

# **MINUTES OF THE MEETING OF THE ADULTS & HEALTH SCRUTINY PANEL HELD ON THURSDAY 5<sup>TH</sup> SEPTEMBER 2019, 6.30-8.40pm**

## **PRESENT:**

**Councillors: Pippa Connor (Chair), Patrick Berryman, Nick da Costa, Eldridge Culverwell, Felicia Opoku, Matt White and Helena Kania**

### **13. FILMING AT MEETINGS**

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

### **14. APOLOGIES FOR ABSENCE**

Apologies for absence were received from Cllr Mike Hakata.

### **15. ITEMS OF URGENT BUSINESS**

None.

### **16. DECLARATIONS OF INTEREST**

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

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

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

None.

### **18. MINUTES**

With regards to action points from the previous meeting, Cllr Connor referred to the Active Travel in Haringey briefing which she said was a really useful summary of policies and strategies in this area. She noted that there were quite a few initiatives mentioned in the briefing that were planned or currently in progress so it would be useful for the Panel to receive an update in around 6 months time. Will Maimaris, Director for Public Health, said that this would be possible but suggested that an

update in around 9-12 months would be more appropriate due to the likely timescales involved with the initiatives. **(ACTION)**

The accuracy of the minutes from the previous meeting was then agreed.

**AGREED: That the minutes of the meeting held on 20<sup>th</sup> June 2019 be approved as an accurate record.**

## **19. BUDGET OVERVIEW**

Paul Durrant, Head of Finance for People, and Sandra Robb, Adults and Health Business Partner, presented an overview to the Panel of the financial performance of the services within Priority 2 (Enable adults to live healthy, long and fulfilling lives) as at the end of Quarter 1 of 2019/20.

Paul Durrant reported that there was currently a projected overspend of £3.6m which comprises of overspends of:

- £2.9m on adult social care
- £0.3m on Public Health
- £0.4m on Commissioning

The overspend in adult social care includes a £2.7m overspend on care packages which is an overachievement on the expected £3.9m overspend for this area once the net savings and growth have been applied. The £2.7m overspend is broken down as follows:

- £1.7m on Adult Placements
- £0.6m on Learning Disabilities Placements
- £0.4m on Mental Health Placements

The overspend on Osborne Grove Nursing Home was projected to be £0.2m. Although an additional £0.3m had been provided for this in the current financial year, delays in the consultation on the staffing structure have still resulted in the overall projected overspend.

The £0.4m projected overspend on Commissioning was due mainly to salaries and a savings objective which has not been achieved.

The £0.3m projected overspend on Public Health was due mainly to budget setting with some service charges being higher than anticipated.

Priority 2 has a capital budget of £8.6m divided over ten projects as set out in Appendix 3:

- Though project 208 (on supported living schemes) is currently showing zero spend for 2019/20, some spend is expected to be brought forward in year at

some point and in the next financial year. This is because there has been other activity on the Linden House adaptation and on Canning Crescent assisted living (also shown in Appendix 3). Further programmes on supported living are being worked up, these just need to be programmed into the budget when possible.

- On project 209 (on assistive technology) there has been a pause in the delivery model and an update is expected in Quarter 2.
- On project 213 (on Canning Crescent assisted living) following the initial feasibility, architects are being appointed and moving forward to RIBA Stage 2 Concept Design and RIBA Stage 3 Developed Design by Spring next year. If there is slippage in 2019/20 then the capital budget can be carried forward to the following year.
- On project 215 (on Hornsey Town Hall supported living) this is now being funded through the Housing Revenue Account.

Asked about the expected capital spend on project 207 (new day opportunities offer), Charlotte Pomery, Assistant Director for Commissioning, said that there is a figure set aside (which is larger than the one shown in Appendix 3) to bring back into use the two properties in Waltheof Gardens. The capital outlay will be spent this year. Further spending in future years has not yet been identified and is not in the budget spreadsheet but she said that this is not necessarily reflective of wider ambitions and doesn't mean that there won't be further spending in this area in future years.

With regards to the delivery of savings on the revenue budget (as set out in Appendix 4), Paul Durrant said that the top three rows (on learning disabilities, mental health and physical support) are the core savings which are the toughest to deliver. All are reporting as 'amber' at present which means that there is confidence in delivering the majority of it but there is still a challenge to achieve overall delivery. Asked about the learning disability savings he said that it was anticipated that the achieved savings would be close to the £1.1m target.

Helena Kania asked why savings were being targeted at mental health when in fact there is an under-reporting of mental health problems at present. Beverley Tarka, Director of Adults & Health said that the majority of the spend is on existing care packages within adult social care and that the savings are targeted at reducing the cost of these existing care packages. Some mental health service users are placed in more high-needs arrangements than they need to be and could be 'stepped down' as they make progress. A review is in progress to see how many people can be 'stepped down' and this involves a thorough reassessment process. Increasing the range of supported living opportunities, as referred to earlier, will be important in achieving this stepping down to less expensive services.

Asked about a resilience reserve, Paul Durrant said that there was a specific resilience reserve of £2m applied to the Adults & Health budget last year but there is

no specific reserve to be applied this year. Beverley Tarka added that it is important to separate the savings target from the underlying overspend in the budget caused by care package pressure. The £2m resilience reserve was applied to the Adults & Health budget last year but in this year that has been some accommodation for that reserve already built in to the Adults & Health budget for this year. She said that there is a collegiate approach to supporting adult social care across the Council and that corporate finance colleagues constantly review the budget and there is recognition of the stress that adult social care is under.

Cllr Connor requested that future budget updates identify any savings being achieved through 'invest to save' measures.

Asked to expand on the causes of the "reported pressures on the Commissioning budget", as set out in paragraph 2.4 of the main report, Charlotte Pomery said that this largely related to staffing and rent payments from community organisations for Council premises. It does not include contracts or commissioned services which are generally funded from the care services budget.

## **20. PREVENTION AND EARLY INTERVENTION**

Rochelle Jamieson, Head of Strategy – People, and Andrea Wershof, Local Area Coordinator, introduced this item with a presentation on early intervention and prevention in Haringey which included the following points:

- That services are geared to solve problems for people and that solutions are based on what would work best from the services available.
- The approach aims to intervene to enable people to access help at an earlier stage and stay as independent as possible.
- The feedback from residents is consistently that they want help to prevent things from going wrong, they want to be involved in helping to shape services and they want services to be well joined up and for any long-term support to be holistic when needed.
- Other suggestions from residents have included:
  - That there needs to be a care navigator to help people access the internet and available services.
  - That services need to be close to people as it can be difficult for people with mobility issues to travel far.
  - That older people want to stay in their own home for as long as possible and have a better quality of life rather than live in a residential care home.
- A critical part of the approach is providing information, support and guidance and developing a network of options to provide people with the support that they need. The aim is to create an environment that enables and empowers all residents to live well and achieve their potential including by helping people to find their own solutions.

- There are no access criteria for the early intervention and prevention service and this prevents the need for people to ‘jump through hoops’ before they can get access to help.
- The different levels of intervention were displayed in one slide as a “care cone” with four levels:
  - Keeping people healthy, safe and well through public health services.
  - Early intervention and prevention to provide a network of options to help people.
  - Care and support through coordinated multi-agency teams.
  - Specialist/emergency, including specialist palliative care.
- The Local Area Coordinator role was described as person-centric because it aims to be led by the residents including those who are needy and may have felt disenfranchised previously. By being on their side it can be transformative for someone who is on their own and by helping to connect them with various types of support it can help them to achieve their vision of a ‘good life’. Examples were given including helping an isolated individual with learning disabilities through his re-housing assessment process after his parents had died.

Will Maimaris, Director of Public Health, advised the Panel that there are currently just two Local Area Coordinators covering Hornsey and Northumberland Park but there are plans in place to expand the programme with an additional four to operate mainly in the east of the borough.

In response to questions from the Panel, Will Maimaris, Rochelle Jamieson and Andrea Wershof said:

- That there are usually three or four ‘touch-points’ that the Local Area Coordinators visit each week but there are other assets such as libraries, schools and community cafes where they also might visit people. Populations of each area covered is limited to about 18,000-20,000.
- Asked about how to reach isolated people, Local Area Coordinators are well known in the local community by, for example, shopkeepers, cafes, schools and faith groups. These often let the Local Area Coordinators know about people who need help who might not otherwise ask for help.
- Asked about evidencing the savings from this programme, this is always a challenge but there is an evaluation and also a collection of case studies with professionals who can set up what would have happened had the Local Area Coordinators not been in the area. This type of evidence can be incrementally built up over time and there is work ongoing on continuing to evaluate this work. The investment in the programme so far is relatively modest with £120,000 per year provided to cover two Local Area Coordinators plus the evaluation work. Will Maimaris said that he was convinced that there are significant savings resulting from this across the system, particularly if it

prevents the need for just a few high-cost packages. However, it can be difficult to quantify savings to adult social care, including because some individuals helped by the Local Area Coordinators may not have been in contact with adult social care system at that stage without this contact being made.

- In terms of small grants for community groups, the embedded nature of the Local Area Coordinator work can help to generate intelligence to help shape what the Council commissions. They can also help advise community groups about consulting their user groups and evaluating projects that they have done which can help them to improve their funding applications.
- Asked about continuation of service when a Local Area Coordinator is on leave or in the event that they leave the Council, it was acknowledged that it can be difficult to delegate the relationships that Local Area Coordinators build up. However, it is not an emergency service and issues can generally be picked up after a short period of leave. By expanding the number of Local Area Coordinators from two to six in future will also help, with a larger team better able to cover for a colleague where necessary.
- On why there were significantly more 'Level 2' interventions in Hornsey than in Northumberland Park, this was likely to be because in Hornsey there are typically more interventions involving older people who often require longer-term support whereas the populations in Northumberland Park was more likely to involve younger people and families.
- On why a large proportion of outcomes that were not captured in Graph Eight in the report, this was due to inadequacies of the form with limited options and so many outcomes were captured as 'other'.

Florence Guppy, Programme Lead – Connected Communities, then presented to the Panel with an overview about the Connected Communities programme. It had started about a year previously as a migrant integration programme funded by the Ministry of Housing, Communities and Local Government (MHCLG) and focused on support for new arrivals to the borough in employment, housing, parenting & early years, English language and community groups. As the programme has developed it has become clear that it works to the same principles as other initiatives such as the Local Area Coordinators and the Community First trial, including by being resident-led, strength-based, locality-based and without entry thresholds, and so these programmes were becoming more closely linked.

Data collected in relation to the Connected Communities programme has shown that it had worked with 1,186 residents between September 2018 and July 2019, 931 of whom were female. There were also a higher than expected number of Albanian nationals in contact with the programme than had been expected. Showing the impact of the early intervention work is a challenge but the team is looking at ways of measuring the social value, social connections and the savings to the Council. The

programme is not a stand-alone service, but more a part of a wider network of support including other existing Council services.

In response to questions from the Panel, Florence Guppy, Beverley Tarka and Charlotte Pomery said:

- That the programme has two funding streams, the original one from the MHCLG with a focus on migrant integration including employment advisers, housing support, etc, and then the additional funding from the Transformation Board to embed the principles of Local Area Coordination.
- That next steps include working with health provision which will involve trialling Connected Communities/Community First at two GP practices and also at North Middlesex Hospital's A&E department and so this will involve linking up with Enfield colleagues as the hospital serves both boroughs.
- That there are different funding streams for the various programmes, but there are a range of different ways of working with residents so this has enabled various approaches to be tested and evaluated.

Cllr Pippa Connor asked whether a basic guide of the main officers and points of contact for each programme could be distributed to Councillors. **(ACTION)**

Andrea Wershof said that if any Councillors were interested in shadowing either of the Local Area Coordinators for a half-day or full-day they would be very welcome to do so.

Cllr Pippa Connor thanked all the officers for their presentations and for the useful information provided.

## **21. OSBORNE GROVE UPDATE**

Charlotte Pomery, Assistant Director for Commissioning, introduced this item noting that the report in the agenda pack had previously been provided to the Cabinet in July 2019 with the recommendations in section 3 that were approved. Work is now ongoing to delivery Option 4 from the feasibility study, which is for the demolition of the current building and to build a 70-bedroom nursing home on the site. This option also provides for the delivery of additional services for older people on site which are aligned to nursing care. Further details about the next stages will be shared with stakeholders in the autumn and again in January. The opening of the new nursing home is anticipated in 2022.

In response to questions from the Panel, Charlotte Pomery said:

- The costings for the four options are given in paragraph 6.36 of the report and are approximately in the £20-30m range. The previous figures for estimated costs given last year were significantly lower as they were based on some initial high-level intermediate work to estimate the likely costs. The detailed

work that was subsequently carried out was based on a whole new set of requirements and factored in different use types, high-spec environmental sustainability, the layout of the building and a future-proofed building.

- The Council needs to account for the significant amount of borrowing and the cost associated with that. The table in paragraph 8.1.3.4 of the report sets out the calculations for the overall savings for each of the various options once these costs have been accounted for based on an expected asset life of 45 years.
- The additional consultation with stakeholders from the autumn will be to consider more detailed designs as this was not in the remit of the feasibility study. The stakeholders are expected to remain involved all the way throughout the project up to, and probably also after, the opening of the new nursing home.
- Having a 70-bed capacity makes the new nursing home more economically viable while the environmental standards and the more flexible use of the rooms make it a more cost effective home to run.
- A paper on the consultation would be going to Cabinet in September for a decision.
- The feasibility study itself is a large document and had not been circulated to Members. Any Members interested in viewing the document could do so at River Park House by contacting Charlotte Pomery.

## **22. DATES OF FUTURE MEETINGS**

- 6<sup>th</sup> Jan 2020 (6:30pm)
- 25<sup>th</sup> Feb 2020 (6:30pm)

CHAIR: Councillor Pippa Connor

Signed by Chair .....

Date .....