haringey Forum for Older People</p> <p>Bernard Lanigan, Service Manager, Older People's Assessment and Care Management, HC</p>	<p>Increased choice and control</p>

OUTCOME 3: STAYING HEALTHY				
To promote staying healthy and reducing inequalities in health				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
<p>3.1 To keep older people informed about their choices for a healthier lifestyle</p> <p>3.1(i) Help older people to eat healthily and regularly in hospital, intermediate care and at home:</p> <ul style="list-style-type: none"> Older people volunteers help elderly patients eat on the ward Older patients weighed and height measured on admission to identify 	<p>Within NHS Haringey's existing resources and</p>	<p>NI 125: Achieving independence for older people through rehabilitation</p>	<p>In Hospital and Intermediate Care:</p> <p>Suzanne Goldberg, Specialist Older People</p>	<p>Improved health and emotional well-being</p>

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OUTCOME 3: STAYING HEALTHY To promote staying healthy and reducing inequalities in health				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
<p>signs of malnourishment</p> <ul style="list-style-type: none"> Older people needing help with eating identified on admission and their meal placed on a red tray Following a social work assessment of need, home carers remain with clients to help with feeding or to ensure the meal is eaten, recording the outcome Nutritional status to be included in care plans Weight recorded at regular intervals with a clear action plan as required Continue to provide advice on healthy eating to older people in their own community languages using Community Nutrition Assistants Through ethnic monitoring information review on annual basis the need to establish specialist services and seek funding streams where appropriate Wider population accessed via voluntary and community groups Older people involved as trainers/advisors Healthy eating factsheets available at public access points across the borough Develop role and identify resources for specialist dietician for older people Ensure older people's needs are recognised in the Obesity Strategy Revise food and nutrition strategy (March 2006) Include diets for specific conditions, eg no salt related to high blood pressure <p>3.1(ii) Support to stay healthy through a range of healthy living activities, advice and information:</p> <ul style="list-style-type: none"> Link to Social Marketing Agenda Considered feasibility and usefulness of expanding universal services, eg Sixty Plus Improve public health information eg dental and foot care Free and low-cost services for older people identified Year on year figures show older people are making more use of Choose and Book which is now available in all libraries and all staff fully trained 	Area Based Grant	<p>/intermediate care Target: Haringey has committed to a statistically significant improvement on data for year 2008-09 as the target for 2010-11</p> <p>NI 139: The extent to which older people receive the support they need to live independently at home 2009-10: 2% 2010-11: 2% 2011-12: tbc</p>	<p>Dietician (currently on maternity leave) At Home: Debbie Wilkins, Manager, Nutrition & Dietetics, NHS Haringey (currently on maternity leave) Len Weir Manager, Home Care and Sheltered Housing, HC</p>	
	Within NHS Haringey's existing resources plus Health in Mind Project – Area Based Grant funded and further bids to external funds	<p>NI 8: Adult participation in sport (2007-10 stretch target) Baseline: 22.9% (2006-07 Active People Survey) 2009-10: 26.9% 2010-11: 27.9% (provisional) 2011-12: tbc</p>	<p>Mathew Peilling, Commissioning Manager, Adult, Culture and Community Services, HC Diana Edmonds, Assistant Director, Culture, Libraries & Adult Learning, HC Vanessa Bogle, Public Health Strategist - Long</p>	Improved health and emotional well-being

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OUTCOME 3: STAYING HEALTHY To promote staying healthy and reducing inequalities in health				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
		NI 119: Self reported measure of people's overall health and well-being Baseline: 80% 2009-10: 80% 2010-11: 80% 2011-12: tbc NI 120: All-age cause mortality rate Targets: tbc NI 121: Mortality rate from all circulatory diseases at ages under 75 Baseline: 98 per 100,000 (2007-08) 2009-10: 93 2010-11: 92 2011-12: tbc NI 123: Stopping smoking Baseline: 1872 4-week quitters (not per 100,000) (2006-07) 2009-10: 1008 2010-11: 1008 2011-12: tbc Local stretch target (ends 2009-10): Number of smoking quitters in N17 area	Term Conditions, NHS Haringey	

OUTCOME 3: STAYING HEALTHY To promote staying healthy and reducing inequalities in health				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
<p>3.1(iii) Develop preventive footcare service:</p> <ul style="list-style-type: none"> Produce partnership footcare strategy to include non-medical preventative foot care services alongside footcare service for medical needs Voluntary sector commissioned to provide some basic preventative footcare Preventative service includes advice on hygiene and well-being issues Continue to rollout the basic footcare service provided through drop-in centres to include alternative venues such as community groups and day centres, delivering 1000 individual appointments per year 	NHS Haringey	<p>Baseline: 240 (2006-07) 2009-10: 300</p> <p>NI 139: The extent to which older people receive the support they need to live independently at home 2009-10: 2% 2010-11: 2% 2011-12: tbc</p>	<p>Anne Daley, Head of Commissioning, South East Haringey, NHS Haringey</p> <p>Robert Edmonds, Director, Age Concern</p> <p>Len Weir, Service Manager, Supported Housing and Home Care, HC</p>	Improved health and emotional well-being
<p>3.1(iv) Address inequalities in healthcare at the point of delivery:</p> <ul style="list-style-type: none"> Older people's involvement in post consultation and monitoring implementation of services linked to the 4 primary care collaboratives. Implement the findings of the Health Inequalities Audit 2008 	Within NHS Haringey's existing resources	<p>NI140 Fair treatment by local services Baseline: 60.4% (2008 Place Survey) 2009-10: 62.6% 2010-11: 65% 2011-12: tbc</p>	<p>Susan Otfiti, Associate Director of Public Health, Adults and Older People</p>	Improved health and emotional well-being
<p>3.1(v) Promote smoking cessation services and education to prevent people starting smoking:</p> <ul style="list-style-type: none"> Continued programme of smoking cessation services Continued monitoring of numbers of over 65s involved in all programmes Monitoring figures for 2008-09 onwards Breakdown of figures to show effectiveness of programmes in continued non-smoking Easily accessible advice on possible physical reactions to stopping smoking and how to deal with these 	Within NHS Haringey's existing resources	<p>NI 123: Stopping smoking Baseline: 1872 4-week quitters (not per 100,000) (2006-07) 2009-10: 1008 2010-11: 1008 2011-12: tbc</p>	<p>Debbie Morgan, Service Manager, Drugs Advisory Service Haringey</p>	Improved health and emotional well-being
3.2 To encourage older people to use leisure services				

OUTCOME 3: STAYING HEALTHY To promote staying healthy and reducing inequalities in health				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
<p>3.2(i) Continue to develop a healthy activity programme for older people in leisure centres and other venues:</p> <ul style="list-style-type: none"> • Health walks led from a variety of public access points across the borough • Volunteer scheme developed to lead walks • Promote training opportunities for local people to become volunteer walk leaders to enable the health walks programme to be developed further • Nordic walking scheme developed with volunteer leads • Increase participation of everyone aged 50 and over in a widening range of activities offered at leisure centres and at other venues • Increased use and user satisfaction • Participation in government scheme to offer more free swimming to older people • Assistance with swimming for older people at leisure centres • More privacy in changing rooms to meet needs of disabled people and faith groups • Additional training in place for staff to help older people into and out of pools to ensure health and safety is upheld throughout • Dissemination of recommendations from consultant's report on programme and accessibility issues at Park Road • Entry, intermediate and advanced level exercise classes at Tottenham Green and Park Road leisure centres • Participation in Olympiad weekend • Training for leisure centre staff in how to assist disabled people • A range of classes focusing on relaxation held in libraries, learning, community and day centres • Older people invited to share/publicise their experiences of participation in classes 	<p>Within Haringey Council's existing resources accessing external funding as appropriate</p>	<p>NI 8: Adult participation in sport (2007-10 stretch target) Baseline: 22.9% (2006-07 Active People Survey) 2009-10: 26.9% 2010-11: 27.9% (provisional) 2011-12: tbc</p> <p>NI 119: Self reported measure of people's overall health and well-being Baseline: 80% 2009-10: 80% 2010-11: 80% 2011-12: tbc</p> <p>NI 120: All-age cause mortality rate Targets: tbc</p> <p>NI 121: Mortality rate from all circulatory diseases at ages under 75 Baseline: 98 per 100,000 (2007-08) 2009-10: 94 2010-11: 93 2011-12: tbc</p> <p>NI 123: Stopping smoking Baseline: 1872 4-</p>	<p>John Morris, Assistant Director, Recreation, HC [Simon Farrow] Robert Edmonds, Director, Age Concern Diana Edmonds, Assistant Director, Culture, Libraries & Adult Learning, HC</p>	

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OUTCOME 3: STAYING HEALTHY To promote staying healthy and reducing inequalities in health				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
		week quitters (not per 100,000) (2006-07) 2009-10: 1008 2010-11: 1008 2011-12: tbc		
3.3 To strengthen mental health services for older people				
3.3(i) Develop an Older People's Mental Health Strategy to be in place by the end of 2009	Within existing resources – Haringey Council and NHS Haringey	NI 149: Adults in contact with secondary mental health services in settled accommodation Target: Haringey has committed to a statistically significant improvement on data for year 2008-09 as the target for 2010-11 NI 139: The extent to which older people receive the support they need to live independently at home 2009-10: 2% 2010-11: 2% 2011-12: tbc	Barbara Nicholls , Head of Commissioning, HC	Improved health and emotional well-being

OUTCOME 4: BEING ACTIVE				
To create opportunities for being active including getting involved, volunteering, socialising and life-long learning				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
4.1 To create opportunities for taking up recreational activities				
<p>4.1(i) Continue to develop non-sport related recreational and social activities for people aged 50 and over involving agencies such as Age Concern Haringey, Sixty Plus scheme, community centres and health agencies through running older people's drop-in groups in Haringey libraries:</p> <ul style="list-style-type: none"> • Involve older people in development of Haringey's Cultural Strategy • Programme of community-appropriate leisure and recreation activities in resource centres, community gatherings, etc • Develop and support clubs and groups run for and by older people • Expand mobile libraries service to community centres, producing year on year figures to show how many visits, to which venues and how many issues in which categories were raised • Well-publicised programmes of activities run in and by community centres, voluntary sector and commissioned services eg Sixty Plus • Use of College of North East London programmes, eg students offering subsidised hairdressing on Saturday mornings • Consult with older people to establish what they social activity they would • Monitor take-up of social activity, inviting feedback to assess outcomes and effectiveness of the programmes • Identify community centre development worker role to provide free help and support for self-organising pensioner groups, eg to complete applications <p>4.1(ii) Run reminiscence groups around the borough to enable older people to share their life experiences:</p> <ul style="list-style-type: none"> • Continue reminiscence programme • Monitoring take-up • Invite feedback to assess outcomes and effectiveness of the programme • Develop links with inter-generational work 	<p>Within Haringey Council's existing resources accessing external funding as appropriate</p>	<p>NI 9: Use of public libraries 2009-10: 53% 2010-11: 54% 2011-12: 55%</p> <p>NI 10: Visits to museums and galleries 2009-10: 66% 2010-11: 67% 2011-12: 68%</p> <p>NI 11: Engagement in the arts 2009-10: 58% 2010-11: 59% 2011-12: 60%</p>	<p>Diana Edmonds, Assistant Director, Culture, Libraries & Learning, HC</p> <p>Naeem Sheikh, Chief Executive, HAVCO</p> <p>Robert Edmonds, Director, Age Concern Haringey</p> <p>Debbie Nichols, Manager, Sixty Plus</p>	<p>Improved health and emotional well-being</p> <p>Improved quality of life</p>
4.2 To increase opportunities for life-long learning				
<p>4.2(i) College of North East London and the Haringey Adult Learning</p>	<p>Within existing resources</p>	<p>NI 140: Fair treatment by local services Baseline: 60.4% (2008 Place Survey) 2009-10: 62.6% 2010-11: 65% 2011-12: tbc</p>	<p>Diana Edmonds, Assistant Director, Culture, Libraries & Learning, HC</p> <p>Robert Edmonds, Director, Age Concern Haringey</p>	<p>Improved quality of life</p>
4.2(i) College of North East London and the Haringey Adult Learning				
<p>NI 140: Fair</p> <p>Jan Dunster, Assistant</p> <p>Improved</p>				

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OUTCOME 4: BEING ACTIVE				
To create opportunities for being active including getting involved, volunteering, socialising and life-long learning				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
<p>Service to work with older people to establish life-long learning needs and preferences, including University of the Third Age:</p> <ul style="list-style-type: none"> • Establish what is currently available across the borough • Establish linkages/duplication in current programmes • Consult with local older people to explore future possibilities and need • CONEL and HALS (with Haringey Guarantee Scheme) work in partnership to work to explore how this can be resourced and managed across the borough in partnership to identify programmes attractive to older people which meets their needs, eg "active grandparenting" • Publicise comprehensive programme of activity • Ensure that current and future programme about all courses, including free and low-cost courses for older people, are at public access points across the borough and at community centres, with faith groups and hard-to-reach groups and events, setting targets for uptake by older people 	resources – HALS and CONEL	treatment by local services Baseline: 60.4% (2008 Place Survey) 2009-10: 62.6% 2010-11: 65% 2011-12: tbc	<p>Director, Learner Information and Support, CONEL</p> <p>Pat Duffy, Head of Haringey Adult Learning Services, HC</p> <p>Manuela Toporowska, Haringey Forum for Older People</p>	quality of life
4.3 To support the use of computers by older people				
<p>4.3(i) Expand opportunities for older people to work with computers:</p> <ul style="list-style-type: none"> • HALS and CONEL to work in partnership to provide Information and Communication Technology (ICT) courses targeted at older people • Develop more computer opportunities in council-run supported housing, day centres and drop-ins, and consider future development into community venues • Train tenants including Greek speaking residents at Hilldene Court • Supported Housing to access internet sites of interest, including online Greek newsprint and other Greek language sites • Train staff at day centres and drop-in centres providing information and materials enabling them to assist clients • Haringey Libraries and HALS to continue to offer weekly Silver Surfer and First Byte sessions • Haringey Libraries and HALS to train Super Silver Surfers per year for each location • Silver surfers are directed to HALS to enhance their confidence and expertise in use of computers • Develop timetable for extending to community and resource centres 	Within existing resources – HALS and CONEL	<p>NI 140: Fair treatment by local services Baseline: 60.4% (2008 Place Survey) 2009-10: 62.6% 2010-11: 65% 2011-12: tbc</p>	<p>Diana Edmonds, Assistant Director, Culture, Libraries & Learning, HC</p> <p>Len Weir, Manager, Supported Housing and Home Care, HC</p> <p>Jan Dunster, Assistant Director, Learner Information and Support, CONEL</p> <p>Pat Duffy, Head of Haringey Adult Learning Services</p> <p>Robert Edmonds, Director, Age Concern</p>	Improved quality of life

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OUTCOME 4: BEING ACTIVE				
To create opportunities for being active including getting involved, volunteering, socialising and life-long learning				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
<ul style="list-style-type: none"> • CONEL to identify programme of venues for mobile ICT bus targeting older learners • Range of taster sessions and beginner ICT courses in a wider range of courses including digital photography, PowerPoint, Excel, etc • Identify need and demand for courses (link to 4.3i) • Publicise what is available across the borough (link to 4.3i) • Use voluntary sector intergenerational projects to assist training/mentoring 	<p>Within existing resources – HALS and CONEL</p>		Haringey	
4.4 To increase the take up of English as a second language (ESOL) by older people				
<p>4.4(i) Monitor take-up and delivery of English for Speakers of Other Languages classes / family learning courses by older people:</p> <ul style="list-style-type: none"> • Monitoring year on year by CONEL and by HALS, looking at take-up, outcomes and effectiveness of patterns of delivery • Increase numbers of older people successfully completing ESOL • Promote courses through community and hard-to-reach groups • Expand teaching into community centres and other community venues • Incorporate into review of provision and delivery of courses 		<p>NI 13: Migrants' English language skills and knowledge Targets: tbc</p>	<p>Jan Dunster, Assistant Director, Learner Information and Support, CONEL</p> <p>Pat Duffy, Head of Haringey Adult Learning Services</p>	Improved quality of life
OUTCOME 5: CHOOSING WORK				
To create opportunities for employment				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
<p>5.1 To deliver programmes to help people aged 50+ into employment and training, monitoring take-up and outcomes of training opportunities</p> <p>5.1(i) Coordinate job brokerage provision for older people:</p> <ul style="list-style-type: none"> • Raise awareness of Haringey Guarantee Scheme • Haringey Guarantee Scheme to monitor involvement of over 50s in programme • Continue to develop ways to measure the take up of employment and training courses by people aged 50 and over • Continue to deliver the "New Deal for over 50s" • Wood Green Job Centre Plus to monitor numbers and outcomes, 	<p>Within existing resources – Job Centre Plus and Haringey Council</p>	<p>Local: Number of registered Haringey Guarantee participants with a completed better off calculation Baseline: 0 2009-10: 400</p>	<p>Paul Clarke, Programme Manager, Haringey Guarantee, Economic Regeneration, HC</p> <p>Helene Owen/Phyllis Fealy, Job Centre Plus, Wood Green</p>	<p>Improved health and emotional well-being</p> <p>Improved quality of life</p> <p>Economic</p>

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OUTCOME 5: CHOOSING WORK To create opportunities for employment				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
<ul style="list-style-type: none"> using feedback to improve the working experience Promote benefits and advice services to allay fears of returning to work Publicise advice sessions for over 50s through leaflets, visits, events and engaging with older people's group Publicise vocational skills training London Development Agency approached for further support on employment opportunities 		2010-11: 400 Local: Number of people on incapacity benefit for more than six months helped into sustained work (2007-10 stretch target) Baseline: 9 2009-10 (stretch target ends): 31 NI 153: Working age people claiming out of work benefits in worst performing neighbourhoods Baseline: 28.4% 2009-10: 26% 2010-11: 24.4% [frozen target re-assess at 2 year refresh]		well-being
5.1(ii) Continue to provide work placements and supported employment opportunities for older people with disabilities: <ul style="list-style-type: none"> Develop links with disabled organisations to promote placement and employment opportunities, depending on the organisation's future capacity to offer placements Explore options for over 50s offered by Workstep through the Employment Action Network Monitor uptake by over 50s Introduce and monitor take up of work trial opportunities as a practical alternative to traditional interview processes Promote Haringey Guarantee Scheme's Condition Management Programme 	Within existing Workstep contract resources	Local: Number of registered Haringey Guarantee participants with a completed better off calculation Baseline: 0 2009-10: 400 2010-11: 400 Local: Number of people on incapacity benefit for more than	Steve Davies , Human Resources, HC Nigel Redmond , Head of Human Resources, NHS Haringey Paul Clarke , Programme Manager, Haringey Guarantee, Economic Regeneration, HC Martin Tucker , Regeneration Manager,	Improved health and emotional well-being Improved quality of life Economic well-being

OUTCOME 5: CHOOSING WORK To create opportunities for employment				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
<ul style="list-style-type: none"> Work with older people's groups to publicise schemes 		<p>six months helped into sustained work (2007-10 stretch target) Baseline: 9 2009-10 (stretch target ends): 31</p> <p>NI 153: Working age people claiming out of work benefits in worst performing neighbourhoods Baseline: 28.4% 2009-10: 26% 2010-11: 24.4% [frozen target re-assess at 2 year refresh]</p>	<p>Employment and Skills, Urban Environment, HC</p>	
<p>5.1(iii) Run refresher skills services and courses for people aged 50 and over:</p> <ul style="list-style-type: none"> Maintain 50+ learners annual targets and, if appropriate, expand Link back to market research 	<p>To be confirmed: Existing resources and research additional funding opportunities</p>	<p>Local: Adults achieving a Skills for Life qualification and entered employment and those gaining a qualification in the workplace Local: Adults achieving a full level two qualification and entered employment and those gaining a qualification in the workplace (In 2010-11 Local Skills Council ceases)</p>	<p>Pat Duffy, Head of Haringey Adult Learning Service, HC</p>	<p>Improved health and emotional well-being Improved quality of life Increased choice and control Economic well-being</p>

OUTCOME 5: CHOOSING WORK To create opportunities for employment				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
		to exist; new targets tbc with incoming organisation)		
5.2 To promote awareness of advice, information and support services to help people aged 50+ into training and employment				
5.2(i) Increase promotion of skills development, information, advice and guidance and job search activities for HALS and CONEL courses and services, targeting people aged 50 and over: <ul style="list-style-type: none"> Development of career change research programme in partnership to direct skills training appropriately Older people are advised on effective ways of marketing their skills and knowledge, involving older people in training delivery 	Within existing resources – HALS and CONEL	Local: Number of people on incapacity benefit for more than six months helped into sustained work (2007-10 stretch target) Baseline: 9 2009-10 (stretch target ends): 31 Local: Number of registered Haringey Guarantee participants with a completed better off calculation Baseline: 0 2009-10: 400 2010-11:400	Pat Duffy , Head of Haringey Adult Learning Service, HC Jan Dunster , Assistant Director, Learner Information and Support, Conel	Improved health and emotional well-being Improved quality of life Economic well-being

OUTCOME 6: FEELING SAFER To create safer communities				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
6.1 To safeguard vulnerable adults				
6.1(i) Focus on working across multi-disciplinary agencies and with partners to ensure that the safeguarding policy and procedures are embedded:	Within existing multi-agency safeguarding	SOVA1: Timeliness of adding SOVA alert to system. % within 1	Olive Komba-Kono , Manager, Safeguarding Adults, HC	Maintaining personal dignity and

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OUTCOME 6: FEELING SAFER To create safer communities				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
<ul style="list-style-type: none"> Ensure that safeguarding plans meet the dignity challenge Continue to publicise the multi-agency reporting process to all staff and to vulnerable adults Ensure vulnerable people have adequate and effective access to translation services 	resources	day SOVA2: Waiting time for strategy discussion. % within 1 day SOVA3: Waiting time for initial investigation. High, medium and low risk SOVA4: Waiting time for strategy meeting. High, medium and low risk SOVA5: Timeliness of follow-up meetings (within 14 days) SOVA6: Timeliness of SOVA process (completion within 28 days) SOVA7: Reviews (i) % completed within 6 weeks (ii) % of all SOVA reviews completed		respect
6.1(ii) Ensure that research with adult social care users and carers is subject to ethical review and approval: <ul style="list-style-type: none"> All research proposals presented to Research Governance Panel for ethical approval to safeguard service users and carers 	Within Haringey Council's existing resources	NI 140: Fair treatment by local services Baseline: 60.4% (2008 Place Survey) 2009-10: 62.6% 2010-11: 65% 2011-12: tbc	Margaret Allen , Assistant Director, Commissioning and Strategy, HC	Maintaining personal dignity and respect

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OUTCOME 6: FEELING SAFER To create safer communities				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
6.2 To provide access to crime prevention services for older people who have been victims of crime				
<p>6.2(i) Routinely refer older people to schemes offering professional advice and support:</p> <ul style="list-style-type: none"> Maintain and service the Metropolitan Care and Repair referral scheme to provide security improvements to all older victims of burglary, reassurance and assistance in completing insurance or other claims Offer all older victims a referral to Victim Support Haringey Emotional and practice support routinely provided to survivors of crime, including domestic violence 	<p>Within Safer Communities Partnership existing resources</p>	<p>NI 24: Satisfaction with the way the police and local council dealt with anti-social behaviour Targets: tbc</p>	<p>Eric Childs, Crime Prevention Officer, Metropolitan Police Service Steve Fallon, Manager, Metropolitan Care and Repair Tessa Newton, Manager, Victim Support Haringey Penny Rutter, Manager, Hearthstone John Brown, Borough Commander, London Fire Brigade Mike Bagnall, Anti-Social Behaviour Action Team</p>	<p>Improved quality of life Freedom from discrimination or harassment</p>
<p>6.2(ii) Provide and install equipment to assist with future prevention:</p> <ul style="list-style-type: none"> Install and maintain "Memo-Cams" in the homes of all repeat victims of distraction burglaries Link up with HC's Safe and Sound alarm service to provide distraction assistance Distribution of light-timers within burglary hotspots to include older people 	<p>Within Safer Communities Partnership existing resources</p>	<p>NI 24: Satisfaction with the way the police and local council dealt with anti-social behaviour Targets: tbc</p>	<p>Eric Childs, Crime Prevention Officer, Metropolitan Police Service Steve Fallon, Manager, Metropolitan Care and Repair</p>	<p>Improved quality of life Freedom from discrimination or harassment</p>
6.3 To provide access to crime prevention services for older people who have not been victims of crime				
<p>6.3(i) Publicise contact details for crime prevention advice as widely as possible:</p> <ul style="list-style-type: none"> Ensure that Crime Prevention Office and Safer Neighbourhoods Teams contact details are available to all older people either directly or through carers and other agencies Publicise contact details through established mechanisms such as local Safer Neighbourhoods Teams newsletters, Haringey People, etc. 	<p>Within Safer Communities Partnership existing resources</p>	<p>NI 24: Satisfaction with the way the police and local council dealt with anti-social behaviour Targets: tbc</p>	<p>Eric Childs, Crime Prevention Officer, Metropolitan Police Service Steve Fallon, Manager, Metropolitan Care and Repair</p>	<p>Improved quality of life Freedom from discrimination or harassment</p>

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OUTCOME 6: FEELING SAFER To create safer communities				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
6.3(ii) Provide and install equipment to assist in crime prevention	Funding to be sought for extension of Safe and Sound alarms with bogus caller button	NI 24: Satisfaction with the way the police and local council dealt with anti-social behaviour Targets: tbc	Repair Debbie Nichols , Manager, Sixty Plus Claire Kowalska , Community Safety Team	Improved quality of life Freedom from discrimination or harassment
6.3(iii) Programme of preventative advice, support and information: <ul style="list-style-type: none"> 10% of Metropolitan Care and Repair visits to be preventative to those who have not experienced burglary Crime prevention officer to work with mobile and housebound library service to make older people aware of confidence tricksters and unexpected visitors Sixty Plus to continue to do initial assessments, as part of crime prevention partnership Information distributed via services such as meals on wheels, mobile libraries, Metropolitan Care and Repair and Sixty Plus Publicise service offered by utilities companies for planned visits by meter readers, providing advocacy support where necessary 	Within Safer Communities Partnership existing resources	NI 24: Satisfaction with the way the police and local council dealt with anti-social behaviour Targets: tbc	Eric Childs , Crime Prevention Officer, Metropolitan Police Service Steve Fallon , Manager, Metropolitan Care and Repair	Improved quality of life Freedom from discrimination or harassment
6.3(iv) Programme of outreach work and visits to hard-to-reach and seldom-heard groups using community networks, neighbourhoods and public events in parks: <ul style="list-style-type: none"> Safer Neighbourhood Teams regularly visit older people's residential homes to provide reassurance and regular reminders of distraction burglaries Train older people's organisations in crime prevention, eg Sixty Plus, health visitors, etc Maintain links with these organisations ensure that vulnerable older 	Within Safer Communities Partnership existing resources	NI 24: Satisfaction with the way the police and local council dealt with anti-social behaviour Targets: tbc	Eric Childs , Crime Prevention Officer, Metropolitan Police Service Steve Fallon , Manager, Metropolitan Care and Repair Tessa Newton , Manager, Victim Support Haringey	Improved quality of life Freedom from discrimination or harassment

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OUTCOME 6: FEELING SAFER To create safer communities				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
people are referred <ul style="list-style-type: none"> • Provide crime prevention talks to older people's groups and at events • Use contacts made through smoke alarms installation scheme to publicise crime prevention services to vulnerable older people • Outreach programme to seldom-heard/hard-to-reach groups and those for whom English is not their first language 			John Brown , Borough Commander, London Fire Brigade	
6.4 To create a working partnership of problem-solving advisers and older people				
6.4(i) Continue to roll out a problem-solving methodology in a partnership with front-line services to resolve local crime, disorder and environmental issues: <ul style="list-style-type: none"> • Partnership to support Area Based Working bringing front-line partners together • Methodology for dealing with long-term, ingrained problems beyond the scope of day to day working • Partnership to include reps from crime prevention, fire service, safer neighbourhoods, Metropolitan Care and Repair, Victim Support, to work in consultation with Haringey Forum for Older People reps • Provide additional advice and information where required through Crime Prevention Office and local Safer Neighbourhood Teams (SNTs) 	Within Safer Communities Partnership existing resources	NI 24: Satisfaction with the way the police and local council dealt with anti-social behaviour Targets: tbc	Leo Kearse , Safer Communities Development Coordinator John Brown , Borough Commander, London Fire Brigade Eric Childs , Crime Prevention Officer, Metropolitan Police Service Tessa Newton , Manager, Victim Support Haringey Steve Fallon , Manager, Metropolitan Care and Repair Debbie Nichols , Manager, Sixty Plus	Improved quality of life Freedom from discrimination or harassment
6.4(ii) Establish a one-stop audience-appropriate menu of services from which residents can make an informed choice to improve safety and security inside and outside the home: <ul style="list-style-type: none"> • Explore issues of particular interest/concern to older residents, eg awareness raising, combating fear of reporting crime and revenge • Establish what measures work best in raising the confidence of older people who have been victims of crime • Incorporate experiences of Victim Support clients to feed into 	Within Safer Communities Partnership existing resources	NI 24: Satisfaction with the way the police and local council dealt with anti-social behaviour Targets: tbc	John Brown , Borough Commander, London Fire Brigade Eric Childs , Crime Prevention Officer, Metropolitan Police Service Tessa Newton , Manager,	Improved quality of life Freedom from discrimination or harassment

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OUTCOME 6: FEELING SAFER To create safer communities				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
<p>preventative work</p> <ul style="list-style-type: none"> Provide the Community Alarm service to those who are assessed as needing it, including information on any potential help in funding the weekly cost 			<p>Victim Support Haringey</p> <p>Steve Fallon, Manager, Metropolitan Care and Repair</p>	
6.5 To make older people feel safer outside their homes				
<p>6.5(i) Improved security in sheltered housing schemes:</p> <ul style="list-style-type: none"> Renewal/ upgrading of CCTV in all council-run schemes Completion of specialist lighting level assessments in areas of concern in partnership with Sensory Impairment Team at Winkfield Resource Centre Renewal/ upgrading of CCTV in council-run schemes to improve images 	<p>Subject to available funding</p>	<p>NI 139: The extent to which older people receive the support they need to live independently at home</p> <p>2009-10: 2%</p> <p>2010-11: 2%</p> <p>2011-12: tbc</p>	<p>Jackie Goodwin / Toyin Olusoga, Homes for Haringey</p>	<p>Improved quality of life</p> <p>Freedom from discrimination or harassment</p>
6.6 To make older people feel safer inside their homes				
<p>6.6(i) Home fire safety checks:</p> <ul style="list-style-type: none"> Formal partnership established by 31 March 2009 between LFB, ACCS and Supporting People referring people most at risk from fire to the London Fire Brigade to complete fire safety checks on their homes A system capable of generating 150 referrals per quarter and include a means to measure referrals generated LFB to complete 95% of Home Fire Safety Visits within 60 days of the referral generated Home fire safety checks service, including provision of 10-year smoke detectors, offered by Environmental Health and Housing, HC LFB to use scheme as part of Safer Communities work in partnership with crime prevention, safer neighbourhoods, Victim Support (see Goal 6) Information provided on prevention of fires caused by lighted cigarettes 	<p>Within Safer Communities Partnership existing resources</p>	<p>Local: Number of accidental dwelling fires (stretch target 2007-10)</p> <p>Baseline: 240 (2006-07)</p> <p>2009-10 (ends): 300</p> <p>NI 49: Number of primary fires and related fatalities and non-fatal casualties (excluding precautionary checks)</p> <p>Targets: tbc</p>	<p>John Brown, Borough Commander, London Fire Brigade</p> <p>Steve Russell, Environmental Health and Housing Group</p>	<p>Improved quality of life</p>

OUTCOME 7: HAVING A SAFE, COMFORTABLE AND WELL-MAINTAINED HOME				
To ensure that older people have a safe, comfortable and well-maintained home (and garden) which meets their needs				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
7.1 To increase access to affordable schemes that provide low level home maintenance and gardening support to older people				
<p>7.1(i) Develop a low cost membership scheme for older people who are homeowners and private tenants to help with repairs, domestic services and gardening:</p> <ul style="list-style-type: none"> • Scheme members have access to: <ul style="list-style-type: none"> - approved list of contractors who are CRB checked - surveyors - project management - other MCR services • Scheme advertised effectively across the borough 	Supporting People - tbc	NI 141: % of vulnerable people achieving independent living Baseline: 65% (2007-08) 2009-10: 77% 2010-11: 79% 2011-12: tbc	<p>Mathew Pelling, Commissioning Manager</p> <p>Steve Fallon, Manager, Metropolitan Care and Repair (MCR)</p>	Improved quality of life
<p>7.1(ii) Expand and develop handypersons' minor repair and gardening services for homeowners and private tenants:</p> <ul style="list-style-type: none"> • Number of older people assisted with minor repairs and gardening to be determined pending funding • Monitoring of standard of completed work • Programme of home safety audits • Programme of repair/replacement of fences, gates and pathways to prevent falls at no charge to older people • Showcasing gardens through "In Bloom" and similar schemes 	Supporting People - tbc Additional funding to be investigated (Mathew Pelling to meet with Steve Fallon & Allan Williams)	NI 141: % of vulnerable people achieving independent living Baseline: 65% (2007-08) 2009-10: 77% 2010-11: 79% 2011-12: tbc	<p>Mathew Pelling, Commissioning Manager</p> <p>Steve Fallon, Manager, Metropolitan Care and Repair (MCR)</p>	Improved quality of life
<p>7.1(iii) Explore the potential for establishing a home shopping service:</p> <ul style="list-style-type: none"> • Investigate potential demand for a home shopping service to include home delivery with someone on site to assist at point of delivery escorts for shopping trips 	Within existing resources to be confirmed, including Supporting People and Haringey Council	NI 141: % of vulnerable people achieving independent living Baseline: 65% (2007-08) 2009-10: 77% 2010-11: 79% 2011-12: tbc	<p>Mathew Pelling, Commissioning Manager</p> <p>Steve Fallon, Manager, Metropolitan Care and Repair (MCR)</p> <p>Len Weir, Service Manager, Older People, HC</p>	Improved quality of life
7.2 To improve the quality of housing, particularly for vulnerable older people who need assistance in keeping their property in good repair				
<p>7.2(i) Develop a communications plan to ensure vulnerable older people who are tenants or owner occupiers know where to get help with housing related issues such as home and garden maintenance and affordable warmth:</p> <ul style="list-style-type: none"> • Established partnership approach to sharing and disseminating 	To be confirmed: North London Sub Region Grant	NI 119: Self reported measure of people's overall health and well-being Baseline: 80%	<p>Steve Russell, Manager Housing and Health, Urban Environment, HC [Lynn Sellar]</p> <p>John Mathers, Fuel</p>	Improved quality of life Economic well-being

OUTCOME 7: HAVING A SAFE, COMFORTABLE AND WELL-MAINTAINED HOME To ensure that older people have a safe, comfortable and well-maintained home (and garden) which meets their needs				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
<p>audience-appropriate information</p> <ul style="list-style-type: none"> Established contact point for information gathering and monitoring of follow-up Following identification and addressing of urgent need, information is shared across partnership to address individual need holistically in an ongoing programme Use of Common Assessment Framework to identify potential need Link to Achieving Excellence Access Pathways project A range of easy-to-follow information available at all major customer access point across the borough eg libraries, GP surgeries, buses, street signs, JCDs, community groups, council tax bills Regular space in Haringey People with contact points and seasonal information Affordable warmth strategy agreed and in place <p>7.2(ii) Identify homes in the private sector in need of major repair, which are occupied by older homeowners:</p> <ul style="list-style-type: none"> Shared knowledge base between statutory and voluntary partners to identify properties Coordination of established equity release scheme up to £5000 for repairs, repayable on sale of property eg Houseproud Established feasibility of extending multi-partnership contracts currently for council tenants and leaseholders to include local owner occupiers. 	<p>To be confirmed: Department of Health</p>	<p>2009-10: 80% 2010-11: 80% 2011-12: tbc</p> <p>NI 138: Satisfaction of people over 65 with both home and neighbourhood 2009-10:1% increase 2010-11:1% increase 2011-12:1% increase</p>	<p>Poverty Officer, Urban Environment Bernard Lanigan, Manager, Older People's Assessment and Care Management [Jo Giacon] Diana Edmonds, Assistant Director, Culture, Libraries and Learning, HC</p>	Improved quality of life
<p>7.2(ii) Identify homes in the private sector in need of major repair, which are occupied by older homeowners:</p> <ul style="list-style-type: none"> Shared knowledge base between statutory and voluntary partners to identify properties Coordination of established equity release scheme up to £5000 for repairs, repayable on sale of property eg Houseproud Established feasibility of extending multi-partnership contracts currently for council tenants and leaseholders to include local owner occupiers. 	<p>Subject to availability of resources</p>	<p>NI 119: Self reported measure of people's overall health and well-being Baseline: 80% 2009-10: 80% 2010-11: 80% 2011-12: tbc</p> <p>NI 138: Satisfaction of people over 65 with both home and neighbourhood 2009-10:1% increase 2010-11:1% increase 2011-12:1% increase</p>	<p>Mathew Peeling, Commissioning Manager, HC to meet with Steve Fallon, Allan Williams, Steve Russell/Lynn Sellar to progress</p>	Improved quality of life

OUTCOME 8: LIVING WITH SUPPORT To enable older people to live independently with support for as long as possible in their own homes				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
8.1 To strengthen community based services				
<p>8.1(i) Increase number of intermediate care options available (including through the rapid response team and services which prevent a person having to go into hospital):</p> <ul style="list-style-type: none"> Continued reduction in numbers of delayed transfers of care Explore the possibility of expanding care options across other therapies Further develop advocacy projects as part of Advocacy Strategy Consider how extra supported housing might be developed to expand intermediate care options and the better targeting of existing Supporting People funded provision to prevent hospital and residential care/nursing home admissions 	<p>Delayed discharge pooled budget</p> <p>Supporting People - tbc</p>	<p>NI 125: Achieving independence for older people through rehabilitation /intermediate care Target: Haringey has committed to a statistically significant improvement on data for year 2008-09 as the target for 2010-11</p>	<p>Sue Southgate, Manager, Integrated Care Team, HC</p> <p>Anne Daley, Head of Commissioning, South East Haringey, NHS Haringey</p> <p>Mathew Pelling, Commissioning Manager, HC</p>	<p>Increased choice and control</p>
<p>8.1(ii) Further develop Falls Prevention Programme:</p> <ul style="list-style-type: none"> Year on year reduction in numbers of admissions to hospital and attendance at A&E at Whittington and North Middlesex University Hospitals Year on year reduction in number of falls resulting in fracture neck of femur Monitor outcomes of NHS Haringey bids for falls coordinators at Whittington and North Middlesex University Hospital for self-referrers Monitor outcome of footcare service as a preventative measure Finalisation of action plan and clinical audit arising out of National Clinical Audit of Falls and Bone Health in Older People Share information on falls caused by as a result of slips on pavements with transport and planning HC services 	<p>NHS Haringey Commissioning 2009-10</p> <p>Supporting People – Floating Support and Met Care and Repair (tbc)</p>	<p>NI 125: Achieving independence for older people through rehabilitation /intermediate care Target: Haringey has committed to a statistically significant improvement on data for year 2008-09 as the target for 2010-11</p> <p>NI 139: The extent to which older people receive the support they need to live independently at home 2009-10: 2% 2010-11: 2% 2011-12: tbc</p>	<p>Anne Daley, Head of Commissioning, South East Haringey, NHS Haringey</p> <p>Carole McGregor, Falls Co-ordinator, NHS Haringey</p> <p>Debbie Nichols, Manager, Sixty Plus Floating Support Service</p> <p>Steve Fallon, Manager - Metropolitan Care and Repair</p> <p>Mathew Pelling, Commissioning Manager, HC</p>	<p>Improved health and emotional well-being</p>

OUTCOME 8: LIVING WITH SUPPORT To enable older people to live independently with support for as long as possible in their own homes				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
8.2 To promote choice and control				
8.2(i) Publicise availability of AskSara (self-assessment, rapid access) service for offering help, support and advice on health, home and daily activities: <ul style="list-style-type: none"> Publicise availability of AskSara (self-assessment, rapid access), including free use of computers and internet in all libraries 	Within Haringey Council's existing resources	NI 14: Reducing avoidable contact: Minimising the proportion of customer contact that is of low or no value to the customer Targets: tbc	Bernard Lanigan , Physical Disabilities and Sensory Impairment, HC	Increased choice and control
8.2(ii) Develop an End of Life Care Strategy for Haringey residents: <ul style="list-style-type: none"> Older people involved in consultation process Options about individual choices set out clearly in accessible formats Advocacy support available Programme of training for staff on end of life care and choices 	Within Haringey Council's existing resources	NI 129: End of life care – access to appropriate care enabling people to be able to choose to die at home Target: completed strategy	Anne Daley , Head of Commissioning, South East Haringey, NHS Haringey	Increased choice and control Maintaining personal dignity and respect
8.2(iii) Promote the use of individual budgets and direct payments as widely as possible: <ul style="list-style-type: none"> Advocacy Strategy to incorporate help for people choosing direct payments and individual budgets Roadshows to promote and advise visiting pensioners forum, community centres, Age Concern, as part of the Personalisation Programme Provide training for staff on individual budgets and direct payments Efficient mechanisms in place to rectify mistakes quickly Integrated into personalisation programme Scheme is accessible and incorporates good practice from other authorities [eg Dagenham] Mediated assessments routinely offered Helpline support in partnership with Winkfield Resource Centre as part of self-assessment and referral process for DPs and IBs. 	Within Haringey Council's existing resources	NI 130: Social care clients receiving Self Directed Support per 100,000 population Targets: tbc	Bernard Lanigan , Manager, Older People's Assessment and Care Management, HC [Peter Lewington] Barbara Nicholls , Head of Commissioning, ACCS Steve Fallon , Manager Metropolitan Care and Repair	Increased choice and control
8.2(iv) Expand the use of medicines prescription charts which make it easier to know when to take your medication:	Within existing resources	NI 124: People with a long-term condition	Pauline Taylor , Head of Medicines Management,	Increased choice and control

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OUTCOME 8: LIVING WITH SUPPORT To enable older people to live independently with support for as long as possible in their own homes				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
<ul style="list-style-type: none"> • Identification of vulnerable adults unable to manage their own medication through the single assessment process • Undertake a more detailed assessment of medicines management issues and possible solutions, based on evidence of effective interventions and best practice by March 2010 • Implementation to start from March 2011 	and identified to roll out client held records for Single Assessment Process	supported to be independent and in control of their condition Target: implementation in March 2011	NHS Haringey	control
8.3 To develop day opportunities for older people				
<p>8.3(i) Ensure that day opportunities services in Haringey are provided equitably to meet the full range of cultural needs with access to social and recreation activities and services that promote and support older people to remain as independent as possible and able to exercise choice and control in how their individual support needs will be met:</p> <ul style="list-style-type: none"> • A comprehensive day opportunities strategy for older people completed 2009 • Project Board to be established spring 2009 • Links to Strategy for Mental Health Older People in terms of specific mental health provision in relation to older people • Identify need for day opportunities offering low to medium support, including black and minority ethnic resources • Haynes Centre for people with dementia due to open in July 2009 in Hornsey • A menu of options containing a range of activities and services that engage older people, and maximise independence, control and choice, as well as dignity • Further develop outreach services to older people <p>8.3(ii) Further develop the mobile and housebound library service for people who find it difficult to visit local libraries:</p> <ul style="list-style-type: none"> • Evidence of positive outcomes by users of service eg number of loans, number of housebound people visited and frequency, number of centres/residential homes and frequency, users in each location/area of the borough, etc • Explore ways of expanding the range of facilities, for example, bringing housebound customers together for reading groups, supporting customers to use computers in their own homes, a computer loan 	Within Haringey Council's existing resources	NI 139: The extent to which older people receive the support they need to live independently at home 2009-10: 2% 2010-11: 2% 2011-12: tbc	Barbara Nicholls , Head of Commissioning, Adult, Culture and Community Services, HC	Increased choice and control
	Within Haringey Council's existing resources	NI 9: Use of public libraries: 2009-10: 53% 2010-11: 54% 2011-12: 55%	Diana Edmonds , Assistant Director, Culture, Libraries and Learning, HC Bernard Lanigan , Manager, Older People's Assessment and Care Management, HC	Improved quality of life

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OUTCOME 8: LIVING WITH SUPPORT To enable older people to live independently with support for as long as possible in their own homes				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
<p>scheme</p> <ul style="list-style-type: none"> • Include a question in care assessments to identify new customers • Ensure that all buildings-based adult services, including sheltered housing, receive a visit from the mobile library service 			Debbie Nichols, Manager, Sixty Plus Floating Support Service	
8.4 To improve the quality of home care services				
<p>8.4(i) Develop flexible, round-the-clock, outcome-based, client-centred home care initiatives as part of the Personalisation programme:</p> <ul style="list-style-type: none"> • Service developed with active participation of users • Service is more personalised with more time offered, more continuity with fewer changes of carers and staff who are punctual and efficient • Ensure that the maximum number of home carers possible have annual flu jab • Routinely monitor the time spent with each client • Increase specialist training to home care staff, particularly those with EMI needs 	<p>Within Haringey Council's existing resources</p>	<p>NI 125: Achieving independence for older people through rehabilitation /intermediate care Target: Haringey has committed to a statistically significant improvement on data for year 2008-09 as the target for 2010-11</p> <p>NI 130: Social care clients receiving Self Directed Support per 100,000 population</p> <p>NI 139: The extent to which older people receive the support they need to live independently at home 2009-10: 2% 2010-11: 2% 2011-12: tbc</p>	<p>Bernard Lanigan, Manager, Older People's Assessment and Care Management,HC</p> <p>Len Weir, Service Manager, Supported Housing and Home Care, HC</p>	<p>Improved quality of life</p> <p>Increased choice and control</p>
8.5 To provide high quality co-ordinated services across health, housing, social care and the voluntary sector that reflect the cultural diversity of people in Haringey				
<p>8.5(i) Monitor the progress of schemes piloting a generic approach through the Common Assessment Framework (CAF)</p>	<p>Within existing resources</p>	<p>NI 14: Reducing avoidable contact:</p>	<p>Lisa Redfern, Assistant Director, Adult Services,</p>	<p>Increased choice and</p>

HC = Haringey Council

HAVCO = Haringey Association of Voluntary and Community Organisations

OUTCOME 8: LIVING WITH SUPPORT				
To enable older people to live independently with support for as long as possible in their own homes				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
	and resources identified to roll out client held records – Haringey Council and NHS Haringey	Minimising the proportion of customer contact that is of low or no value to the customer NI 127: Self reported experience of social care users NI 140: Fair treatment by local services Baseline: 60.4% (2008 Place Survey) 2009-10: 62.6% 2010-11: 65% 2011-12: tbc	HC Anne Daley , Head of Commissioning, South East Haringey, NHS Haringey	control

OUTCOME 9: GETTING OUT AND ABOUT				
To ensure that older people are able to get out and about including being able to use public transport				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
9.1 To ensure spotless, smart and safe streets that everyone can use				
9.1(i) Develop and implement a work programme for the Haringey Mobility Forum: <ul style="list-style-type: none"> Progress achieved against actions in work programme agreed by Mobility Forum and Haringey Council Frontline Services. 	Within Haringey Council's existing resources	NI 175 (Local target): Access to services and facilities by public transport (and other specified models) Target: TfL data not yet available. Targets	Joan Hancox , Head of Sustainable Transport, HC	Making a positive contribution

HC = Haringey Council

HAVCO = Haringey Association of Voluntary and Community Organisations

OUTCOME 9: GETTING OUT AND ABOUT				
To ensure that older people are able to get out and about including being able to use public transport				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
<p>9.1(ii) Monitor the cleanliness and maintenance of streets:</p> <ul style="list-style-type: none"> Implementation of Street Cleanliness Action Plan to improve NI 195 performance and residents perception Implementation of Dumping Action Plan to improve NI 196 performance and residents perception 	<p>Within Haringey Council's existing resources</p>	<p>to be set at year 2 refresh</p> <p>NI 195: Improved street and environmental cleanliness (levels of litter detritus graffiti and fly-posting)</p> <p>NI 196: Improved street and environmental cleanliness – fly tipping</p>	<p>Beverley Taylor, Assistant Director, Frontline Services, Urban Environment, HC</p>	<p>Improved quality of life</p>
<p>9.1(iii) Continue to monitor the quality of roads and pavements, publicising results to show how this has informed planning:</p> <ul style="list-style-type: none"> Continue to use annual conditions survey to inform budget setting and programme planning Publicise findings of annual conditions survey and action plan in Haringey People Use year on year data to measure and publicise changes in residents satisfaction Report through Better Places Partnership Board and share with across other relevant boards, particularly Well-being Partnership Board Distribute information via Haringey Forum for Older People mailings, through council A-Z booklet and Haringey People Consider printing information/feedback postcards to be placed in public reception areas 	<p>Within Haringey Council's existing resources</p>	<p>NI 168: Principal roads where maintenance should be considered</p> <p>NI 169: Non-principal classified roads where maintenance should be considered</p>	<p>Joan Hancox, Head of Sustainable Transport, HC</p>	<p>Improved quality of life</p>
<p>9.1(iv) Continue to resurface all classified roads to reach top UK quartile for quality:</p> <ul style="list-style-type: none"> Wood Green High Road resurfaced 2008-09 Principal roads of Fortis Green and West Green Road [part] resurfaced 2009-10 and West Green Road 2010-11 Non-principal roads resurfaced: Alexandra Park Road, High Street N6, Rokesley Avenue and Stapleton Hall Road in 2008-09 	<p>Transport for London funding</p> <ul style="list-style-type: none"> - 2008-09 £400k - 2009-10 £435k - 2010-11 £358k <p>Council funding</p>	<p>NI 168: Principal roads where maintenance should be considered</p> <p>NI 169: Non-principal classified roads</p>	<p>Joan Hancox, Head of Sustainable Transport, HC</p>	<p>Improved quality of life</p>

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OUTCOME 9: GETTING OUT AND ABOUT				
To ensure that older people are able to get out and about including being able to use public transport				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
	for non-principal roads - 2008-09 £250k - 2009-10 £250k	where maintenance should be considered		
9.1(v) Continue to improve footways, prioritising those in the worst condition and those where most trip accidents occur, including keeping the pavements clear, so that people are able to walk freely: <ul style="list-style-type: none"> Effectiveness publicity of role of street wardens and the public in reporting obstructions on pavements from overgrown gardens Continued emphasis on duty of householder to maintain gardens/boundaries Consider ways of making steep pavement gradients more accessible for wheelchairs and people with low mobility Investing in footways to improve condition and reduce accident claims 	Transport for London funding £2m to re-lay pavements	NI 168: Principal roads where maintenance should be considered NI 169: Non-principal classified roads where maintenance should be considered	Joan Hancox, Head of Sustainable Transport, HC	Improved quality of life
9.1(vi) Continue to improve street lighting replacing the oldest first and prioritising areas with high crime rates and road accidents: 50% of streetlights to meet modern standards by March 2010	Transport for London funding £1m secured for 2008-09 and £2m for 2009-10	NI 168: Principal roads where maintenance should be considered NI 169: Non-principal classified roads where maintenance should be considered	Joan Hancox, Head of Sustainable Transport, HC	Improved quality of life
9.2 To further develop the community transport service				
9.2(i) Further develop the community transport service (to include Council, NHS Haringey, the voluntary sector and the Haringey Mobility Forum): <ul style="list-style-type: none"> Effective working partnership between Frontline Services and the Mobility Forum addressing transport issues via an agreed work programme [see 9.1v] Monitoring of community transport to include use of service user evaluation to inform improvement Review cost of community transport scheme to unfunded organisations and individuals Promote scheme for training other organisations' drivers to reduce costs 	Within Haringey Council's existing resources	Local NI 175: Access to services and facilities by public transport (and other specified models) Target: TfL data not yet available. Targets to be set at year 2 refresh	Joan Hancox, Head of Sustainable Transport	Making a positive contribution

HC = Haringey Council

HAVCO = Haringey Association of Voluntary and Community Organisations

<p style="text-align: center;">OUTCOME 9: GETTING OUT AND ABOUT To ensure that older people are able to get out and about including being able to use public transport</p>				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
<p style="text-align: center;">9.3 To improve the quality of service provided by public transport companies</p>				
<p>9.3(i) Improve standard of bus stops via ongoing quarterly meetings with Transport for London and Public Transport Liaison:</p> <ul style="list-style-type: none"> • Ensure damaged seats at bus stops are repaired quickly • Seating at bus stops to be clearly prioritised for older people and people with disabilities • Consider improvements to routes travelling east to west across the borough • Police/community support presence at transport hubs to tackle anti-social behaviour • Discuss potential for increasing the number of bus stops with lighted billboards as part of programme to improve lighting generally at stops • Consider additional bus stop lighting as part of accessibility measures 	<p>Bus stop accessibility funding</p>	<p>Local NI 175: Access to services and facilities by public transport (and other specified models) Target: TfL data not yet available. Targets to be set at year 2 refresh</p>	<p>Malcolm Smith, Transport Planning Manager, HC</p>	
<p>9.3(ii) Encourage Transport for London to provide better and more frequent transport to and from local hospitals:</p> <ul style="list-style-type: none"> • Consider scope for more services to and from St Ann's Hospital • Consider further improvements to services to and from North Middlesex University Hospital 	<p>TfL resources</p>	<p>Local NI 175: Access to services and facilities by public transport (and other specified models) Target: TfL data not yet available. Targets to be set at year 2 refresh</p>	<p>Malcolm Smith, Transport Planning Manager, HC</p>	<p>Improved quality of life</p>
<p>9.3(iii) Involve Transport for London and council officers with older people's events in order to provide information and receive feedback:</p> <ul style="list-style-type: none"> • Haringey Forum for Older People to invite officers from council and Transport for London to give presentations and receive feedback on key issues 	<p>TfL/HFOP resources</p>	<p>Local NI 175: Access to services and facilities by public transport (and other specified models) Target: TfL data not yet available. Targets to be set at year 2 refresh</p>	<p>Manuela Toporowska, Development Officer, Haringey Forum for Older People</p>	<p>Making a positive contribution</p>
<p>9.3(iv) Encourage London Buses to improve quality of services via ongoing quarterly meetings with Transport for London and P:</p> <ul style="list-style-type: none"> • Improvements to overall bus service reliability 	<p>TfL resources</p>	<p>Local NI 175: Access to services and facilities by public transport (and other</p>	<p>Malcolm Smith, Transport Planning Manager, HC</p>	<p>Improved quality of life</p>

OUTCOME 9: GETTING OUT AND ABOUT				
To ensure that older people are able to get out and about including being able to use public transport				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
<p>9.3(v) Seek to work with local bus companies to involve older residents in bus driver training via ongoing quarterly meetings with Transport for London and Public Transport Liaison:</p> <ul style="list-style-type: none"> Transport for London/London Councils provide outcomes of inclusion of older people's needs in their driver training using customer feedback and complaints and bus companies monitoring of staff behaviour 	TfL resources	<p>specified models) Target: TfL data not yet available. Targets to be set at year 2 refresh</p> <p>Local NI 175: Access to services and facilities by public transport (and other specified models) Target: TfL data not yet available. Targets to be set at year 2 refresh</p>	Malcolm Smith, Transport Planning Manager, HC	Improved quality of life
9.4 To implement the borough wide strategy to improve access to public conveniences across the borough				
<p>9.4(i) Pilot a Community Toilet Scheme to encourage cafés, pubs, etc to let the public use their toilets without obligation:</p> <ul style="list-style-type: none"> Launch of 18-month pilot 	Within Haringey Council's existing resources	NI 5: Overall/general satisfaction with the local area	Beverley Taylor, Assistant Director, Frontline Services, Urban Environment, HC	Improved quality of life
<p>9.4(ii) Produce and distribute a list of all accessible public conveniences with their opening hours:</p> <ul style="list-style-type: none"> Establish if there is a demand for an easy-to-carry list If demand exists, list to be produced after Community Toilet Scheme pilot is in place 	Within Haringey Council's existing resources	NI 5: Overall/general satisfaction with the local area	Beverley Taylor, Assistant Director, Frontline Services, Urban Environment, HC	Improved quality of life
<p>9.4(iii) Develop a plan for existing unused public conveniences based on outcome of the Community Toilet Scheme pilot:</p>	Within Haringey Council's existing resources – may be cost-prohibitive to refurbish	NI 5: Overall/general satisfaction with the local area	Beverley Taylor, Assistant Director, Frontline Services, Urban Environment, HC	Improved quality of life
<p>9.4(iv) Install accessible toilets in three more public libraries – Highgate, Alexandra Park and Stroud Green</p>	Within Haringey Council's existing resources	NI 5: Overall/general satisfaction with the local area	Dinesh Kotecha, Head of Property Services	Improved quality of life

OUTCOME 10: MAKING THE MOST OF YOUR INCOME To enable older people to maximise their income				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
10.1 To ensure that comprehensive pensions advice is widely available				
<p>10.1(i) Continue to promote information about accessing good quality and reputable independent financial advisors to older people:</p> <ul style="list-style-type: none"> List appears in Older People's Guide (see also 2.2i): www.haringey.gov.uk/opguide-money.htm Identified contact for ensuring that information is updated regularly or at least once a year (see also 2.2i) All financial advisors are FSA accredited List to include names, contact details, and the full range of services available 	<p>Within Age Concern's existing resources</p> <p>[Robert Edmonds to check w Cllr B Harris on funding to renew/print OP Guide]</p> <p>Within Haringey Council's existing resources</p>	<p>NI 14: Reducing avoidable contact: Minimising the proportion of customer contact that is of low or no value to the customer</p>	<p>Robert Edmonds, Director, Age Concern Haringey</p>	<p>Economic well-being</p>
10.2 To provide comprehensive advice on the full range of benefits and entitlements and increase take-up of these				
<p>10.2(i) Develop the <i>Claim It</i> campaign to further strengthen the local working partnership between the Benefits and Local Taxation, Department for Work and Pensions, Job Centre Plus, Employment and Skills Team, Finance Assessment Team, voluntary sector and benefits agency to provide comprehensive benefits services:</p> <ul style="list-style-type: none"> Include representation from the GP collaboratives Hold three partnership outreach events per year Agree timings and focus of events across partnership and well in advance Consider using community centre venues with support from interpreters Programme to be organised under "Claim It" branding 	<p>Within <i>Claim It</i> partnership's existing resources</p> <p>Supporting People - tbc</p>	<p>NI 14: Reducing avoidable contact: Minimising the proportion of customer contact that is of low or no value to the customer</p>	<p>Imelda Mullins, Deputy Director, Age Concern Haringey</p> <p>Jim Brady, Manager, Benefits and Local Taxation, HC</p> <p>Bernard Lanigan, Manager, Older People's Assessment and Care Management, HC</p> <p>Mathew Peilling,</p>	<p>Economic well-being</p>

OUTCOME 10: MAKING THE MOST OF YOUR INCOME To enable older people to maximise their income				
KEY INITIATIVES	RESOURCES	NATIONAL INDICATOR 2009-2012	LEAD	WBSF OUTCOME
<ul style="list-style-type: none"> • Expand and monitor outreach by Supporting People floating support services year on year • Work with Benefits Policy Analyst at CAB to investigate a holistic approach across the partnership • Share knowledge and skills to make the most effective use of general and specialist benefits knowledge and services, including where to refer people and help with completing forms • Establish which organisations coordinate which services across the borough, when and where and mechanisms for distributing information • Establish list of advice workers and what community languages are offered • Create checklist to ensure all relevant groups within partnership are kept informed and advised of updates • Analyse feedback to evaluate <p>10.2(ii) Lobby central government about inflexibility of tax credit/benefits system for older people</p>	Within HFOP's existing resources		Commissioning Manager, HC	Making a positive contribution



Meeting: Well-Being Partnership Theme Board

Date: 14 May 2009

Report Title: Draft User Payment Policy

Report of: Making a Positive Contribution Sub-Group
of Haringey's Well Being Partnership Board

Summary

To update on a partnership wide User Payment Policy guidance.

Recommendations

To note the guidance document recommended for endorsement by partners and to consider:

- i) The timescale and process for implementation across respective statutory, voluntary and community sector organisations.
- ii) The partner organisations to be involved in the initial 12 month pilot implementation of the guidance

For more information contact:

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Appendices

Appendix 1 –Draft User Payment Policy Guidance

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Draft User Payment Policy Guidance

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(1) Procedure flowchart	To be developed
(2) Reimbursement request form	To be developed
(3) Receipt form	To be developed
(4) Service User/Carer Registration Agreement	To be developed
(5) Partner organisations	To be agreed

This policy will form part of Haringey's User and Carer Involvement Strategy (forthcoming).

1 Purpose of policy

This policy aims to support local health and social care organizations with the principle of reimbursing service users for their involvement. It aims to provide some consistency of approach to ensure that service users are treated fairly and appropriately so that they are able to make an informed choice about the arrangements concerning their involvement.¹

2 Scope of policy

This policy relates to people aged 18 and over who are Haringey residents and particularly those who access or would benefit from health and/or social care / or wider well-being services.

It will enable invited participants to receive reimbursement of out-of-pocket expenses and/or payment as appropriate.

Individual organisations across statutory and voluntary sector agencies will set protocols for management of the scheme in their services.

The policy applies to all partner organisations represented on Haringey's Strategic Partnership (HSP)².

"I go to Haringey's Learning Disability Partnership Board not simply to chair it but I'm there to share my opinions and experiences as a service user with a learning disability.

I should be rewarded for my contributions to Board meetings just like the professionals that go to these meetings."

Micheal Brookstein,
Co-chair, Haringey Learning Disability Partnership Board
& Membership Secretary for London People First.

This is a guidance document recommended for endorsement by all partners.

3 Service User Involvement

Service user involvement is defined as activity that enables users and potential users of services in Haringey to work in partnership with professionals to influence actions taken by those who make decisions at all levels within the organisation.

¹ Reward and Recognition DH August 2006 the policy will apply to all organisations in Haringey's Strategic Partnership (HSP) – see list in appendix C attached (add page no)

² Haringey's Strategic Partnership (HSP) is the overarching board that governs . . .

4 Principles

It is the intention that all payment rates are set at an agreed rate and are offered in a consistent manner so as to promptly meet out of pocket expenses and recognise the level of expertise/time offered by users/carers to improve the quality of local services.

5 Levels of Involvement Activity

Payments rates are set according to the type of involvement activity and the three levels are outlined below:

Involvement Activity	Payment
Level 1 (Informing / Consulting – out of pocket expenses)	
Level 1: <i>Informing and engaging</i> people about current and planned services	Expenses only
Level 1: <i>Consulting on decisions</i> , offering opinions, listening to feedback	Expenses only
Level 2 (Representation - Standard involvement)	
Level 2: <i>Deciding together</i> , encouraging additional ideas or options, seeking joint decisions	Payment at lower rate plus expenses
Level 2: <i>Acting together</i> , not only deciding jointly what to do, but actually doing it together “in partnership”	Payment at lower rate plus expenses
Level 2: <i>Encouraging independent initiatives</i> . Helping others to do what they want – perhaps within a framework of advice and support provided by those who control the resources	Payment at lower rate plus expenses
Level 3 (Consultancy – Enhanced involvement)	
Level 3: <i>Contribute to training, education and research</i> training/educating others work involving extensive preparation such as presenting at a seminar or conference	Payment at higher rate plus expenses
Level 3: <i>Undertaking work with a higher level of responsibility, or requiring a particular level of expertise.</i> (e.g. participating in recruitment and selection)	Payment at higher rate plus expenses

To ensure that those service users and carers whose mobility is restricted or who are unable to make their own way to/from a venue are able to participate, accessible transport will be offered and provided free of charge.

Training will be offered by partner agencies to support involvement activity.

6 Rates of payment

The following rates of payment will be offered:

Level 1 Out-of-pocket expenses

Reimbursement	
Childcare costs	Up to £7.50 per hour
Replacement carer	Up to £7.50 per hour
Personal assistant	Up to £7.50 per hour*
Reasonable travel costs e.g. including public transport, bus, tube, train, car or taxi	At cost

Level 2 – Standard involvement*

Payment rate and reimbursements	
Standard rate of pay	£7.50 per hour up to £55 per day
Stationery, phone calls necessary for the involvement task	At cost upto a maximum of ??
Plus out of pocket reimbursement as Level 1 above	

Level 3 – Enhanced involvement*

Payment rates and reimbursements	
Enhanced rate of pay	£15 per hour up to £120 per day
Plus out of pocket reimbursement as Level 1 above	

*consideration should be given to reasonable preparation time eg for chairing meeting.

Level 4 - Individually negotiated contract

Haringey's user and carers involvement strategy³ aspires to engage those with direct experience of services in the delivery of training and the provision of consultancy as part of wider commitment to improving the quality of these services.

Responsibility for a complex area of work, eg delivering training to staff, leading a workshop at an event or speaking at a conference	Individually negotiated contract
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It is recommended that for paid involvement (level 2 & 3), out of pocket expenses reimbursement or provision of travel tickets, etc, should be offered *in addition to the payment fee*.

7 Procedure for claiming payments (and reimbursements of expenses)

7.1 Reimbursement of out of pocket expenses (attendance at level 1 events)

Add here arrangement specific to each partner organisation

7.2 Payments to service users or carers

Add here arrangement specific to each partner organisation

7.3 Other methods of reimbursement

individually negotiated **add here** arrangement specific to each partner organisation

³ This strategy is in development with an anticipated production later in 2009 / 10

The Partner Organisation's Finance Team will manage the administration of payments and will:

- Retain all documentation in relation to payments
- Issue payment (eg cash/cheque/electronic transfer) within a month
- Log all payment details electronically
- Provide reports on payments as and when requested.

Payments claimed to be countersigned by User Involvement designated lead person and processed by organisation concerned.

8 Legal /Equalities implications

Service users are supported to seek advice from Haringey Citizen's Advice Bureau (or other independent advice agency) such that they are not to be left out of pocket or put at risk of being financially worse off as a result of their involvement activity

If a service user is offered a role that involves unsupervised contact with vulnerable people, they will be required to undertake a CRB (Criminal Records Bureau) check, prior to undertaking such work. Partner organisations are obliged by the Department of Health to ensure that people working in their organisations, even as volunteers, have this clearance. Please note that a criminal record in itself will not mean that someone cannot be accepted to carry out a Level 1, 2 or 3 activity.

Add here equalities impact monitoring and assessment referenced to each partner organisations policy.⁴

9 Funding

9.1 Payments made to service users or carers under the terms of this policy will be separately coded and identified in the finance system. This will allow uptake of this policy to be monitored by locality and care group.

9.2 Payments under this policy will be funded from local budgets. The lead organisation for the Well-Being partnership board (currently shared by Haringey Council ACCS and NHS Haringey) will identify a user involvement budget and co-ordinate contributions for the designated partnership activities on an annual basis.

10 Implementation / Review

Timescale – pilot over 12months with 6 months review

This policy has been drafted in April 2009 by the Making a Positive Contribution sub-group of Haringey's Well-Being Partnership Board and developed in accordance with DOH guidance:

Reward and Recognition: The principles and practice of service user payment and reimbursement in health and social care. (Dept of Health August 2006)

- Appendix 1 - Procedure Flowchart - to be developed
- Appendix 2 - Reimbursement request form - to be developed
- Appendix 3 - Receipt form - to be developed
- Appendix 4 - Service User/Carer Registration Agreement - to be developed

⁴ cross reference to Haringey Council's Research Governance Framework (add date)

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Meeting: Well-Being Strategic Partnership Board

Date: 14 May 2009

Report Title: Mental Well-Being Impact Assessments: Haringey Time Bank

Report of: Health and Wellbeing Subgroup – Gerry Atkinson/Janice Woodruff

Purpose

To inform the Board on the agreement to undertake two Mental Wellbeing Impact Assessments annually on policies and to start to skill up the workforce in this practice area.

To highlight outcomes of MWIA on the Haringey Time bank and benefits of this approach, which outweigh the financial investment for the community in promoting social cohesion and releasing social capital.

Legal/Financial Implications

The MWIA shows the financial and non-financial benefits of using this approach to develop initiatives that support and encourage community engagement, participation, neighbourhood support and general well-being.

The benefits of the MWIA approach can be seen in the 'exchange value' of Time Bank Hours between users of the service.

Any proposed expansion to the service to be discussed with local commissioners.

Recommendations

- 1) Notes the report, and the success of Support ongoing MWIA x 2 yearly
- 2) Notes the benefit of such an approach across other areas of the Haringey Strategic Partnership
- 3) Notes the proposal for the expansion of the Haringey Time bank across the borough which will be discussed with local commissioners
- 4) Notes the assistance that the Haringey Time bank has in ongoing support for community cohesion and achievement for statutory bodies against key performance targets.

For more information contact:

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Mental Well-Being Impact Assessments (MWIA):

- 1) Proposal for ongoing Mental Well-being Impact Assessments within Services
- 2) Outcome of Northumberland Park Time Bank MWIA

1) Proposal for ongoing Mental Well-being Impact Assessments within Services

A group of multi-agency staff have been trained in MWIA as a result of Well London funding. These are 6 staff from Public Health and Commissioning HTPCT, Mental Health Commissioning LBH, 2 Occupational Therapists from BEHMHT and 1 member from the Mental Carers Support Association.

The emerging Joint Mental Health Strategy will promote MWIA as a method to include consideration for mental well being in all projects under development. It was agreed at the Health and Wellbeing subgroup in March that the staff who have been trained in MWIA will continue to use their skills and train up staff to complete them where policy is being reviewed. The proposal is for 2 MWIA's to be undertaken each year by the above team, with 2 staff from each policy area involved in the assessment in order to skill them up in the process. In this way we can skill up the workforce to undertake their own MWIA when planning/reviewing a project. This is particularly important to retain these skills within the borough.

In order to do this the Partnership would need to identify projects in the planning/review stage which would be appropriate to undertake a MWIA and also support the staff to complete the assessments, which take approximately 4-5 days in total, from planning, completing assessment and report writing. A process by which the MWIA will need to be agreed and agree how to take forward recommendations.

2) Outcome of Northumberland Park Time Bank MWIA

“How People feel is not an elusive of abstract concept, but a significant public health indicator, as significant as rates of smoking, obesity and physical activity” (Department of Health, 2001)

Local Impact:

“ I know a few more people that I can call on if I need a bit more help. It’s like a tonic if you’re on your won. It’s nice to be involved with something you can have a say about. To see when you “swap” with others, someone else benefits from a skill that you have.”

Time banks were invented in the mid-1980s in the US as a response to the erosion of social networks and informal neighbourhood support which were perceived as the bedrock of society (Cahn and Rowe, 1998). The idea was brought to the UK in 1996 and the first UK Time Bank was established in 1998 in Gloucester under the name Fair Shares¹.

In 2002 a national survey of Time Bank coordinators across the UK found that there were 36 active Time Banks with an average of 61 participants each (Seyfang and Smith, 2002). Since then, the idea has grown and by 2005 there were 70 active Time Banks across the UK with a further 70 being developed and, an estimated 4000 participants, who have exchanged over 210,000 hours.² Time Bank in the UK is now developed in a range of settings where involvement of residents and service users can have beneficial impacts, for example, health care, regeneration, education and community development. (Burns and Smith, 2004).

In its basic form, a Time Bank rewards local people for helping others. For every hour a person spends helping someone, they get an hour of time in return in the form of a ‘time credit’. They can ‘spend’ this time credit asking for help themselves. The principles being recognising people as assets and that everyone has skills to share; redefining work to include the unpaid ‘core economy’ of work in the neighbourhood and community; nurturing reciprocity and exchange rather than dependency.

The time Bank fits into the LBH and Primary Care Trust’s strategies aimed at supporting and encouraging community engagement, participation, neighbourhood support and general well-being.

The aims of this Mental Well-Being Impact Assessment (MWIA) are to:

- To identify how Northumberland Park Time Bank impacts on the mental health and well-being of its members
- To identify ways in which the project might maximise its positive impacts and minimise its negative impacts

¹ Gill Seyfang. Time Banks and the Social Economy: Exploring the UK Policy Context. Centre for Social and Economic Research on the Global Environment, School Environmental Sciences, University of East Anglia, Norwich, UK 2006.

² Source: Time Banks UK, 2005.

- To develop indicators of mental well-being that can be used to measure, evaluate and improve the mental well being of the Time Bank members.

Northumberland Park Time Bank

Northumberland Park Time Bank is open to all members of the community, irrespective of their age, gender, religion, mental or physical disabilities and other circumstances. It hopes to make a difference in this community by generating community spirit; offering practical support to residents; promoting healthy lifestyles; reducing anti social behaviour; increasing the skills and confidence of local people by promoting self worth; offering support to local community and voluntary groups; improving intergenerational relationships and; enhancing social network.

At present, Haringey borough has only one Time Bank located in Northumberland Park. In its present form, the Northumberland Park Time Bank is being managed by one part time member of staff employed 18 ½ hours per week. Support is given by line manager from Groundwork who are delivering and funding the project and an advisor who is employed for one day per month. The Time Bank received funding of £30,000 from Healthy Communities for the financial year 2008/09 to cover the salary and National Insurance of the part -time Time Broker, plus support from line manager and advisor. It is also to provide for events, room bookings, volunteer expenses, equipment and so on. This funding is available only on a year on year basis and is not guaranteed.

Method

This MWIA was conducted by organising a workshop for members and broker of the Northumberland Park Time Bank and, using the Well London MWIA toolkit, which together a tried and tested Health Impact Assessment methodology with the evidence around what promotes and protects mental well-being. The toolkit enables people to consider the potential impacts of a policy, service or programme on mental health and well-being and can lead to the development of stakeholder indicators. It captures the DOH ‘Making it Happen Guidance’ for mental health promotion (2001) identifies four key areas that promote and protect mental well-being namely:

- Enhancing Control
- Increasing Resilience and Community Assets
- Facilitating Participation
- Promoting Inclusion

Hence, the toolkit helps participants identify things about a policy, programme or service that impact on feelings of control, resilience, participation and inclusion and therefore their mental health and well-being.

Time Bank Value of Hours Exchanged

Activity	No. exchanged	hours	Market value per hour	Total value
Office skills	244		£15.00	£3,660.00

Cooking	80	£15.00	£1,200.00
Attending meetings	43	£12.00	£516.00
Computer skills	122	£30.00	£3,660.00
Visiting	80	£11.00	£880.00
Gardening	25	£40.00	£1,000.00
Assisting at events	22	£11.00	£242.00
Telephone befriending	160	£11.00	£1,760.00
Reflexology	42	£50.00	£2,100.00
DIY simple	16	£69.00	£1,104.00
Errands	8	£11.00	£88.00
Dog walking	25	£15.00	£375.00
Caring	7,000	£10.00	£70,000.00
Total			£86,585.00

The cost of the Part-Time Time Bank Co-ordinator is £30,000. The social capital released as a direct result of the time bank that can be costed at market value is £86,585.00, which is a free good to society of £56,585.00. Note that the value of carers swaps is the largest swap currently within the time bank, however these could increase if the capacity of the broker was increased.

The value of carers is the largest exchange of free good, which is providing a value for voluntary caring. Caring does not attract a high value and often is provided at a large personal and financial loss for the carers.

Time is also donated by volunteers who do not want to exchange their credits as they get enough satisfaction and personal gain by using their skills. The current value of credits available to time bank members is dependant on the number of hours that an individual volunteers for ie 1 hour of volunteering equals 1 hour that can be swapped for something that they want. An example of this is one lady, who is building up her credits for a particular old lady, so that she can have some DIY undertaken in her home, which she otherwise would not be able to afford and also to have her shopping done. She currently has 52 hours banked, which would be £3,588 if exchanged for DIY. Another client has built up 40 hours tidying up communal garden space which she is donating for older people.

The value of the impact, outlined in the MWIA, cannot be costed but we can see from the comments of participants that it supports mental well being by promoting social cohesion, integration, reduction of isolation, fostering a feeling of individual worth through utilisation of skills for the community. Examples of the impact that cannot be measured are outlined in the case studies in Appendix 1.

Membership

Time Bank currently has 71 individual members and 9 organisational members. There have been over 2000 hours exchanged so far this year for:

- Caring
- IT lessons
- Befriending
- Gardening
- Dog walking
- Hospital visiting
- Shopping
- Reflexology

Statistics

- Female members outnumber male members almost 2 - 1
- Largest number of members fall in the 50+ age group
- Greatest number of members live with family - this accounts for all carers
- Second greatest number live alone

Members have joined from a number of areas:

- N17 (33%)
- N8 (22%)
- N22 (20%)
- N15 (10%)
- N10 (8%)
- N4 (6%)
- EN3 (1%)

Requests for help –

DIY	22%
Gardening	22%
Computer skills	20%

Other requests include help with:

Massage/relaxation, help with sewing/knitting, occasional home help, help with heavy lifting/moving, companionship/visiting, accompanying to appointments/occasional lifts.

Outstanding Need

There are over 40 people on the waiting list that have not yet been matched with a volunteer for a number of reasons including:

- Shortage of volunteers with the requisite skills – i.e. DIY
- Although the TB was set up to operate in the Northumberland Park (N17) area, people have joined through other organisations from all over the borough – N4, N8, N15, N10. Many of these members are elderly and require help with basic skills such as gardening, simple decorating and DIY – there is a need to recruit volunteers local to these areas who can provide the necessary skills.
- Waiting for CRB checks to be completed
- Need for Time broker to be able to dedicate more time to recruiting people with the necessary skills

Trend

Requests for help from TB are increasing – it is important that TB is not viewed as a replacement for services that statutory agencies should be providing. Members are increasingly asking for help in the following areas:

- Occasional transport for hospital appointments, shopping etc
- Gardening
- DIY and simple decorating
- At home hairdressing (simple)
- Basic knowledge of domestic electrical equipment
- IT skills
- Dance and exercise classes
- Massage and relaxation

Recommendations from MWIA

Increasingly referring clients to Time Bank to enable access to volunteering opportunities for people who may be coping with effects of long term mental health issues such as depression and anxiety or have drug related issues.

The Time Bank is a valuable source of access for emotional and practical support, in a time where finances are strained and potential for development limited. Extending the remit of the time bank will enhance the strength of communities and build resilience plus enable statutory organisations to meet key local objectives.

Many of the clients from other projects have a history of being let down therefore it is essential that Time Bank can increase their confidence by meeting expectations. To help achieve this the following considerations need to be addressed:

- Supporting the steering committee to enable the Time Bank to grow as an independent organisation and apply for funding in its own right, with representation across partnerships to support it's development in line with local strategic objectives.
- Widen the remit of the time bank and availability across the borough through increasing Time Brokerage to meet demand.
- Funding to allow the project to run for the next 3 years to enable sustainability
- Accessible premises where members can meet regularly and arrange skill swaps
- Increased input from other agencies either by providing volunteers to regularly lead workshops or to provide training

Only by providing a reasonable period of time can we hope to create a network of sustainable relationships that will allow people to build up trust and confidence to continue the aims of Time Bank beyond funding possibilities.

Additional Supporting Evidence – See MWIA

Stafford, Mai, et al.

Neighbourhood social capital and common mental disorder : testing the link in a general population sample.

Health and Place 2008; 14 (3): 394-405 (September 2008)

General population multilevel studies of social capital and mental health are few in number. This multilevel study examined external measures of neighbourhood social capital and common mental disorders [CMD]. Main effects and stress buffering models were tested. Based on data from over 9,000 residents in 239 neighbourhoods in England and Scotland, there was no evidence of a main effect of social capital. For people living in deprived circumstances only, associations between neighbourhood social capital and CMD were seen. Elements of bridging social capital (contact amongst local friends) were associated with lower reporting of CMD. Elements of bonding social capital (attachment to neighbourhood) were associated with higher reporting of CMD. Findings provide some support for the hypothesis that social capital may protect against CMD, but indicate that initiatives should be targeted to deprived groups, focus on specific elements of social capital and not neglect the important relationship between personal socioeconomic disadvantage and CMD. 3 figs. 3 tables 58 refs. [Abstract]

Case Studies

Case Study 1

C was referred to Time Bank by her case worker. C has a long term CMI – depression – that has led to her being unable to work which has greatly impacted on her sense of self worth. She has become estranged from her family who feel unable to cope with her depression and now lives alone feeling quite isolated.

C's initial request was to be put in touch with someone that she could share weekends away with. Time broker suggested that C might like to accompany her to a group that meets every Monday to cook and eat healthy food together while socialising. C agreed to this and as a result she has made a couple of friends and they are presently planning some days out. She has also signed up to a 12 week canoeing course and is even talking about going on to teach others to canoe.

C felt she had nothing to give when she first joined the time bank but is now willing to volunteer her time within the group by helping with cooking, setting up and tidying away. She is beginning to feel valued and likes the fact that by doing things within the group she can earn the credits that she can use to continue with canoe lessons or perhaps exchange for cinema tickets when available.

Case study 2

H has been caring for his wife for a number of years following her diagnosis of dementia. He was made redundant from his job and decided to take

advantage of an IT course believing that this would allow him to secure employment in a new field.

However after several interviews he was still unemployed and his lack of success coupled with his wife's deteriorating condition led to him becoming quite depressed.

One of the most popular requests among the users was to learn IT and H was more than happy to give lessons. He now runs a class every other Tuesday and has a regular attendance of around 5.

Members who attend the class have told me they were put off signing up to other classes because they felt intimidated by the fact that others would be 'younger', 'smarter', 'understand things better' but felt at ease with H because they knew him, knew the problems he was facing were very similar to theirs and also knew the Centre they were going to do the lessons in.

H said ' I thought if I got a qualification in computing skills I could get a job – it felt after a while that no one wanted me. I've worked since I was 15 and to feel I couldn't provide for my wife when she most needed me was a blow. I don't think I want to get anything back from time bank at the moment – I just love coming here and helping other people understand computers a bit better. We have a lot of fun.'

Case study 3

J has been attending the Carers Centre for a number of years. She was caring for her husband until he recently passed away. She continued to be involved with the Centre but was also feeling quite isolated as she was now living alone. She has practised reflexology for a number of years but felt uneasy inviting people to her home to do this – she has now started to offer reflexology sessions within the Northumberland Park Women and Children Centre where she has a regular group of 3-4 women every Tuesday. Due to writing about this session in the last newsletter we have received some requests from other people who would like to come along to her sessions. J said 'I feel needed again, I love doing reflexology, it gives me an energy that I didn't have for a long time'

Case study 4

D recently did some DIY for a young mother who lives alone with a young baby – her son was in long term foster care because of her depression and inability to cope with him. As a result of some basic repairs being done on her home she has reported feeling much more positive and is now able to have her son home for weekend visits. D says' I now always say hello to this person when I see them out, its another way of meeting people and bringing communities together. I didn't get anything for the work but I earned time credits. I have arthritis and you never know what you might need in the future – maybe help with my shopping – at the moment I don't need anything but I know my credits are in the bank for when I do. I also enjoyed the Give or Take day – I took an old camera and brought home a VCR'

Case study 5

We have recently begun offering the women who attend the Living Under One Sun group the chance to learn and share skills such as knitting and crochet, one of the women invited her neighbour to come along – she has diagnosed asperger syndrome and told us quite plainly that knitting was not for her so could she do some clay workshops with the women. She has been doing this for approx 5 weeks now. As part of the syndrome she can be quite plain spoken and some of the women did not know how to respond to her bluntness, however they are now beginning to recognise that she has a talent with the clay and have reconsidered their initial assumptions about her.

Feedback

'Its all about giving you own talents to others. You need to use your talents or you become miserable and it affects your health.'

Once you retire from a job you need something to stimulate the brain – I am stretched, it keeps me fit and away from the doctor. By getting involved with TB I can forget about my worries for a while.

'I know a few more people that I can call on if I need a bit of help. Its like a tonic if you're on your own. To see when you 'swap' with others how they benefit from the skill you have. I have met a reflexologist through TB and can have a lovely massage every week, something I could never afford on a pension'

You maintain your individuality – I brought my percussion instruments to our social event – it was fantastic to see other people using the instruments I had made and having so much fun.

There is always a real person at the end of the phone to help me out when I need it.

It is good to know that TB members are checked out and not 'cowboys' –I've had bad experiences in the past.

On the Give or Take days-

'Great, can we have more'

'I've had a good clearout – and brought back some things I need'

'I met some nice people today and had a chat while I was browsing around the books – hopefully I will see these people again when I am in Park Lane and I will be able to say hello to them'

From local councillor –'it is really good to see this space being used for such as good event – it has also made more people aware of what is on offer in the Resource Centre'

100% of people asked said they thought it was a great idea and would like to see more of these events

100% of people asked said the organisation of the event was good or very good

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Well London

Communities working together
for a healthier city

Northumberland Park Time Bank

Mental Well-being Impact Assessment (MWIA)

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LOTTERY FUNDED

South London and Maudsley



NHS Foundation Trust

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THE IMPACT OF NORTHUMBERLAND TIME BANK ON MENTAL WELL-BEING

1. EXECUTIVE SUMMARY

Time banks were invented in the mid-1980s in the US as a response to the erosion of social networks and informal neighbourhood support which were perceived as the bedrock of society (Cahn and Rowe, 1998). The idea was brought to the UK in 1996 and the first UK Time Bank was established in 1998 in Gloucester under the name Fair Shares¹.

In 2002 a national survey of Time Bank coordinators across the UK found that there were 36 active Time Banks with an average of 61 participants each (Seyfang and Smith, 2002). Since then, the idea has grown and by 2005 there were 70 active Time Banks across the UK with a further 70 being developed and, an estimated 4000 participants, who have exchanged over 210,000 hours.² Time Bank in the UK is now developed in a range of settings where involvement of residents and service users can have beneficial impacts, for example, health care, regeneration, education and community development. (Burns and Smith, 2004).

In its basic form, a Time Bank rewards local people for helping others. For every hour a person spends helping someone, they get an hour of time in return in the form of a 'time credit'. They can 'spend' this time credit asking for help themselves. The principles being recognising people as assets and that everyone has skills to share; redefining work to include the unpaid 'core economy' of work in the neighbourhood and community; nurturing reciprocity and exchange rather than dependency.

The time Bank fits into the LBH and Primary Care Trust's strategies aimed at supporting and encouraging community engagement, participation, neighbourhood support and general well-being.

The aims of this Mental Well-Being Impact Assessment (MWIA) are to:

- To identify how Northumberland Park Time Bank impacts on the mental health and well-being of its members
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- To develop indicators of mental well-being that can be used to measure, evaluate and improve the mental well being of the Time Bank members.

Northumberland Park Time Bank

Northumberland Park Time Bank is open to all members of the community, irrespective of their age, gender, religion, mental or physical disabilities and other circumstances. It hopes to make a difference in this community by generating community spirit; offering practical support

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to residents; promoting healthy lifestyles; reducing anti social behaviour; increasing the skills and confidence of local people by promoting self worth; offering support to local community and voluntary groups; improving intergenerational relationships and; enhancing social network.

At present, Haringey borough has only one Time Bank located in Northumberland Park. In its present form, the Northumberland Park Time Bank is being managed by one part time member of staff employed 18 ½ hours per week. Support is given by line manager from Groundwork who are delivering and funding the project and an advisor who is employed for one day per month. The Time Bank received funding of £30,000 for the financial year 2008/09 to cover the salary and National Insurance of the part -time Time Broker, plus support from line manager and advisor. It is also to provide for events, room bookings, volunteer expenses, equipment and so on. This funding is available for only 3 years.

It currently has 71 individual members and 9 organisational members. There have been over 2000 hours exchanged so far in 2008 for activities such as caring, IT lessons, befriending, gardening, dog walking, hospital visiting, shopping and reflexology. Requests for help from Time Bank are increasing and members are increasingly asking for help in transport for hospital appointments, shopping, gardening, DIY and simple decorating, home simple hairdressing, basic knowledge of domestic electrical equipment, IT skills, dance and exercise classes and massage and relaxation. Other projects are also increasingly referring clients to Time Bank as the volunteering opportunities offered are 'soft option' which is attractive to people who may be coping with effects of long term mental health issues such as depression and anxiety or have drug related issues.

There are over 40 people on the waiting list who we have not yet been able to match with a volunteer partly because delay in return of CRB checks and shortage of volunteers with the requisite skills.

Method

This MWIA was conducted by organising a workshop for members and broker of the Northumberland Park Time Bank and, using the Well London MWIA toolkit, which together a tried and tested Health Impact Assessment methodology with the evidence around what promotes and protects mental well-being. The toolkit enables people to consider the potential impacts of a policy, service or programme on mental health and well-being and can lead to the development of stakeholder indicators. It captures the DOH 'Making it Happen Guidance' for mental health promotion (2001) identifies four key areas that promote and protect mental well-being namely:

- Enhancing Control
- Increasing Resilience and Community Assets
- Facilitating Participation
- Promoting Inclusion

Hence, the toolkit helps participants identify things about a policy, programme or service that impact on feelings of control, resilience, participation and inclusion and therefore their mental health and well-being.



Results

The participants believed that the Time Bank had most impact on the older and younger population in the community as well as the disabled.

Enhancing control- participants reported that the Time Bank has improved their skills and attributes as well as opportunities for self- help. They identified lack of transportation for member as having a negative impact on the gains from the Northumberland Park Time Bank.

Increasing resilience and community assets- participants reported that the Time Bank has positive impacts on their sense of belonging; it decreases isolation and increase communication. They also believed that it builds networks and trust in the community; increase relaxation and enables inter- generations of cultures. They expressed concerns around trust been broken. The Time Bank has already addressed this concern by conducting a CRB check on all potential members. They believed that funding for the time-bank is inadequate and unsecured; there is also lack of provision of a building for the project and, this might have negative impacts and discourage members.

Participation- participants reported that the Time Bank increased their feeling of involvement, more people are wanting to participate and there is demand for it. However, they expressed their concern regarding funding for the project and, that people from other borough might find access difficult because the service is only available in Northumberland Park. There were concerns about potential loss of workers if their expectation cannot be met.

Inclusion- with regard to inclusion, participants reported the Time Bank having a positive impact on trust between members and the community (allowing neighbours to come into your homes and being allowed to go into people's homes). Time Bank also increased their confidence and is inspirational; they feel safer at home; and their isolation and anxiety reduced.

Recommendations

The users and project workers of Time Bank valued the work Northumberland Park Time bank does. People from outside the area also wanted to access the Time Bank and were willing to pay to get there. People felt they could be creative again and ideas could start to be planned quickly as Time Bank is about skills and not about money.

The following recommendations are therefore made:

- There is need for the Time Bank to have a full- time coordinator and low cost accessible premises for the project where members can meet regularly and arrange skill swaps. Funding streams should be identified and the Lottery Funds could be one of the options.
- Insurance for Time Bank members helping with transportation should be looked into to improve access for members.
- Staff from the council, PCT, MH staff to become more involved in the working of the Time Bank.
- Time Bank coordinator should link up with other successful Time Bank groups London wide to share ideas and support each other. Links to Age Concern and Mental Health bridging the gap should also be made.



- A meeting should be held with Director of Public Health to discuss the findings from the MWIA. The report should also be feed back to the Well-being Partnership Board.
- Membership of the steering group should be reviewed to include Well-being Partnership Board/Public Health representation. Regular support should be given to the Time Bank by the steering group.
- Risk management training should be made available to the co-ordinator and members.
- Regular social events to support the members, helping to break down barriers in the neighbourhood, isolation and support co production/Time Banking.
- The Time Bank should be linked into local area agreements (LAAs).
- The Time Bank should encouragement more young people to become involved in Time Bank exchange of their skills.
- There is need to show case the benefits of the Time Bank to the authorities, political leaders and so on.
- More activities and learning for members should be made available within the Time Bank. Increased input from other agencies either by providing volunteers to regularly lead workshops or to provide training should be sought.



2. INTRODUCTION

Time banks were invented in the mid-1980s by US civil rights lawyer Edgar Cahn as a response to the erosion of social networks and informal neighbourhood support which Cahn perceives as the bedrock of society (Cahn and Rowe, 1998).

A Time Bank in its basic form, rewards local people for helping others. For every hour a person spends helping someone, they get an hour of time in return in the form of a 'time credit'. They can 'spend' this time credit asking for help themselves. The principles of Time Banking are: recognising people as assets and that everyone has skills to share; redefining work to include the unpaid 'core economy' of work in the neighbourhood and community; nurturing reciprocity and exchange rather than dependency

The idea was brought to the UK in 1996 and the first UK Time Bank was established in 1998 in Gloucester under the name Fair Shares³. In 2002 a national survey of Time Bank coordinators across the UK found that there were 36 active Time Banks with an average of 61 participants each (Seyfang and Smith, 2002). Since then, the idea has grown and by 2005 there were 70 active Time Banks across the UK with a further 70 being developed and, an estimated 4000 participants, who have exchanged over 210,000 hours.⁴ Time Bank in the UK now developed in a range of settings where involvement of residents and service users can have beneficial impacts – e.g. health care, regeneration, education and community development - and this user-based delivery of public services is termed 'co-production' (Cahn, 2000; Burns and Smith, 2004).

Time banking is a practical example of co-production in action that is producing exciting new initiatives on the ground, including developing new ways of service commissioning – by linking people so they can exchange services and skills with each other. Three successful time banking projects are King's Cross Time Bank (KCTB) where a consortium of three locally based organisations, including one with a co-production and Time Bank coordinator successfully bid for a £2 million tender to provide day-care services to people with mental health problems; A Community Volunteers Time Bank that tackles social isolation among older people; and Rushey Green Time Bank that provides patient-centred holistic care for 7000 patients in Catford.

Co-production relates to key local authority objectives including personalisation, place shaping, the duty to engage and health and well-being

Northumberland Park Time Bank is open to all members of the community, irrespective of their age, gender, religion, mental or physical disabilities. It hopes to make a difference in this community by generating community spirit; offering practical support to residents; promoting healthy lifestyles; reducing anti social behaviour; increasing the skills and confidence of local people by promoting self worth; offering support to local community and voluntary groups; improving intergenerational relationships and; enhancing social network

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- To identify how Northumberland Park Time Bank impacts on the mental health and well-being of its members
- To identify ways in which the project might maximise its positive impacts and minimise its negative impacts
- To develop indicators of mental well-being that can be used to measure, evaluate and improve the mental well being of the Time Bank members.

3. NORTHUMBERLAND PARK TIME BANK

Northumberland Park Time Bank is designed to involve all members of the community, regardless of age, gender, religion, mental or physical disabilities. It hopes to make a difference in this community by:

- * Generating community spirit
- * Offering practical support to residents
- * Promoting healthy lifestyles
- * Reducing anti social behaviour
- * Increasing the skills and confidence of local people by promoting self worth
- * Offering support to local community and voluntary groups
- * Improving intergenerational relationships
- * Enhancing social network

Staffing- There is one part time member of staff employed 18 ½ hours per week. Support is given by a line manager from Groundwork who are delivering the project. There is also support from an advisor who is employed for one day per month.

Funding- Time Bank received funding of £30,000 for the financial year April 08 – March 09. This is to cover the salary and National Insurance of the part -time Time Broker, plus support from line manager and advisor. It is also to provide for events, room bookings, volunteer expenses, equipment and so on.

Membership- Time Bank currently has 71 individual members and 9 organisational members. There have been over 2000 hours exchanged so far in 2008 for:

- Caring
- IT lessons
- Befriending
- Gardening
- Dog walking
- Hospital visiting
- Shopping
- Reflexology



There are over 40 people on the Time Bank waiting list who have not yet been able to be matched with a volunteer for a number of reasons including:

- Shortage of volunteers with the requisite skills – i.e. DIY
- Although the Time Bank was initially set up to operate in the Northumberland Park (N17) area, people have joined through other organisations from all over the borough – N4, N8, N15, N10. Many of these members are elderly and require help with basic skills such as gardening, simple decorating and DIY – there is a need to recruit volunteers local to these areas who can provide the necessary skills.
- Waiting for CRB checks to be completed is also an issue causing delays for potential volunteers.

Trend- Requests for help from Time Bank are increasing –members are increasingly asking for help in the following areas:

- Occasional transport for hospital appointments, shopping etc
- Gardening
- DIY and simple decorating
- At home hairdressing (simple)
- Basic knowledge of domestic electrical equipment
- IT skills
- Dance and exercise classes
- Massage and relaxation

Other projects are also increasingly referring clients to Time Bank as the volunteering opportunities offered are 'soft option' which is attractive to people who may be coping with effects of long term mental health issues such as depression and anxiety or have drug related issues.

3. AIMS OF THE MWIA ASSESSMENT

- To identify how Northumberland Park Time Bank impacts on the mental health and well-being of its members
- To identify ways in which the project might maximise its positive impacts and minimise its negative impacts
- To develop indicators of mental well-being that can be used to measure, evaluate and improve the mental well being of the Time Bank members.



4. WHAT DO WE MEAN BY MENTAL HEALTH AND WELL-BEING?

For the purpose of this impact assessment project we define mental health and well-being as:

“ ..The emotional and spiritual resilience which enables us to survive pain, disappointment and sadness. It is a fundamental belief in one’s own and others dignity and worth” (Health Education Authority, 1997)

Put simply our mental well-being is about how we think and feel.

6. METHODOLOGY

The Mental Well-being Impact Assessment (MWIA) is a two part screening toolkit that enables people to consider the potential impacts of a policy, service or programme on mental health and well-being and can lead to the development of stakeholder indicators. The toolkit brings together a tried and tested Health Impact Assessment methodology with the evidence around what promotes and protects mental well-being.

The DOH ‘Making it Happen Guidance’ for mental health promotion (2001) identifies four key areas that promote and protect mental well-being:

- Enhancing Control
- Increasing Resilience and Community Assets
- Facilitating Participation
- Promoting Inclusion

The MWIA is based on these four key areas and helps participants identify things about a policy, programme or service that impact on feelings of control, resilience, participation and inclusion and therefore their mental health and well-being. In this way the toolkit enables a link to be made between policies, programmes or service and mental well-being that can be measured.

“How people feel is not an elusive or abstract concept, but a significant public health indicator; as significant as rates of smoking, obesity and physical activity” (Department of Health 2001).

The MWIA Workshop

The purpose of the workshop is to work with stakeholders to identify from their perspective the key potential impacts that Northumberland Park Time Bank has on the mental well-being of the participants. It will also identify actions to maximise positive impacts and minimise potential negative impacts on mental well-being.



Table 1: Workshop participants

Role	No.	%
Time Bank Participants	11	84.6
Time Bank	1	7.7
Other project workers	1	7.7
Total	13	100.0%

6. RESULTS

What does mental well-being mean to the stakeholders in the project?

The participants were asked to come up with words that they associate with mental well-being. They were then asked to group them and link the words to come up with a definition of mental well-being. They were also asked to appraise different definitions of mental well-being by notable individuals and organisations such as the World Health Organisation (WHO).

After this exercise, the participants preferred the following definitions:

'Mental well-being is ... about being emotionally healthy, feeling able to cope with normal stresses, and living a fulfilled life. It can be affected by things like worries about money, work, your home, the people around you and the environment you live in. Your well-being is also affected by whether or not you feel in control of your life, feeling involved with people and communities, and feelings of anxiety and isolation'. (Coggins & Cooke, 2004).

Populations most Likely to be Affected by the Northumberland Park Time Bank

Public mental health aims to promote and protect the mental health of the whole population, while recognising that (as is the case for physical health) levels of vulnerability to poor mental health will vary among different population groups.

A profile of the community/ies that are living in the area that this Time Bank is targeting suggests the following characteristics and needs:

- Northumberland Park is one of the most deprived wards in Haringey; located in the north eastern part of the borough. It is one of the most deprived 5th of areas in the country.
- It is one of the two most populous wards in Haringey. The population of Northumberland Park is growing - it is expected to increase from an estimated 13,239 residents in 2008 to 14,005 in 2011. The ward has the highest concentration of children under the age of 5 of 10.5% in 2008. The borough also has the highest birth rates of nearly 80 births per 1000 females aged 15- 44 years between 2003-05. Residents that aged 65 and over form about 8% of the population.
- The majority of residents are females representing 51.8% of the population in 2008.



- Northumberland Park is one of the most ethnically diverse wards in the country with majority of its residents belonging to the Black and Ethnic Minority (BME) group.
- According to the last census, 17.8% of its residents are living with a long-term illness a figure higher than average for the borough and England and Wales. Lower proportion of residents than Haringey as a whole and England and Wales also reported their health as being 'good'
- The Quality and Outcomes Framework (QOF) in March 2008 data suggests that north east Haringey, where Northumberland Park is situated, has a relatively higher proportion of mental health conditions in the practices when compared with Haringey average.

In order to identify those in Northumberland Park community that the local stakeholders consider to be affected by the Time Bank a discussion was facilitated. The findings are presented in table 2.

Table 2

Priority population group affected or targeted by your proposal
<ul style="list-style-type: none"> - Older people - Young people - People with disability

WHAT ARE THE KEY IMPACTS OF NORTHUMBERLAND PARK TIME BANK ON MENTAL HEALTH AND WELL-BEING?

The MWIA toolkit suggests a four-factor framework for identifying and assessing protective factors for mental well-being, adapted from Making it Happen (Department of Health 2001) and incorporates the social determinants that affect mental well-being into four factors that evidence suggests promote and protect mental well-being:

- *Enhancing control*
- *Increasing resilience and community assets*
- *Facilitating participation*
- *Promoting inclusion.*

Participants were introduced to the factors and asked to think about the Time Bank and rate how important it was to the participants and the potential impact that the service could have on it.



The Potential Impact of the Time Bank on Feelings of Control

Enhancing control - the evidence

A sense of agency (the setting and pursuit of goals), mastery (ability to shape circumstances/ the environment to meet personal needs), autonomy (self-determination/individuality) or self-efficacy (belief in one's own capabilities) are key elements of positive mental health that are related to a *sense of control* (Mauthner and Platt 1998; Stewart-Brown et al in press).

Enhancing control is fundamental to health promotion theory and practice, and is identified in the Ottawa Charter as a key correlate of health improvement:

“Health promotion is the process of enabling people to increase control over and to improve their health”. (Ottawa Charter for Health Promotion. WHO, Geneva, 1986.)

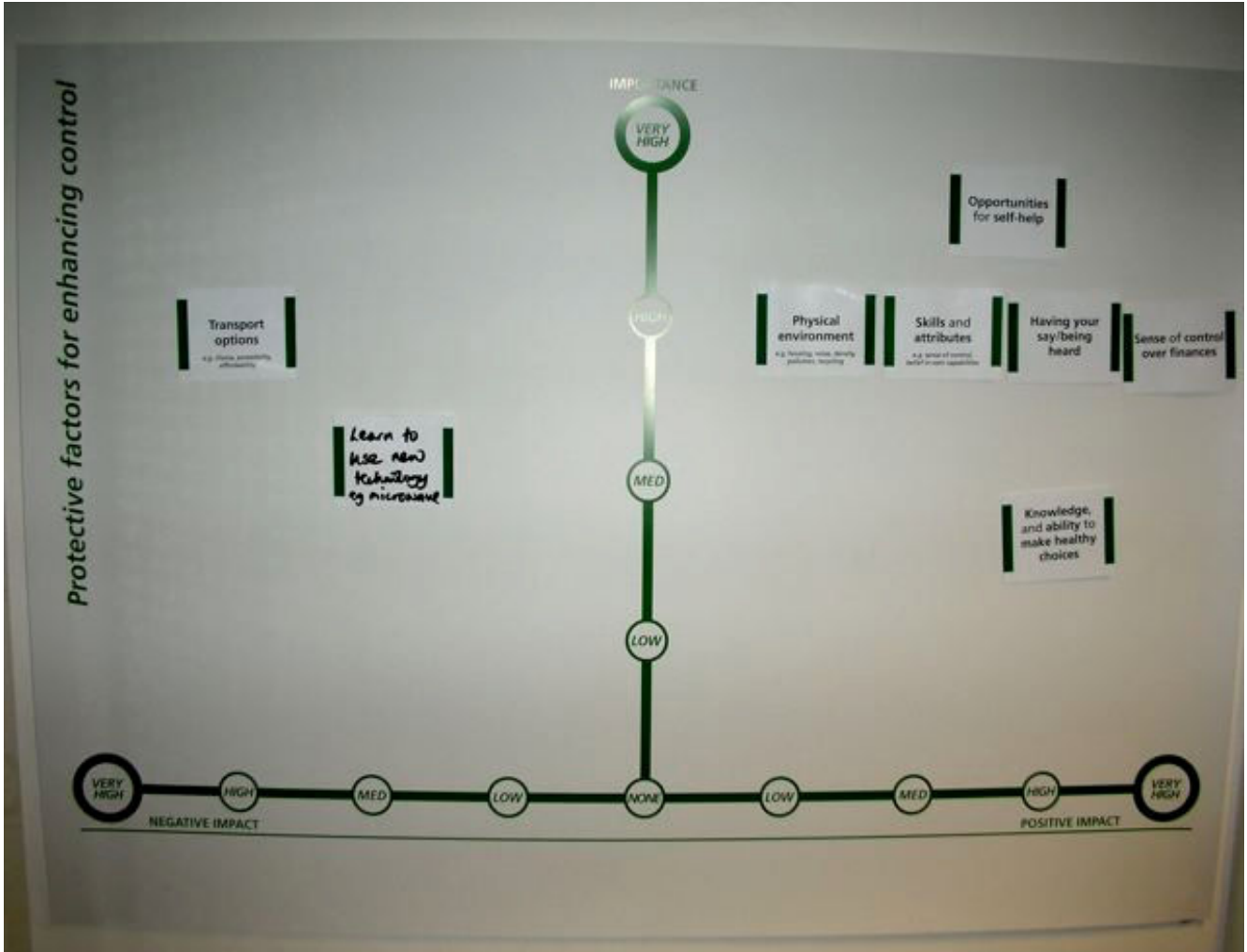
Lack of control and lack of influence (believing you cannot influence the decisions that affect your life) are independent risk factors for stress (Rainsford et al 2000). People who feel in control of their everyday lives are more likely to take control of their health (McCulloch 2003). Job control is a significant protective factor in the workplace, and this is enhanced if combined with social support (Marmot et al 2006).

Employment protects mental health; both unemployment and job loss increase risk of poor mental health: financial strain, stress, health damaging behaviour and increased exposure to adverse life events are key factors associated with job loss that impact on mental health (Bartley et al 2006). Job insecurity, low pay and adverse workplace conditions may be more damaging than unemployment, notably in areas of high unemployment (Marmot and Wilkinson 2006)

Participants were then invited to work between themselves to identify which of the factors that contribute to a sense of control that they felt Time Bank had the potential to have either a positive or negative impact and the degree of importance of that impact. The results are presented in figure 1.



Figure 1 Prioritisation Grid - Increasing control



Having identified these participants were invited to work through their top three priorities to identify in more detail the potential impacts and any recommendations that emerged.

The results are presented in table 3.



Table 3

Top priorities	Impacts of the Time Bank on control		Comments and Actions	Measure
	(+) Positive Impact	(-) Negative Impact		
Lack of transport		High	Make existing transport choices work better (co-ordinator to consider feeding this back) Private car hire and pay for petrol etc	
Opportunities for self- help	High		Dancing classes, salsa + all sorts (help socially to meet others and, Exercise, Relaxation, Massages and alternative therapies, Osteopathy.	
Skills and attributes	High	Lack of skills e.g. with new technology	Get more young people involved	



The Potential Impact of Time Bank on Resilience

Increasing resilience and community assets – the evidence

Emotional resilience is widely considered to be a key element of positive mental health, and is usually defined as the extent to which a person can adapt to and/or recover in the face of adversity (Seligman; Stewart Brown etc). Resilience may be an individual attribute, strongly influenced by parenting (Siegel 1999), or a characteristic of communities (of place or identity) (Adger 2000). In either case, it is also influenced by social support, financial resources and educational opportunities. It has been argued that focusing on ‘emotional resilience’ (and ‘life skills’) may imply that people should learn to cope with deprivation and disadvantage (Secker 1998). WHO states that interventions to maximise and take advantage of health assets can counter negative social and economic determinants of health, especially among vulnerable groups. The result is improved health outcomes. (www.euro.who.int/socialdeterminants/assets/20050628_1)

Good physical health protects and promotes mental health. Physical activity, diet, tobacco, alcohol consumption and the use of cannabis and other psychotropic substances all have an established influence on mental well-being. Capacity, capability and motivation to adopt healthy lifestyles are strongly influenced by mental health and vice versa. There is growing evidence of the link between good nutrition, the development of the brain, emotional health and cognitive function, notably in children, which in turn influences behaviour. (Mental Health Foundation 2006; Sustain 2006). Regular exercise can prevent some mental health problems (anxiety and depression), ameliorate symptoms (notably anxiety) improve quality of life for people with long term mental health problems and improve mood and levels of subjective well-being (Grant 2000; Mutrie 2000; Department of Health 2004). Both heavy drinking and alcohol dependence are strongly associated with mental health problems. Substance misuse may be a catalyst for mental disorder. (Alcohol Concern; Mental Health Foundation 2006; Royal College of Psychiatrists 2006)

Although the evidence is limited, spiritual engagement (often, but not necessarily expressed through participation in organised religion) is associated with positive mental health. Explanations for this include social inclusion and participation involving social support; promotion of a more positive lifestyle; sense of purpose and meaning; provision of a framework to cope with and reduce the stress of difficult life situations (Friedli, 2004; Aukst-Margetic & Margeti, 2005) (Idler *et al*, 2003); Mental Health Foundation 2006.

Low educational attainment is a risk factor for poor mental health; participation in adult education is associated with improved health choices, life satisfaction, confidence, self-efficacy and race tolerance. (Feinstein *et al* 2003; James 2001)

Communities with high levels of social capital, for example trust, reciprocity, participation and cohesion have important benefits for mental health (Campbell and McLean 2002; Morgan and Swann 2004). Social relationships and social engagement, in the broadest sense, are very significant factors in explaining differences in life satisfaction, both for individuals and communities.

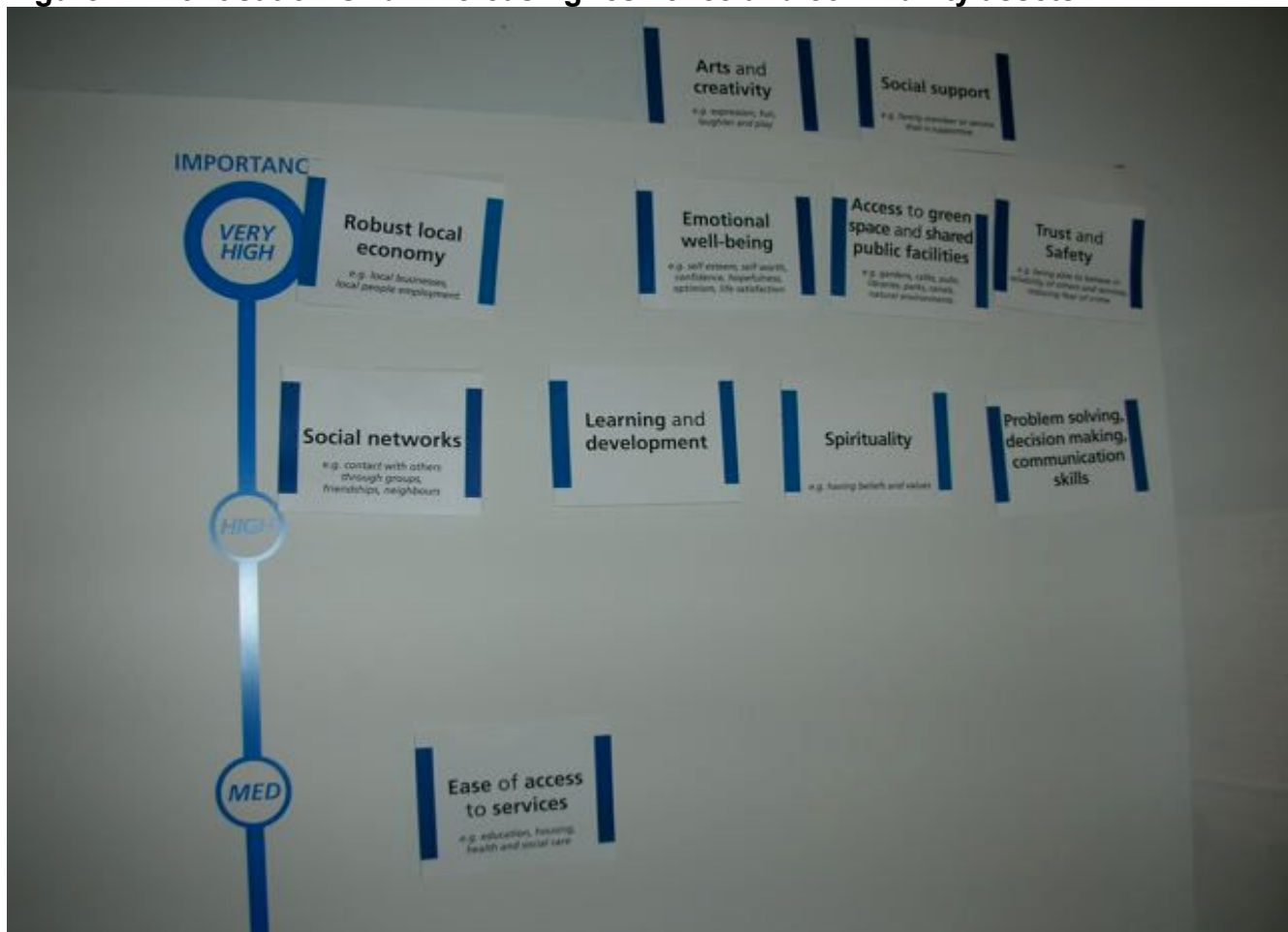


Neighbourhood disorder and fragmentation are associated with higher rates of violence; cohesive social organisation protects against risk, stress and physical illness; (Fitzpatrick and LaGory 2000; McCulloch 2003;

Physical characteristics associated with mental health impact include building quality, access to green, open spaces, existence of valued escape facilities, noise, transport, pollutants and proximity of services (Chu et al 2004; Allardyce et al 2005; Jackson 2002). Housing is also associated with mental health - independent factors for increasing risk of poor mental health (low SF36 scores) are damp, feeling overcrowded and neighbourhood noise (Guite et al 2006; HF Guite, Clark C and Ackrill G (2006). Impact of the physical and urban environment on mental well-being Public Health supplement in press).

Participants were then invited to work between themselves to identify which of the factors that contribute to a sense of resilience that the Time Bank had the potential to have either a positive or negative impact, and the degree of importance of that impact. The results are presented in figure 2.

Figure 2 Prioritisation Grid - Increasing resilience and community assets



Having identified these participants were invited to work through their top three priorities to identify in more detail the potential impacts and any recommendations that emerged.



The results are presented in table 4.

Table 4

Top priorities	Impacts of the Time Bank on resilience and community assets		Comments and Actions	Measure
	(+) Positive Impact	(-) Negative Impact		
Social support	<p>Sense of belonging</p> <p>Decrease social isolation</p> <p>Increase Communication</p>	<p>Forced Values</p> <p>Don't want to break comfort zones</p> <p>Cost of service/ materials</p>	<p>Identify funds</p> <p>Long- term plan: 5-10 years</p> <p>Needs venue focal point</p> <p>Partnership working</p> <p>Strategy</p> <p>Sustainability</p>	<p>Badge of Time Bank</p> <p>Managers</p> <p>Trying something new once a month - volunteer</p>
Trust and Safety	<p>Build network- You can phone support network</p> <p>Trust in the community</p> <p>Walk boundaries</p> <p>Increase relaxation</p> <p>Enabling inter - generation cultures (opportunity)</p>	<p>Time Bank needs to vet people</p> <p>CRB checks may exclude individuals whose skills would be valuable to Time Bank</p> <p>Trust can be broken</p> <p>Building</p> <p>Expectations</p>	<p>Identify funds</p>	
Access to green space and public shared facilities				



The Potential Impact of the Time Bank on participation and Inclusion

Facilitating participation and promoting social inclusion – the evidence

Feeling useful, feeling close to other people and feeling interested in other people are key attributes that contribute to positive mental wellbeing (Stewart Brown et al, Warwick Edinburgh, Measuring Mental Wellbeing Scale forthcoming).

Participation is the extent to which people are involved and engaged in activities outside their immediate household, and includes cultural and leisure activities, as well as volunteering, membership of clubs, groups etc., participation in local decision-making, consultation, voting etc.

Social inclusion is the extent to which people are able to access opportunities, and is often measured in terms of factors that exclude certain groups, e.g. poverty, disability, physical ill-health, unemployment, old age, poor mental health.

Although participation and social inclusion are different constructs, there is some overlap in the literature, and they are therefore considered together here.

Strong social networks, social support and social inclusion play a significant role both in preventing mental health problems and improving outcomes (SEU 2004). Social participation and social support in particular, are associated with reduced risk of common mental health problems and poor self reported health and social isolation is an important risk factor for both deteriorating mental health and suicide (Pevalin and Rose 2003). Similarly for recovery, social participation increases the likelihood, while low contact with friends and low social support decreases the likelihood of a recovery by up to 25% (Pevalin and Rose).

However, social support and social participation do not mediate the effects of material deprivation, which in itself is a significant cause of social exclusion (Mohan et al 2004; Morgan and Swann 2004; Gordon et al 2000).

Anti discrimination legislation and policies designed to reduce inequalities also strengthen social inclusion (Wilkinson 2006; Rogers and Pilgrim 2003).

There is some evidence that informal social control (willingness to intervene in neighbourhood threatening situations, e.g. children misbehaving, cars speeding, vandalism) and strong social cohesion and trust in neighbourhoods, mitigates the effects of socio-economic deprivation on mental health for children (Drukker et al 2006).

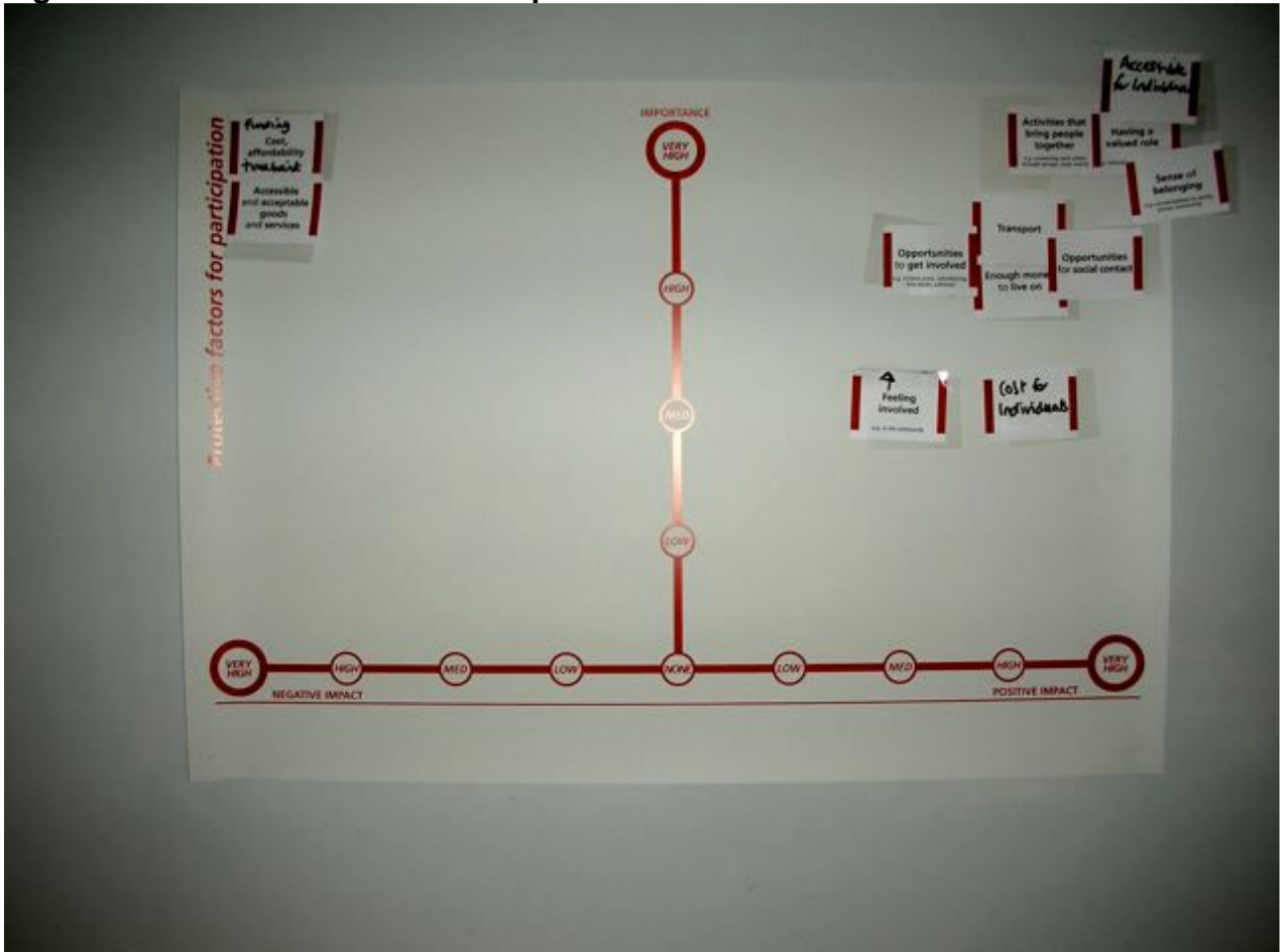
Higher national levels of income inequality are linked to higher prevalence of mental illness (Pickett et al 2006). Mental health problems are more common in areas of deprivation and poor mental health is consistently associated with low income, low standard of living, financial problems, less education, poor housing and/or homelessness. Inequalities are both a cause and consequence of mental health problems (Rogers and Pilgrim 2003; SEU 2004; Melzer et al 2004).

Participants were then invited to work between themselves to identify which of the factors that contribute to facilitating participation and reducing social isolation they felt the Time Bank



had the potential to have either a positive or negative impact, and the degree of importance of that impact. The results are presented in figure 3.

Figure 3 Prioritisation Grid - Participation



Having identified these participants were invited to work through their top three priorities to identify in more detail the potential impacts and any recommendations that emerged.



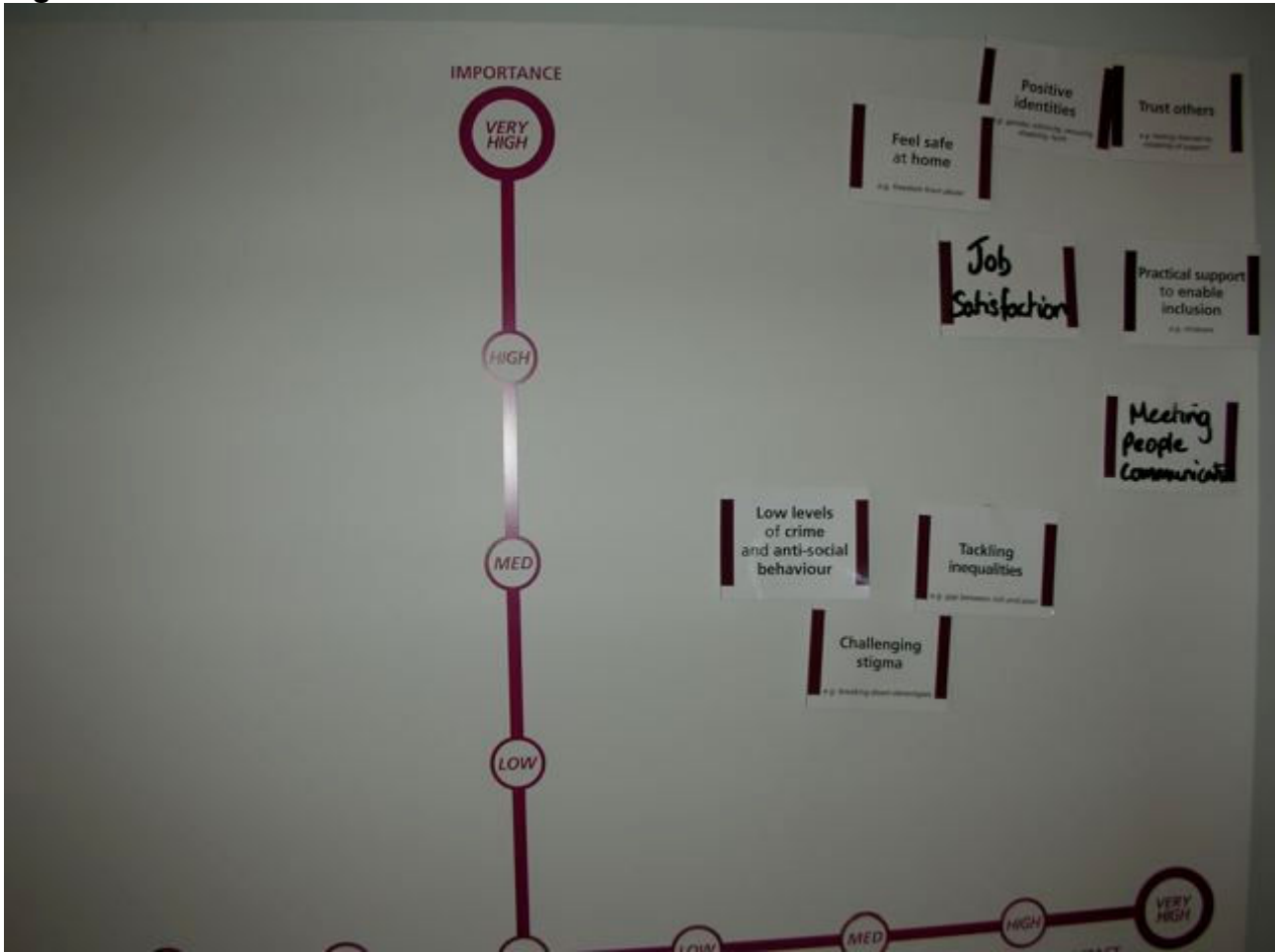
The results are presented in table 5.

Table 5

Top priorities	Impacts of the Time Bank on Participation		Comments and Actions	Measure
	(+) Positive Impact	(-) Negative Impact		
Funding for Time Bank (Cost and affordability)	<p>A lot of people want to participate</p> <p>People from outside Northumberland Park are accessing it</p>	<p>Time Bank only funded in Northumberland Park</p> <p>Potential loss of workers because of high expectations, pressure and over-demand.</p> <p>Potential negative effect if it fails</p>	<p>Let people be aware of the impact of the project</p> <p>Sell it to the politicians (MPs, Councillors) by writing, via drama and so on</p> <p>Individual case study outreach</p> <p>Highlight how it networks with other community projects</p>	
Accessible and acceptable goods and services	<p>Demand for Time Bank</p>	<p>Not valuable for children</p> <p>Only in Northumberland Park at the moment</p>	<p>Showcase the benefits</p> <p>Secure funding to widen access</p> <p>Roll out to other neighbourhood</p>	



Figure 4 Prioritisation Grid - Inclusion



Having identified these participants were invited to work through their top three priorities to identify in more detail the potential impacts and any recommendations that emerged.



The results are presented in table 6.

Table 6

Top priorities	Impacts of the Time Bank on Inclusion		Comments and Actions	Measure
	(+) Positive Impact	(-) Negative Impact		
Trust others	Allowing others into your home Motivating people to be involved Increases confidence	Open yourself to be let down	On- going regular vetting of Time Bank users Opportunity to share anxieties about gaining support from Time Bank users	
Feel safe at home	Decreases anxiety Time Bank members are vetted Reduces isolation			
Positive identities	Changes views Trying something new Inspirational	It might reinforce stereotypes		



Summary

The stakeholders identified eleven (11) key determinants of mental well-being that were both of high importance and had a high impact. A focus on these for the Time Bank will help promote the mental well-being of the users.

MWIA Area	Increasing Control	Resilience	Participation	Inclusion
Key Determinants	Lack of transport priority	Social support	Funding for Time Bank (Cost and affordability)	Trust others
	Opportunities for self- help	Trust and Safety	Accessible and acceptable goods and services	Feel safe at home
	Skills and attributes	Access to green space and public shared facilities		Positive identities

7. REVIEWING THE LITERATURE EVIDENCE BASE

The MWIA toolkit assessment criteria for the protective factors (discussed in section 5) are based on a review of the published literature that research suggests are helpful in promoting and protecting mental well-being. In order to build on this evidence base a short additional literature review was undertaken to identify, what if any, published research studies there may be suggesting that the Time Bank may have on mental well-being. This is intended to provide further evidence to substantiate or challenge the findings from the MWIA workshop.

- A research was commissioned in Scotland to investigate the impact of Time Banking on members in terms of their social, physical, economic, cultural and human capital among five Scottish Time Banks. There was also a focus on distance travelled with regard to employment, education and training.

The research found that the level of impact of Time Banking across the five capitals was higher in the more established Time Banks. There was evidence to suggest that some of the indicators of economic capital, e.g. moving into training or employment, were only visible in the more established Time Banks. However, there was also evidence to suggest that the indicators of human and social capital, e.g. achieving something useful and doing more volunteering, were visible across all Time Banks. All interviewed Time Bank members were clear that culture was not considered to be relevant to Time Banking. Time Brokers felt that the local populations were represented to varying degrees, but that Time Banks were very inclusive, and did not view culture as an issue. There is evidence that the Time Broker role is a key component in ensuring positive experiences; by knowing all Time Bank members, they



are able to identify the skills of individual members and to encourage skills development. There was evidence to suggest that the impact of this was greatest when there was a full time, paid Time Broker.⁵

- Time banks have been shown to be successful in attracting participation among the most deprived neighbourhoods, and the participants of Time Banks are among the most socially-excluded groups in society, and those least-likely to be involved in traditional volunteering. It was found that 58% of Time Bank participants have an annual household income of under £10,000 a year, compared to only 16% of traditional volunteers. The benefits of Time Banking demonstrated include increased self-esteem and confidence, gaining skills, growing social networks and building friendships, getting more involved in the community, and meeting needs – overcoming social exclusion and enabling active citizenship.³ These findings agree with the finding from this Mental Well-being Impact Assessment.

9. DEVELOPING INDICATORS OF WELL-BEING

“What gets counted, counts.” Therefore being able to measure progress and impact of the Time Bank on the determinants of mental well-being identified by the stakeholders through the MWIA is an important step. Building on the initial ideas from stakeholder about “how you know” that certain impacts have happened 10 indicators have been developed.

Factor	Determinant	How do you know?	Data collection	Frequency
Increasing Control	Self determination and positive mental wellbeing.	<ul style="list-style-type: none"> Number of people who feel they can influence decisions in their locality. A question such as “As a result of the Time Bank are you more able to influence decisions in the local community”? could be added to Time Bank customer satisfaction surveys 	Satisfaction surveys- Time Bank Coordinator	12 monthly

⁵ Christine Reilly and Tam Cassidy, Volunteer Development Scotland (August 2008)



Resilience	Trust, social cohesion and support.	<ul style="list-style-type: none"> • Satisfaction of people receiving the service • Self reported measure of people' overall health and wellbeing 	Satisfaction surveys- Time Bank Coordinator	12 monthly
Participation	Having a valued role	<ul style="list-style-type: none"> • Verbal feedback • Number of Active members in the Time Bank • Ongoing demand for the service • Number of activities taking place 	Monitoring by the Time Bank Coordinator.	3 monthly
Inclusion	Positive Identities	<ul style="list-style-type: none"> • Changing views of each other (Time Bank participants) and the area. • Trying something new – social events to have a theme • Nos. participating in volunteering. • LAA N119 – indicator- self reported measure of people's overall health and wellbeing 	Neighbourhood management data collection? Self reporting to the Time bank	3-6 monthly



10. RECOMMENDATIONS

The users and project workers of Time Bank valued the work Northumberland Park Time bank does. People from outside the area also wanted to access the Time Bank and were willing to pay to get there. People felt they could be creative again and ideas could start to be planned quickly as Time Bank is about skills and not about money.

The following recommendations are therefore made:

- There is need for the Time Bank to have a full- time co- coordinator and low cost accessible premises for the project where members can meet regularly and arrange skill swaps. Funding streams should be identified and the Lottery Funds could be one of the options. Strategies for fund raising should also be developed.
- Insurance for Time Bank members helping with transportation should be looked into to improve access for members.
- Partnership working should be improved. Staff from the council, PCT, MH staff to become more involved in the working of the Time Bank.
- Time Bank coordinator should link up with other successful Time Bank groups London wide to share ideas and support each other. Links to Age Concern and Mental Health bridging the gap should also be made.
- A meeting should be held with Director of Public Health to discuss the findings from the MWIA. The report should also be feed back to the Well-being Partnership Board.
- Membership of the steering group should be reviewed to include Well-being Partnership Board/Public Health representation. Regular support should be given to the Time Bank by the steering group.
- Risk management training should be made available to the co-ordinator and members.
- Regular social events to support the members, helping to break down barriers in the neighbourhood, isolation and support co production/Time Banking.
- The Time Bank should be linked into local area agreements (LAAs).
- The Time Bank should encouragement more young people to become involved in Time Bank exchange of their skills improving intergenerational relationships.
- There is need to show case the benefits of the Time Bank to the authorities, political leaders and so on. The Time Bank should also promote its volunteers.
- More activities and learning for members should be made available within the Time Bank. Increased input from other agencies either by providing volunteers to regularly lead workshops or to provide training should be sought.



11. REFERENCES FOR COMMUNITY PROFILE

- Joint Strategic Needs Assessment August 2008
- Health Survey for England 2003-05
- Health Profile 2008
- Haringey Health Report 2006
- Census 2001 (Office of National Statistics)
- Greater London Authority population projection 2007
- London Health Observatory
- Quality Management and Analysis System (QMAS)

12. APPENDICES



APPENDIX ONE

Evaluation of the Stakeholder MWIA workshop

MWIA Workshop Feedback Forms Analysis

- 13 participants attended the MWIA workshop from a diverse range of ethnicity.

Perception

Overall, the participants found the workshop intense, educative, informative and inspiring. When asked to describe their experience in relation to (Q.1, relevance Q2, addition to understanding and Q3, usefulness) they were challenged, enlightened, enriched and gained thorough understanding of the MW impact of the Time Bank Project to the Users or beneficiaries. Many thought the workshop was an eye-opener thought stimulating. It enabled them to explore avenues for development. Most of them felt the MWIA has contributed in broadening their understanding of their mental well-being.

Relevancy

The majority of the participants (8 out of 13) found the sessions very relevant to the Time Bank (BT) project, and/or to the future Time Bank development initiatives.

Expectations

11 out of 13 participants found the workshop played vital role in the increasing of their understanding of mental well-being.

The participants have commented positively about the workshop using the terms 'useful (10)', 'interesting (11)', 'enjoyable (8)' and 'understandable (6)'.

When participants asked if they would recommend the workshop to others, they replied "YES" vehemently.

Participants Comments

"Better understanding for service users"

"It will contribute in enhancing the well-being"

"Well done, keep up the good work"

They did enjoy the time to interact in between sessions, especially during the lunch time.



APPENDIX TWO

Views from Northumberland Park and MWIA Workshop

Northumberland Park Estate



Park Lane, Northumberland Park



Workshop Participants







APPENDIX THREE

This is what the people say (Interviews with Time Bank members):

Q1 Why did you get involved with the Time Bank Project?

- A. "I have been involved since the beginning in August 2008, it's giving your own talents to those less fortunate. You need to use your own talents or you become miserable and it affects your own health".
"Once you retire from a professional job you need something to stimulate the brain, I am stretched! It keeps me fit and away from the doctor!"

Q2 How has the Time Bank project been of benefit to you?

- A. "I know a few more people that I can call on if I need a bit more help, It's like a tonic if you're on your own. It's nice to be involved with something you can have a say about. To see when you 'swap' with others, someone else benefits from a skill you have!"
"You make new contacts, I have met someone there who has helped me to make contacts with a reflexologist."
"There's a real person at the end of the telephone line someone to help me out!"
"You maintain your individuality, I performed at a workshop bringing my percussion instruments, using my gifts! It was good to see other people using instruments I had made".
"It gets people out of isolation, I moved into the area 2 years ago, Time Bank has helped me, there is an opening for new people to have a say".
"We need a venue, it's important! Like now for Christmas, if we had somewhere we could 'swap' decorations, upgrade! What I'm discarding could be your treasure, or a seasonal 'swap' like plants for our gardens".
"As an older person it's good to know that Time Bank people are checked out and not 'cowboys' as I have had bad experiences in the past, when I've been ripped off".
"Also by getting involved with Time Bank I can forget about my own worries!"
"It was also nice to have interaction with your team, who came to do your presentation at Time Bank, so involvement with other services who come to talk with us".

Interviewer;- Ms Jackie Clark Community Development Worker.

Interviewee;- Ms Ruth Hutchinson, Time Bank member.



The following interview is in response to the questions of

Question:

- “What is your experience of being a member of Time Bank”
- “What do you feel the advantages or disadvantages of this project are”

Response of Dave Earp:

“I think it is a very good scheme, it enables people to get things done, without expensive tradesmen or dealing with the cowboys. For example I put some curtain rails up for someone in my neighbourhood, it gave me job satisfaction. I helped someone who made me feel good and also the person was very pleased with the job.

When I do a job, I do it properly, the council won't put curtain rails up and a private builder would cost a lot of money. I now always say hello to this person when I see them out, it's another way of meeting people. It brings communities together people I haven't met in my life. I didn't have anything in return for this job but I have earned time credits. I have arthritis and you never know in the future what you might need, maybe to have the shopping done if my arthritis gets very bad but at the moment I don't need anything.

I think the Time Bank is a good idea, I liked the event when we brought items from our house and could swap with other people, no money needed. I took a digital camera and took home a VCR. The only negative thing is if people don't bring anything but seem to help themselves with a lot to take home, they are taking advantage, they're out of order.

I fully support this scheme I think it can help a lot of people”



Interviewer: Emma Risheq – Service Manager for the Haringey Therapeutic Network

Interviewee: Mr Dave Earp




Wellbeing Theme Board Exception Report

Generated on: 01 May 2009

CY02_P_N0112 Rate of under-18 conceptions (per 1000 girls aged 15-17 as compared with the 1998 baseline rate)		Quarterly values	
		Value	Target
Outcome Lead	Portfolio	Q1 2008/09	0.3% -5.3%
		Q2 2008/09	32.6% -5.3%
Sustainable Community Strategy Outcome		Q3 2008/09	6.4% -5.3%
		Q4 2008/09	14.4% -5.3%
		2008/09	12.4% -5.3%
			
Red			
<p>Definition: The change in the rate of under 18 conceptions per 1,000 girls 15-17 years resident in the area for the current calendar year, as compared with the 1998 baseline rate, shown as a % of the 1998 rate.</p> <p>ABG Funding: £ 272,037 Cosmic (£4,358); Substance Misuse Coordinator (£4454); Teenage Pregnancy Local Implementation Grant (£170,000); TP sexual health (£51,375); 4YP (Bus) (£32,125); Libraries for life (£9,725)</p> <p>Explanation of current performance</p> <p>Current Activities</p> <p>Best Practice The following boroughs have achieved significant reductions between 1998-2006:</p> <ul style="list-style-type: none"> • Hammersmith & Fulham -36.5% • Hackney -28% • Tower Hamlets -24.2% • Newham -20.5% <p>DCSF attribute success to engagement with delivery partners, a senior local champion, effective sexual health services, prioritisation of sex and relationship education, focus on targeted interventions, training on sex and relationships for partner organisation, a well resourced youth service and a good local communication strategy.</p> <p>Emerging Risk Impact on local public services and the well being of children and young people.</p> <p>Performance discussion date:</p> <p>Equality Impact There are young women 15 – 18 years. The profile of</p>			

<p>this section of the population is as follows: Total number of young women 15 – 18 6,384 British 32%, White Other 17%, Mixed 9%, Asian 9%, Caribbean 14%, African 16%, Other 3%</p>	
--	--

AC03_H_N0008 Adult participation in sport and active recreation (2007-2010 stretch target)		Quarterly values	
Outcome Lead	Portfolio	Value	Target
Sustainable Community Strategy Outcome		2008/09	20.2% 22.9%
 Amber			
<p>AGB Funding Better Places o Walking £10.7K o Walk, Jog & Cycle Project £12.3 o Celebrating Sport £6K o Sports Hub 16.5K</p> <p>Wellbeing Haringey NHS Lead - Health in Mind (Health Walks), Active for Life (GP Referral) & Cardiac Rehabilitation £150K Other funding for the total programme has been drawn down from Sport England, TFL, Tennis Foundation, Football Foundation and variety of smaller grants as well as the core funding from the council and partners.</p> <p>Explanation of current performance There has been significant ongoing work to date mainly concentrating on in house improvement in the borough including:</p> <ul style="list-style-type: none"> · Leisure centre renewals · Increasing leisure centre usage (New Pricing Policy for individuals and group hire) · Parks improvements/increasing parks usage · General sports development · GP Referral · Walking programmes <p>For example increasing usage in our leisure centres has and continues to be successful with a 4% increase in 08-09.</p> <p>From the first Sport England Active People Survey (APS) there is a downward trend in participation in London.</p> <p>The reduction in Haringey's adult participation rate from 05-06 22.9% to 07-08 20.2% is not considered statistically significant however it does reinforce the need for further investment to meet the challenging LAA target of increasing Haringey's adult participation to 26.9% by 2010/11.</p> <p>Current Activities</p>			

Having secured additional resources, in particular from the Sport England Community Investment Fund (CIF) existing projects and new partner projects have been drawn together under the HariActive Programme. This programme will be given strategic focus and be monitored by the newly formed Community Sport and Physical Activity Network (CSPAN); a group which brings together key partners and stakeholders involved in increasing physical activity.

New Partner Projects:




- **HariActive** – Make a Change Project (project using sophisticated targeted marketing and taster sessions and better information dissemination to increase participation in three key market segments which are predominant in Haringey)
- **Club, Coach and Volunteer Development Project** (deeper analysis of APS statistics shows a strong correlation between the number and quality of clubs in a locality and the rate of participation. Thus this project will improve both club capacity and quality in the borough and participation as a result)
- **Sports Hub Development Project** (this project concentrates resources in two main areas of club activity – the White Hart Lane corridor which includes the sports centre, playing fields and schools in the area and Finsbury Park – in order to develop multi sports hubs which are a proven way way of increasing participation)
- **Walk, Jog, Cycle Project** (walking is already fairly well developed in the borough this project enhances this and also drives participation in two other activities which are research indicates has excellent potential to attract high rates of participation)
- **Free Swimming for under 16's and over 60's** (funded by the council and central government) - significant improvements in swimming usage is expected. While the primary focus is children it is anticipated that parents will accompany their children to swimming and that more over 60's will attend as a result of promotional activities, tasters etc.
- **Health for Haringey** – an extensive programme of community based physical activity programmes managed by Age Concern

As well existing sports development projects have been enhanced – Football Development, Netball Development, Aquatics Development, Athletics Development and Tennis Development

Best Practice

- The emerging work around the social marketing which Haringey has embraced via the HariActive Make


<p>a Change Project and the links with the health related work in this arena such as Change for Life and Go London</p> <ul style="list-style-type: none"> · Smarter and tighter partnership working via CSPAN development <p>Boroughs doing well in London are: Wandsworth – 28.4% Richmond – 27.8% Kensington & Chelsea – 28.6%</p> <p>Boroughs immediately surrounding Haringey: Barnet 22.7% Camden 23.9% Enfield 14% Hackney 21% Islington 20.9% Waltham Forest 18.3%</p> <p>Emerging Risk The recession and the impacts this has on residents disposable income may reduce take up of sport and physical activity opportunities.</p> <p>Performance Discussion date: TBC Future CSPAN dates: 29th July 09, 2nd September 09, 9th November 09 and 13th January 10</p> <p>Equality Impact: Currently the downward trend in Haringey is universal across gender and ethnicity. This exacerbates the already lower participation rates by women and people from BME groups. However there are pleasing increases in participation amongst disabled people in the borough.</p>	
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UE06_H_N0156			
Number of households living in temporary accommodation	Quarterly values		
		Value	Target
	Q1 2008/09	5182	5207
	Q2 2008/09	4952	4940
	Q3 2008/09	4695	4470
	Q4 2008/09	4548	4000
	2008/09	4548	4000
Outcome Lead	Portfolio		
Sustainable Community Strategy Outcome			
			
Red			
The target set for the reduction of households in Temporary			

Accommodation in 2008/09 to 4000 from 5389 by 31st March 2009 was recognised as challenging in light of the previous performance of the service in reducing the numbers of households in Temporary Accommodation. During the year the number has fallen each month totalling a 841 reduction for the year. Significant areas of improvement have been made in the Council's management of homelessness in the following areas. The number of successful homelessness applications has fallen by 50% compared to previous years, considerable work has been targeted at resolving outstanding queries and a backlog of unassessed cases. A new Private Sector Lettings team has been created to focus upon the

<p>sourcing of Assured Shorthold tenancies to provide alternative options to those tenants in Temporary Accommodation. This team has been in place for 8 months and has steadily increased the number of properties being offered to tenants during the year (643 for the year) and these numbers will continue to grow in 2009/10 (800 +). A further additional reduction of 1000 households in Temporary Accommodation is achievable in 2009/10 as a key outcome for improving the delivery of the Strategic and Community Housing Service.</p>	
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<p>CY02_P_N0053b Prevalence of breast-feeding at 6-8 wks from birth - Percentage of infants for whom breastfeeding status is recorded Outcome Lead</p>			
	<p>Quarterly values</p>		
		<p>Value</p>	<p>Target</p>
	<p>Q1 2008/09</p>	<p>87.6%</p>	<p>85%</p>
	<p>Q2 2008/09</p>	<p>20%</p>	<p>85%</p>
	<p>Q3 2008/09</p>	<p>18%</p>	<p>85%</p>
	<p>Q4 2008/09 2008/09</p>	<p>65%</p>	<p>85%</p>
<p>Portfolio</p>			

Sustainable Community Strategy Outcome		
		
Red		

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Meeting: Well-Being Partnership Theme Board

Date: 14 May 2009

Report Title: Draft Core Strategy Preferred Options Consultation May 2009: "A New Plan for Haringey 2011 – 2026"

Report of: Planning and Regeneration, Urban Environment

Purpose

To provide the Well-Being Partnership Theme Board with an update on "A New Plan for Haringey" (Core Strategy Preferred Options) that provides spatial policies that will shape the future of Haringey up to 2026 and deliver the Vision set out in the Sustainable Community Strategy.

Summary

"A New Plan for Haringey 2011 – 2026" is the Draft Core Strategy setting out the preferred options forward for Haringey on the key planning issues for the future. The Draft Core Strategy Preferred Options document has been developed taking into account the responses to the Issues and Options consultation in February – March 08 and other key evidence that has been gathered and examined. The Core Strategy outline how the Council will deliver the strategic and local development needs including housing, employment, leisure and retail provision from 2011 to 2026.

Public consultation on the preferred options will run from 5th May until 30th June 2009.

In accordance with PPS12 'Local Spatial Planning' Haringey's Core Strategy will also give spatial interpretation to the recently adopted Sustainable Community Strategy's key outcomes:

- People at the heart of change;
- An environmentally sustainable future;
- Economic vitality and prosperity shared by all;
- Safer for all;
- Healthier people with a better quality of life; and
- People and customer focused.

The key elements of the core strategy are:

- A description of the essential characteristics of the area
- The critical issues, problems and challenges facing the area
- The articulation of the spatial vision for the area

- The objectives to achieve the spatial vision
- Core policies to set out the activities and actions to deliver the strategy
- An implementation and monitoring framework.

The Preferred Options report identifies future challenges which are cross-cutting themes for the Core Strategy. The key challenges are:

- Climate change
- Demographic change
- Use of natural resources
- Health and well-being
- High quality design
- Equality and inclusion
- Economic change
- Transport
- Crime and safety

Twelve preferred policies have been developed to help deliver the Core Strategy vision and objectives.

The preferred policies are arranged to align with the Sustainable Community Strategy themes. Policies have been drawn up for the following topic areas:

People at the heart of change in Haringey

- **Strategic Policy 1 Managing Growth** – Concentrate growth in Tottenham Hale, Haringey Heartlands, Upper Lee Valley, all town centres and other sustainable locations across the borough
- **Strategic Policy 2 Housing:** maximise housing in the borough and meet housing needs for affordable, family housing, more smaller households and housing for specific groups.

An environmentally sustainable future

- **Strategic Policy 3 Environment:** Manage climate change, energy use and the environment
- **Strategic Policy 4 Movement:** Improve public transport, walking and cycling – reduce road congestion

Economic vitality and prosperity shared by all

- **Strategic Policy 5 Employment:** Promote sustainable jobs and training & businesses
- **Strategic Policy 6 Retail:** Protect town centres and shopping

A Safer, attractive and valued urban environment

- **Strategic Policy 7 Design:** Design buildings and streets so they look good, respect local character and adapt to climate change and energy management
- **Strategic Policy 8 Conservation:** Conservation areas and listed buildings will be protected and enhanced
- **Strategic Policy 9 Green Infrastructure:** Maintain and enhance open space and parks

Healthier people with a better quality of life

- **Strategic Policy 10 Health & Community Well-Being:** Improve health care provision and promote healthier lifestyles, promote equality and diversity
- **Strategic Policy 11 Culture & Leisure:** Promote and develop more leisure and cultural opportunities
- **Strategic Policy 12 Community Infrastructure:** Deliver better community facilities and make efficient use of existing facilities

People and customer focused

- Providing high quality, accessible services that give value for money, respond to people's need and meet their aspirations. Place greater emphasis on community engagement and tackle social, exclusion.

Implementation & Monitoring

The Core Strategy is the key vehicle for delivering the Strategic Partnership outcomes in the Sustainable Community Strategy, the LAA and the forthcoming CAA. It also delivers against national and regional priorities such as targets for affordable housing, economic development and preparing for, and mitigation of, climate change. We will monitor progress against these outcomes and targets through an Annual Monitoring Report.

The Core Strategy will also include Community Infrastructure Plan which will set out the identified community infrastructure required to deliver the Core Strategy. This is ongoing work and discussions have already started with key stakeholders and service providers.

Legal/Financial Implications

This consultation on the Draft Core Strategy Preferred Options is an informal consultation stage (it is not a statutory requirement for preparing the Core strategy as set out in PPS 12. The Council has decided to proceed with two stage consultation to ensure wider community and stakeholder involvement/participation in preparing this strategically important spatial planning policy document that will influence the future vision for the Borough. The outcome of this consultation will influence the preferred policies for Core Strategies that will be submitted to the Secretary of State in February 2010. There are no legal issues that will arise directly out of this consultation process.

There are no significant financial implications arising from this report.

Recommendations

The Planning and Regeneration Service would request that the Haringey Strategic Partnership (Well-Being Partnership Theme Board) support the consultation on the "A New Plan for Haringey" (Draft Core Strategy Preferred Options) and all the various groups that make up the Partnership respond to the Preferred Options Document to ensure that this Strategic planning policy

document meets the aspirations of the communities, stakeholders and partners in Haringey.

For more information contact:

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Title: Group Manager Strategy & Sites

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Background

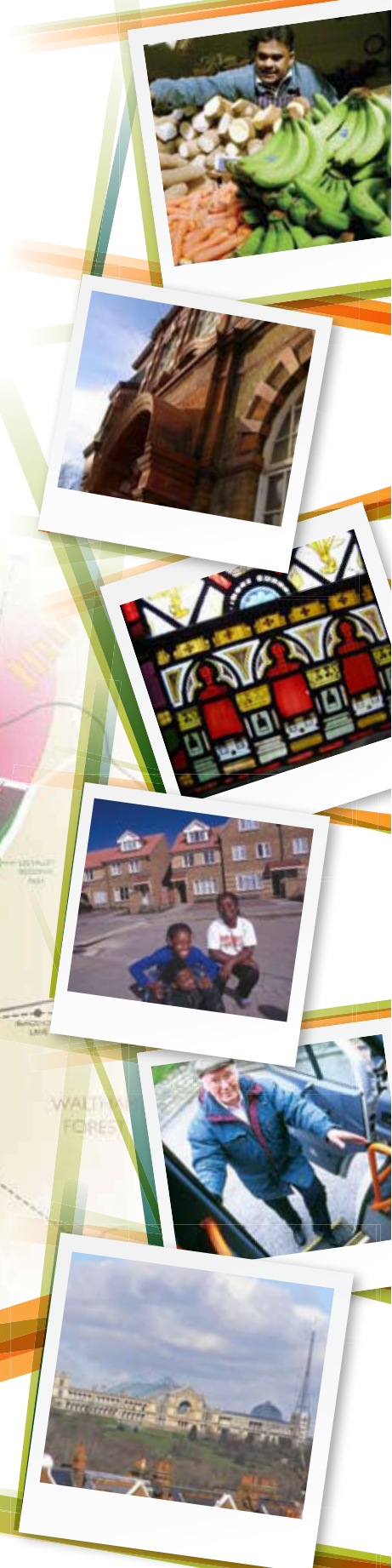
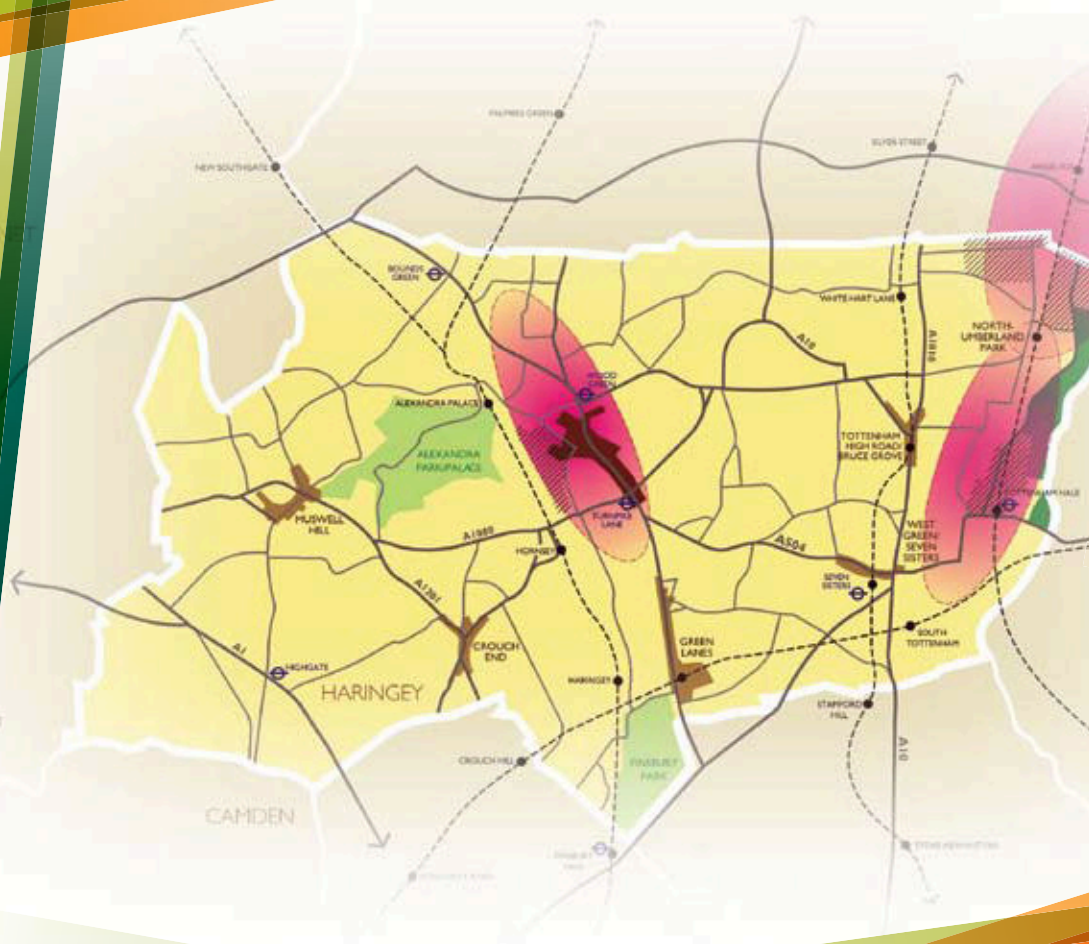
“A New Plan for Haringey” Draft Core Strategy Preferred Options

Appendices

The Summary Consultation Material. (To be provided Next week)

A New Plan for Haringey 2011 - 2026

Haringey's Local Development Framework



**Core Strategy Preferred
Options Consultation May 2009**

www.haringey.gov.uk



Haringey Council

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A New Plan for Haringey 2011 – 2026

Core Strategy Preferred Options Haringey's Local Development Framework

- Haringey is changing. We are developing a new plan that outlines how the borough will manage these changes.
- We aim to create a strong community and a safer, more attractive place to live. We want Haringey to be carbon neutral, with a better choice of high quality housing, more schools, better facilities and services, less cars, and the best parks and green spaces in London.



A New Plan for Haringey – HAVE YOUR SAY

**The consultation runs from
5th May to 30th June 2009**

What are the challenges for the next 15 years?

- Population increase of 15% by 2026
- New homes in Tottenham Hale and Haringey Heartlands
- All new homes to be carbon neutral by 2016
- Adapting to climate change
- Better health and community facilities
- New primary and secondary schools
- Vibrant and accessible town centres
- Economic change and promoting jobs
- Protecting parks and wildlife
- Promoting public transport and sustainable travel
- Quality buildings and public spaces



The Key Community and Planning Issues for Haringey:

We are asking you to give your views and comments on our plans

- How will they impact on your neighbourhood?
- How can they be improved?

People at the heart of change in Haringey

- 1 Managing Growth** Concentrate Growth in Tottenham Hale, Haringey Heartlands, Upper Lee Valley and all town centres
- 2 Housing** Maximise housing in the borough and meet all housing needs

An environmentally sustainable future

- 3 Environment** Manage climate change, energy use and the environment
- 4 Movement** Improve public transport, walking and cycling – reduce road congestion

Economic vitality and prosperity shared by all

- 5 Employment** Promote sustainable jobs and training & businesses
- 6 Town Centres** Protect town centres and shopping

A Safer, attractive and valued urban environment

- 7 Design** Design buildings and streets to improve safety, respect local character and adapt to climate change and energy management
- 8 Building Conservation** Conservation areas and listed buildings will be protected and enhanced
- 9 Green Infrastructure** Maintain and enhance open space and parks

Healthier people with a better quality of life

- 10 Health and Well-being** Improve health care provision and promote healthier lifestyles
- 11 Culture and Leisure** Promote and develop more leisure and cultural opportunities
- 12 Community Infrastructure** Deliver better community facilities and make efficient use of existing facilities

Next Steps

What will we do with your views and comments?

Your views and comments will help make future planning decisions in Haringey such as planning applications for development, changes in the use of land and help shape investment in the borough.

There will be a number of community events and workshops throughout the consultation. Please contact us for information or if you would like us to attend your community event or meeting.

The above is a summary leaflet; you can view the full document at your local library or council office, or online at:

www.haringey.gov.uk/corestrategy

We can be contacted at:

Planning Policy Team
639 High Road, Tottenham,
London N17 8BD
Telephone: 020 8489 5512
Email: ldf@haringey.gov.uk

If you want this in your own language please tick the box, fill in your name and address and send to the freepost address below

Shqip

Nëse dëshironi ta keni këtë në gjuhën tuaj, ju lutemi vendosni shenjën ✓ në kuti, shënoni emrin dhe adresën tuaj dhe niseni me postë falas në adresën e mëposhtme.

Kurdî

Ku hun wena la zîmanixa daxwâzin. Lewira îflaret bikin Navixa û navnîflanaxa tije bikin â biflenin ê navnîflana jêr la vepêre.

عربي

إذا كنت تود هذا الكتيب بلغتك، فالرجاء وضع علامة على المربع، واكتب إسمك وعنوانك وارسلهما بالبريد المجاني إلى العنوان المبين بأسفل

Português

Se desejar receber o folheto na sua própria língua, por favor assinale a quadrícula, preencha com o seu nome e morada e envie para o endereço 'freepost' (com porte pago) abaixo indicado.

বাংলা

আপনি যদি এটা আপনার নিজের ভাষায় পেতে চান তবে অনুগ্রহ করে সঠিক বাক্সে টিক দিন, এবং আপনার নাম ঠিকানা লিখে নিচের ঠিকানায় পাঠিয়ে দিন, এর জন্য কোন ডাকটিকিট লাগবে না।

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Français

Pour recevoir ces informations dans votre langue, veuillez cocher la case, inscrire votre nom et adresse et nous renvoyer ce formulaire, sans affranchir, à l'adresse ci-dessous.

Soomaai

Faani aadkan ku rabto afkaaga fadlan xariijir ku dhig sanduuqa yar, ku qor magacaaga iyo cinwaankaaga oo markaas u dir cinwaanka boosta lacag la'aanta ah ee hoos ku qoran.

Ελληνικά

Αν θέλετε αυτό το έντυπο στη γλώσσα σας, παρακαλούμε σημειώστε το τετράγωνο, συμπληρώστε το ονοματεπώνυμο και τη διεύθυνσή σας και στείλτε το στην παρακάτω διεύθυνση χωρίς ταχυδρομικό τέλος.

Türkçe

Bu kitapçığın Türkçe'sini istiyorsanız, kutuyu işaretleyip, adınızı-soyadınızı, adresinizi yazdıktan sonra, lütfen bunu posta pulu yapıştırmadan aşağıdaki adrese gönderin.

Please indicate if you would like a copy of this booklet in another language not listed or any of the following formats and send to the freepost address below.

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- Another language *Please state:* _____
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8th Floor, River Park House, 225 High Road, N22 8HQ**

The Core Strategy Preferred Options is the New Plan for Haringey 2011-2026



Meeting: Well-Being Strategic Partnership Board

Date: 14 May 2009

Report Title: Implementation of Haringey's Draft Housing Strategy 2009-19

Report of: Kate Dalzell, Urban Environment, London Borough of Haringey

Purpose

To update the Well Being Partnership Board on the production of Haringey's Housing Strategy 2009-19, and to gain the input of the Board in the development of the Implementation Plan.

Summary

Haringey's Housing Strategy 2009-19 has been developed as a partnership strategy, overseen by the Integrated Housing Board of the Haringey Strategic Partnership. Housing has a significant role to play in improving the quality of people's lives in Haringey, and can have an impact on a wide range of outcomes. The Housing Strategy is an over-arching strategy: it provides a framework, and a number of more focused strategies will sit beneath it, providing greater detail around areas such as Homelessness, Affordable Warmth, Private Sector Housing, and Older People's Housing.

Consultation on a draft strategy took place between January and March of 2009 to inform development of a final draft. Unfortunately timing did not allow for attendance at a meeting of the Well-being Partnership Board as part of the consultation, however Board members were invited to a dedicated Draft Housing Strategy Consultation Workshop, and feedback was sought from related bodies, including the Well-being Chairs Executive, Older People's Partnership Board, Safeguarding Adults Board and Advice Providers Network. Strategy development was also informed by the work to refresh *Experience Counts*. The consultation report attached at Appendix A identifies how the consultation was delivered, and how its outcomes have shaped the strategy.

A final draft was approved by Cabinet on 21 April 2009, and will be put to full Council for endorsement in June 2009. The final draft is attached for the information of the Well Being Partnership Board at Appendix B.

Work is now underway to develop a rolling three year Implementation Plan for the strategy. As this is an over-arching strategy the majority of actions are addressed in more detail through existing delivery mechanisms: the strategy does not replicate these, but aims to clearly signpost where responsibility for the detail of implementation lies, and to ensure ownership and accountability

in relation to all commitments. Delivery will be overseen by the Integrated Housing Board through its quarterly monitoring process. A working draft of the Implementation Plan is attached at Appendix C.

Legal/Financial Implications

N/A

Recommendations

- That the Well Being Partnership Board note the outcomes of the consultation on the Housing Strategy 2009-19, and the final draft of Haringey's Housing Strategy 2009-19
- That the Well Being Partnership Board input into the development of the strategy Implementation Plan

For more information contact:

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Appendices

Appendix A: Haringey Housing Strategy 2009-19 Consultation Report

Appendix B: Final Draft Haringey Housing Strategy 2009-19

Appendix C: Draft Haringey Housing Strategy Implementation Plan

Haringey's Housing Strategy 2009-19

Consultation feedback

Consultation carried out between 26 January and 13 March 09

1. Introduction

This document reports on the results of the consultation process for Haringey's Housing Strategy 2009-19, which was carried out between 26 January and 13 March 2009.

The Housing Strategy is designed to set out plans for how the Council and its partners plan to improve housing in Haringey over the next ten years.

The draft strategy identifies as its vision the creation of:

balanced neighbourhoods of choice, which meet the housing aspirations of Haringey's residents and offer quality, affordability and sustainability for current and future generations

Four priorities framed the draft strategy:

1. To meet housing need through mixed communities which provide opportunities for our residents
2. To ensure housing in the borough is well managed, of high quality, and sustainable
3. To provide people with the support and advice they need
4. To make all homes in the borough a part of neighbourhoods of choice

These priorities guided how information was gathered during the consultation process, although steps were taken to ensure respondents could feedback on any aspect of housing they thought relevant.

2. Consultation materials

In order to communicate the content of the strategy and provide different methods for people to feedback, a number of consultation materials and communication techniques were used:

Full draft strategy document was available in hard copy and online. These were mailed to community and voluntary groups, along with copies of the consultation leaflet.

Consultation leaflet which contained a 'simplified' version of the vision and priorities (expanding them from four to eight, for ease of understanding) asking respondents to comment on these and identify which three they thought most important to housing in Haringey. Space was also provided for additional comments.

These were mailed out to community groups, distributed to customer service centres, libraries and community centres, taken to Area Assemblies and sent out when people contacted us.

Web page detailing the purpose of the strategy and consultation, with details of how to feedback.

Article in Haringey People (monthly magazine which focuses on Haringey issues, which is delivered to all residents in the borough) on the Housing Strategy and consultation information.

3. Who we consulted with and methods we used

Residents, community and voluntary groups, council staff and organisations which deliver housing or have an interest in housing in Haringey were included in the consultation.

Residents

Residents of the borough were consulted with in a number of ways:

- Existing social housing forums were attended (Temporary Accommodation Forum, Resident Consultation Forum and Tenant Participation Panel), where a presentation was given on the strategy and then followed by feedback gathering exercises
- Six Area Assembly meetings (where local issues are discussed and residents get an opportunity to speak to community leaders and Councillors) were attended, where council officers could talk face-to-face with residents about housing issues and the strategy
- Consultation officers presented and gathered feedback at a Haringey Youth Council meeting
- Consultation officers presented and gathered feedback at the Older People's Partnership Board (this was a mixture of older people representatives, council officers and partners)
- Consultation leaflets were displayed in customer service centres, libraries and community centres
- Consultation leaflets were sent to resident associations and community groups alongside copies of the full strategy
- An article on the strategy was placed in 'Haringey People'
- Information was put on the Haringey council web site

Organisations with an interest in housing and council staff

- Presentations and feedback gathering at a Landlords Forum and Registered Social Landlord and Developers Forum
- Presentations and feedback gathering at forums and meetings with Safeguarding Adults Board, Older People's Partnership Board, Advice Providers Network, Acquisitive Crime Partnership Board, Integrated Housing Board, Enterprise Board, Safer Communities Executive Board, Well-being Chairs Executive, and Homes for Haringey (an arms length management organisation (ALMO) established to manage council-owned housing)
- Strategy distributed to Haringey Council staff, discussed at Haringey Council Corporate Policy Network, and other staff forums and workshops

Community and voluntary groups

Over 300 community and voluntary groups (these included groups which deal issues relating to race, sexuality, faith, mental and physical health, domestic

abuse, the environment, housing advice and homelessness) were mailed a copy of the strategy and copies of the consultation leaflet.

Housing Conference

A Housing Conference was held on 18 February 2009, and was used as an opportunity to discuss the direction the council should take to meet housing aspirations over the next decade. 125 people attended, including representatives from housing associations, developers, landlords from the private sector, residents, representatives from community and voluntary organisations and officers from public sector agencies. The conference incorporated workshops which explored themes from the strategy.

4. Feedback

In this section, feedback from the consultation has been organised according to the priority they address. Every feedback comment was treated as equal, so details have not been provided of who or which organisation said what.

An additional priority (Priority five) was added when feedback was analysed, in response to the weight of interest shown through the consultation in developing work around housing and environmental sustainability.

A total of 226 individuals supplied comments through the conference, consultation leaflets, area assemblies and contacting consultation officers directly. In addition, feedback was gathered through discussion at twenty four existing forums and partnership boards.

Overall, there was support for the priorities in the strategy. Key areas of feedback were:

- That partnership work is strengthened (with registered social housing providers, advice and support agencies and employment and training providers)
- That housing plays a positive role in communities and neighbourhoods (strengthening resident involvement and ensuring complimentary infrastructures are in place)
- That decent standards of management for rented homes (both private and social housing) are delivered
- That vulnerable adults are supported
- That the Housing Strategy contributes to Haringey's 'green agenda'
- That the strategy is effectively implemented

Findings from consultation leaflets

Overall results from the consultation leaflets indicate that reducing homelessness, building more homes, safe and attractive neighbourhoods, improving social housing and making homes 'greener' were seen as the most important housing priorities for Haringey.

Priority one: To meet housing need through mixed communities which provide opportunities for our residents

Supply new housing as a part of mixed communities

- It was generally agreed that there is a need for more housing (a mixture of private and social) and that any new housing should be delivered in such a way which benefits the community.
- There was support for plans to provide a balance of tenure options so there is choice for residents.
- Regeneration projects must be led by the local community.

Connecting housing to employment and skills

- There was extensive support for actions in this section, respondents emphasised the need for housing providers to work in partnership to improve life chances by contributing to education, training and employment initiatives which will build peoples' skills.

Maximise the supply of housing from existing homes

- Actively addressing the use of empty properties in the borough was supported, alongside encouragement for the council in lobbying to be given the ability and resources to purchase empty properties.

Work with residents and private sector landlords to look at alternatives to address Temporary Accommodation

- There was agreement that work in the private sector would be a viable option to address the high numbers of temporary accommodation users. Concerns over the sustainability and security of this type of tenure were also raised, alongside the need to provide support for people considering this option.
- The need for a culture change was stressed, so that residents accept housing may be in the form of assured shorthold tenancies (AST) rather than tenancies for life.

Priority two: To ensure all housing in the borough is well managed, of high quality and sustainable*High quality new build*

- There was agreement of the need for high quality new build and an increase in the number of large properties.

High quality social housing

- The improvement of housing management standards was identified as an issue, as was the need to build on relationships between registered providers of social housing and the Council to improve the management of housing.
- Best use must be made of Decent Homes funds (designed to improve the standard of social homes) in order that improvements are not superficial, but address more fundamental concerns.
- Consultation with residents was identified as needing to be strengthened in the Council.

High quality private sector housing

- A number of 'support and advice' issues were raised: the need to be able to challenge landlords on behalf of tenants, and landlords being kept up-to-date on their responsibilities and how they can take action when necessary.
- Respondents felt the securing of standards particularly important where private housing was to be used as a 'substitute' for social housing.

High quality temporary accommodation

- Respondents stressed the need to tackle overcrowding and disrepair issues.

Priority three: To provide people with the support and advice they need

Provision of high quality advice

- There was agreement that 'housing advice' needs to look beyond housing and link with other forms of advice, for example around employment opportunities.
- Respondents commented on the need to think about how service users can be engaged with at an early stage to promote independence.
- There was support to implement schemes concerned with mortgage rescue and flexible tenure and to develop innovative mortgage products.
- Housing services having a more honest approach, when providing advice, was identified as an effective method for managing the expectations of service users.
- It was suggested that high standards of training in advice and support for Council and voluntary staff be re-enforced to ensure quality and consistency.

Provide joined-up support through multi-agency working

- The importance of strong partnerships and communications across all sectors of relevance to housing (health, employment, vulnerable service users) was stressed.
- It was requested that this section be called 'needs of vulnerable adults and partnership working' to reflect a whole-system approach that addresses the priorities of different service user groups (amongst these would be those with learning/physical disabilities, older people, users of adult mental health services, those with autism, alcohol and drugs dependents)
- There was an emphasis on addressing older peoples housing needs over the next ten years and an increase in low income older owner-occupiers

Safeguarding children and young people

- The need to engage with children in schools before they become homeless and effectively manage their views of the service was highlighted

Priority four: To make all homes in the borough a part of neighbourhoods of choice

- Respondents stressed that residents must be involved in the development and shaping of local areas and communities
- The need for more Houses of Multiple Occupancy in the borough was identified, while others stressed the need to safeguard family environments and ensure local communities are not negatively affected by this kind of accommodation
- The coordination of housing provision with good quality local services through area-based working was considered to be a fundamental.
- Infrastructure (such as transport and local enterprise) was seen as an important consideration when regenerating and designing areas.
- 'Designing out crime' was considered key in regeneration programmes.

Proposed Priority five: To contribute to the Greenest Borough

- Respondents stressed that building sustainable, well-designed housing was critical – this was also important with existing housing.
- A need for clear direction for landlords (social and private) regarding energy efficiency was reported.
- There was an emphasis on changing the behaviour of residents by education and training, alongside the promotion of green projects.
- It was suggested that recycling services should be tailored to meet the needs of the range of different types of homes in the borough.

General feedback

Feedback which did not address specific priorities in the strategy was concerned with:

- The language in the vision being simplified and less oriented towards the housing profession
- Making clearer the links to existing strategies and areas of work (such as homelessness, travellers, older people) and illustrate structures and partnerships which will be used to deliver the strategy
- The need to recognise and respond to the Audit Commission inspection of Allocations and Lettings, Haringey London Borough Council 2008

5. Impact of feedback on the strategy

Feedback from the consultation was used to inform the finished strategy and implementation plan.

A rolling three year implementation plan will be developed as an appendix to the strategy. This will demonstrate how its delivery will be achieved through supporting strategies, structures and partnerships, clearly identifying timeframes and responsibilities.

Priority one: To meet housing need through mixed communities which provide opportunities for our residents

- To make reference to our commitment to ensuring that engagement with local communities is at the heart of regeneration and new development
- To look into options for providing longer security of tenure through private sector lettings for those on the Temporary Accommodation list
- To lobby for the local authority to have the ability and resources to purchase empty properties

Priority two: To ensure all housing in the borough is well managed and of high quality and sustainability

No changes to this section were considered to be required as a result of feedback, which reinforced the priorities identified in the strategy to strengthen standards.

Priority three: To provide people with the advice and support they need

- To strengthen the priority actions within ‘high quality advice’ to make explicit the need for housing advice to be strongly linked to advice provision in related areas, such as employment and training, and other support services, as well as advice around mortgage rescue and mortgage options
- To include a priority action on training for advice providers, and quality assurance, in relation to all housing advice providers in Haringey
- To change the title of 3.2 Provide joined-up support through multi-agency working to The needs of vulnerable adults and partnership working.
- To strengthen the content in this area relating to the needs of vulnerable adults, to support a whole system planning approach which moves away from a silo approach to specialist needs housing requirements. At the same time, this section to refer to a wider range of client groups
 - Key to this will be the development of a Move On Strategy, with the aims of making effective use of the borough’s supported housing stock, and helping vulnerable people to become more independent and able to live in mainstream or general needs housing
- To refer, in the context of the proposed Older People’s Housing Strategy, to the need to exchange some older sheltered accommodation stock to extra care stock, and look to providing some extra care stock for market sale

Priority four: To make all homes in the borough a part of neighbourhoods of choice

- To emphasise the need for residents to be involved in the shaping of local areas and communities
- To emphasise the role of design / asset management in reducing crime in community spaces and regeneration initiatives

Priority five: To contribute to creating the Greenest Borough

- To include an additional priority, “To contribute to creating the Greenest Borough”. This priority will bring together actions that ensure the environmental sustainability of housing in the borough, including:

- Strong planning policies developed and agreed through the Local Development Framework
- The delivery of catalytic projects to drive change and innovation
- Housing providers to work with residents to inform, and to secure behaviour change, around their use of resources and the energy efficiency of their homes
- For regeneration and refurbishment projects to deliver high standards of environmental sustainability

Haringey's Draft Housing Strategy 2009-19

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Foreword

All of us aspire to a good quality home in a pleasant neighbourhood. This strategy is about the next ten years, and how we can get closer to achieving this for everyone living in Haringey, whether they rent from the Council, from a registered provider or private landlord, or own their own home.

There is a great deal of work underway to improve housing in the borough. For example we are investing significant resources in improving the quality of homes through our Decent Homes Programme; and two of London's biggest regeneration projects are in Haringey at Tottenham Hale and Haringey Heartlands which will deliver thousands of new properties.

However much remains to be done. This ten-year plan looks at how all partners and stakeholders can work together to create better quality housing and neighbourhoods across the borough.

It considers how we create more homes, but also how we build communities with a mix of private, council and registered provider properties. It considers issues such as how to make homes greener, as well as how to improve housing advice and support for residents.

I hope that you will agree with the priorities for Haringey as we and our partners have framed them here, and that you will join with us in our work to deliver our vision for housing in the borough.

Cllr John Bevan
Cabinet Member for Housing Services

Haringey's Draft Housing Strategy 2009-19

Executive Summary

This strategy has been developed by the Integrated Housing Board (IHB) as an over-arching policy document which sets out Haringey's approach to housing over the next ten years, identifying a vision for housing in the borough and a set of strategic objectives. It is a strategy for stakeholders across the entire spectrum of housing-related activity in the borough, including the Council, registered providers of social housing, developers, private sector landlords, owner-occupiers, residents, and voluntary and community sector providers.

Our vision for housing in Haringey is to create:

Neighbourhoods that people choose to live in with a balance of different types of homes which offer quality, affordability and sustainability for current and future generations

In order to deliver this vision our five aims are:

1. To meet housing need through mixed communities which provide opportunities for our residents

This aim is about providing the right balance of homes, in terms of their type, size, price and tenure and making sure enough housing is available, by building new homes and making the most of our existing housing. It is also about working with residents in temporary accommodation to look at alternative kinds of housing, and strengthening the links between housing services and training and employment support opportunities.

2. To ensure housing in the borough is well managed, of high quality, and sustainable

Focusing on ways we can work with residents and social and private landlords to improve standards of decency, design, and energy efficiency in our homes

3. To provide people with the support and advice they need

To enable residents to make the most of housing opportunities in the borough. Residents need housing advice and support that are accessible and of high quality, enable choice and independence, and are responsive to individual needs.

Behind this aim is a range of work focused on how we improve advice, the need for early intervention to prevent homelessness, providing support for vulnerable people and delivering the Supporting People Strategy, and the role

of housing services in safeguarding children and young people.

4. To make all homes in the borough a part of neighbourhoods of choice

This aim is about making all homes in the borough a part of neighbourhoods that people would choose to live in by creating well-designed, attractive, clean and safe public spaces where there is a real sense of belonging and pride.

5. To contribute to creating the Greenest Borough

A wide body of scientific evidence now supports the view that climate change is a serious and urgent issue. Our dwellings contribute significantly to CO2 emissions in the borough, and environment change will shape our housing need in the future. This aim is about encouraging developers, landlords and home owners to adopt the highest possible standards in energy efficiency, sustainable design and construction.

In order to achieve these aims for Haringey our approach will be based on the following principles:

- Partnership between organisations, agencies and residents in the borough
- Strong relationships with government and national agencies (such as the Homes and Communities Agency and Tenant Services Authority) that will get the best deal for Haringey's residents
- Engagement with residents and communities so that decisions and service improvement are shaped by what they want

Introduction and Overview

Haringey is the fifth most diverse borough in London, and home to approximately 225,700 people (2006 ONS data). It contains both areas of relative affluence and concentrations of deprivation, and we face exciting opportunities and serious challenges in meeting our aspirations for its housing. The borough has high levels of need for units of affordable accommodation, and many of our existing homes do not meet required standards of decency, or are situated in run-down areas. At the same time the borough contains highly successful neighbourhoods, and there are significant regeneration schemes underway.

Housing has a significant role to play in improving quality of life in Haringey and contributes to a wide range of outcomes. Many organisations and areas of work at local, regional and national levels play a part in this. This is an over-arching strategy, and articulates at a high level how these strands of work come together to contribute to achieving the overall vision shared by partners and residents, and a range of other strategies that inform and support the strategy.

Our aim is to create balanced neighbourhoods where people choose to live, which meet the housing aspirations of Haringey's residents and offer quality, affordability and sustainability for current and future generations. In realising this vision for housing, we aim to have a positive impact on related areas which are priorities for Haringey, including the health, well-being and achievement of residents, particularly our children and young people, and the sustainability of the borough. To do this we must increase the amount of housing in the borough, ensuring that a significant proportion of new homes are affordable to residents, and that they meet high standards of design. We will make sure that design minimises the impact of new housing on natural resources. We must ensure that we make the best use of existing stock, and that all housing in the borough is well-managed and energy efficient. We must make homes a part of neighbourhoods that people want to live in, a part of sustainable, mixed communities. Finally, we must provide support and advice that give residents independence and choices, with continuing opportunities to exercise these as they move through their lives and their needs change.

At the time of writing, the economic down-turn presents us with new challenges in meeting these aspirations. Over the short to medium term we will place a particular focus on making sure that excellent services, as far as possible, reduce the impact of the recession on residents and that regeneration and home-building projects being worked on in the borough are delivered. Through its 'single conversation' approach the Homes and Communities Agency will provide mechanisms through which we can make the most of regional and national support and opportunities, and explore the scope for innovative delivery models through which to drive renewal where it is needed. The council, with the Haringey Strategic Partnership, will actively participate in this. The Mayor of London will be publishing a new London Housing Strategy in late 2009: this draft strategy for

Haringey identifies what the borough can offer in contributing to delivery of the wider regional agenda.

How we produced this strategy

The development of this strategy was led by the Integrated Housing Board, a theme board of the Haringey Strategic Partnership. A draft was drawn-up, based on the evidence available, the policy context, and dialogue with some of the key stakeholders in the borough, and used as the launch-pad for a consultation period between January and mid-March 2009.

The consultation aimed to engage a wide range of people and organisations in developing the strategy. A Housing Conference was held on 18 February 2009, at which over 125 people, including residents, social and private landlords, community and voluntary sector organisations, and staff from local and regional public sector agencies, came together to discuss the key themes in the strategy.

The consultation engaged through a number of existing forums, including the Haringey Strategic Partnership and its theme boards, resident engagement mechanisms used by Homes for Haringey, community and voluntary groups, Area Assemblies, the Youth Council and the Haringey Forum for Older People, as well as the consultative forums in place for engaging with housing stakeholders.

A range of materials and mediums were used. The consultation made use of the Council's website, Haringey People, and customer access points across the borough. Opportunities were provided for people to contribute face to face, online, or in writing. A summary leaflet with brief questionnaire was produced in addition to the full draft strategy, to ensure people were able to access the level of detail appropriate to their need or interest.

A total of 226 individuals engaged with the development of the strategy through the conference, questionnaire and written responses, area assemblies, and direct contact with consultation officers. In addition feedback on the draft strategy was gathered through discussion at 24 established forums and partnership boards. A Feedback Report summarising the outcomes of the consultation and how these have impacted on this strategy was shared with those who were involved, and can be seen on the Haringey Council website. An equalities impact assessment was also undertaken, the outcomes of which are incorporated into the strategy Implementation Plan.

Our context: the situation in Haringey

Haringey is a diverse and fast changing borough. Some 50% of our population overall, and three-quarters of our young people, are from ethnic minority backgrounds, and around 200 languages are spoken in the borough. The population is projected to expand by up to 10.6% by 2031. Within this there is expected to be a general shift upwards in the average age, but also an increase in the numbers of very young people.

It is the dynamics of the borough's population that lie behind the change and growth in housing demand in the borough. Currently just under half of Haringey's households are owner-occupiers, with around 30% living in the social rented sector (18% Council stock, 11% Housing Association) and 22% in private rented accommodation. Owner occupation is greater in the west of the borough, with concentrations of social rented housing in the east of the borough, reflecting a wider social and economic polarisation. 30% of Haringey's population live in central and eastern areas of the borough which are among the 10% most deprived in England, and it is in these areas that regeneration efforts are currently concentrated.

There is a high demand for housing across all tenures. In the private sector this can be seen in house prices, which rose by 94.9% over 2002-7, with the average home in Haringey costing approximately £353,800 in summer 2008, although this average masks significant variation across the borough. While prices are falling at the time of writing, the long-term trend in house prices is for prices to increase. The need for affordable housing outstrips supply, with a shortfall in provision of 4,865 units per annum, or 52 per 1,000 head of population - outstripping the average Inner London shortfall of 32 units per 1000 head of population. Housing need disproportionately affects BME households, and 40% of Black African and Asian households are living in unsuitable accommodation.

Responding to this shortfall is a priority for the borough: 26% of residents consider affordable decent homes to be the most important thing in making somewhere a good place to live, and 17% think that it is the thing that most needs improving in the local area. Housing need is reflected in high demand for social housing. In 2007/8 1488 households joined the Housing Register, while only 868 households secured a permanent social rented home. At November 2008 about 4,800 households Haringey were living in temporary accommodation, and the borough faces a huge challenge in meeting government targets to reduce these numbers.

The borough has targets for provision of new housing, and affordable housing, based on a capacity study. A new requirement of national policy is to identify a 15 year supply of housing land in the form of a housing trajectory. The purpose of the housing trajectory is to measure Haringey's performance in meeting its strategic housing target, as set out in the London Plan and, to ensure a

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continuous supply of land for housing over a 15 year period from the year of adoption, with a focus on identifying specific sites for the first 10 years. The borough's housing trajectory demonstrates we are likely to exceed the 680 annual target leading to 2016/17.

Over four fifths of new housing over the next ten years will be supplied at Tottenham Hale and Haringey Heartlands, which are designated as an Opportunity Area and Area for Intensification respectively in recognition of the potential to provide significant numbers of new homes, jobs and regeneration benefits at these locations. The borough has also identified five priority areas which contain the highest levels of deprivation where regeneration initiatives are targeted. These are Mid Tottenham and Seven Sisters; Northumberland Park; White Hart Lane ward; Bruce Grove/ Tottenham Hale; and Wood Green Town Centre, with Noel Park ward and parts of Woodside.

There is also scope to make greater use of existing stock through tackling empty homes, and increasing turn-around times on void social properties. Council tax records show that in April 2007 approximately 1,000 private sector properties had been vacant for over six months. Evidence also suggests that 18.6% of homes are under-occupied. Under-occupation is most common among owner-occupiers, but also occurs within social and private rented housing.

Parallel to this, the 2007 Housing Needs Assessment identified 20.9% of households to be living in unsuitable housing, the main reason for which was overcrowding. Within the social rented sector about 15% of households are overcrowded. This reinforces evidence about demand for affordable housing which demonstrates insufficient availability of larger, three to four bedroom, dwellings in the borough (although demand for one and two bedroom properties remains high). Households with support needs are more likely than households overall to be in unsuitable housing: nearly one in five households in Haringey currently contains at least one person with a designated special need. Quality of housing environment is linked to health outcomes, and care and access requirements can tie housing provision closely to independence. Poor housing also has a negative impact on other areas of life for children and young people, in particular their health and well-being, and educational attainment.

The government has set a target that by 2012 all social housing stock will reach Decent Home standards. A survey of council stock concluded that at March 2008 42% of Council stock did not meet these standards, and an investment programme is underway to address this, with similar improvements being carried out by other social landlords in the borough. There are areas in the borough where there are wider environmental issues, for example poor design of estates, where we need to look beyond upgrade of individual homes to explore potential for wider estate renewal. A 2002 Private Sector Stock Conditions Survey identified that 15.7% of private stock was unfit, most commonly due to disrepair. Domestic properties contribute 50% of all CO2 emissions in Haringey, and

improvements to the thermal efficiency of homes in the borough will be key to work to reduce poverty and contribute to the Mayor's ambitious target to reduce carbon emissions in London by 60% by 2025.

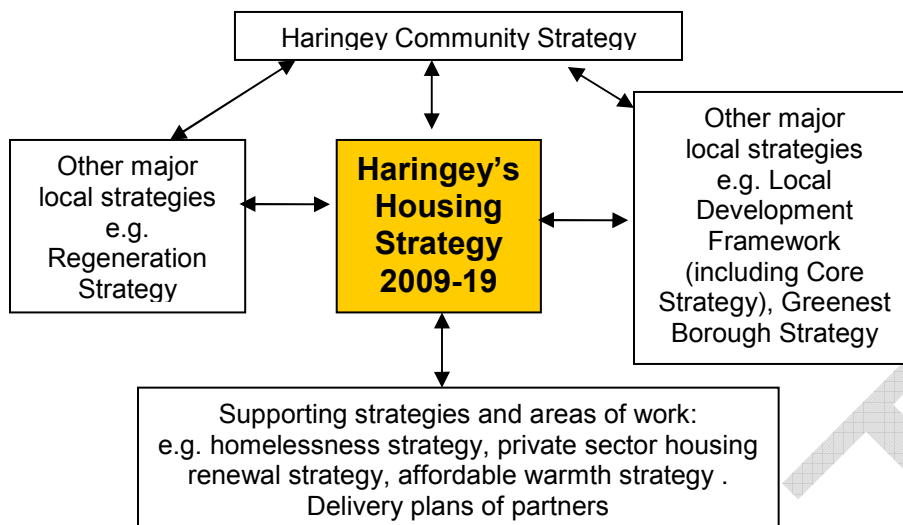
The National and Regional Context

National government has committed to the provision of more homes, more affordable homes, and greener homes. Emphasis has also been placed on the need for mixed tenure and sustainable communities. Partners are being encouraged to work together flexibly and to make use of innovative models through which to deliver on this agenda, and there is a commitment to working with local authorities to enable this and to mitigate the impact of the recession.

The economic downturn has reduced the availability of credit and increased the cost of loans and mortgages. As funding for new social housing is often closely tied to the construction of market housing, there is pressure on house building across all sectors. National government has introduced a package of reforms and support to temper the impact of this. The Homes and Communities Agency, established through the 2008 Housing and Regeneration Act, provides mechanisms through the 'single conversation' which will support local authorities and their partners in working with regional and national agencies to counter negative impacts. The introduction of the Tenant Services Authority in the same Act will have a direct impact on the future management of social and council housing. This is likely to build on recent reviews which have brought to the fore the need to strengthen the voice of tenants and provision of choice, as well as a role in training and employment.

The Mayor of London will be publishing a new Housing Strategy late 2009. At the time of writing, the Mayor identifies three priorities: the provision of additional homes, using innovative models for investment and strong dialogue between housing agencies and providers; the quality and design of new homes, regeneration of areas and greening of all homes; and working to promote opportunity, by meeting need and raising aspirations. Our North London Housing Strategy also addresses the need for increased supply of affordable and intermediate housing, mobility and choice, improved housing quality, meeting need for Supporting People services and homeless households, and contributing to the development of balanced communities.

Locally, housing is key to meeting the objectives of Haringey's Community Strategy 2007-16, particularly those on improving health and quality of life, and creating economic vitality and prosperity, and will contribute to delivery of a number of other key strategies, including the Greenest Borough Strategy and Regeneration Strategy. Furthermore Haringey's emerging Core Strategy will provide the spatial framework for development of new housing in the borough and has close links with achieving other of our objectives for housing.

DRAFT: HARINGEY HOUSING STRATEGY 2009-19**Our approach to delivery**

In order to achieve this vision, we must work in partnership, and ensure that we focus on the needs and aspirations of Haringey's residents and communities. Three principles will underpin our approach:

- **Engaging with residents and communities so that we can place their needs at the heart of all we do**

This principle will be central to all of our work. Engagement will be ongoing at a range of levels, with landlords and services involving tenants and service users in service improvement, feedback from residents' groups informing our work in local areas, and shared data about what local people want acting as a driver for partnership working.

Haringey is very diverse, and there can be particular needs associated with specific communities within the borough. The vision of Haringey's Community Strategy is to create "a place for diverse communities that people are proud to belong to": in delivering our vision for housing we will be responsive to the needs of the communities within the borough, and ensure that dialogue around their needs is strong and two-way.

- **Working in partnership**

The contribution of all partners is necessary for us to achieve our vision. Partnership work will be co-ordinated through the Haringey Strategic Partnership and the Integrated Housing Board, with regular wider stakeholder consultation with private sector landlords, social landlords and residents informing this work. We will also work through regional and sub-regional structures to ensure that we work strategically to coordinate initiatives and investment wherever it is appropriate to do so.

- **Leading and brokering relationships with government and national agencies (such as the Homes and Communities Agency and Tenant Services Authority) to get the best deal for Haringey's citizens now and in the future.**

The newly established Homes and Communities Agency brings together previous fragmented bodies and programmes driving and supporting housing and regeneration, to provide a mechanism for a 'single conversation' between national and regional agencies and local authorities and other partners on the housing and regeneration needs of area. Through a strategic approach based on partnership and a holistic understanding of the needs of communities in Haringey, we will maximise the opportunities this opens up for us to regenerate Haringey.

What we need to do

Our vision for housing in the borough is to create:

Neighbourhoods that people choose to live in with a balance of different types of homes which offer quality, affordability and sustainability for current and future generations

In order to deliver this vision our aims must be:

1. To meet housing need through mixed communities which provide opportunities for our residents
2. To ensure housing in the borough is well managed, of high quality, and sustainable
3. To provide people with the support and advice they need
4. To make all homes in the borough a part of neighbourhoods of choice
5. To contribute to creating the Greenest Borough

1. To meet housing need through mixed communities which provide opportunities for our residents

We need to respond to housing need in the borough by increasing housing supply. We will do this through new build, and by making the most of the housing we have, for example tackling under-occupation and reducing the number of empty homes in the borough. The credit crunch has changed the housing market, and to continue to deliver new homes we will need to explore new models and products to drive delivery.

Currently different types of housing are unevenly spread in the borough. We need to create communities with a mix of housing tenure type and size. Mixed communities are more sustainable in terms of their impact on services and

amenities, and allow for natural shifts in family size and the economic advancement of individuals. This aim allows housing to offer a range of opportunities to residents, allowing people to access housing suited to their needs and aspirations at different points in life, including accessible opportunities for affordable home ownership and other intermediate housing options. Opportunities for residents are integrally linked to economic regeneration in the borough and efforts to increase skills and employment levels, and housing has a role to play in this.

1.1 Supply new housing as a part of mixed communities

We will deliver more housing, and more affordable housing, in line with our targets, and we will use our planning policies to ensure that this delivery focuses on sustainable locations, with a view to improving the spread of housing type across the borough. Where there is opportunity for new development and regeneration in the borough, we will ensure that engagement with residents and local communities is at the heart of plans for change.

To sustain delivery over the economic down-turn we need to work closely with our delivery partners, and with regional and national agencies through the single conversation with the Homes and Communities Agency. To support delivery we will look at innovative delivery models which draw on the different strengths and assets that partners can bring together, and a range of products to meet market needs. The partnership approach will be based on flexibility, however there we will not compromise on design, or on making housing a part of mixed and sustainable communities.

Some areas in the borough are characterised by severe deprivation and low quality housing stock. Where there are opportunities for wholesale development and improvement we will explore these through masterplanning tools.

We will pursue with London Councils or other appropriate bodies the need for a London wide allocations and letting choice, for our residents and all other residents in London. Where very large scale regeneration is taking place, such as Thamesmead, supported by significant government funding, it is not appropriate, and indeed it is impractical, that only the local borough concerned allocates the properties provided to its local residents. The benefits of such large scale regeneration should be made available to all London residents who are already allowed to make bids to their existing local borough.

Priority actions are to:

- Maximise the supply of new housing and new affordable housing. We will meet the delivery targets set out in the Unitary Development Plan and the Local Area Agreement, including delivery of our major regeneration projects at Haringey Heartlands and Tottenham Hale

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- Deliver new housing in line with Haringey's Housing Supplementary Planning Document, and in so doing contribute to the creation of mixed and balanced communities, and delivery of an adequate standard and range of housing, especially affordable and accessible housing to meet current and future needs in the borough
- Develop and promote a range of flexible intermediate housing products
- Develop policies for our Local Development Framework which support us in delivering housing that is part of mixed and sustainable communities.
- Within the Core Strategy development process evaluate the option to reduce the threshold at which developments must contribute to affordable housing, from 10 units to 5 units
- Pursue with London Councils and other appropriate bodies the need for London-wide allocations and letting choice
- To ensure, with the use of appropriate planning powers, that delivery of new housing is supported by the infrastructure and services in terms of local amenities, transport and services
- Work with our local and national partners to broker support and flexibilities which sustain new development
- Review our partnering arrangements with social housing developers to make sure we are maximising our opportunities
- Explore the potential to develop local asset based vehicles and other innovative models to bring together public sector assets, finance, and partners to regenerate areas

1.2 Connecting housing to employment and skills

There are links between worklessness and tenure in Haringey. The 2001 Census found that the employment rate among those living in social housing was only 36%, compared to a rate of 56% for the borough as a whole. The 2007 Hills Report proposed a greater role for social housing in addressing worklessness, and strengthening our work in this area will be a key component of supporting residents to realise their housing aspirations.

Priority actions are to:

- Work with Homes for Haringey and social housing providers to connect residents to opportunities for training and employment through the Haringey Guarantee and other local providers
- Ensure housing advice services and homelessness services are closely linked with employment and skills support, particularly in relation to housing for young people
- Work with contractors to help residents benefit from employment opportunities arising from their work in the borough through applying the Supplementary Planning Guidance Employment Code of Practice and Employment Training Protocol

1.3 Maximise the supply of housing from existing homes

There is scope to make more use of existing stock, across all tenures in meeting housing demand in the borough, tackling empty homes in the private sector, reducing the time that social homes stand empty between lettings, addressing under-occupation, and identifying where there is potential for new accommodation through transforming redundant and disused space on housing estates, or making better use hidden space within individual homes.

Priority actions are to:

- Reduce the numbers of empty homes in the borough through delivery of our Empty Homes Strategy
- Lobby for the local authority to have the ability to purchase empty properties, to enable it to ensure that when brought back into use, these properties are used to address the borough's housing need in the most effective fashion
- Develop an Under-occupation Strategy that delivers a borough-wide approach to under-occupation in the social sector, in close partnership with support services and registered providers of social housing
- Explore options to deliver 'hidden homes' on estates, transforming disused space such as old laundries, shore sheds, or parking space into accommodation.
- Investigate options for investing in adaptation of existing stock to meet the changing needs of families as they expand and address over-crowding.
- Reduce the time taken to re-let homes managed by social landlords by working in close partnership to improve efficiency.

1.4 Work with residents and private sector landlords to look at alternatives to temporary accommodation

The number of households living in temporary accommodation in Haringey is very high and the borough faces a huge challenge in meeting government targets to reduce these numbers. Of these homeless households approximately 60% have been living in temporary accommodation for at least 4 years. Black & Minority Ethnic (BME) households account for 81% of households living in temporary accommodation, and young people aged 16-24 account for just over a third of single homeless people.

In addition to our work to prevent homelessness, we need to work with those in temporary accommodation to manage their expectations, and to work with private sector landlords to develop and promote affordable housing options appropriate for and accessible to homeless households.

Priority actions are to:

- Work proactively with private landlords and residents of temporary accommodation, persuading them to accept a new arrangement involving an assured shorthold tenancy
- Establish a Housing Options Team that provides specialist, comprehensive

advice on a full range of housing options

- Look into options for providing longer security of tenure through private sector lettings for those on the Temporary Accommodation list

2. To ensure all housing in the borough is well managed and of high quality and sustainability

Improvements to the physical condition of housing stock in all sectors is needed to reach Decent Homes Standards and to raise the energy efficiency of housing in the borough, and high standards need to be applied for new build. Partners need to engage with one another and with residents in delivering high quality management, benchmarking, sharing best practice, and putting customer needs to the fore.

2.1 High quality new build

To ensure that new housing in the borough meets high standards of design and energy efficiency, priority actions are to:

- Ensure that new housing is developed in line with the policies and standards laid out within the Council's Unitary Development Plan (UDP) and Housing Supplementary Planning Document, and forthcoming Local Development Framework high standards of design, sustainable construction, energy efficiency, and the use of renewable energy applied. Expectations will build on the latest regional and national standards, such as the Code for Sustainable Homes and those for Lifetime Homes, the Commission for Architecture and the Built Environment (CABE) building for life standards and the forthcoming London Housing Design Guide, and the emerging Core Strategy's policies on climate change and the use of natural resources.

2.2 High quality social housing

Social housing will be brought up to Decent Home standards. Homes for Haringey and social landlords will have clear service standards and performance targets that drive continuous improvement in terms of value for money, customer service, accessibility and quality of delivery. Tenant involvement will be at the heart of improving housing management.

Priority actions are to:

- Bring council and social housing stock up to Decent Homes standards
- Engage residents with a view to strengthening their voice, and to building choice over where they live, the services that are delivered to them and how these are delivered.
- Work with the Tenant Services Authority, Integrated Housing Board and other forums to share best practice, local intelligence, and performance information,

and for constructive challenge of partner performance.

- Registered providers of social housing to work together to agree on shared housing management standards

2.3 High quality private sector housing

Over two thirds of Haringey's households are in private sector housing. The sector is very diverse, as seen by the range in the purchase price of homes across the borough, and the varying quality of stock. There is work to do to improve the quality and energy efficiency of private sector stock, and this is a particular priority for vulnerable households.

In Haringey a relatively high percentage of households live in the private rental sector (at 22%, against 14% in London and 9% nationally). As such it is an important element in the borough's housing offer and we need to make effective use of available tools, and strengthen our partnership with landlords to ensure that this accommodation is of a decent standard and well-managed. Work to improve the quality of the private sector rental offer will help in meeting the need arising from our work to reduce the numbers in temporary accommodation, and lessen the pressure on the social rented sector.

Priority actions are to:

- Use Haringey Council's procurement powers and influence in negotiating leases for temporary accommodation to support engagement with landlords on improving quality and management
- We will work to source resources that will help landlords to improve the condition of private sector homes
- Improve the quality and energy efficiency of private sector stock through enforcement, information and provision of grants, the latter provided and registered as a charge against the property.
- Identify landlords who are not observing their responsibilities and use enforcement powers vigorously
- Use accreditation and the licensing of Houses in Multiple Occupation as tools to improve standards of management
- Explore the potential of additional licensing schemes, "discretionary licensing" to raise management standards in private rented accommodation
- Strengthen our engagement with private sector landlords through regular Landlords Forums and ensure that services provided by the Council are effective in helping them to deliver our aspirations.
- Ensure that the character of housing in our conservation areas is protected.

2.4 High quality temporary accommodation

A high number of households in the borough live in temporary accommodation. The council is in a strong position to ensure that this accommodation is of appropriate quality and suitability.

Priority actions are to:

- Improve the condition of temporary accommodation through routine inspections and robust enforcement of contracts and standards
- In consultation with service users, provide new guidance concerning the procurement and allocation of temporary accommodation, and transfers within temporary accommodation.

3. To provide people with the support and advice they need

For residents to make the most of housing opportunity in the borough, they need to be able to access advice and support at appropriate times. These services need to be geared towards enabling choice and independence. Early intervention and a joined-up approach will ensure the best outcomes. The economic downturn has increased the importance of advice and support, which must be able to address a wide range of need and be tailored to individual circumstances. Housing services are also able to play a role in improving outcomes for children and young people in the borough, and it is a priority to ensure that we support them, through involvement in safeguarding, and by helping to provide housing which helps them to be healthy and achieve.

3.1 Provision of high quality advice

We will deliver a full range of advice to help people across all tenures to maintain or improve their existing accommodation, or to inform them in considering options for a change in accommodation. Advice will be accessible, use outreach to increase awareness, and evidence strong linkage between services.

Priority actions are to:

- Increase our focus on early intervention and the prevention of homelessness.
- Provide specialist, comprehensive advice on a full range of housing options through a Housing Advice Team, able to help service users to make an informed decision on which options would best meet their needs.
- Provide Housing advice services which are closely linked to advice provision in related areas, such as employment and training, the network of Children's services, and other support services, as well as advice around mortgage rescue and mortgage options.
- Provide training and quality assurance around housing advice to all providers of housing advice in Haringey

3.2 The needs of vulnerable adults and partnership working.

Support services will work with vulnerable people in a joined-up and coordinated way, to promote social inclusion and independence.

We will contribute to the government's agenda across all adult client groups of promoting independence and reducing the use of care and support in institutional

settings, to increase the number of people living in their own homes and more community-based support arrangements. In Haringey, needs analysis and population trends point to a roughly stable and ongoing demand for supported housing from the older population, with an increase in minority ethnic communities, and an increased demand for housing provision that meets the needs of people with dementia, learning disabilities, autism and aspergers, mental health needs and/ or generally chaotic lifestyles, physical disabilities and people with substance misuse problems. Housing providers will work in partnership with others in meeting the needs of the wide range of client groups in the borough, taking a pathways approach that opens up a range of options.

Through the development and delivery of our Move-On Strategy, we will work to make effective use of the borough's supported housing stock, by helping vulnerable people to become more independent and able to live in mainstream or general needs housing, providing settled homes to those who are able to live independently or with floating support, and promoting choice through the use of choice based lettings.

Delivery of our Supporting People Strategy is key in providing housing-related support to help vulnerable people live independent lives. Much of this work is provided through generic floating support, and specialist support where there are specific or intensive needs. This work is targeted towards a number of different client groups, and geared to complement statutory services, prevent and combat the effects of homelessness or institutionalisation, and promote social inclusion. Housing providers will be active in engaging with Supporting People Services about housing support provision and the commissioning of services.

Through the Vulnerable Adults Delivery Group implementing our Homelessness Strategy we are working to adopt a shared strategic approach to the provision of housing and support for homeless vulnerable adults, ensuring that support packages are tailored to individuals specific needs, and that households move onto suitable accommodation with the support they need.

Priority actions are to:

- Support delivery of the Supporting People Strategy and recommissioning of services.
- Engage in ongoing dialogue with services that work with vulnerable people and service users around their housing needs.
- Develop and deliver a Move-On Strategy
- Implement the conclusions of a supported housing review, responding to the need for more flexible models of housing support and for the development of extra care sheltered housing for those older people with higher levels of need, and to make the most effective use of the £17m Decent Homes funding allocated to bringing the council's supported housing to Decent Homes standard.

- Develop and deliver an Older People's Housing Strategy, building on the goals identified in 'Experience Counts' Haringey's Strategy for improving the quality of life for older people.

3.3 Safeguarding children and young people

Poor housing can have a negative impact on other areas of children and young people's lives. Research suggests that the longer children live in bad accommodation – for example poorly-repaired or heated, or overcrowded housing - the more likely they are to suffer health problems, get bullied, and struggle to keep up with homework¹. Homelessness in particular can have an adverse impact on the health, mental well-being, safety, school attainment and overall life prospects of children². In Haringey in 2008, approximately 7,500 children are homeless and living in temporary accommodation. Moving home can have an impact on children and young people's link with their schools, and housing services will minimise disruption to education caused in this way.

By improving the quality and stability of housing provision we can therefore help to improve other aspects of children's lives. This priority is explored in Haringey's Homelessness Strategy, an objective of which is to 'work to proactively safeguard children and vulnerable adults'. The Children, Young People and Families Delivery Group is accountable for making sure that elements of the action plan relating to this objective are delivered.

Within Haringey's Sustainable Community Strategy, the borough commits to 'safeguard children and adults from abuse and neglect wherever possible and deal with it appropriately and effectively if it does occur'. Across the board, our safeguarding work will ensure that where we work with children, young people and their families, we take all reasonable measures to minimise the risks of harm to children's welfare. Those working in housing organisations take appropriate action where any concerns are identified about children and young people's welfare, and that these are addressed with regard to agreed local policies and procedures and in partnership with other agencies.

Priority actions are to:

- Improve joint working (particularly between housing organisations and services and the Children and Young People's Service), with shared protocols around referrals, assessment, and information sharing, supported by multi-agency training and workshops with frontline staff.
- Ensure staff in relevant housing agencies and partner organisations are fully aware of safeguarding procedures, with regular training to keep them up-to-date, and confident about what to look out for in considering the needs of

¹ Matt Barnes, Sarah Butt, Wojtek Tomaszewski, *What happens to children in persistently bad housing?*, Natcen and Shelter, 2008

² Lisa Harker, *Chance of a lifetime; the impact of poor housing on children's lives*; Shelter, 2008

children and families and how to act on these.

- Placing those families and young people who become homeless and need temporary accommodation, in housing in areas where they have local connections wherever appropriate, and providing stability for them while they are in temporary accommodation.
- Place the needs of children and young people at the fore in the 2009 review of our Lettings Policy
- Undertake work identified in our Homelessness Strategy to adopt a shared strategic approach to provision of housing and support for homeless children and young people
- Ensure households taking up new accommodation have the support they need to access services and settle into a neighbourhood, through provision of information and floating support services, and that unmet needs are identified and followed up at an early stage.
- Review with Children's Services issues relating to public housing provision and the adoption of children, and where flexibilities can be sought to satisfy the best practice aspiration of providing the child with their own bedroom.

4. To make all homes in the borough a part of neighbourhoods of choice

Housing has a role to play in creating well-designed, attractive, clean and safe public spaces where there is a real sense of belonging and pride. Meeting this aim requires a wide range of services to work in partnership.

A number of the actions found elsewhere in this strategy will contribute to achieving this aim. For example enforcement work with landlords, support for vulnerable adults, and employment and skills services can contribute to improved community safety, in addition to the home security and safe by design actions identified below. Similarly, the requirements for strong design and good infrastructure raised under aim one are also important here. This section addresses areas of partnership

Priority actions are to:

- Ensure that local residents are involved in the shaping of local areas and communities.
- Make use of enforcement powers to tackle environmental blight.
- Improve the public realm in the borough through environmental improvement programmes on existing estates
- Tackle the fear of crime through partnership work to improve home security
- Make the most of the impact that design and maintenance can play in reducing crime in community spaces and regeneration initiatives
- For housing services to participate in area-based work to tackle key issues in local areas in a way which is responsive to local concerns

5. To contribute to creating the Greenest Borough

A wide body of scientific evidence now supports the view that climate change is a serious and urgent issue. Baseline carbon emission data (2003) reveals that 49% of CO2 emissions in Haringey are from dwellings. Through modifications to existing homes and strong design for new homes, the energy efficiency of the borough's housing stock can be improved, while changes in the behaviour of residents can also reduce CO2 emissions. We also need to plan for the way that climate change will shape our housing needs in the future, considering where adaptation will be necessary in ensuring that housing is sustainable in the context of environmental change.

We will strengthen the environmental sustainability of housing in the borough, through planning policies, and through encouraging developers, landlords and home owners to adopt the highest possible standards in energy efficiency, sustainable design and construction.

Priority actions are to:

- Enforce planning policies, developed through the emerging Core Strategy, which ensure that development has a lower environmental impact, to help limit climate change and be able to adapt to the effects of climate change in the future through adopting sustainable design and construction measures, and prioritising decentralised energy generation.
- Ensure all planning applications have a sustainability and energy assessment and encourage new build to be low or zero carbon
- All new publicly funded homes to achieve at least level three of the Code for Sustainable Homes
- For regeneration and refurbishment projects to deliver high standards of environmental sustainability
- Support the introduction of 'Retrofit' measures to reduce carbon dioxide emissions from existing homes.
- Improve the energy efficiency of private sector stock through information and provision of grants, the latter provided and registered as a charge against the property.
- Inform and support residents to deliver behaviour change in the use of resources, and the energy efficiency of their homes
- The delivery of catalytic projects to drive change and innovation
- Develop and deliver an Affordable Warmth Strategy for Haringey

Delivering and monitoring the strategy

This strategy will be adopted by the Haringey Strategy Partnership (HSP), which brings together local public agencies, community groups and businesses. Its delivery will be overseen by the Integrated Housing Board, a thematic partnership board which supports the HSP with regards to housing issues.

DRAFT: HARINGEY HOUSING STRATEGY 2009-19

This is an over-arching strategy, and below it sit a number of supporting strategies and areas of work each with their own implementation and monitoring arrangements. The implementation plan identifies where responsibility lies for delivery of this strategy, without seeking to duplicate these arrangements.

A small number of key indicators have been identified which will be monitored quarterly by the Integrated Housing Board. These indicators provide a high level picture of how we are delivering on our vision. They are underpinned by lower level indicators of success and progress which can be interrogated where issues in delivery arise.

Our targets for delivering against these indicators are negotiated with central government on a three yearly basis. The details of the targets and our performance against them can be seen in the Implementation Plan.

Headline indicators	
NI 155	Number of affordable homes delivered (gross)
NI 154	Net additional homes provided
NI 156	Number of households living in Temporary Accommodation
NI 187	Tackling fuel poverty – people receiving income based benefits living in homes with a low energy efficiency rating
NI 158	% Non-decent council homes
NI 160	Local Authority tenants' satisfaction with landlord services
NI 186	Per capita CO2 emissions in the LA area
NI 5	Overall / general satisfaction with local area
NI 141	Percentage of vulnerable people achieving independent living

Haringey's Housing Strategy 2009-19 Implementation Plan

Introduction

This Implementation Plan sets out how we will deliver the commitments made in Haringey's Housing Strategy 2009-19. It identifies how the priority actions in the strategy will be addressed, identifying responsibilities and timeframes for delivery, on a rolling three year basis. It is a 'living document' that will be regularly reviewed and updated. Check on-line for the latest update to this document at www.haringey.gov.uk

The Implementation Plan sets out against the aims of the strategy, the priority actions that will deliver the strategy, a timetable for delivery and identifies milestones, outcomes and responsibilities. The strategy is an over-arching policy document, and below it sit a number of supporting strategies and areas of work each with their own implementation and monitoring arrangements. The implementation plan identifies where responsibility lies for delivery of this strategy, without seeking to duplicate these arrangements.

Haringey's Housing Strategy 2009-19

The strategy identified as our vision for housing in Haringey, the creation of *Neighbourhoods that people choose to live in with a balance of different types of homes which offer quality, affordability and sustainability for current and future generations*

1. **To meet housing need through mixed communities which provide opportunities for our residents**
 - 1.1 Supply new housing as a part of mixed communities
 - 1.2 Connecting housing to employment and skills
 - 1.3 Maximise the supply of housing from existing homes
 - 1.4 Work with residents and private sector landlords to look at alternatives to temporary accommodation

2. **To ensure all housing in the borough is well managed and of high quality and sustainability**

- 2.1 *High quality new build*
- 2.2 *High quality social housing*
- 2.3 *High quality private sector housing*
- 2.4 *High quality temporary accommodation*

3. To provide people with the support and advice they need

- 3.1 *Provision of high quality advice*
- 3.2 *The needs of vulnerable adults and partnership working*
- 3.3 *Safeguarding children and young people*

4. To make all homes in the borough a part of neighbourhoods of choice

5. To contribute to creating the Greenest Borough

Monitoring delivery

Delivery of Haringey's Housing Strategy 2009-19 will be overseen by the Integrated Housing Board, a thematic partnership within Haringey's Strategic Partnership. This plan will be reviewed and updated annually, and progress will be reported and managed at the Integrated Housing Board.

A small number of key indicators have been identified which will be monitored quarterly by the Integrated Housing Board. These indicators provide a high level picture of how we are delivering on our vision. They are underpinned by lower level indicators of success and progress which can be interrogated where issues in delivery arise. The list of indicators and targets for delivery are laid out at the bottom of the Implementation Plan.

Acronyms

SCHS: Strategic and Community Housing Services, London Borough of Haringey

LBH: London Borough of Haringey

IHB: Integrated Housing Board

This document was last updated in March 2009

1. To meet housing need through mixed communities which provide opportunities for our residents

Ref	Priority Action	Where sub-actions lie	Timeframes/ Milestones	Responsible for action	Strategic coordination	Measurable outputs
1.1.1	Maximise the supply of new housing and new affordable housing: deliver on targets set out in the Unitary Development Plan and the Local Area Agreement, including regeneration projects at Haringey Heartlands and Tottenham Hale	LBH Planning and Regeneration Service and SCHS Enabling Team		Head of Planning, Regeneration and Economy		NI 154 Net additional homes provided; NI 155, Number of affordable homes delivered
1.1.2	Deliver new housing in line with Haringey's Housing Supplementary Planning Document	LBH Planning, Regeneration and Economy	Ongoing	Head of Planning, Regeneration and Economy		155, Number of affordable homes delivered
1.1.3	Develop and promote a range of flexible intermediate housing products	SCHS Business Plan	Ongoing, responsive to market environment	Enabling Manager, SCHS, LBH		Partially reflected in NI 154, net additional homes provided
1.1.4	Develop policies for our Local Development Framework which support us in delivering housing that is part of mixed and sustainable communities.	LBH Planning, Regeneration and Economy, Core Strategy Development process	Consultation on Preferred Options Spring 2009; consultation on submission draft Spring 2010. Submission for inspection for Autumn 2011	Head of Planning, Regeneration and Economy	LBH	Submission passed by inspection

1.1.5	Within the Core Strategy development process to evaluate the option to reduce the threshold for developments to contribute to affordable housing from 10 units to 5 units	LBH Planning, Regeneration and Economy, Core Strategy Development process	As above	Head of Planning, Regeneration and Economy	LBH	
1.1.6	Pursue with London Councils and other appropriate bodies the need for London-wide allocations and letting choice		Ongoing lobbying	Lead Member for Housing		
1.1.7	Ensure that delivery of new housing is supported by the infrastructure and services needed to make it part of sustainable communities	See Implementation Plan Aim 4 below.				
1.1.8	Work with local and national partners to broker support and flexibilities which sustain new development	Single Conversation Team	Team established 2009	Director of Urban Environment, LBH	LBH	NI 154 Net additional homes provided; NI 155, Number of affordable homes delivered
1.1.9	Review our partnering arrangements with social housing developers to make sure we are maximising our opportunities	LBH SCHS Business Plan	2009/10	Enabling Manager, Housing Strategy, Development and Partnerships	LBH	
1.1.10	Explore the potential to develop local asset based vehicles and other innovative models to bring together public sector assets, finance, and partners to regenerate areas	Led through LBH Urban Environment Directorate.	Ongoing. Development of a Local Investment Agreement with the HCA, 2009/10	LBH SCHS Head of Housing Strategy, Development and Partnerships	LBH	

1.2 Connecting housing to employment and skills						
1.2.1	Work with Homes for Haringey and social housing providers to connect residents to opportunities for training and employment through the Haringey Guarantee	Regeneration Strategy Implementation Plan, Haringey Guarantee Project		Economic Regeneration, and ALMO Client Manager, SCHS, LBH	Regeneration Programme Board	
1.2.2	Ensure housing advice services and homelessness services are closely linked with employment and skills support, particularly in relation to housing for young people	Homelessness Strategy Action Plan, Priority Four, Provide choice and encourage independence	Employment skills surgery for TA residents, June 09	Head of Housing Support and Options, LBH. Training, Education and Skills Delivery Group,	Homelessness Strategy Implementation Group	
1.2.3	Work with contractors to help residents benefit from employment opportunities arising from their work in the borough through applying the Supplementary Planning Guidance Employment Code of Practice and Employment Training Protocol	Regeneration Strategy Implementation Plan: Section 106 Local Labour Agreements. Development of Tottenham Hale GLS site has allowed the development of a model.	Model to be replicated as other developments come on stream.	Economic Regeneration, LBH	Regeneration Programme Board	Developer to work with LBH Economic Regeneration Service to procure not less than 20% of the total workforce from local labour, half of this as trainees working towards accredited qualifications. Developer to recruit local people qualified to NVQ Level 2/3 in construction skills who undertook training with a local college

1.3 Maximise the supply of housing from existing homes						
1.3.1	Reduce the numbers of empty homes in the borough through delivery of our Empty Homes Strategy	Ongoing work to bring empty homes back into use, SCHS Business Plan. Empty Homes Strategy refresh	Ongoing Strategy refresh March 2010	Housing Improvement Manager, Private Sector	SCHS Business Plan, LBH	Strategy refreshed, 2010
1.3.2	Lobby for the local authority to have the ability to purchase empty properties		Ongoing	Lead Member for Housing		
1.3.3	Develop an Under-occupation Strategy that delivers a borough-wide approach to under-occupation in the social sector, in close partnership with support services	Overcrowding and Under-occupation Strategy	Strategy to be developed by March 2010	Housing Strategy and Partnerships Manager, Head of Housing Strategy, Development and Partnerships, SCHS	SCHS Business Plan, LBH	Strategy produced, milestones and targets developed through implementation plan
1.3.4	Explore options to deliver 'hidden homes' on estates, transforming disused space such as old laundries, shore sheds, or parking space into accommodation.	Homes for Haringey		Head of Strategic and Community Housing Services in partnership with HfH		
1.3.5	Reduce the time taken to re-let homes managed by social landlords	Work with Homes for Haringey through Lettings Service Improvement Group Action Plan. Form RSL and Lettings Forum	Progress in monthly performance against voids targets. Sept 09, Forum in place	Head of Housing Needs and Lettings	Lettings Service Improvement Group	Average Relet Time target. Target set annually, 2009/10 TBC
1.3.6	Investigate options for investing in adaptation of existing stock to meet the changing needs of families as they expand and address over-crowding.	Overcrowding and Under-occupation Strategy	Strategy to be developed by March 2010	Housing Strategy and Partnerships Manager, Head of Housing Strategy, Development and Partnerships	SCHS Business Plan, LBH	Strategy produced, milestones and targets developed through implementation plan

<i>1.4 Work with residents and private sector landlords to look at alternatives to temporary accommodation</i>						
1.4.1	Work proactively with private landlords and residents of temporary accommodation, persuading them to accept a new arrangement involving an assured shorthold tenancy	Homelessness Strategy Action Plan, Priority Five	Scheme to promote AST packages to be developed and promoted 2009/10	Head of Housing Needs and Lettings, LBH. Housing Options Delivery Group	Homelessness Strategy Implementation Group	NI 156, Number of households living in Temporary Accommodation
1.4.2	Establish a Housing Options Team that provides specialist, comprehensive advice on a full range of housing options	Homelessness Strategy Action Plan, Priority Four	Team established and trained 2009/10	Head of Housing Support and Options. Housing Options Delivery Group	Homelessness Strategy Implementation Group	NI 156, Number of households living in Temporary Accommodation
1.4.3	Look into options for providing longer security of tenure through private sector lettings for those on the Temporary Accommodation list.			Head of Housing Needs and Lettings, LBH. Housing Options Delivery Group	Homelessness Strategy Implementation Group	NI 156, Number of households living in Temporary Accommodation

2. To ensure all housing in the borough is well managed and of high quality and sustainability

<i>2.1 High quality new build</i>				
2.1.1	<p>Ensure new housing is developed in line with the policies and standards laid out within the Council's Unitary Development Plan (UDP) and Housing Supplementary Planning Document, and forthcoming Local Development Framework, with high standards of design, sustainable construction, energy efficiency, and the use of renewable energy applied. Expectations will build on the latest regional and national standards, such as the Code for Sustainable Homes and those for Lifetime Homes, the Commission for Architecture and the Built Environment (CABE) building for life standards and the forthcoming London Housing Design Guide, and the emerging Core Strategy's policies on climate change and the use of natural resources.</p>	LBH Planning and Regeneration Service	Ongoing	Head of Planning, Regeneration and Economy
				Planning, Regeneration and Economy Business Plan, LBH

2.2 High quality social housing						
2.2.1	Bring council and social housing stock up to Decent Homes standards	Decent Homes Programme		Chief Executive, Homes for Haringey	Regeneration Programme Board	Ni 158, The proportion of local authority homes which were non 'decent' at 1st April
2.2.2	Engage residents with a view to strengthening their voice, and to building choice over where they live, the services that are delivered to them and how these are delivered.	Business plans of all registered providers and LBH SCHS Sharing of intelligence through LBH SCHS Strategy, Development and Partnerships Team	Ongoing	Housing Strategy and Partnerships Manager, SCHS	IHB	
2.2.3	Work with the Tenant Services Authority, IHB and other forums to share best practise, local intelligence, and performance information, and for constructive challenge of partner performance.	IHB workplan, supported by LBH SCHS Strategy, Development and Partnerships Team	Annual workplan to be developed over first quarter 2009/10	Housing Strategy and Partnerships Manager, SCHS	IHB	
2.2.4	Registered bodies in Haringey to work together to agree on shared housing management standards	Management Standards development and roll-out work to be led by Homes for Haringey	Development of standards 2009/10, roll-out 2010/11	Chief Executive, Homes for Haringey	IHB	Standards in place and widely recognised

2.3 High quality private sector housing						
2.3.1	Use Haringey Council's procurement powers and influence in negotiating leases for temporary accommodation to support engagement with landlords on improving quality and management	Homelessness Strategy, Priority Six	New guidance on procurement agreed 2009/10	Temporary Accommodation Delivery Group	Homelessness Strategy Implementation Group	- Council contract terms amended - new guidance on inspection and enforcement of TA - annual customer surveys - establishment of TA Management Group
2.3.2	Work to source resources that will help landlords improve the condition of private sector homes	SCHS business plan	Ongoing	Housing Improvement Manager, Private Sector		
2.3.3	Improve the quality and energy efficiency of private sector stock through enforcement, information and provision of grants, the latter provided and registered as a charge against the property.	Private Sector Renewal Strategy Affordable Warmth Strategy	Refresh of strategy 2009/10		SCHS Business Plan, LBH	
2.3.4	Identify landlords who are not observing their responsibilities and use enforcement powers vigorously	Enforcement Strategy Implementation Plan	Ongoing	Head of Enforcement Services, LBH	Frontline Services Business Plan, LBH	
2.3.5	Use accreditation and the licensing of Houses in Multiple Occupation as tools to improve standards of management	SCHS business plan	June 2010	Housing Improvement Manager, Private Sector	SCHS Business Plan, LBH	
2.3.6	Explore the potential of discretionary licensing to raise management standards in private rented accommodation	SCHS business plan	March 2010	Housing Improvement Manager, Private Sector	SCHS Business Plan, LBH	

2.3.7	Strengthen our engagement with private sector landlords through regular Landlords Forums and ensure that services provided by the Council are effective in helping them to deliver our aspirations.	SCHS business plan	Ongoing	Head of Housing Strategy, Partnerships and Development	IHB	Regular forums
2.3.8	Ensure that the character of housing in our conservation areas is protected.	LBH Planning, Regeneration and Economy	Ongoing	Assistant Director Planning, Regeneration and Economy	Planning, Regeneration and Economy Business Plan, LBH	

2.4 High quality temporary accommodation

2.4.1	Improve the condition of temporary accommodation through routine inspections and robust enforcement of contracts and standards	Homelessness Strategy Action Plan, Priority Six	- Contract terms amended and guidance on inspection and enforcement 2009 - Annual customers surveys, 2010 on	Temporary Accommodation Delivery Group	Homelessness Strategy Implementation Group	- Council contract terms amended - new guidance on inspection and enforcement of TA - annual customer surveys - establishment of TA Management Group
2.4.2	In consultation with service users, provide new guidance concerning the procurement and allocation of temporary accommodation, and transfers within temporary accommodation.	Homelessness Strategy Action Plan, Priority six	New guidance on procurement agreed 2009/10	Temporary Accommodation Delivery Group	Homelessness Strategy Implementation Group	

3. To provide people with the support and advice they need

3.1 Provision of high quality advice						
3.1.1	Early intervention and the prevention of homelessness.	Homelessness Strategy Action Plan, Priority Two	Actions to April 2010	Homelessness Strategy Implementation Group	HSIG/ IHB	
3.1.2	Establish a Housing Advice Team providing comprehensive advice on all aspects of housing	Homelessness Strategy Action Plan, Priority Two		Homelessness Prevention and Tenancy Sustainment Delivery Group	Homelessness Strategy Implementation Group	
3.1.3	Ensure housing advice closely linked to advice provision in related areas	Housing Improvement Plan	Ongoing	Homelessness Prevention and Tenancy Sustainment Delivery Group	Homelessness Strategy Implementation Group	
3.1.4	Provide training and quality assurance around housing advice to all providers in Haringey	Housing Improvement Plan	Ongoing	Head of Housing Support and Options	Homelessness Strategy Implementation Group	
3.2 Provide joined-up support through multi-agency working						
3.2.1	Support delivery of the Supporting People Strategy and recommissioning of services	Supporting People Strategy Implementation Plan	Ongoing Service recommissioning over 2009/10		Supporting People Executive Management Board	
3.2.2	Engage in ongoing dialogue with people and service users around their housing needs		Ongoing	Head of Housing Support and Options, LBH		

3.2.3	Develop and deliver a Move-On Strategy	Strategic and Community Housing Services Business Plan, LBH	2009	Head of Development, Strategy and Partnerships, LBH SCHS	IHB	Strategy produced
3.2.4	Implement conclusions of a supported housing review, responding to the need for more flexible models of housing support and the development of extra care sheltered housing for older people with higher levels of need, and to make the most effective use of the £17m Decent Homes funding allocated to bringing the council's supported housing to Decent Homes standard over the next six years.	Urban Environment Business Plan 2009/10	2009/10	AD Business Improvement and Strategy	Regeneration Programme Board	
3.2.5	Develop and deliver an Older People's Housing Strategy, building on the goals identified in 'Experience Counts' Haringey's Strategy for improving the quality of life for older people. The strategy will take forward the outcomes of the supported housing review, and improve access to assistance with the repair, maintenance, safety and fuel efficiency of older people's homes.	Development of an Older People's Housing Strategy	April 2010	Head of Development, Strategy and Partnerships, LBH SCHS, in partnership with Older People's Partnership Board	Older People's Partnership Board, and IHB	Strategy produced

3.3 Safeguarding children and young people						
3.3.1	Improve joint working (particularly between housing organisations and services and the Children and Young People's Service), with shared protocols around referrals, assessment, and information sharing, supported by multi-agency training and workshops with frontline staff.	Homelessness Strategy Action Plan, Priority 7	Joint protocols in place, Quarter 2 2009	Children, Young People and Families Delivery Group	Homelessness Implementation Group	
3.3.2	Ensure staff in relevant housing agencies and partner organisations are fully aware of safeguarding procedures, with regular training to keep them up-to-date, and confident about what to look out for in considering the needs of children and families and how to act on these.	Head of Housing Support and Options	Training with council and HfH staff, 2009 Training and information sharing with partner organisations, 2010	LBH, SCHS, Head of Housing Support and Options	SCHS Business Plan, LBH	
3.3.3	Placing those families and young people who become homeless and need temporary accommodation, in housing in areas where they have local connections wherever appropriate, and providing stability for them while they are in temporary accommodation.	Homelessness Strategy Action Plan, Priority 7		Children, Young People and Families Delivery Group	Homelessness Implementation Group	
3.3.4	Place the needs of children and young people at the fore in the 2009 review of our Lettings Policy	SCHS Business Plan, Lettings Policy development	2009/10 (Dec 2009)	Head of Housing Needs and Lettings	SCHS Business Plan, LBH	Lettings Policy in place

3.3.5	Undertake work identified in our Homelessness Strategy to adopt a shared strategic approach to provision of housing and support for homeless children and young people	Homelessness Strategy Action Plan, Priority 7	Q3 2009, set out a shared three year vision, with clear objectives and outcomes	Children, Young People and Families Delivery Group	Homelessness Implementation Group	
3.3.6	Ensure households taking up new accommodation have the support they need to access services and settle into a neighbourhood, through provision of information and floating support services, and that unmet needs are identified and followed up at an early stage.	Homelessness Strategy Action Plan, Priority 7	Q4 2009, procedures amended and training provided	Temporary Accommodation Delivery Group	Homelessness Implementation Group	
3.3.7	Review issues around public housing provision and the adoption of children around provision of bedrooms			Head of Strategic and Community Housing Services		

4. To make all homes in the borough a part of neighbourhoods of choice

4.1	Ensure that local residents are involved in the shaping of local areas and communities	Business plans of social housing providers; business plans of LBH services; Community Engagement Framework Action Plan; Statement of Community Involvement within the LDF	Ongoing	All partners	IHB	
4.2	Make use of enforcement powers to tackle environmental blight	Enforcement Strategy Implementation Plan	Ongoing	Head of Enforcement, Urban Environment, LBH		
4.3	Improve the public realm in the borough through environmental improvement programmes on existing estates	Coordination of work of Council and social landlords through RSL Forum and other communication routes		Head of Housing Development, Strategy and Partnerships, SCHS, LBH		
4.4	Tackle the fear of crime through partnership work to improve home security	Enforcement Strategy Implementation Plan, Aim 3	Roll-out of warden service 2009/10. Target-hardening - ongoing	Environmental Crime Manager, with Antisocial Partnership Board, Acquisitive Crime Partnership Board		
4.4	Make the most of the impact that design and maintenance can play in reducing crime in community spaces and regeneration initiatives	Within the planning requirement that through design developments meet community safety requirements and improve personal safety through design, and in CABE Building for Life Assessment.	Ongoing	Head of Planning, Regeneration and Economy	LBH	

4.5	For housing services to participate in area-based work to tackle key issues in local areas in a way which is responsive to local concerns	<ul style="list-style-type: none"> - Neighbourhood Area Action Plans - Continued strengthening of engagement with partners at an area level 		SCHS, working with Neighbourhood Management		
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5. To contribute to creating the Greenest Borough

5.1	Enforce planning policies, embedded in the emerging Core Strategy, ensuring that development has a lower environmental impact, limiting/ adapting to climate change through sustainable design and construction and decentralised energy generation.	LBH Planning, Regeneration and Economy, Core Strategy Development process Implementation ongoing, Development control	Consultation on Preferred Options Spring 2009; submission draft, consultation Spring 2010. Submission for inspection Autumn 2011	Head of Planning, Regeneration and Economy		
5.2	Ensure all planning applications have a sustainability and energy assessment and encourage new build to be low or zero carbon			Better Haringey Board, Greenest Borough Strategy Implementation		
5.3	All new publicly funded homes to achieve at least level three of the Code for Sustainable Homes	Business Plan, Policy and Design, Planning, Regeneration and Economy, LBH		Head of Planning Policy and Design, Planning, Regeneration and Economy, LBH		

5.4	For regeneration and refurbishment projects to deliver high standards of environmental sustainability	Delivery plans of Group Manager Development Control and Head of Planning Policy and Design, Regeneration and Economy, LBH	Explore low carbon/renewable energy options at key sites: by 2010, Tottenham Hale, Haringey Heartlands; Bridge NDC sites; Central Leaside Joint Area Action Plans	Group Manager Development Control and Head of Planning Policy and Design, Regeneration and Economy, LBH		
5.5	Support the introduction of 'retrofit' measures to reduce CO2 emissions from existing homes					
5.6	Housing providers to ensure investments and improvements secure the best possible environmentally sustainable solutions	Greenest Borough Strategy Implementation, Priority 5: Sustainable design and construction - Decent Homes in Council stock - Coordination of work of Council and social landlords through RSL Forum and other communication routes - Ongoing delivery of fuel poverty programme by Housing Improvement Manager, Private Sector	Stock to meet Decent Homes Standards, SAP efficiency rating of 70, by 2014	- Decent Homes Programme, HfH, and, LBH ALMO Client Manager	Regeneration Programme Board	NI 158, The proportion of local authority homes which were non 'decent' at 1st April
5.7	Improve the energy efficiency of private sector stock through information and provision of grants, the latter provided and		Affordable Warmth Strategy by March 2010	Housing Improvement Manager, Private Sector		Strategy produced

	registered as a charge against the property.	- Development of Affordable Warmth Strategy				
5.8	Inform and support to residents to deliver behaviour change in the use of resources, and the energy efficiency of their homes	Greenest Borough Strategy, Priority 3: information and awareness raising through coordinated communications campaigns, domestic energy audits, and partnership work	Ongoing		Regeneration Programme Board	
5.9	The delivery of catalytic projects to drive change and innovation					
5.10	Develop and deliver an Affordable Warmth Strategy for Haringey					

Performance Indicators

NI:	National Indicator	Sustainable Community Strategy Priority	Baseline	2008/09 Target	2009/10 Target	2010/11 Target	Partners (* denotes where lead partner is not the council)	Thematic Board
NI 154*	Net additional homes provided * (Frozen target re-assess at year 2 refresh)	People at the heart of change	06/07: 1067	1657 (Haringey's projected additional units)	1602 (Haringey's projected additional units)	1195 (Haringey's projected additional units)	Council - Niall Bolger; RSLs; Housing Corporation	Integrated Housing Board
NI 155	Number of affordable homes delivered (gross) (Frozen target re-assess at year 2 refresh)	People at the heart of change	2006/07 204 2007/08 250	340	340	340	Council - Niall Bolger	Integrated Housing Board
NI 156*	Number of households living in temporary accommodation *	Healthier People with a better quality of life	5206 (Dec 2004 baseline)	4250	4000	2600	Council - Niall Bolger	Integrated Housing Board
NI 158	% of non-decent council homes	Healthier People with a better quality of life	42.0% (Q3 07/08) 44.67% (06/07), 49.91% (05/06)	36%	36%	30%	Council - Niall Bolger	Integrated Housing Board

NI 186*	Per capital CO2 emissions in the LA area *	An environmentally sustainable future	4.9 tonnes per capita (Defra 2005)	3.6% reduction against baseline (0.18 tonnes per capita)	7.4% reduction against baseline (0.36 tonnes per capita)	11 % reduction against baseline (0.54 tonnes per capita)	Council - Niall Bolger	Better Places Partnership
NI 141*	% of vulnerable people achieving independent living *	Healthier people with a better quality of life	07/08 65%.	75%	77%	79%	Council - Phung Mun; TPCT	Wellbeing Partnership
NI 187*	Tackling fuel poverty - % of people receiving income based benefits living in homes with a low energy efficiency rating * a) SAP Rating <35 b) SAP Rating >65	Healthier people and a better quality of life Environmentally sustainable future	a) 13.53% b) 13.04% (survey 0008/09)	-	a) 13 % b) 14 %	a) 12% b) 15%	Council - Niall Bolger; EAGA; British Gas; Fire Service; TPCT; Police; metropolitan Support Trust; Age Concern	Integrated Housing Board

NI 160	Local Authority tenants' satisfaction with landlord services: % of respondents who are very or fairly satisfied with the overall service provided by their landlord	People and customer focused	N/A	64%	66%	68%	Council – Phil Harris	N/A Responsible lead, LBH
NI 5	Overall / general satisfaction with local area	People at the heart of change	2009 baseline to be set through Place Survey	Targets to be agreed when baseline is confirmed by the Audit Commission			N/A Responsible lead, LBH	N/A Responsible lead, LBH