

## NOTICE OF MEETING

# ADULTS & HEALTH SCRUTINY PANEL

**Thursday, 17th January, 2019, 6.30 pm - Civic Centre, High Road, Wood Green, N22 8LE**

**Members:** Councillors Pippa Connor (Chair), Nick da Costa, Eldridge Culverwell, Mike Hakata, Felicia Opoku, Sheila Peacock and Yvonne Say.

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

Quorum: 3

### 1. **FILMING AT MEETINGS**

Please note that this meeting may be filmed or recorded by the Council for live or subsequent broadcast via the Council's internet site or by anyone attending the meeting using any communication method. Although we ask members of the public recording, filming or reporting on the meeting not to include the public seating areas, members of the public attending the meeting should be aware that we cannot guarantee that they will not be filmed or recorded by others attending the meeting. Members of the public participating in the meeting (e.g. making deputations, asking questions, making oral protests) should be aware that they are likely to be filmed, recorded or reported on.

By entering the meeting room and using the public seating area, you are consenting to being filmed and to the possible use of those images and sound recordings.

The chair of the meeting has the discretion to terminate or suspend filming or recording, if in his or her opinion continuation of the filming, recording or reporting would disrupt or prejudice the proceedings, infringe the rights of any individual or may lead to the breach of a legal obligation by the Council.

### 2. **APOLOGIES FOR ABSENCE**

### 3. **ITEMS OF URGENT BUSINESS**

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

### 4. **DECLARATIONS OF INTEREST**

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

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

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

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

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

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

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

## **6. MINUTES (PAGES 1 - 8)**

To approve the minutes of the previous meeting.

## **7. SCRUTINY OF THE 2019/20 DRAFT BUDGET / 5 YEAR MEDIUM TERM FINANCIAL STRATEGY (2019/20-2023/24) (PAGES 9 - 42)**

For the Panel to consider and provide recommendations to the Overview and Scrutiny Committee on the 2019-20 Draft Budget and on the MTFS 2019/20 - 2023/24 and savings proposals relating to the Panel's remit.

## **8. NEW ITEMS OF URGENT BUSINESS**

To consider any items admitted at item 3 above.

## **9. DATES OF FUTURE MEETINGS**

Dominic O'Brien, Principal Scrutiny Officer  
Tel – 020 8489 5896  
Fax – 020 8881 5218  
Email: dominic.obrien@haringey.gov.uk

Bernie Ryan  
Assistant Director – Corporate Governance and Monitoring Officer  
River Park House, 225 High Road, Wood Green, N22 8HQ

Wednesday, 09 January 2019

**MINUTES OF THE MEETING OF THE ADULTS & HEALTH  
SCRUTINY PANEL HELD ON THURSDAY, 1ST NOVEMBER 2018,  
6.30 - 9.25 pm**

**PRESENT:**

**Councillors: Pippa Connor (Chair), Nick da Costa, Mike Hakata,  
Sarah James, Felicia Opoku, Sheila Peacock and Yvonne Say**

**15. FILMING AT MEETINGS**

The Chair referred Members present to agenda Item 1 as shown on the agenda in respect of filming at this meeting, and Members noted the information contained therein'.

**16. APOLOGIES FOR ABSENCE**

Apologies for absence had been received from co-opted member, Helena Kania.

**17. ITEMS OF URGENT BUSINESS**

None.

**18. DECLARATIONS OF INTEREST**

Cllr Pippa Connor declared an interest by virtue of her membership of the Royal College of Nursing.

Cllr Pippa Connor declared an interest by virtue of her sister working as a GP in Tottenham.

**19. DEPUTATIONS/PETITIONS/ PRESENTATIONS/ QUESTIONS**

Cllr Peray Ahmet, Cabinet Member for Adults & Health, provided a brief update to the panel on the following points:

- Budget planning and consultation was ongoing ahead of the next financial year, with adult social care services continuing to suffer from reductions to the budget of 40% since 2010 but the Council would do its utmost to protect the most vulnerable. Supporting vulnerable adults is a key objective of the new Borough Plan which is currently out for consultation.
- At the most recent Cabinet meeting [on October 9<sup>th</sup>], approval was given to plans for the acquisition of the freehold of the former health centre in Canning Crescent and to repurpose the building as a new multi-use mental health hub which will have 21 sheltered units and a crisis café.
- A meeting had been held last week on the redesign of adult social care.

- Plans were being developed to bring some of the closed day care centres back into use.
- Plans for a single homelessness hub had been approved at a previous Cabinet meeting.
- An “Understanding Adult Social Care” event was being held on 6<sup>th</sup> November at Tottenham Green leisure centre.

Cllr Ahmet and Charlotte Pomery, Assistant Director for Commissioning, responded to questions on the following issues:

- Options were being considered on future plans for OGNH. A co-design group chaired by Cllr Ahmet continues to meet and there is also a sub-group chaired by Gordon Peters. Representatives of the CCG attend these groups. It is anticipated that a decision on the future of OGNH would be made by Cabinet in March 2019 with the possible development process then taking approximately 18-24 months.
- On the possible reopening of day care centres, there was still a commitment to the Day Opportunities model and further discussions would take place on the future approach with the co-design groups but the main aim was to bring those assets back into use while following a needs-led approach. There was no timeline decided for this yet.

## 20. MINUTES

With regards to the minutes of the meeting held on 4<sup>th</sup> September 2018:

- Beverley Tarka, Director of Adults and Health, provided a performance update summary on Osborne Grove Nursing Home (OGNH) which was an action point from the previous meeting. She reported that:
  - There are a range of audits which identify how well the home is doing against the five CQC criteria including from the Council’s own Commissioning Quality Assurance team, the CCG and from external auditor Mazurs.
  - The OGNH Steering Group provides oversight and direction on areas including performance, safeguarding and the improvement plan.
  - Five safeguarding alerts had been raised in the last three months.
  - Improvement was required on fall risk assessments, recording of care given, mental health care including dementia, continence care, infection prevention/control, variety of activities and variety of menu.
  - Revised care plans were now in place, key worker arrangements had been implemented and a new clinical lead was in place.
  - The Mazurs audit had awarded a ‘substantial’ rating across a number of different areas including governance and staffing.
- In response to questions from members of the panel, Beverley Tarka said that:
  - The areas that required improvement, according to the Mazurs audit, were mainly operational practices such as the lack of a central operational manual, monitoring of staff claims and maintenance of the asset register.
  - The CQC report had highlighted issues with record keeping and there had been extensive monitoring and oversight to improve recording practice but there was still further room for improvement.
  - The Head of Operations, who directly line manages the registered manager at OGNH, has a place on the oversight committee.

- There is a service improvement plan and an ongoing programme of audit to address the issues of concern but there is no specific timeline for this as they relate to ongoing practice issues.
- In relation to whether the embargo on new residents at OGNH could be lifted, there had been a clear Cabinet decision in June to keep the existing residents there but not to admit any new residents.
- In relation to recent reported safeguarding alerts, it was not possible to provide the panel with additional information on this as this could be too easily identifiable due to the limited number of clients at OGNH.

**AGREED: That the minutes of the Adults & Health Scrutiny Panel meeting held on 4<sup>th</sup> September 2018 be approved as an accurate record.**

### **21. HARINGEY SAFEGUARDING ADULTS BOARD - ANNUAL REPORT 2017/18**

Dr Adi Cooper, Independent Chair of the Haringey Safeguarding Adults Board presented the Board's annual report for 2017/18. The publication of an annual report is one of the three statutory duties that the Board has under the Care Act 2014 and it provides the opportunity to set out the Board's achievements, priorities and future improvements to the way that vulnerable people are safeguarded. Particular points highlighted by Dr Cooper included:

- That attendance at the Board is good and growing, now including representation from social housing providers and the local DWP.
- The Board has undertaken its first Safeguarding Adult Review (SAR) following the death of Robert which has been helpful in identifying areas for action, development and learning.
- The Board has started to do work across the North Central London (NCL) area to try to develop more aligned ways of working.

In response to questions from members of the panel, Dr Cooper, Beverley Tarka, Director of Adults and Health, John Everson, Assistant Director for Adults and Charlotte Pomery, Assistant Director for Commissioning said:

- That Homes for Haringey (HfH) are a member of the Board. There is not presently any representation from higher education providers but this would be worth exploring.
- With regards to the statement that over 60% of the Board's financing comes from Council (paragraph 1.9), the remainder of the funding comes from health and the police. There is never enough resources to do everything that the Board would like to do but there are conversations ongoing at national, regional and local levels about contributions from partners and about how to make the best use of the resources that are available.
- The SAR had been taken to the suicide prevention group which had been helpful although suicide prevention does not necessarily fit neatly into adult safeguarding.
- Processes put in place since the SAR mean that principal social workers now sit on the panels with housing colleagues in cases where vulnerabilities have been identified. This does not change HfH protocols but allows for knowledge on vulnerabilities to be explored as part of discussions as part of the learning from the SAR was that panel at the time didn't have full understanding of Robert's circumstances. An action plan for the SAR will include monitoring the embedding of new practices. Members with concerns about individual cases can raise these through Astrid Kjellberg-Obst, Executive Director of Operations at HfH.

- With regards to the outstanding action points on paragraph these were completed or ongoing as stated except for the one on staffing where there was a revised date although there had been some recent success in recruiting permanent staff to the vacant posts and the end was to complete this by the end of the year.
- The community alarm system (known as Lifeline) has its own operational performance information and so this was not included in the report but this information could be made available if required. Any safeguarding alerts originating from this system would be included within the report.
- The improvements to staff awareness about Making Safeguarding Personal (MSP) (paragraph 2.2.1) predominantly refers to Council staff although the expectation should be that staff from all partners would endeavour to work in this way. Evidencing that kind of data would likely require multi-agency case file audit work. The sub-group on quality assurance is developing a multi-agency audit tool which could help to collect this kind of data in future and further information is likely to be available in the next annual report.
- On the NCL learning event in Nov 2017 (paragraph 2.3), another event was planned this December so this was becoming an annual event and would help to improve joint strategic planning year on year across the sub-region.
- The delivery of safeguarding training (paragraph 2.4.1) in the care sector could be challenging because of the high turnover of staff but a lot of work with partners on workforce development was ongoing across the NCL area, including by developing portability of training between providers and maximising resources available to support training.
- There are aspirations to develop joint working with the Local Safeguarding Children Board (LSCB) through the action plan for this year. National changes around LSCBs are currently ongoing.
- On the low levels of MCA and DoLS training take-up at North Middlesex hospital (paragraph 3.4), Dr Cooper agreed to request an update be requested from North Middlesex and provide these details to the panel in due course. **(Action: Dr Adi Cooper)**
- Three advocacy services had recently been commissioned by the Council, one under the Childrens Act, one on mental health advocacy for adults and one under the Care Act for adults.
- It was difficult to obtain data on the types of abuse that occur within the home, officers agreed to check whether there was any data on this that could be provided. **(Action: Charlotte Pomery)**
- With regards to the demographic data in section 4 of the report, the reason that household income levels were not provided was because this was not included in the national returns and ward level data was not provided because the numbers were too small to be meaningful. The panel was concerned that information on social class was not available.

In summing up the panel's recommendations Cllr Connor commented that:

- A short summary capturing the key areas of the annual report would be useful next time given the length of the report.
- It would also be useful to receive information at the next annual report about process on the multi-agency case file audit tool.

- More information should be collected on safeguarding within the home setting and more training could be targeted at people that have access to vulnerable individuals within the home.
- Progress on joint working with the LSCB would be useful in next annual report.
- Information on ward data would be welcomed in the next annual report.
- Any additional learning from the membership of the DWP on the Board would be welcomed in the next annual report.

**AGREED: That the Board's Annual Report for 2017/18 be noted with consideration to be given to the panel's aforementioned recommendations.**

## 22. SUICIDE PREVENTION

Chantelle Fatania, Consultant in Public Health presented the update report on the Haringey Suicide Prevention Action Plan, supported by Professor David Mosse, Chair of the Haringey Suicide Prevention Group (HSPG), and Tim Miller, CCG commissioner for Mental Health.

Chantelle Fatania said that 55 people had died by suicide in Haringey between 2014 and 2016 representing a suicide rate of 10.3 per 100,000 people. This was the fifth highest in London and higher than the overall rate for England of 9.9 per 100,000 people. A 2016 audit of suicides in Haringey found that 75% of people of deaths were male, the highest rate being those aged 25-44, which is similar to national trends. 66% of deaths took place in the east of the borough.

The factors leading to suicide are often complex and a result of multiple factors so no one organisation is able to influence them all. A collaborative multi-agency approach to suicide prevention is therefore required and so the HSPG coordinates a range of local organisations to reduce risk factors and reinforce protective factors, particularly by providing social support to vulnerable people, raising awareness around suicide and supporting people who have been bereaved by suicide. The HSPG meets on a quarterly basis and the membership includes Haringey Public Health, the Clinical Commissioning Group, Metropolitan Police, Barnet Enfield Haringey Mental Health Trust, British Transport Police and local charities. The Haringey Suicide Prevention Action Plan uses the national Suicide Prevention Strategy for England's six "Areas for Action" framework as a best practice model. Actions within the plan include:

- A suicide prevention respite retreat provided by the Maytree charity supporting people in suicidal crisis in a non-medical setting.
- A psychiatric liaison service in the A&E department of North Middlesex Hospital, including peer support workers to support those in suicidal crisis.
- The Haringey well-being network led by the Mind charity which provides an integrated mental health support service.
- Mental health first aid training has been provided to over 200 front-line workers and residents in the last year.
- Suicide prevention fencing at Archway Bridge had recently been approved.

Professor David Mosse commented that, according to Public Health England guidelines the responsibility for local implementation of the national Suicide Prevention Strategy had been passed down to local authorities. While there was no mandatory requirement to do this, the recommendations were to establish a local suicide prevention plan, a local suicide prevention group and to carry out a suicide audit. This had happened in Haringey but what was different about the HSPG is that the lead is from within the community, hosted by Mind and with buy-in

from a wide range of organisation, both statutory and non-statutory. There was almost no financial backing from the local authority – a small amount of funding provided one member of staff for one day a week but the rest of the work is done on a voluntary basis. The HSPG has put together a business plan for suicide liaison service in the North Central London (NCL) area which would provide timely practical and emotional support for people who have been bereaved by suicide. This type of support is currently unavailable and there is a well evidenced business plan but no money had been made available. While the HSPG is providing an exemplary example of what the government expects through its national Suicide Prevention Strategy it is doing so with very little financial backing.

Responding to questions from the panel, Chantelle Fatania, Professor David Mosse and Tim Miller said:

- That the suicide data from coroners is a problem and that there is almost certainly a significant underestimation of the number of suicides in the official figures. The coroners' data also does not provide details on sexual orientation or ethnicity so there are no national figures on these. Without this data it is more difficult to identify communities in need of particular support.
- Participation from LGBT+ groups in Haringey with the HSPG would be welcomed.
- An app called Kooth, which provides online counselling and peer-to-peer support to 10-16 year olds, had been operational in other boroughs and had been shown to be effective.
- Recent analysis suggests that men working in the construction industry, many of whom are of eastern European origin, are at particularly high risk of suicide. Addressing this requires a multi-agency approach including buy-in from the construction industry. Cllr Connor agreed to raise this with the relevant Cabinet Members. **(Action - Cllr Connor)**
- Peer-supported Open Dialogue (POD) is being trialled in the south-east of Haringey. The principles of a person-first rather than diagnosis-first approach can be applied to primary care settings as well as in A&E settings.

Cllr Connor welcomed the presentations and agreed to take up the issue of suicide liaison service business plan with the Chair of the Joint Health Overview & Scrutiny Committee for the NCL area, Cllr Alison Kelly. **(Action - Cllr Connor)**

Will Maimaris, Director of Public Health, commented that the issue of funding was a challenging one in the current circumstances but the suicide liaison service proposal and the Kooth app could both be looked at.

### **23. PRIORITY 2 BUDGET POSITION (QUARTER 1 - 2018/19)**

John Everson, Assistant Director for Adults, introduced the report on the budget position for Priority 2 of the Corporate Plan for Quarter 1 of 2018/19 and made the following points:

- There were a number of projected overspends totalling £4.4m.
- £3.5m of the overspend related to adult care packages, £2.9m of which related to underlying care package pressures that were brought forward from the previous year and £0.6m of which related to planned savings that had not been delivered. £1.8m out of the £2.4m of planned savings had been met however and work would continue on attempting to deliver the remaining £0.6m.
- £0.7m of the overspend related to the increased costs relating to the ongoing situation at Osborne Grove Nursing Home.



- £0.1m of the overspend related to variance on commissioning costs.

Responding to questions from the panel, John Everson and Beverley Tarka said:

- On the section marked “Other” in Table 1 of the report, further details about the breakdown could be provided to the panel in writing. **(Action – John Everson)**
- On the care packages overspend, the complexity of care is an issue which can be difficult to manage and creates a lot of the extra cost. People are being supported at an earlier stage, including through providing the right information and reablement at the right point but there are also opportunities to improve and provide better value care.
- On care assessments, practitioners are supported to use a strength-based approach building on the positives that an individual has with the aim of providing both value for money and quality of support. In relation to concerns that social workers could be put under pressure when assessing due to limited resources, it was pointed out that the functions of commissioning and assessments have been separated out in recent years with a separate brokerage team sourcing the care packages.
- The annual budget for OGNH is just over £1m so, with the overspend included, the total cost is approximately £1.7m.

Cllr Connor recommended that an overview on capital budget should be provided in addition to the revenue budget in future reports. More detail on budget pressures rather than just headline figures could also be provided.

**AGREED: That the report be noted.**

## **24. WORK PROGRAMME UPDATE**

The panel discussed the draft work programme and preparations for the proposed scrutiny review on day opportunities. It was noted that the Joint Partnerships Board’s reference groups could be a useful source of information about the views of carers and service users about day opportunities. Various day centres, carers groups and luncheon clubs could also be approached in order to try and obtain a diverse range of views from across the borough.

## **25. NEW ITEMS OF URGENT BUSINESS**

None.

CHAIR: Councillor Pippa Connor

Signed by Chair .....

Date .....

This page is intentionally left blank

**Report for:** Budget Scrutiny Panels

- Housing and Regeneration Scrutiny Panel, 17<sup>th</sup> December 2018
- Children and Young People Scrutiny Panel, 18<sup>th</sup> December 2018
- Environment and Community Safety Scrutiny Panel, 18<sup>th</sup> December 2018
- Overview and Scrutiny Committee, 14<sup>th</sup> January 2019
- Adults and Health Scrutiny Panel, 17<sup>th</sup> January 2019

**Title:** Scrutiny of the 2019/20 Draft Budget / 5 Year Medium Term Financial Strategy (2019/20-2023/24)

**Report authorised by:** Jon Warlow, Director of Finance and Section 151 Officer

**Lead Officer:** Oladapo Shonola, Lead Officer Budget & MTFS

**Ward(s) affected:** N/A

**Report for Key/  
Non Key Decision:** N/A

**1. Describe the issue under consideration**

- 1.1 To consider and comment on the Council's 2019/20 Draft Budget / 5 year Medium Term Financial Strategy (MTFS) 2019-20 - 2023 proposals relating to the Scrutiny Panels' remit.

**2. Recommendations**

- 2.1 That the Panels consider, and provide recommendations to Overview and Scrutiny Committee, on the 2019-20 Draft Budget/MTFS 2019/20 to 2023/24 and savings proposals relating to the Scrutiny Panel's remit.

**3. Background information**

- 3.1 The Council's Overview and Scrutiny Procedure Rules (Constitution, Part 4, Section G) state: "The Overview and Scrutiny Committee shall undertake scrutiny of the Council's budget through a Budget Scrutiny process. The procedure by which this operates is detailed in the Protocol covering the Overview and Scrutiny Committee".
- 3.2 Also laid out in this section is that "the Chair of the Budget Scrutiny Review process will be drawn from among the opposition party Councillors sitting on the Overview and Scrutiny Committee. The Overview and Scrutiny Committee shall not be able to change the appointed Chair unless there is a vote of no confidence as outlined in Article 6.5 of the Constitution".

**4. Overview and Scrutiny Protocol**

- 4.1 The Overview and Scrutiny Protocol lays out the process of Budget Scrutiny and includes the following points:
- a. The budget shall be scrutinised by each Scrutiny Review Panel, in their respective areas. Their reports shall go to the OSC for approval. The areas of the budget which are not covered by the Scrutiny Review Panels shall be considered by the main OSC.

- b. A lead OSC member from the largest opposition group shall be responsible for the co-ordination of the Budget Scrutiny process and recommendations made by respective Scrutiny Review Panels relating to the budget.
- c. Overseen by the lead member referred to in paragraph 4.1.b, each Scrutiny Review Panel shall hold a meeting following the release of the December Cabinet report on the new Draft Budget/MTFS. Each Panel shall consider the proposals in this report, for their respective areas. The Scrutiny Review Panels may request that the Cabinet Member for Finance and/or Senior Officers attend these meetings to answer questions.
- d. Each Scrutiny Review Panel shall submit their final budget scrutiny report to the OSC meeting in January containing their recommendations/proposal in respect of the budget for ratification by the OSC.
- e. The recommendations from the Budget Scrutiny process, ratified by the OSC, shall be fed back to Cabinet. As part of the budget setting process, the Cabinet will clearly set out its response to the recommendations/ proposals made by the OSC in relation to the budget.

## **5. Draft Budget (2019/20) / 5 year MTFS (2019/20 – 2023/24)**

- 5.1 The MTFS agreed by Council in February 2018 recognised a budget gap of £11m in 2019/20 that would need to be closed through further budget reductions. The proposed 2019/20 new budget reductions required to help close this gap (i.e. savings, cuts and income generation) of £7m in 2019/20 (rising to £12.8m by 2023/24) are presented for scrutiny.
- 5.2 Even with the budget reduction options set out in Appendix D being approved when the budget is finalised in February, it is presently estimated that the Council will need to have put into effect £6.5m of further budget reductions. This is after the planned utilisation of £10.5m of corporate reserves and balances in 2019/20. The current 2019/20 gap of £6.5m still needs to be addressed before the Final Budget/ MTFS is submitted to Cabinet and Council in February 2019.
- 5.3 The Council continues to have a structural funding gap in 2020/21 estimated at £18.4m - this rises to £26.4m in 2023/24. This gap will be reduced to the extent that further ongoing budget reductions are identified and put into effect in 2019/20.
- 5.4 Scrutiny panel recommendations relating to 2018/19 savings that were previously considered in December 2017/January 2018 which also form part of the 2018/19 budget setting process are attached at Appendix D.
- 5.5 This meeting is asked to consider the proposals relating to the services within its remit and to make draft recommendations to be referred to the Overview and Scrutiny Committee on 28<sup>th</sup> January 2019 for discussion, prior to approval and referral to Cabinet for consideration in advance of the Full Council meeting on 25<sup>th</sup> February 2019. For reference the remit of each Scrutiny Panel is as follows:
  - Priority 1/People (Children) – Children and Young People Scrutiny Panel
  - Priority 2 / People (Adults) – Adult and Health Scrutiny Panel
  - Priority 3 / Place – Environment and Community Safety Scrutiny Panel
  - Priority 4 / Economy – Housing and Regeneration Scrutiny Panel
  - Priority 5 / Housing – Housing and Regeneration Scrutiny Panel
  - Priority X / Your Council– Overview and Scrutiny Committee

- 5.6 As an aide memoire to assist with the scrutiny of budget proposals, possible key lines of enquiry are attached at Appendix A. This report is specifically concerned with Stage 1 (planning and setting the budget) as a key part of the overall annual financial scrutiny activity.
- 5.7 Appendix B sets out the summary of the Draft Budget / 5 year MTFs by priority area.

## **6. Contribution to strategic outcomes**

- 6.1 The Budget Scrutiny process for 2019/20 will contribute to strategic outcomes relating to all Council priorities.

## **7. Statutory Officers comments**

### **Finance**

- 7.1 There are no financial implications arising directly from this report. Should any of the work undertaken by Overview and Scrutiny generate recommendations with financial implications then these will be highlighted at that time.

### **Legal**

- 7.2 There are no immediate legal implications arising from this report.
- 7.3 In accordance with the Council's Constitution (Part 4, Section G), the Overview and Scrutiny Committee should undertake scrutiny of the Council's budget through a Budget Scrutiny process. The procedure by which this operates is detailed in the Protocol, which is outside the Council's constitution, covering the Overview and Scrutiny Committee.

### **Equality**

- 7.4 The draft Borough Plan sets out the Council's overarching commitment to tackling poverty and inequality and to working towards a fairer Borough.
- 7.5 The Council is also bound by the Public Sector Equality Duty under the Equality Act (2010) to have due regard to the need to:
- Eliminate discrimination, harassment and victimisation and any other conduct prohibited under the Act
  - Advance equality of opportunity between people who share those protected characteristics and people who do not
  - Foster good relations between people who share those characteristics and people who do not.
- 7.6 The three parts of the duty applies to the following protected characteristics: age, disability, gender reassignment, pregnancy/maternity, race, religion/faith, sex and sexual orientation. Marriage and civil partnership status applies to the first part of the duty.
- 7.7 The Council has designed the proposals in this report with reference to the aims of the Borough Plan to reduce poverty and inequality. The Council is committed to protecting frontline services wherever we can and the budget proposals have focused as far as possible on delivering efficiencies or increasing income, rather than reduction in services.

- 7.8 As plans are developed further, each area will assess the equality impacts and potential mitigating actions in more detail. Final EQIAs will be published alongside decisions on specific proposals.
- 7.9 Any comments received will be taken into consideration and a further update will be brought to Cabinet on 12<sup>th</sup> February 2018.

### **8. Use of Appendices**

Appendix A – Key lines of enquiry for budget setting

Appendix B – 5 year Draft Budget (2019-20) / Medium Term Financial Strategy  
(2019/20 – 2023/24) - Cabinet 11<sup>th</sup> December 2018

Appendix C – 2018 (Prior Year) Overview & Scrutiny Recommendations

Appendix D – 2019 (New) Budget Proposals

Appendix E – Summary of Capital Programme

### **9. Local Government (Access to Information) Act 1985**

Background papers: 2019/20 Draft Budget / 5 year MTFS (2019/20 – 2023/24) -  
Cabinet 11<sup>th</sup> December 2018

## **Financial Scrutiny: Understanding your Role in the Budget Process**

This document summarises issues and questions you should consider as part of your review of financial information. You might like to take it with you to your meetings, and use it as an aide-memoir.

### **Overall, is the MTFS and annual budget:**

- A financial representation of the council's policy framework/ priorities?
- Legal (your Section 151 Officer will specifically advise on this)?
- Affordable and prudent?

### **Stage 1 – planning and setting the budget**

Always seek to scrutinise financial information at a strategic level and try to avoid too much detail at this stage. For example, it is better to ask whether the proposed budget is sufficient to fund the level of service planned for the year rather than asking why £x has been cut from a service budget.

Possible questions which Scrutiny members might consider –

- Are the MTFS, capital programme and revenue budget financial representations of what the council is trying to achieve?
- Does the MTFS and annual budget reflect the revenue effects of the proposed capital programme?
- How does the annual budget relate to the MTFS?
- What level of Council Tax is proposed? Is this acceptable in terms of national capping rules and local political acceptability?
- Is there sufficient money in “balances” kept aside for unforeseen needs?
- Are services providing value for money (VFM)? How is VFM measured and how does it relate to service quality and customer satisfaction?
- Have fees and charges been reviewed, both in terms of fee levels and potential demand?
- Does any proposed budget growth reflect the council's priorities?
- Does the budget contain anything that the council no longer needs to do?
- Do service budgets reflect and adequately resource individual service plans?
- Could the Council achieve similar outcomes more efficiently by doing things differently?

### **Stage 2 – Monitoring the budget**

It is the role of “budget holders” to undertake detailed budget monitoring, and the Executive and individual Portfolio Holders will overview such detailed budget monitoring. Budget monitoring should never be carried out in isolation from service performance information. Scrutiny should assure itself that budget monitoring is being carried out, but should avoid duplicating discussions and try to add value to the process. Possible questions which Scrutiny members might consider –

- What does the under/over spend mean in terms of service performance? What are the overall implications of not achieving performance targets?
- What is the forecast under/over spend at the year end?
- What plans have budget managers and/or the Portfolio Holder made to bring spending back on budget? Are these reasonable?
- Does the under/over spend signal a need for a more detailed study into the service area?

**Stage 3 – Reviewing the budget**

At the end of the financial year you will receive an “outturn report”. Use this to look back and think about what lessons can be learned. Then try to apply these lessons to discussions about future budgets. Possible questions which Scrutiny members might consider –

- Did services achieve what they set out to achieve in terms of both performance and financial targets?
- What were public satisfaction levels and how do these compare with budgets and spending?
- Did the income and expenditure profile match the plan, and, if not, what conclusions can be drawn?
- What are the implications of over or under achievement for the MTFS?
- Have all planned savings been achieved, and is the impact on service performance as expected?
- Have all growth bids achieved the planned increases in service performance?
- If not, did anything unusual occur which would mitigate any conclusions drawn?
- How well did the first two scrutiny stages work, were they useful and how could they be improved?



**HARINGEY GENERAL FUND BUDGET 2019/20 AND MEDIUM TERM FINANCIAL  
PLAN 2019/24**

**Appendix B**

	2018/19 Budget	Movemen t	2019/20 Projecte d	Movemen t	2020/21 Projecte d	Movemen t	2021/22 Projecte d	Movemen t	2022/23 Projecte d	Movemen t	2023/24 Projected
<b>Services</b>	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>
Priority 1	54,525	4,766	59,291	(401)	58,890	(90)	58,800	0	58,800	0	58,800
Priority 2	91,809	6,319	98,128	(4,584)	93,544	(6)	93,538	39	93,577	(100)	93,477
Priority 3	27,920	(731)	27,189	(1,565)	25,624	(600)	25,024	(70)	24,954	(70)	24,884
Priority 4	4,716	(2,310)	2,406	(15)	2,391	0	2,391	0	2,391	0	2,391
Priority 5	19,833	(1,036)	18,797	(708)	18,089	(573)	17,516	0	17,516	0	17,516
Priority X	38,281	(2,795)	35,487	(2,505)	32,982	(25)	32,957	(6)	32,951	(6)	32,945
Non Service Revenue	13,026	23,521	36,548	(92)	36,456	5,532	41,988	9,416	51,404	8,041	59,445
Further Savings to be identified	0	(6,521)	(6,521)	(11,921)	(18,443)	(1,532)	(19,974)	(4,029)	(24,003)	(2,414)	(26,417)
Contribution from Reserves and Balances		(10,487)	(10,487)	10,487	0	0	0	0	0	0	0
<b>Total Budget Requirement</b>	<b>250,110</b>	<b>10,726</b>	<b>260,836</b>	<b>(11,304)</b>	<b>249,533</b>	<b>2,706</b>	<b>252,239</b>	<b>5,350</b>	<b>257,589</b>	<b>5,451</b>	<b>263,040</b>
<b>Funding</b>											
New Homes Bonus	(2,736)	336	(2,400)	200	(2,200)	0	(2,200)	0	(2,200)	0	(2,200)
Adult Social Care Grant	(718)	718	0	0	0	0	0	0	0	0	0
Revenue Support Grant	(30,202)	8,561	(21,641)	1,626	(20,015)	1,658	(18,357)	0	(18,357)	0	(18,357)
Council Tax	(101,917)	(3,826)	(105,744)	(2,658)	(108,401)	(3,253)	(111,654)	(3,350)	(115,004)	(3,451)	(118,455)
Retained Business Rates by Pool	(20,729)	(3,500)	(24,229)	0	(24,229)	(612)	(24,841)	(500)	(25,341)	(500)	(25,841)
Top up Business Rates	(56,702)	(1,310)	(58,012)	(547)	(58,559)	(1,485)	(60,044)	(1,500)	(61,544)	(1,500)	(63,044)
<b>Total Main Funding</b>	<b>(213,004)</b>	<b>979</b>	<b>(212,025)</b>	<b>(1,379)</b>	<b>(213,404)</b>	<b>(3,691)</b>	<b>(217,095)</b>	<b>(5,350)</b>	<b>(222,446)</b>	<b>(5,451)</b>	<b>(227,897)</b>
Public Health	(20,209)	532	(19,677)	0	(19,677)	0	(19,677)	0	(19,677)	0	(19,677)
Other core grants	(16,897)	(12,237)	(29,134)	12,682	(16,452)	986	(15,466)	0	(15,466)	0	(15,466)
<b>TOTAL FUNDING</b>	<b>(250,110)</b>	<b>(10,726)</b>	<b>(260,836)</b>	<b>11,304</b>	<b>(249,533)</b>	<b>(2,706)</b>	<b>(252,239)</b>	<b>(5,350)</b>	<b>(257,589)</b>	<b>(5,451)</b>	<b>(263,040)</b>

**Appendix C – Prior Year Overview & Scrutiny Committee Recommendations**

**General response to budget consultation process**

Ref	MTFS Proposal	Recommendation	Cabinet Response
N/A	In the context of continuing difficult financial circumstances, and in respect of learning from the experience of the MTFS to date OSC agreed scrutiny should be locked in to the process both of monitoring budget and performance and of evaluating strategy, considering risks and setting out mitigation.	<b>Cabinet to examine how the Council can ensure that meaningful consultation is undertaken in response to the budget setting process.</b>	The Council is required to consult with residents and businesses on any new budget proposals.
		<b>Cabinet should regularly monitor progress on achievement of savings, and report regularly on budget, including achievement of savings, projections; risk; and mitigation.</b>	The budget monitoring report is on the Council's forward plan to be considered by Cabinet on a quarterly basis.
		<p><b>A) Cabinet members and priority leads as appropriate should report to their scrutiny panels, starting in October on: financial performance against budget, risks and mitigation plans, alongside regular reporting on overall priority performance.</b></p> <p><b>B) Quarterly briefings prepared for all panel chairs on priority performance, budget, risks and mitigation.</b></p>	Cabinet Members and officers regularly attend scrutiny panel meetings and will continue to do so.
		<b>Cabinet member for finance should then report to OSC on overall progress against budget, risks and mitigation.</b>	

## Appendix C – Prior Year Overview & Scrutiny Committee Recommendations

### Budget Scrutiny Recommendations – Adults and Health Scrutiny Panel

#### Priority 2

Ref	MTFS Proposal	Recommendation	Cabinet Response
2.1	Haringey Learning Disability Partnership	That further financial and strategic information concerning the evidence base for the Learning Disability budget proposal, especially savings for 2018/19, be made available for consideration by OSC on 29 January before final budget scrutiny recommendations are made. Where possible, this information should be provided for the “mid-way” point.	Noted
2.2	Mental Health	That further financial and strategic information concerning the evidence base for the Mental Health budget proposal, especially savings for 2018/19, be made available for consideration by OSC on 29 January before final budget scrutiny recommendations are made. Where possible, this information should be provided for the “mid-way” point.	Noted

**Appendix C – Prior Year Overview & Scrutiny Committee Recommendations**

Ref	MTFS Proposal	Recommendation	Cabinet Response
2.2	Mental Health	<p><b>That Cabinet have oversight of the funding available for those with acute mental health needs in a community care setting, and should make representations as appropriate via joint health and care bodies and to NHS England.</b></p>	<p>The Council is working with the four other boroughs and five CCGs in the NCL area to ensure a joined up response on this issue which focuses on the health, wellbeing and quality of life of people with mental health needs living in the community.</p> <p>As well as direct approaches to the Mental Health Trust and to NHS England, to ensure that all those with mental health needs continue to receive the range of support that they require whether in a hospital, forensic or community setting, the Council has also referred the issue to the JHOSC for strategic oversight.</p>

## Appendix C – Prior Year Overview & Scrutiny Committee Recommendations

Ref	MTFS Proposal	Recommendation	Cabinet Response
2.3	Physical Support	That further financial and strategic information concerning the evidence base for the Physical Support budget proposal, especially savings for 2018/19, be made available for consideration by OSC on 29 January before final budget scrutiny recommendations are made. Where possible, this information should be provided for the “mid-way” point.	Noted
2.1	Haringey Learning Disability Partnership	That further information on the risks associated with each of the budget proposals be made available for consideration by OSC on 29 January.	Noted
2.2	Mental Health		
2.3	Physical Support		
2.1	Haringey Learning Disability Partnership	<b>That Cabinet be aware that OSC have significant concerns over the viability of savings proposals to Haringey Learning Disability Partnership, mental health and physical support.</b>	The savings proposals for Priority 2 have been made in cognisance of the impact of increasing demand and market pressures for adults with care and support needs. The range of interventions proposed to achieve the required savings is based on evidence drawn from other local authorities and
2.2	Mental Health		

## Appendix C – Prior Year Overview & Scrutiny Committee Recommendations

Ref	MTFS Proposal	Recommendation	Cabinet Response
2.3	Physical Support		<p>recognise that actions around demand management, market management and operational management are needed.</p> <p>There is a range of risks associated with the delivery of all savings and a risk register has been produced and shared which seeks to set these out. The register identifies actions to mitigate the impact of these risks and to support delivery of the savings</p>
N/A		That further information on the overspend on care packages be made available for consideration by OSC on 29 January.	Noted

Any Other Comments		
<b>Panel's work programme</b>	That the panel examine the impact on clients as they go through changes in services provision in relation to the proposed changes to Haringey Learning Disability Partnership, mental health and physical support	N/A

Summary of budget reduction proposals for Adults Services

		2019/20	2020/21	2021/22	2022/23	2023/24	2023/24
Ref	Title	Budget Reductions	Budget Reductions	Budget Reductions	Budget Reductions	Budget Reductions	Budget Reductions
		£'000	£'000	£'000	£'000	£'000	£'000
PA1	Charging for Managed Accounts	120	0	0	0	0	120
PA2	Fast tracking financial assessments	140	0	0	0	0	140
PA3	Capitalisation of CAS	177	0	0	0	0	177
PA4	Housing Related support	600	0	0	0	0	600
PA5	In-House Negotiator	116	344	0	0	0	460
PA6	Transfer of High Cost Day Opps	0	525	15	0	0	540
PA7	Public Health (Sexual Health)	267	0	0	0	0	267
PA8	Investment of drug and alcohol savings in preventative services for adults and families, targeting health inequalities	400	0	0	100	100	600
PA9	Further savings to be delivered by Adults Services	180	180	180	180	0	720
	<b>People (Adults) Totals</b>	<b>2,000</b>	<b>1,049</b>	<b>195</b>	<b>280</b>	<b>100</b>	<b>3,624</b>

**Business Planning / MTFs Options  
2019/20 – 2023/24**

Ref:  
PA1

<b>Title of Option:</b>	<b>Charging for Managed Accounts</b>		
<b>Priority:</b>	<b>People</b>	<b>Responsible Officer:</b>	<b>John Everson</b>
<b>Affected Service(s):</b>	<b>Adults</b>	<b>Contact / Lead:</b>	<b>Farzad Fazilat</b>

**Description of Option:**

- What is the proposal in essence? What is its **scope**? What will **change**?
- What will be the impact on the Council's objectives and outcomes (please refer to relevant Corporate Plan 2015-18 objectives and outcomes, and Borough Plan Evidence Packs)
- **How does this option ensure the Council is still able to meet statutory requirements?**
- How will the proposal deliver the benefits outlined?

*[Proposals will be mapped to the new Borough Plan Priorities/Objectives/Outcomes as they emerge – please take account of any likely changes when framing proposals]*

**Charging Administration Fee**

- 1. Appointeeship** - Currently the Council does not charge for administration of Appointeeship clients, unlike Deputyship where there is an administration fee for managing client funds and assets. The full set of Deputyship charges are set out by the Court of Protection. There is no national policy governing charges for Appointeeship. Policy and charges are therefore subject to local Council decisions. Subject to review and potentially Cabinet approval, the Council may decide to charge an administration fee comparable to that levied for Deputyship, the additional income based on 200 new clients could equate to approximately £70k in additional annual income.
- 2. Self-funders** - A number of residents meet the full costs of their care and therefore arrange their own packages of care, without recourse to the local authority. However, some residents who meet the full costs of their care look to the Council to organise the setting up of their care packages – a function for which the Council does not currently charge. Other authorities do charge for this service. As an income-generating opportunity, the Council is proposing to charge for arranging packages of care for self-funders. Given only a minority of disabled and older residents in need of packages of care are self-funders, the income generating potential is limited and a maximum of £50k additional income has been calculated.

<b>1. Financial benefits summary</b>					
<b>2018/19 Service Budget (£'000)</b>					
<b>Savings</b>	<b>2019/20</b>	<b>2020/21</b>	<b>2021/22</b>	<b>2022/23</b>	<b>2023/24</b>
<i>All savings shown on an incremental basis</i>	<b>£000s</b>	<b>£000s</b>	<b>£000s</b>	<b>£000s</b>	<b>£000s</b>
New net additional savings (year on year)	120				



<b>Impact / non-financial benefits and disbenefits</b>
<p><b>What is the likely impact on customers and how will negative impacts be mitigated or managed?</b>  <i>List both positive and negative impacts. Where possible link these to outcomes (please refer to relevant Corporate Plan 2015-18 objectives and outcomes)</i></p>
<p>1. Appointeeship – Those clients for whom the Council acts as Appointee would be impacted by this change as they would incur a management fee. This is in line with other administrative tasks carried out by the Council on behalf of users and would mirror the approach for Court of Protection clients, ensuring that the Council covers its administrative costs. Administrative costs would only be levied where there were sufficient funds in place to warrant this. Close communication with clients and families will be needed to ensure introduction of charges does not have an adverse impact on vulnerable clients.</p> <p>2. Self-funders - There will be a financial impact on those adults who fund their own care and who choose to have their care managed by the council. Currently this management service is free. Those who do not want to pay this fee would have the choice to manage their own care provision which may result in taking up poor quality services or placing stress on the individual.</p>
<p><b>What is the impact on businesses, members, staff, partners and other stakeholders and how will this be mitigated or managed? How has this been discussed / agreed with other parties affected?</b>  <i>List both positive and negative impacts.</i></p>
<p>The Council is currently able to charge for Court of Protection clients based on legislative guidance. There is no such guidance for charging fees in relation to appointeeship although their situations are in effect similar.</p> <p>There would be additional administrative time required to manage the charging of this service.</p>
<p><b>How does this option ensure the Council is able to meet statutory requirements?</b></p>
<p>The Council is already meeting its statutory responsibility to appointeeship clients. As the number of clients increase, however, the council recognises the administrative costs of managing client accounts is increasing and that there is a need to off-set this increasing cost.</p> <p>The statutory requirement to provide care and support under the Care Act 2014 legislation is not affected by the proposal to charge self-funders.</p>

<b>Risks and Mitigation</b>			
<i>What are the main risks associated with this option and how could they be mitigated?</i>			
Risk	Impact H/M/L	Probability H/M/L	Mitigation
There may be objections from clients and users about the proposal to charge for managing appointeeship accounts. The fact there is no specific statutory guidance around charging appointeeship clients may pose a barrier.			Legal and financial advice prior to implementation and develop breakdown of which clients will be subject to charging.
Self-Funders not managing their care effectively			All people in receipt of Adult Social Care receive a review. Any issues would be identified at this stage or if the service user or carer contacted the service.

Capacity of staff to deliver			A full appraisal will need to be carried out to ensure the application of charging does not incur additional costs.

## Business Planning / MTFs Options 2019/20 – 2023/24

Ref: PA2
-------------

<b>Title of Option:</b>	<b>Fast Tracking Financial Assessments</b>		
<b>Priority:</b>	<b>People</b>	<b>Responsible Officer:</b>	<b>John Everson</b>
<b>Affected Service(s):</b>	<b>Adults</b>	<b>Contact / Lead:</b>	<b>Farzad Fazilat</b>

### Description of Option:

- *What is the proposal in essence? What is its **scope**? What will **change**?*
- *What will be the impact on the Council's objectives and outcomes (please refer to relevant Corporate Plan 2015-18 objectives and outcomes, and Borough Plan Evidence Packs)*
- **How does this option ensure the Council is still able to meet statutory requirements?**
- *How will the proposal deliver the benefits outlined?*

*[Proposals will be mapped to the new Borough Plan Priorities/Objectives/Outcomes as they emerge – please take account of any likely changes when framing proposals]*

This proposal aims to speed up the process of financial assessment so that charging starts as soon after the start of services as possible. The aim would be to carry out any necessary financial assessment before services are brokered and put in place, except in an emergency. The saving lies largely in reducing levels of debt and the costs of recovering overpayments rather than any additional costs to the user of this approach.

The Financial Assessment Process currently starts after a service has been agreed. The delay in assessment results in direct loss of income for the council. The direct loss of income for 2017-18 was £140k. We are changing the process to bring the assessment upstream and complete the calculation and determine client contribution before the service starts to avoid loss of income to the council.

It is worth noting that there are additional non-cashable savings which are deemed to be significant: the avoidance of the costs of lengthy recovery of unpaid contributions and a reduction in queries from providers and families which take up resources within the social care adult services, payments and Brokerage service. The fast tracking of financial assessments will ensure that all assessments are carried out before care packages and funding are agreed and will avoid loss of income as outlined above.

<b>1. Financial benefits summary</b>					
<b>2018/19 Service Budget (£'000)</b>					
<b>Savings</b>	<b>2019/20</b>	<b>2020/21</b>	<b>2021/22</b>	<b>2022/23</b>	<b>2023/24</b>
<i>All savings shown on an incremental basis</i>	<b>£000s</b>	<b>£000s</b>	<b>£000s</b>	<b>£000s</b>	<b>£000s</b>
<b>New net additional savings (year on year)</b>	<b>140</b>				

<b>Impact / non-financial benefits and disbenefits</b>
<p><b>What is the likely impact on customers and how will negative impacts be mitigated or managed?</b>  <i>List both positive and negative impacts. Where possible link these to outcomes (please refer to relevant Corporate Plan 2015-18 objectives and outcomes)</i></p>
<p>Service users will be aware of the outcome of the financial assessment sooner and thereby be able to understand any charges they will be required to meet, including deciding to make plans to manage their own care.</p> <p>Users will be aware sooner of the costs of services which have been put in place, with greater clarity about the client's contribution to the cost of care for people who receive care.</p> <p>Users may feel they are being charged more or that charging is playing a part in their assessment – this is not the case.</p>
<p><b>What is the impact on businesses, members, staff, partners and other stakeholders and how will this be mitigated or managed? How has this been discussed / agreed with other parties affected?</b>  <i>List both positive and negative impacts.</i></p>
<p>There would be an additional requirement for two Financial Assessment Officers to manage the fast tracking of Financial Assessments. The process needs to be fully integrated with the front of the service. This process would need to be fully reviewed prior to implementation to test the capacity of the team to deliver and the cost effectiveness of the approach.</p>
<p><b>How does this option ensure the Council is able to meet statutory requirements?</b></p>
<p>The statutory requirement to provide care and support under the Care Act 2014 legislation is not affected by this proposal.</p>

<b>Risks and Mitigation</b>			
<i>What are the main risks associated with this option and how could they be mitigated?</i>			
Risk	Impact H/M/L	Probability H/M/L	Mitigation
Risk that users and carers will disengage with the financial assessment process if carried out near the needs assessment, adding further delay	M	M	Ensure financial assessment is introduced sensitively, demonstrating the benefits to the users of compliance
Capacity of staff to deliver	M	M	<p>Currently the staffing arrangement and process of the referral from Social Care front of the service to the Financial Assessment service does not lend itself to efficient way of working. Financial Assessment Officers need to be working closely with the front of the service to provide Fast Track assessments and provide timely advice to service users.</p> <p>We require two financial Assessment Officers at PO1 grade at the cost of £86k. This is invest to save.</p> <p>This would be reviewed after 24 months.</p>

## Business Planning / MTFs Options 2019/20 – 2023/24

Ref: PA3
-------------

<b>Title of Option:</b>	<b>Community Alarms Service</b>		
<b>Priority:</b>	<b>People</b>	<b>Responsible Officer:</b>	<b>John Everson</b>
<b>Affected Service(s):</b>	<b>Adults Social Care</b>	<b>Contact / Lead:</b>	<b>Jeni Plummer</b>

### Description of Option:

- *What is the proposal in essence? What is its **scope**? What will **change**?*
- *What will be the impact on the Council's objectives and outcomes (please refer to relevant Corporate Plan 2015-18 objectives and outcomes, and Borough Plan Evidence Packs)*
- **How does this option ensure the Council is still able to meet statutory requirements?**
- *How will the proposal deliver the benefits outlined?*

*[Proposals will be mapped to the new Borough Plan Priorities/Objectives/Outcomes as they emerge – please take account of any likely changes when framing proposals]*

Haringey's Community Alarms Service provides personal alarms, with a monitoring and response service, and a limited range of other assistive technology to residents. CAS clients include council social care clients, along with self-funders and HfH properties, such as sheltered accommodation. The cost of delivering the service to CAS clients is offset by contributions from clients who would not be eligible for council-funded care.

Because installation of a CAS solution can be considered the provision or adaptation of fixed assets for the benefit of our residents, there is scope within financial regulations to capitalise the majority of the operating and equipment costs of the CAS.

<b>1. Financial benefits summary</b>					
<b>2018/19 Service Budget (£'000)</b>					
<b>Savings</b>	<b>2019/20</b>	<b>2020/21</b>	<b>2021/22</b>	<b>2022/23</b>	<b>2023/24</b>
<i>All savings shown on an incremental basis</i>	<b>£000s</b>	<b>£000s</b>	<b>£000s</b>	<b>£000s</b>	<b>£000s</b>
<b>New net additional savings (year on year)</b>	<b>177</b>				

<b>Impact / non-financial benefits and disbenefits</b>
<p><b>What is the likely impact on customers and how will negative impacts be mitigated or managed?</b>  <i>List both positive and negative impacts. Where possible link these to outcomes (please refer to relevant Corporate Plan 2015-18 objectives and outcomes)</i></p>
<p>N/A</p> <p>Customers would not be impacted by this change to the way the service is funded.</p>
<p><b>What is the impact on businesses, members, staff, partners and other stakeholders and how will this be mitigated or managed? How has this been discussed / agreed with other parties affected?</b>  <i>List both positive and negative impacts.</i></p>
<p>This results in one post being deleted, however this proposal is already in operation with no negative impacts experienced. All parties involved have been notified.</p>
<p><b>How does this option ensure the Council is able to meet statutory requirements?</b></p>
<p>Subject to agreement that capitalisation of proposed CAS costs is in line with financial regulations, there are no changes to the Council's ability to meet statutory requirements.</p>

<b>Risks and Mitigation</b>			
<i>What are the main risks associated with this option and how could they be mitigated?</i>			
Risk	Impact H/M/L	Probability H/M/L	Mitigation
N/A			

**Business Planning / MTFs Options  
2019/20 – 2023/24**

Ref: PA4
-------------

<b>Title of Option:</b>	<b>Optimising transformational element of the Flexible Homelessness Support Grant</b>		
<b>Priority:</b>	<b>People</b>	<b>Responsible Officer:</b>	<b>Charlotte Pomery</b>
<b>Affected Service(s):</b>	<b>Adults</b>	<b>Contact / Lead:</b>	<b>Gill Taylor</b>

**Description of Option:**

- *What is the proposal in essence? What is its **scope**? What will **change**?*
- *What will be the impact on the Council's objectives and outcomes (please refer to relevant Corporate Plan 2015-18 objectives and outcomes, and Borough Plan Evidence Packs)*
- **How does this option ensure the Council is still able to meet statutory requirements?**
- *How will the proposal deliver the benefits outlined?*

*[Proposals will be mapped to the new Borough Plan Priorities/Objectives/Outcomes as they emerge – please take account of any likely changes when framing proposals]*

In essence, ASC is funding housing advice and support which can be funded through the Flexible Homelessness Support Grant whilst we transform these services and create longer term, more sustainable funding routes over the next 3 years.

**1. Financial benefits summary**

<b>2018/19 Service Budget (£'000)</b>					
<b>Savings</b>	<b>2019/20</b>	<b>2020/21</b>	<b>2021/22</b>	<b>2022/23</b>	<b>2023/24</b>
<i>All savings shown on an incremental basis</i>	<b>£000s</b>	<b>£000s</b>	<b>£000s</b>	<b>£000s</b>	<b>£000s</b>
<b>New net additional savings (year on year)</b>	<b>600</b>				

<b>Impact / non-financial benefits and disbenefits</b>
<b>What is the likely impact on customers and how will negative impacts be mitigated or managed?</b> <i>List both positive and negative impacts. Where possible link these to outcomes (please refer to relevant Corporate Plan 2015-18 objectives and outcomes)</i>
Services to users and carers will be positively affected by this proposal as it is based on a transformational approach which will create more sustainable routes to funding going forward.  Users and carers will continue to benefit from a range of housing related support to better meet their needs to live independently in the community.
<b>What is the impact on businesses, members, staff, partners and other stakeholders and how will this be mitigated or managed? How has this been discussed / agreed with other parties affected?</b> <i>List both positive and negative impacts.</i>
Positive impact of continuation of housing related support, and a recognition of its continued value.
<b>How does this option ensure the Council is able to meet statutory requirements?</b>
The statutory requirement to provide care and support under the Care Act 2014 legislation is not affected by this proposal. The Council's duties under the Homelessness Reduction Act are not affected by these proposals.

<b>Risks and Mitigation</b>			
<i>What are the main risks associated with this option and how could they be mitigated?</i>			
Risk	Impact H/M/L	Probability H/M/L	Mitigation
There is a risk that routes to sustainable funding for services which can meet need are not identified.	M	M	Focus on transformational activity and doing something different.
Risk of reduced take up of HRS services during any transitional period.	M	M	Continue to make the case for vulnerable residents to be supported in a myriad ways to maintain their tenancies.



## Business Planning / MTFs Options 2019/20 – 2023/24

Ref: PA5
-------------

<b>Title of Option:</b>	Care Negotiation activity of Adults Care Packages		
<b>Priority:</b>	People	<b>Responsible Officer:</b>	John Everson
<b>Affected Service(s):</b>	Adults Social Care	<b>Contact / Lead:</b>	Farzad Fazilat

### Description of Option:

- What is the proposal in essence? What is its **scope**? What will **change**?
- What will be the impact on the Council's objectives and outcomes (please refer to relevant Corporate Plan 2015-18 objectives and outcomes, and Borough Plan Evidence Packs)
- **How does this option ensure the Council is still able to meet statutory requirements?**
- How will the proposal deliver the benefits outlined?

*[Proposals will be mapped to the new Borough Plan Priorities/Objectives/Outcomes as they emerge – please take account of any likely changes when framing proposals]*

An interim care negotiator was recruited in March 18 to work with providers of residential care, semi-independent care and supported living settings across Adult Social Care. The care negotiator used their knowledge of the market and a care fund calculator approach to renegotiate care costs down with providers in relation to overcharging in relation to actual service user needs.

The table below shows that there are potentially savings of £8,858 per week, which could equate to £460,662 annually. It is recommended that 2 care negotiators are recruited on 1 year FTC at P04 with an on cost figure of up to £114k

<b>Financial benefits analysis</b>					
<b>Saving / Cost</b>	<b>2019/20</b>	<b>2020/21</b>	<b>2021/22</b>	<b>2022/23</b>	<b>2023/24</b>
<i>All savings / costs shown on an incremental basis</i>	<b>£000s</b>	<b>£000s</b>	<b>£000s</b>	<b>£000s</b>	<b>£000s</b>
A. Gross saving	230	230			
B. Revenue implementation cost (One Off Pressure)	-114	0			
C. Ongoing revenue cost	0	0			
<b>D. Net Saving (A+B+C)</b>	<b>116</b>	<b>230</b>	<b>0</b>	<b>0</b>	<b>0</b>
E. Saving(s) already included in MTFs 2018/23					
<b>F. New net additional saving (D minus E)</b>	<b>116</b>	<b>230</b>	<b>0</b>	<b>0</b>	<b>0</b>

<b>Impact / non-financial benefits and disbenefits</b>
<b>What is the likely impact on customers and how will negative impacts be mitigated or managed?</b> <i>List both positive and negative impacts. Where possible link these to outcomes (please refer to relevant Corporate Plan 2015-18 objectives and outcomes)</i>
N/A  Customers will not be directly impacted, staff have managed impact to ensure seamless transition. Proposal is currently in operation.
<b>What is the impact on businesses, members, staff, partners and other stakeholders and how will this be mitigated or managed? How has this been discussed / agreed with other parties affected?</b> <i>List both positive and negative impacts.</i>
<ul style="list-style-type: none"> <li>• Staff - improved confidence in engaging with users and their families regarding placements.</li> <li>• Members - improved satisfaction of service users and their families and partner organisations; Improved reputation of Haringey Council.</li> <li>• Provider - enhanced relationship with Brokerage team to ensure strengths based needs are at the centre of negotiations.</li> </ul>
<b>How does this option ensure the Council is able to meet statutory requirements?</b>
The Council will continue to meet its statutory requirements under the Care Act 2014 and the Children and Families Act 2014, both of which place emphasis on needs assessment, outcomes identification and support planning.  Improved knowledge of negotiating care costs with providers supports early help, prevention and wellbeing, promoting independence and supports families to make informed decisions about the care and support needs.

<b>Risks and Mitigation</b>			
<i>What are the main risks associated with this option and how could they be mitigated?</i>			
Risk	Impact H/M/L	Probability H/M/L	Mitigation
N/A			

## Business Planning / MTFs Options 2019/20 – 2023/24

Ref: PA6
-------------

<b>Title of Option:</b>	<b>Day Opportunities – transfer of high cost out of borough placements into borough</b>		
<b>Priority:</b>	<b>People</b>	<b>Responsible Officer:</b>	<b>John Everson</b>
<b>Affected Service(s):</b>	<b>Adults Social Care</b>	<b>Contact / Lead:</b>	<b>James Cuthbert</b>

### Description of Option:

- *What is the proposal in essence? What is its **scope**? What will **change**?*
- *What will be the impact on the Council's objectives and outcomes (please refer to relevant Corporate Plan 2015-18 objectives and outcomes, and Borough Plan Evidence Packs)*
- **How does this option ensure the Council is still able to meet statutory requirements?**
- *How will the proposal deliver the benefits outlined?*

*[Proposals will be mapped to the new Borough Plan Priorities/Objectives/Outcomes as they emerge – please take account of any likely changes when framing proposals]*

The Council has three ex-day centre premises that, with certain adaptations, could be leased to a local provider to support 15-20 of these high cost service users at reduced cost, and closer to their existing support networks.

This could yield £540,000 in savings in full year 2020/21, depending on:

- Which service users move to the new service
- The outcome of the procurement exercise
- The capacity of the service to support a higher number of service users by using the leased premises as a 'hub' to support more service users.

There will be a capital outlay requirement of approximately £177k and a £10-15k social work resource requirement to manage (on a 3-4 month basis), the transition/support planning process of moving service users from out of borough back into area.

<b>1. Financial benefits summary</b>					
<b>2018/19 Service Budget (£'000)</b>					
<b>Savings</b> <i>All savings shown on an incremental basis</i>	<b>2019/20</b> <b>£000s</b>	<b>2020/21</b> <b>£000s</b>	<b>2021/22</b> <b>£000s</b>	<b>2022/23</b> <b>£000s</b>	<b>2023/24</b> <b>£000s</b>
<b>New net additional savings (year on year)</b>	<b>0</b>	<b>525</b>			

<b>Impact / non-financial benefits and disbenefits</b>
<p><b>What is the likely impact on customers and how will negative impacts be mitigated or managed?</b>  <i>List both positive and negative impacts. Where possible link these to outcomes (please refer to relevant Corporate Plan 2015-18 objectives and outcomes)</i></p>
<p>Service users and families accessing out of area placements at high cost will be supported to access the new service in borough and involved in the co-design process to ensure the new service meets need. There may be negative perceptions about the change from families which will need a robust co-production process to overcome.</p>
<p><b>What is the impact on businesses, members, staff, partners and other stakeholders and how will this be mitigated or managed? How has this been discussed / agreed with other parties affected?</b>  <i>List both positive and negative impacts.</i></p>
<p>Enabling service users in out of area arrangements to take up services in borough may have impacts on the viability of the out of area services. However, the impact of this would not be significant as there is a plural market in third sector and private sector day opportunities services, and the leasing of an in-borough day centre premises to a provider will further diversify our in-borough market to supplement any capacity loss out of area.</p>
<p><b>How does this option ensure the Council is able to meet statutory requirements?</b></p>

<b>Risks and Mitigation</b>			
<i>What are the main risks associated with this option and how could they be mitigated?</i>			
Risk	Impact H/M/L	Probability H/M/L	Mitigation
None of the day centres will be suitable for the designated service user group	M	M	Feasibility and works to be conducted.
Savings will be lower than anticipated because the procurement process fails to identify more cost-effective alternatives	M	M	Full market engagement exercise required.
Savings will be lower than anticipated because the Council is unable to support high-cost service users to access in-borough arrangements	M	M	Extensive programme of engagement required, with input from SW resource.

## Business Planning / MTFs Options 2019/20 – 2023/24

Ref: PA7
-------------

<b>Title of Option:</b>	Sexual health projection.		
<b>Priority:</b>	People	<b>Responsible Officer:</b>	Akeem Ogunyemi
<b>Affected Service(s):</b>	All	<b>Contact / Lead:</b>	Sarah Hart

### Description of Option:

- What is the proposal in essence? What is its **scope**? What will **change**?
- What will be the impact on the Council's objectives and outcomes (please refer to relevant Corporate Plan 2015-18 objectives and outcomes, and Borough Plan Evidence Packs)
- **How does this option ensure the Council is still able to meet statutory requirements?**
- How will the proposal deliver the benefits outlined?

*[Proposals will be mapped to the new Borough Plan Priorities/Objectives/Outcomes as they emerge – please take account of any likely changes when framing proposals]*

### Proposal

Sexual Health has the largest allocation within the public health budget and is a high-risk budget in terms of variation, as it is primarily comprised of demand-led services. The council is legally bound to provide open access sexual health services. Many residents use services outside of Haringey. The proposal is to offer up savings based on the efficiencies already achieved and for this to form the baseline budget 2019-20. Beyond this growth in the need for a service will be absorbed by channel shift from high cost services to self-testing.

### Background

Spiralling demand and high unit price led public health to develop a local step change program and be part of a London wide re-commissioning program. In 2017, public health reshaped its provision and went to tender for a local young people's service, BME outreach service, healthy living pharmacies and GP services, plus a shared North Central London services. Channel shift to these services created MTFs savings. Further savings are likely to come in 2018 from new on line testing services and a fairer tariff in clinics outside of NCL.

Growth – there is some uncertainty in knowing what the growth in demand has been because the channel shift and the old systems of demand capture are very different. 3.5% growth has been factored in which counter balance 15%-30% channel shift to less expensive routes of service delivery.

### Savings summary:

There will be a net recurrent saving of £267k from 2019/20 onwards

### 1. Financial benefits summary

2018/19 Service Budget (£'000)	2019/20	2020/21	2021/22	2022/23	2023/24
Savings	£000s	£000s	£000s	£000s	£000s
<i>All savings shown on an incremental basis</i>					
Existing Budget	5,450	5,183	5,183	5,163	5,163
Proposed net expenditure after savings	5,183	5,183	5,183	5,163	5,163
<b>Savings</b>	<b>267</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
New net additional savings (year on year)	0	0	0	0	0

### Impact / non-financial benefits and disbenefits

What is the likely impact on customers and how will negative impacts be mitigated or managed?

*List both positive and negative impacts. Where possible link these to outcomes (please refer to relevant Corporate Plan 2015-18 objectives and outcomes)*

**Customers**- savings are the result of a transformation program that has been a gradual 'step change', moving at the pace of residents adapting to using different types of sexual health services – i.e. pharmacies, young people's service, to on line kits. Ongoing savings are coming from Commissioners having re negotiated a new tariff for out of area providers.

**What is the impact on businesses, members, staff, partners and other stakeholders and how will this be mitigated or managed? How has this been discussed / agreed with other parties affected?**

*List both positive and negative impacts.*

We are not expecting any further changes to services.

**How does this option ensure the Council is able to meet statutory requirements?**

The savings outlined in this template are a result of a better than anticipated shift away from acute GUM services. This is a result of a transformation that has already been planned in sexual health services in Haringey, and has been through relevant governance and consultation, which have outlined the benefits and risks.

### Risks and Mitigation

*What are the main risks associated with this option and how could they be mitigated?*

Risk	Impact H/M/L	Probability H/M/L	Mitigation
Sexual health services are demand-led	H	M	Regular review and profiling of activity. Communications about new cost-effective ways of accessing services (e.g. home testing kits)

## Business Planning / MTFs Options 2019/20 – 2023/24

Ref: PA8
-------------

<b>Title of Option:</b>	<b>Drug and alcohol savings with contribution to preventative services for adults and families, targeting health inequalities</b>		
<b>Priority:</b>	<b>People</b>	<b>Responsible Officer:</b>	<b>Sarah Hart/Will Maimaris</b>
<b>Affected Service(s):</b>	<b>Drugs and alcohol services</b>	<b>Contact / Lead:</b>	<b>Sarah Hart</b>

### Description of Option:

Investment of drug and alcohol savings in preventative services for adults and families, targeting health inequalities

Retendering of the three core substance misuse adult contracts has created savings, available from January 2019. Savings come from a market price adjustment on the recovery service. Also through taking the employment services out of the contract, now funded until 2020 by the Department of Work and Pensions Individual Placement Support pilot. The cabinet report on the re-tendering process stated in the finance comments that proposals would be developed on how these savings would be used for investment in areas to improve health and wellbeing. We propose that we split the savings between cashable savings and investments in preventative services that reduce health inequalities and have a medium term return on investment for the council.

Table 1 shows that there will be a recurrent net saving related to reduced commissioning costs across the three years of £400k. The remaining funding will be held back for investment in schemes which prevent ill health in adults and families and have a specific focus on health inequalities. For these services, business cases will be developed for consideration, with a need to show returns on investment by 2021-22 to the council.

	Year 1 2019-20	Year 2 2020-21	Year 3 2021-22	Year 4 2022-3	Year 3 2021-22
Direct savings from reduced commissioning costs	£400k (recurrent)	£0	£0	£0	£450k
Invest	£200k (recurrent) including £142k in year 1 only for existing planned investment in targeted lifestyle services for adults	£0	£0	£0	£250k
ROI return from adults or children's social care budgets	£0	£0	To be included in the business case aim for recurrent £100k net saving	To be included in the business case aim for £100k recurrent net saving	To be included in the business case £100k net saving

Table 1 the savings achieved from the investment in reduction of use of high cost services.

Haringey public health now have a strong track record in identifying ROI programs and producing savings, not from limiting access but shifting demand e.g. alcohol hospital liaison services, enhanced home detox and the sexual health transformation.

Public health have scoped a number of potential areas for ROI. By May 2019 public health could rank these in terms of ROI and provide a business case. Below are some of the areas we would like to explore – many of which have a focus on families, – we would look to also scope plans which specifically reduce demand on adult social care.

- **Program of Individual Placement Support (IPS).** The national IPS trials in substance misuse and mental health will show if there is sufficient ROI from IPS. The savings will come in employment spring boarding more residents successfully through a Council funded program, this could be substance misuse treatment or homeless services.
- **Pause.** This is a national program that tackles vulnerable women having multiple pregnancies, which end in repeated social care interventions. Intermediate savings would come from a reduction care proceeding.
- **Program for children of dependent parents.** If Haringey is not successful in the innovation fund bid then we could fund the project with the savings. The ROI is potentially rapid on this project in terms of children's social care costs and a future return on adult substance misuse budgets

Public health would work with finance to create a business case for any investment by May 2019 with a clear outline of where savings would be realised (adults vs childrens)

**Why would the Council agree to invest to save rather than disinvestment?** This option has two advantages for the Council, firstly being able to demonstrate investment in innovative prevention programs. Secondly, by exploring a small investment in years 1 and 2 public health deliver can potentially deliver savings in high cost social care budgets that will create a permanent shift in spend.

Funding for substance misuse services comes from the ring fenced public health grant, a return for which has to be provided to Public Health England (PHE) annually. Whilst recognising localism, there is significant scrutiny by PHE on substance misuse spend and wider public health spend and performance so any disinvestment would be questioned.

#### Summary of net savings:

**Year 1: 2019/20 - £400k net recurrent savings from commissioning costs**

**Year 3: 2021/22 – Additional £100k recurrent savings from return on investments – e.g. reductions in looked after children, reduction in adult social care costs.**

**Year 4: 2022/23 – Additional £100k recurrent savings from return on investment**

1. Financial benefits summary					
2018/19 Service Budget (£'000)					
Savings	2019/20	2020/21	2021/22	2022/23	2023/24
<i>All savings shown on an incremental basis</i>	£000s	£000s	£000s	£000s	£000s
Existing Budget	4,300	0	0	0	0
Proposed net expenditure after savings	3,900	0	0	0	0
<b>Savings</b>	<b>400</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
New net additional savings (year on year)	<b>400</b>	<b>0</b>	<b>0</b>	<b>100</b>	<b>100</b>

#### Impact / non-financial benefits and disbenefits

**What is the likely impact on customers and how will negative impacts be mitigated or managed?**

*List both positive and negative impacts. Where possible link these to outcomes (please refer to relevant*



<i>Corporate Plan 2015-18 objectives and outcomes)</i>
<p>Commissioning savings have already been realised with the expectation that outcomes will not be negatively impacted.</p> <p>The impact of new investments would be scoped and evaluated including an EqlA but would be targeted at reducing health inequalities</p> <p>Potential positive contributions to the following borough plan outcomes:</p> <p>Outcome 5: Happy childhood: all children across the borough will be happy and healthy as they grow up, feeling safe and secure in their family and in our community</p> <p>Outcome 8: All adults are able to live healthy and fulfilling lives, with dignity, staying active and connected in their communities</p> <p>a) Healthy life expectancy will increase across the borough, improving outcomes for all communities</p> <p>c) Adults will feel physically and mentally healthy and well</p> <p>d) Adults with multiple and complex needs will be supported to achieve improved outcomes through a coordinated partnership approach</p>
<b>What is the impact on businesses, members, staff, partners and other stakeholders and how will this be mitigated or managed? How has this been discussed / agreed with other parties affected?</b>
<p>Commissioning savings have already been realised with the expectation that outcomes will not be negatively impacted. This has already been through cabinet in October 2018.</p> <p>The impact of new investments would be scoped and evaluated and we would engage with partners on any proposals.</p>
<b>How does this option ensure the Council is able to meet statutory requirements?</b>
<p>Provision of drugs and alcohol support services are a condition of the Council's Public Health Grant. These will be continue to be delivered.</p>

<b>Risks and Mitigation</b>			
<i>What are the main risks associated with this option and how could they be mitigated?</i>			
Risk	Impact H/M/L	Probability H/M/L	Mitigation
Commissioning savings	I	I	There will be a robust service user led process to ensure that the changes in delivery do not impact negatively on service users. The Commissioner will monitor the implementation of the new contract on a monthly basis. The service user network will help to support and service users through the transition to the new service
Return on Investment	TBD	TBD	

This page is intentionally left blank

**SUMMARY OF CAPITAL PROGRAMME - PRIORITY 2 (ADULTS)**

Capital Scheme No	Capital Scheme Title	Capital Scheme Description	2019/20	2020/21	2021/22	2022/23	2023/24	Scheme Total
			£,000	£,000	£,000	£,000	£,000	£,000
211	Community Alarm Service	This scheme is correctly account for the capital costs of the service. It relates to the cost of the installation of the alarms	177	177	177	177	177	885
213	Canning Crescent Assisted Living	Cabinet at its meeting of the 9th October 2018 decided to purchase Canning Crescent. The intention is to return to Cabinet with a fully costed business case that converts the building into 21 supported housing units as well a provision for the relocation of the Clarendon Recovery College.	500	4,200	1,750	250	-	6,700
214	Osborne Grove Nursing Home	The budget detailed here provides for the redevelopment of the OGNH. A further report and business case will presented to Cabinet once the feasibility study has been concluded.	500	1,500	6,000	2,250	500	10,750
215	Hornsey Town Hall Supported Living	The council has the opportunity to purchase the affordable housing units in the development. The creation of the units is a requirement of the planning permission. The council intends to use the units for supported living.	250	1,750	-	-	-	2,000
216	Homelessness Hub	Cabinet at its meeting of the 11th September 2018 agreed to enter into a lease of 332-334 High Road, Tottenham. This was to create an co-located housing assessment centre and hub for single homeless people and those at risk of homelessness.	100	-	-	-	-	100
<b>Totals - Adults</b>			<b>1,527</b>	<b>7,627</b>	<b>7,927</b>	<b>2,677</b>	<b>677</b>	<b>20,435</b>

This page is intentionally left blank