



## APPENDIX 2.5a

# **Business Plan for The Bridge Renewal Trust June 2009 - March 2019**

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## **1. The Vision, Goals and Objectives of The Bridge NDC Successor Body**

This is the business plan for The Bridge Renewal Trust (hereafter called the Trust) operating in the Seven Sisters area of South Tottenham. The plan is for a 10 year period commencing in July 2009 to June 2019.

The Trust is the asset holding successor body for The Bridge NDC which will come to an end in March 2011. It will encompass the Laurels Healthy Living Centre as a physical asset and with a broader remit to address health and wellbeing priorities in the area.

The business plan follows extensive consultation with:

- The Bridge NDC project team
- The Bridge NDC Board
- Key stakeholders including the Teaching Primary Care Trust (TNHS HARINGEY), the London Borough of Haringey, the Mental Health Trust, the Local Strategic Partnership, HAVCO and the Learning and Skills Council (LSC).
- Residents
- Voluntary and community organisations, particularly those focusing on health and wellbeing.

All of the issues discussed, pointed to a clear role for a successor body that builds on the success of The Bridge NDC, initially using The Laurels Health Living Centre as its core platform, and which bridges the gap between the local community and health and social care services.

The vision for Trust is:

**To significantly improve the health and wellbeing of people living in Seven Sisters by making it easy for them to influence, access and use integrated and relevant services.**

We will act as a delivery catalyst to supplement the efforts of our partners to provide effective, responsive and innovative health and social services in Seven Sisters, within our diverse and often hard to reach communities.

We will represent the voice of our community in building pathways for optimum delivery of services to impact on the wider determinants of health, including housing, crime and employment.

The Trust will be set up as a **company limited by guarantee** with **charitable** status. The purpose of the Trust is for the benefit of the community and is captured in its charitable objects as follows:

- to promote and protect the physical and mental health of residents in and around the Seven Sisters area of South Tottenham, London ("the Area of Benefit"); and

- the relief of unemployment for the benefit of residents in the Area of Benefit through a range of interventions including training and assistance to find employment; and
- to relieve and prevent poverty amongst people living within the Area of Benefit; and
- to further or benefit the residents of the Area of Benefit [and the surrounding neighbourhood,] [without distinction of sex, sexual orientation, race or of political, religious or other opinions] by associating together the said residents and local authorities, voluntary and other organisations in a common effort to advance education and to provide facilities and services in the interest of social welfare for the objective of improving the conditions of life for the residents.

The Trust will achieve its aims by undertaking the following activities:

(1) Constantly review and develop The Laurels Healthy Living Centre as a place for the delivery of responsive health-related services for local residents. The Charity will work with the community and service providers to facilitate delivery of health services that local people require. Services will include GP Services, Development Checks, Dietetics, Family Planning, Midwives, New born hearing screening, Speech Therapy, Spirometry, Counselling, Health Visitor sessions and Camidoc, Footcare, Phlebotomy, Diabetic clinics, Baby Immunisations and early stage therapy for mental health with services that target disadvantaged communities.

(2) Deliver range of preventative health, wellbeing and social care services at the Laurels Healthy Living Centre and through outreach including Health advice- delivered in culturally sensitive ways, Nutrition and dietary advice- healthy eating, Substance misuse and addiction services, Counselling services, Language support, Advocacy, Complimentary therapies and Welfare rights.

(3) Provide affordable accommodation at the Laurels Healthy Living Centre and other support services to the voluntary and community sector, particularly small local groups.

(4) Provide advocacy and voice for the community by acting as an 'honest broker' between the community and service providers such as London Borough of Haringey, the NHS Haringey, The Mental Health Trust and other statutory bodies and agencies. This role will be achieved through the composition of the Board of the Charity and through the creation of service user participation groups to that will assist with service development that meet local needs. The Charity will be a key channel for the statutory bodies to reach the communities living in the area.

(5) Tackle worklessness by providing education, employment and training services to young people and adults in need of such services

(6) Create employment opportunities for unemployed people through the provision of business advice, support and training in order to set up and retain own businesses.

(7) Promote public safety and prevent crime through public education and awareness projects.

(8) Improve quality of life and create employment and training opportunities for disadvantaged and unemployed local residents by promoting social, physical and economic development of the area.

**Specifically, the advocacy and 'community voice' roles of The Trust will involve:**

- Holding assets for the benefit of the Community.
- Based at the Laurels, it will build a mix of service delivery, and make the Laurels into a vibrant local centre for the community
- It will work beyond the Laurels, outreaching to the community and working with a wide range of voluntary and community groups on health and social care matters. Through bidding for outside project funding it will increase the breadth and depth of services on offer
- It will be a key channel for the statutory bodies to reach the communities living in the area, since it will be able to find new routes to match the needs of the users with provision
- It will be a further way to represent the community voice to key strategic bodies in Haringey, and in this way be able to bend and influence the delivery of services
- It will work with community, voluntary bodies and social enterprises of all sizes to offer a responsive and innovative mix of services out of the Laurels and beyond and it will work with new and growing social enterprises to build their capacity
- It will work with Haringey Council, NHS Haringey and Mental Health Trust to act as a catalyst and pathfinder for new routes to access disadvantaged communities and individuals.
- It will be in a unique position close to the point of delivery; to monitor the quality fit and mix of services delivered.
- It will focus on outcomes for individuals, and thus make an active contribution to Local Area Agreement (LAA) targets for the Seven Sisters neighbourhood.

**The Wider determinants of Health**

The Trust will focus initially on health and wellbeing issues. This makes sense given the physical asset of The Laurels, existing services and the priorities for health in terms of the need for longer term interventions to achieve desired health outcomes. As the Trust becomes more established, it will broaden its remit to address some of the wider determinants of health, for example, skills and employment, and housing.

In tandem, the Trust will acquire other physical assets where these add to the services provided to the community, and once its record of delivery and reliability has been established.

## **2. The Context**

### **2.1 The Bridge NDC**

The most widely recognised achievements of the NDC have been in the creation of physical assets, such as The Laurels, and The Triangle Children's centre. These are seen by residents and stakeholders alike as the most recognisable and lasting legacy. The community would also claim a greater feeling of safety, and a pleasanter local environment, whilst recognising that the area still has a way to go on these measures.

Most interestingly, the community have greatly valued the feeling of involvement and consultation in their own neighbourhood, and feel they have been able to influence initiatives in the locality. The NDC has helped to build a community spirit and now has a group of local residents who are committed to making a difference, and 'looking out for one another'.

The NDC has developed effective means of community engagement and empowerment. We have therefore built into the governance plan for the successor body, transparency and accountability which ensure resources and assets are used for the benefit of the local community. Securing charitable status for the successor body will provide a suitable asset lock to ensure that any assets held are protected for this purpose.

### **2.2 Health and Wellbeing in Haringey**

The NDC area of Haringey remains an area of significant health issues and inequalities:

- The population is very transient and this creates both challenges and opportunities for the successor body.
- A large population of people are not accessing health care
- A significant percentage of people have language needs
- A large percentage of refugees and asylum seekers with associated health issues
- High rates of mental health issues- associated with a migrant population and high unemployment
- Male life expectancy is 1.8 years below the national average, a reflection of the socio-economic status and deprivation within the area.
- High rates of diabetes – in some parts of Haringey this is twice the national average
- Excess of deaths from heart disease and cancer in the in the 20-64 year age groups
- Higher rates of obesity among children than the national average (21.6% compared to 17.3% nationally)
- A large number of people with conditions that would benefit from treatment but a lack of awareness of what is available. The needs therefore remain unmet.

### **2.3 Health- the national context**

The January 2006 White Paper 'Our Health, Our Care, Our say' recognises that there is growing evidence that, where people are actively involved in choosing services and

making decisions about the kind of treatment and care they get, the results are better. In addition, as the Health agenda moves towards asking people to take more responsibility for making choices in their lives that will promote their health and independence, they should have a greater say in the services provided.

People have clearly stated that they want more convenient local health and social care services. They want different services more closely integrated to meet their needs, with better information provided to the people who use the services. The new emphasis on prevention will help close the health inequalities gap, which is all too evident in the very transient populations of the NDC area.

Better links between health and social care are becoming an essential platform for more effective service delivery, as is innovation in delivery mechanisms, which will include a greater role for smaller, local organisations, social enterprises, and voluntary bodies, to meet local needs. A focus on prevention rather than cure will put more control into individuals' hands.

Similarly the move towards practice based commissioning, allowing GPs to commission services most appropriate to the particular local needs will act as a driver for more responsive and innovative models of joined-up support within communities, delivering better health outcomes and well-being, including a focus on prevention. It will be in the interests of primary care practices to develop more local services, which will provide better value for money.

The national context is for more joint commissioning between the NHS HARINGEYs and local authorities to achieve greater integration between primary and social care. A joint commissioning framework and shared outcomes will underpin this approach and the Local Area Agreement, a key mechanism for joint planning and delivery.

The national priorities are reflected in Haringey's Well Being Strategic Framework 2007-2010 which sets out 7 key outcomes:

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

The Laurels Healthy Living Centre has been selected by NHS Haringey as one of three 'polyclinics' in Haringey. Polyclinics are intended to be the place where most routine healthcare needs are met and the "main stop for health and wellbeing" Polyclinics are planned to offer access to antenatal and postnatal care, healthy living information and services, community mental health services, community care, social care and specialist advice-all in one place.

Currently 15000 patients are registered with the GPs based at The Laurels and in two year's time this will have risen to 20 000. NHS Haringey would like to see the Laurels become a 'one-stop-shop' for local healthcare needs.

## **2.4 The people who live in the community - their vision**

The local residents have certainly felt the influence of the NDC initiative in the area – not just in the physical developments and improvements, although they are very visible, but in such things as:

- The focus on the elderly has helped to build the social networks which go to the heart of a strong community.
- Healthy eating awareness
- Access to and awareness of a greater range of local services
- Physical activities for children and young people, which has contributed to wellbeing, self-esteem, and provided external role models, which it is hoped will contribute to employment ambitions.
- The residents feel consulted and more included. They place a high value on the feeling of having some influence over their own neighbourhood.

The local community is hoping that The Laurels will be a base for fully integrated excellent health and social care (for South Tottenham or part of it) that genuinely helps people to keep healthy, and acts as a 'one-stop-shop' for their day-to-day health needs.

The NDC has already been able to influence the delivery of mainstream NHS Haringey services out of the Laurels, and in response to community demand, foot care and phlebotomy services have moved there from April 2008. This is seen as a significant improvement, and a very strong example of the effective representation that The Bridge NDC can provide on behalf of the community. The community feel that there are many services which they would like an organisation like The Bridge NDC to help provide:

- More information – what services are available and where / how to access them, with shorter waiting times
- Social networks and support groups – residents want an environment where people look out for each other
- Health promotion and education – whilst more has been done, particularly in schools, people, particularly children, are still making poor choices
- Worklessness – continues to be high and creates complex social and well-being issues
- Someone should be able to integrate better the initiatives taken in hospitals, schools, and the council
- Alcohol – is still causing a lot of problems in the neighbourhood, but also for families
- Residents want to be involved, in the community, or through voluntary organisations
- Services for older people
- Health services should be provided within the community:
  - For the elderly
  - In managing long term conditions
  - Screening services
  - Footcare
  - Services for young people
- A feeling of greater safety – which has clear links to well being and mental health



## **2.5 The Voluntary and Community Sector (VCS)**

There are many community and voluntary groups in Haringey with a focus on improving health and wellbeing in the borough. Some of these are local arms of large well known charities, others are small and are responding to the specific needs of the local community.

The VCS Wellbeing Theme Group brings these organisations together to consult on and influence the Haringey Strategic Partnership and its members on health and wellbeing priorities in the borough. HAVCO as the community and voluntary infrastructure organisation in Haringey work with the sector to build their capacity and assist with funding applications and quality matters. They recognise that the challenges for many voluntary and community groups remain premises- having a recognisable “shopfront” and funding. HAVCO can see a valuable role for the Trust as being an effective intermediary between the statutory and other funders and the community and voluntary groups on health and wellbeing issues. Some voluntary and community groups utilise space in The Laurels and this has proven successful in being able to access their target clients. Historically, the rental was free to the group but more recently a charging structure has been introduced - moving to a position over time of full cost recovery.

## **2.6 What this means for the successor body- The Trust**

All of these factors point to a clear role for The Trust as the successor body.  
A role which:

- Builds on the successes of the NDC programme and fully utilises its assets, specifically The Laurels Healthy Living Centre. In time, further assets could also be built into this model.
- Works to address the health and social care priorities in the area through the Laurels and through other channels
- Works to assist the Local Authority, NHS Haringey and the MHT meet their objectives through greater involvement of the community
- Supports and facilitates voluntary and community organisations to address the health and social care priorities

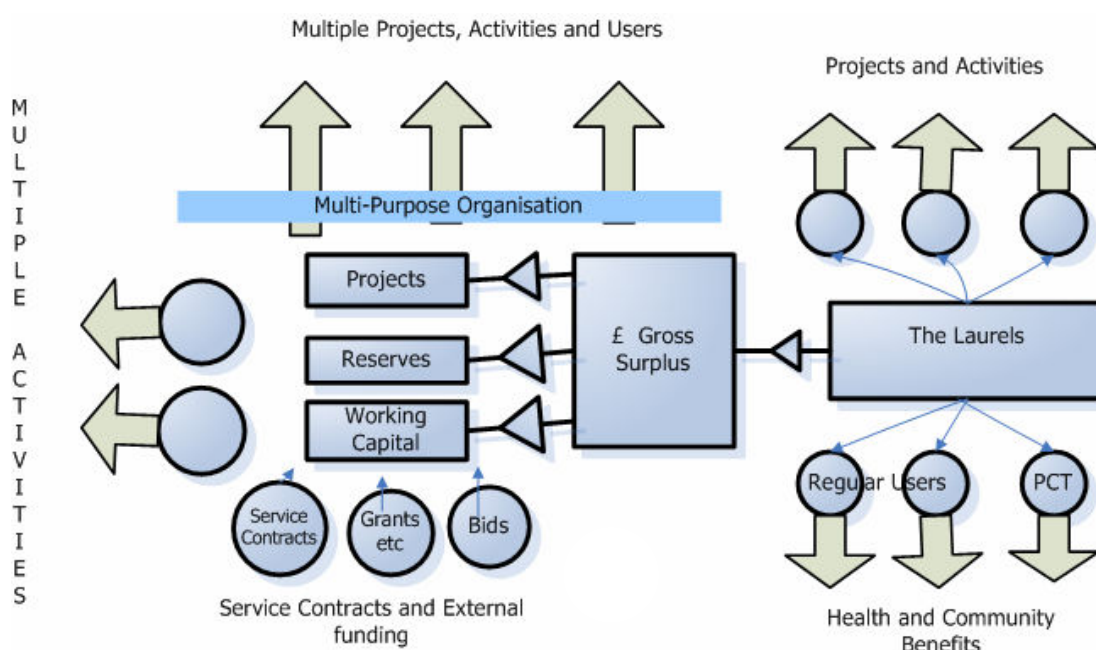
Its role will over time broaden to address other factors which collectively impact on the health and wellbeing of the community –particularly skills and employment.

### 3. The Operational Plan

This section sets out what The Trust will do and the services it will deliver. It outlines how the organisation will operate and work with its key partners.

The successor body will operate as a community organisation. Community-based organisations provide an important alternative, bottom up, self-help approach that complements the interventions of most external agencies. The existence of strong sustainable community-based organisations offers significant benefits to public sector service providers. These agencies have the knowledge that there are organisations working locally that can tap into resources and networks that are not open to them. The activities that these organisations undertake can forestall the call on their services, complement those that they deliver, and provide early warning signs of changing needs.

The Trust will therefore be a multi-purpose organisation, as recognised in the recently published work on Community Assets, and Community Ownership<sup>(i)</sup> It will have a range of income sources, whilst maintaining a very simple internal structure.



After 'Community Assets: the benefits and costs of community management and Ownership, Stephen Thake, Reader in Urban Policy, Centre for Social and Evaluation Research, London Metropolitan University  
[www.communities.gov.uk/publications/communities/communityassets](http://www.communities.gov.uk/publications/communities/communityassets)

The income sources will be:

- Income from leasing space in the Laurels Healthy Living Centre to regular users such as primary care services
- Income from the rental of space to enable multiple projects, activities and users to deliver services within the remit of The Trust. These could be social enterprises, community groups, or commercial tenants.
- Delivery of service contracts for the statutory agencies and other organisations
- Income from grants

In order to take on contracts on a commercial basis, the new organisation will:

- Meet the necessary quality criteria, by putting in place appropriately experienced, skilled staff, management structure and quality assurance procedures. These are further detailed in Sections 8 and 10.
- Demonstrate commercial viability through this Business Plan. The financial projections are detailed in Appendix 1.
- Show evidence of sound governance, and clarity of purpose, through having well-defined roles, and structural safeguards for the protection of the community assets and utilisation of surplus generated.

### **3.1 The Services**

The Trust will deliver the following services. It will have the flexibility to extend beyond the strictly delineated geographic boundaries of the NDC. These boundaries have caused some on-the-ground anxieties for residents marginally outside the area, but equally in need. A 'greying' of the existing boundaries will be helpful to all. It will be a community facility open to who ever needs to access it.

#### **(1) The Laurels Healthy Living Centre as a place for the delivery of NHS Haringey and Mental Health Trust services**

These services are already in place and will grow to reach more people and to provide a wider range of services. This development is in line with the intention to develop the Laurels into a polyclinic. NHS Haringey would like to extend the services provided at the Laurels as do the Mental Health Trust.

The existing services are:

GP Services  
Development Checks  
Dietetics  
Family Planning  
Midwives  
New born hearing screening  
Speech Therapy  
Spirometry  
Counselling  
Health Visitor sessions  
Camidoc

The NDC has already influenced an increase in the availability of NHS Haringey services, in line with resident wishes. From April 2008 the following services became available at The Laurels:

Footcare  
Phlebotomy  
Diabetic clinics  
Baby Immunisations

The Mental Health Trust (MHT) is also looking to offer early stage therapy from The Laurels. This will involve a full time clinical technician plus a room with 3-5

computers. They would be able to treat approximately 20 patients per day. In particular the MHT need to offer services to the large Turkish and Kurdish population in the area where they know there are high rates of depression and domestic violence.

## **(2) The delivery of preventative health, wellbeing and social care services through the Laurels Healthy Living Centre and through outreach**

The preventative health, wellbeing and social care issues will include:

Health advice- delivered in culturally sensitive ways

Nutrition and dietary advice- healthy eating

Substance misuse and addiction services

Counselling services

Language support

Advocacy

Complementary therapies

Welfare rights

The Trust will maximise the use of the space within the Laurels to both deliver these services directly and importantly through other organisations- using the community and voluntary sector as much as possible. It will not be enough to rely on people coming in to the Laurels and outreach services will be essential to reach those people particularly hard to reach. The Trust will promote volunteering and support people in the community to fulfil this important role.

## **(3) Providing accommodation, space and other services to the voluntary and community sector**

This builds on the current practice whereby voluntary and community groups utilise the NDC space within The Laurels. Historically this was rent free but latterly a rental model has been introduced to move to a full recovery position. The Trust will maximise the utilisation and occupancy of the space available to the voluntary and community sector while achieving competitive rates for rental income. The Trust will extend its operating hours to operate longer in the evening and over the weekend. This responds to feedback from the community and in addition opens its doors to a wider range of organisations as well as the community. In addition to the rental of space, the Laurels will accommodate events, workshops and drop-ins which a wider range of organisations can utilise. When referring to voluntary and community groups we are talking about small local groups as well as larger organisations with local representation.

The existing Café space will be a key feature of the accommodation and service package. There needs to be a review of the need for a café as apposed to a pharmacy. The financial forecasts assume income for rent of the café space.

The shared community room will be rented to five not for profit organisations working on health, well being or social care issues with the local community. This space at an affordable rate gives these organisations a base from which to operate and provides easy access for the community.

The other rooms will be available on a sessional basis. The Trust will market these to a wide range of charities, the community and voluntary sector, statutory bodies and private companies. The following are given purely as examples of how organisations might use the facilities, in what ways and importantly how these meet the vision of the Trust. There are no firm commitments in place from any of the organisations mentioned. These are proposed by way of example of the kind of services the Trust might consider.

- Healthy Living Advisers to run events and surgery sessions for parents and children

**The rate of obesity among children is higher than the national average**

- MIND to hire the meeting room on a regular basis for people experiencing depression

**There are high rates of mental health needs in the area**

- Age Concern to hire a consulting room to hold surgery sessions with older people giving them advice on benefits and other support

- St Mungos to hire a consulting room on a weekly basis for a GP to meet with homeless people advising them on health matters

**The population is very transient**

- The Alzheimer Society could hire the café and surrounding area for a drop in for people and their families

- The Café could be used to do healthy eating talks and demonstrations

**Helping to tackle the obesity problem**

- The Citizens Advice Bureau could do regular surgery sessions as could other organisations giving advice and information- perhaps to certain community groups and in the appropriate language.

**A significant percentage of people have language needs**

- A refugee/asylum seeker support group could provide advice on health and social care.

**There are a large percentage of refugees and asylum seekers with associated health issues**

#### **(4) An Advocacy and Voice for the community**

The Trust will represent the community on health and wellbeing issues in liaison with the London Borough of Haringey, NHS Haringey and MHT and other statutory bodies and agencies. Similarly they will provide an access channel to the community for these bodies. This role will be achieved through the composition of the Board of the Trust and through the creation of a service user participation group. The Trust will plan and manage regular workshops, forums and events as appropriate. The Trust will be represented on the Haringey Local Strategic Partnership.

#### **(5) Expertise and a Coordination role**

To liaise with key stakeholders on health and wellbeing matters, to tender for funding from a range of sources and manage the effective delivery of these contracts.

A key role of the Trust will be expertise to liaise with the statutory bodies, to tender for funds to deliver a wider range of services to the community and to manage the delivery of these services within the community and voluntary sector.

The Trust will work with HAVCO and support bringing the VCS together on collaborative tenders to develop the capacity of the VCS to deliver. It will identify gaps in provision and support the development of delivery channels- again using the community wherever possible. The Trust will have expertise in tendering and funding applications and in contract management and delivery.

These services will be built up over the five year period of this plan with the Laurels Healthy Living Centre as the starting point and a forecast target income by March 2016 of over £1 million.

### **3.2 Rental of Space within The Laurels**

A key objective of The Trust will be to maximise the occupancy and utilisation of the space within The Laurels for health, wellbeing and social care services. This will extend the range of services to the community, improve access by extending the operating hours and at the same time maximise the income which can be reinvested in the community.

- The Trust will rent out the rooms in its part of The Laurels to a range of organisations working within the health, wellbeing and social care arena
- These organisations will be from the private, charitable and community and voluntary sector including social enterprises.
- We want to encourage and support a flexible use of the space and so the following arrangements will be established.
- Some space will be available for rental on affordable terms for the community and voluntary sector delivering health and well being services to the community.
- The Trust will support the establishment of new community and voluntary groups where these meet an identified need and existing gap in provision by offering space on these affordable terms and by providing additional support through the expertise of The Trust and key partners such as HAVCO.
- Some space will be available for rent on a sessional basis designed to maximise the range of organisations using The Laurels and reaching the community.

- The operating hours of the Laurels will be maximised and sessional hire will be based on the following sessional arrangements
  1. 09.00-12.30
  2. 13.30-17.00
  3. 17.30-21.00
  4. 10.00-13.00 ( Saturday mornings)
- The sessional rates are detailed in Appendix 2 and have been developed following research into comparative fee structures in a range of community organisations
- The Trust will market the space to the relevant private providers and the larger charities/bodies as a key access point for the community
- The Trust will maximise the occupancy of the space over the period of this plan from 30% occupancy in year 1 to 60% occupancy by year 4. A 10% increase each year should be easily achievable.
- As previously described, the focus at the outset will be health and wellbeing and over time it may be feasible to use the space for a wider remit.
- Where The Trust is delivering services directly and using space within The Laurels to do so, the rental cost will be built into the service overheads.

### **3.3 Working Practices**

The Trust will establish the following working practices:

- An initial small core team of 4 (3 FTE) people will operate the basic services of the Trust at the Laurels
- The Laurels Project Manager will have specific responsibility for the overall management of The Laurels Healthy Living Centre reporting to The Trust Director
- As is currently the case, facilities management will be contracted out to a management company
- NHS Haringey services delivered at The Laurels will be managed by a NHS Haringey Manager as now
- The Laurels Project Manager will manage the utilisation of the dedicated Trust space
- A Laurels Operating Guide will set out what type of organisation can use The Laurels to ensure they are aligned with the purpose of The Trust and the conditions of use.
- The Laurels Project Manager will promote the Laurels and attract a number of voluntary community organisations into the Laurels, delivering relevant services, and work with these organisations where necessary to up skill them and ensure they are self-supporting.
- The Bridge Project and Contracts Manager will work with The Bridge Chief Executive to develop and deliver a range of project and contracts.

For additional commissioned services, the Trust will:

- Recruit or contract additional people as needed
- Ensure all additional overhead costs such as space, are fully costed into the tender finances
- Strictly adhere to financial and performance reporting requirements

#### 4. Legal Structure and Governance

The Trust will have as its purpose:

- Improved services
- Local accountability and involvement
- Social Return on Investment
- Commitment to serving the community

The Trust will be company limited by guarantee and a charity governed by a Board of Trustees. It is proposed that a maximum of 10 Directors/Trustees are drawn from a balance of the following sources:

- |                                                          |   |
|----------------------------------------------------------|---|
| • Local residents (including NDC Resident Board members) | 4 |
| • London Borough of Haringey                             | 2 |
| • NHS Haringey                                           | 1 |
| • Mental Health Trust                                    | 1 |
| • Co-opted Members eg legal and financial expertise      | 2 |

No one group will dominate the Board. Directors will be chosen to ensure an appropriate skills mix is available. This skills mix should include:

- Members of the community who understand the community and its diversity
- An understanding of health issues
- Legal
- Financial
- General organisational and management skills.

Community members will be selected by a transparent process of nomination with selection by a panel of other members of the Board. A development programme for the Board will be put in place.

The transition period involving initial Trustees appointed by the NDC Partnership Board will allow for some continuity whilst enabling other people to become involved. As one of the underpinning requirements for the success of The Trust will lie in having an appropriately high quality Board, the selection of members will be key.

**A Service User Participation Group** will also be established to inform the future development and improvement of the services provided through the Trust.



## **5. Premises and the Laurels Lease Arrangements**

The current lease arrangements are as follows:

1. Circle 33 is the Head lease holder and the landlord to the Mayor and Burgesses of the London Borough of Haringey (the Council)
2. The Mayor and Burgesses of the London Borough of Haringey (the Council) are the tenants of Circle 33, having the lease of the building for 125 yrs
3. The Mayor and Burgesses of the London Borough of Haringey (the Council) is the landlord of the Haringey Teaching Primary Care Trust,
4. NHS Haringey, formerly Haringey Teaching Primary Care Trust, holds a sublease and is the tenant of council (25 yrs at market rent)
5. NDC is a sub tenant of NHS Haringey (25 year)

It is proposed that the current lease arrangements will be maintained with the 25 year NDC sub-tenancy being re-assigned to The Bridge Renewal Trust. The Successor body will also derive benefits from the rental income from the building. Haringey Council does not derive any direct financial benefit from any of the lease arrangements.

## 6. The Financial Plan

Financial spreadsheet relating to Years 1 to 5 of activities is shown in Appendix 1. Key assumptions are:

- The major stakeholders including Haringey Local Authority, NHS Haringey and the MHT all contract for service delivery with The Trust. They have all indicated a willingness to do this, although the amounts assumed are relatively small.
- The rental pricing structure outlined in Appendix 2 is implemented for the dedicated Trust space with an increase in occupancy over the 5 years of 30% to 60%.
- The current Café space is rented out to, say, a pharmacy service
- The Laurels is currently the only asset used for planning purposes, although future growth to include other assets should not be discounted.
- Activities are based on community health care services
- To grow further, there will need to be further assets involved.

This creates an organisation turning over £1 million per year by year five, employing an initial core staff of 3 FTE.

### 6.1 Financial Management

Income and Surplus Available for Reinvestment given the above assumptions:

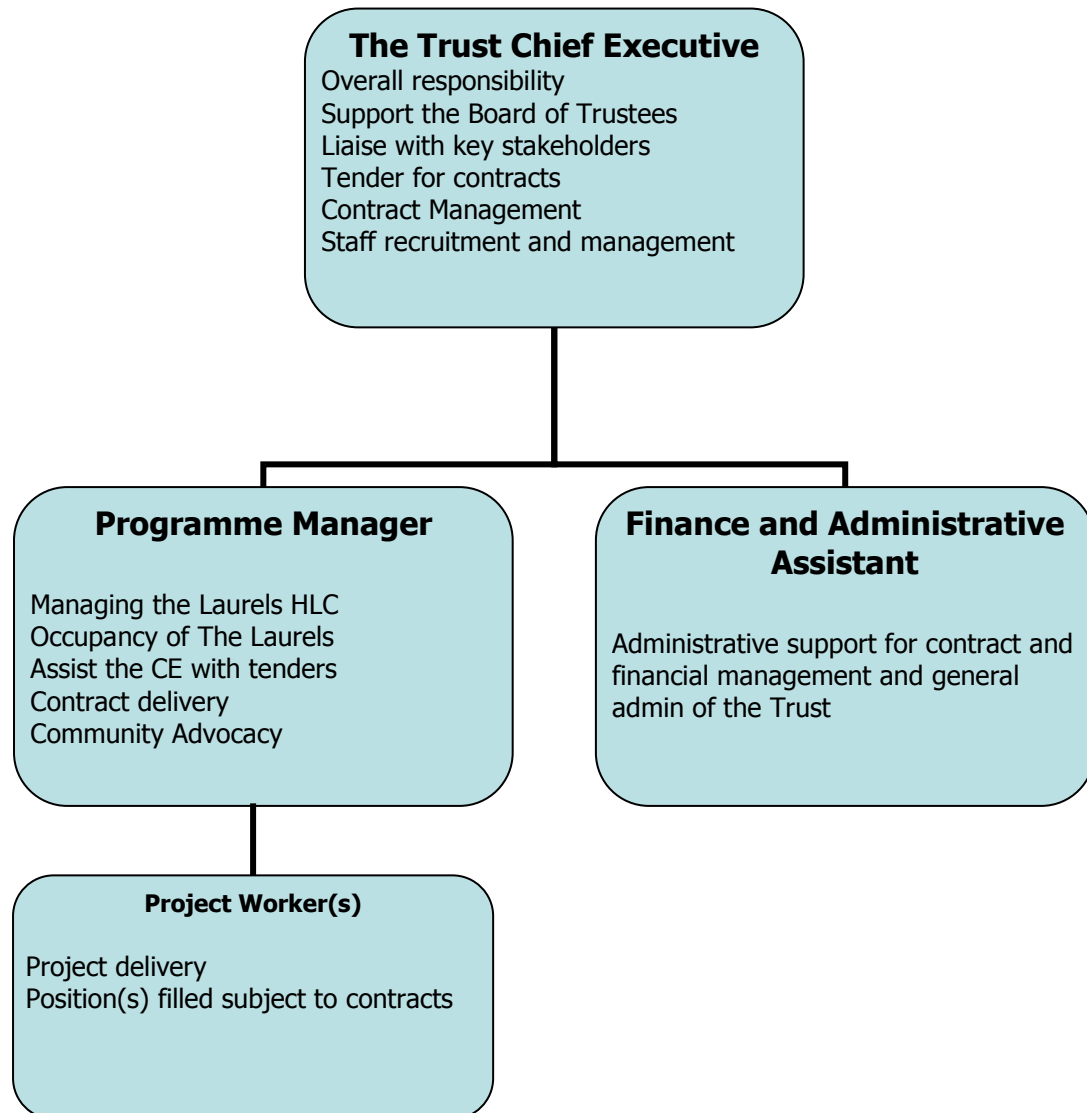
	Year 1	Year 2	Year 3	Year 4	Year 5	Total
<b>TOTAL INCOME</b>	<b>£555,000</b>	<b>£432,000</b>	<b>£509,700</b>	<b>£512,889</b>	<b>£551,663</b>	<b>£2,561,252</b>
<b>TOTAL EXPENDITURE</b>	<b>£358,706</b>	<b>£417,830</b>	<b>£495,092</b>	<b>£504,994</b>	<b>£546,544</b>	<b>£2,323,165</b>
<b>RETAINED NET SURPLUS/CONTINGENCY</b>	<b>£196,294</b>	<b>£14,171</b>	<b>£14,608</b>	<b>£7,895</b>	<b>£5,120</b>	<b>£238,087</b>

## **7. Accountability**

- As a company with charitable objectives, the Trust will be as focused on activities that is for public benefit.
- It will be obliged by charity commission to serve the interest of the community thus keeping its aims fixed on its public benefit.
- As a small local organisation with a limited number of commissioning clients, it will be obliged to focus firmly on reliable delivery and agreed outcomes, in order to sustain a flow of delivery contracts.

## 8. People, management and roles

The Trust will start up with lean people resources, building these over time as needed. In order to manage and deliver the above services the starting structure will be:



### The Trust Chief Executive

Overall responsibility reporting to the Board of Trustees. Specific responsibility for liaison with the key stakeholders and statutory bodies in order to communicate the needs of the local community. Identifying funding opportunities which meet The Trust's goals and tendering for contracts will be important. Will be responsible for representing and promoting The Trust, recruiting and managing staff.

### Programme Manager

Responsibility for managing The Laurels Healthy Living Centre within the Trust organisation. They will

- maximise occupancy and utilisation of the Laurels facility
- Liaise with the managers of NHS Haringey services being delivered from The Laurels
- Work closely with the CE to identify service gaps and funding opportunities
- Responsible for the project and contract delivery working with the project team- whether they are employed, contracted, volunteers or other community and voluntary organisations.

### **The Finance and Contract Assistant**

Responsible for all administration and basic financial and contract management.

It would greatly help the Trust to attract the appropriate calibre and experience level if the staff employment terms and conditions were similar to those offered by Haringey Council at present. In particular the pension could be part of the council scheme, as has been the case in other similar successor bodies.

## **9. Communication and Community Engagement**

There are four strands to the marketing and promotion of The Trust.

- Marketing to the statutory bodies and other organisations with the purpose of securing commissions and grants for services. This will be done by the Board of Trustees and by the Chief Executive through effective relationship building and management
- Marketing the Laurels space to a wide range of private, community and voluntary organisations. This will be the responsibility of the Programme Manager who will undertake tours, events, proactive contact to achieve the occupancy targets. The Programme Manager will develop a calendar of events and workshops which will be promoted to the local community directly and through relevant organisations
- Promoting the Trust to the community as the access point for health, wellbeing and social care issues and as the body that listens and influences public health providers. This will be achieved by:
  - Effective delivery on the ground
  - Outreach work deploying local community workers and volunteers
  - The Service User Participation Group
  - By a regular programme of forums and consultative events
- NHS Haringey, the MHT and community and voluntary organisations will want to action their own marketing. This will be within the overall brand of The Trust brand and this will be a condition of lease and room hire.

### **9.1 Community Engagement**

The engagement of the community is essential to secure the success of The Trust and will be achieved by:

- Local resident representation on the Board of Trustees.
- A Service User Participation Group
- Opening up The Laurels to the community and voluntary sector-for more organisations to use and with extended opening hours
- Recruiting and training volunteers from the community to outreach to the “hard to reach” and to deliver awareness and information. The Trust will seek funding to action this. This will not only deliver health messages to the community but will up-skill and engage the volunteers.
- An annual community/social audit which will engage the community in improving the services being delivered

## **10. Quality Assurance**

To be the community organisation with which local stakeholders want to contract, the Trust will achieve high quality standards of delivery.

- It will be well governed with a balanced and skilled Board of Trustees
- The employed team will be capable with a proven track record of relevant work and achievement that builds on the track record of the NDC
- Volunteers will be recruited and managed using professional people management practices
- Service delivery will be tightly monitored and managed - both for projects delivered directly or through other organisations
- In partnership with HAVCO, Support will be given to develop the capacity of community and voluntary groups
- The Trust will invite regular feedback from the Service User Participation Group on the quality of services on how they can be improved
- The Trust will action an annual community /social audit deriving feedback from the community and from all other stakeholders. This will provide the basis on which to plan ongoing improvements
- The Trust will seek quality accreditations such as Customer First and Investor in people (IiP) where these will demonstrably improve the quality of services and /or are essential to secure grants and contracts.

### **10.1 Monitoring and Evaluation**

Regular monitoring and evaluation of performance will be essential for the Trust, both for any commercial contracts undertaken, and also in terms of regular reviews of performance against this and other plans.

## 11. Meeting the Local Area Agreement Outcomes

The Trust is committed to working in close and effective partnership with Haringey council and all stakeholders to meet local needs and deliver the LAA outcomes in the area of benefit. We will achieve this by improving access to appropriate services without taking over the delivery of statutory services.

<b>Community Strategy/Priority</b>	<b>National Indicators Set</b>	<b>The Trust Objectives/Targets</b>
Economic vitality prosperity shared by all	Working age people claiming out of work benefits NI153 16- 18 year olds not in education, training or employment NI 117	<ul style="list-style-type: none"> <li>Improved access and provision of health, well being, social care services which will impact on economic prosperity of all</li> <li>Support for community and voluntary groups</li> <li>Using the community to deliver outreach services</li> <li>Initial focus on health and wellbeing – in time broaden remit to skills &amp; employment</li> </ul>
Be safer for all	Drug users in effective treatment NI 40 Reduce the harm caused by illegal drugs Repeat Incidents of Domestic Violence NI 32	<ul style="list-style-type: none"> <li>The Laurels HLC as a place for delivery of NHS Haringey and MHT services</li> <li>Delivery of preventative health, wellbeing and social care services through the Laurels and through outreach, such as provision of substance misuse and addiction services</li> </ul>
Healthier people with a better quality of life	Early access of women to maternity services NI126 Prevalence of breast feeding at 6-8 weeks from birth NI53 Under 18 conception rate NI112 Prevalence of Chlamydia in under 20 year olds NI113 16+ current smoking rate prevalence NI123 Alcohol harm related hospital admission rates NI 39 Mortality rate from all circulatory diseases NI121	<p>The Laurels HLC as a place for delivery of NHS Haringey and MHT services</p> <ul style="list-style-type: none"> <li>Promote the benefits of active living</li> <li>Smoking cessation clinics</li> <li>Alcohol related services</li> </ul> <p>Delivery of preventative health, wellbeing and social care services through the Laurels and through outreach</p> <ul style="list-style-type: none"> <li>Access to HIV testing</li> <li>Support for families with children with a disability through drop ins and through voluntary homecarers</li> <li>Provision of maternity services</li> <li>Healthy Eating awareness</li> <li>Sexual health and sexually transmitted diseases clinics</li> </ul>



	Number of vulnerable people achieving independent living NI141	
<p>People and customer focused</p> <p>People at the heart of change</p>	<p>% of people who feel that they can influence decisions in their locality NI4</p> <p>Fair treatment by local services NI140</p> <p>Participation in regular volunteering NI6</p> <p>% of people who believe people from different backgrounds get on well together in their local area NI1</p>	<ul style="list-style-type: none"> <li>• To fulfil an advocacy and conduit role</li> <li>• Expertise and Co-ordination</li> <li>• Providing accommodation, space and other services to the voluntary &amp; community sector</li> <li>• Delivery of services through outreach using the community</li> </ul> <p>The Trust to manage the delivery of services commissioned by the statutory bodies</p> <p>Service User participation group</p> <p>Represented on the HSP</p> <p>Local people on the Board of Trustees</p> <p>Engage local people in volunteering roles such as volunteer carers, leaders of activity sessions, healthy eating advisers</p>

## 12. Risk Analysis *Reference has been made to The Quirk Review of community management and ownership of public assets (ii)*

Risk	Actions to mitigate
Laurels is not transferred to the successor body	<ul style="list-style-type: none"> <li>➤ Start discussing lease arrangements with London Borough of Haringey and NHS Haringey as soon as possible. An immediate requirement is the gifting of surplus income from the Laurels to the NDC Successor body (This figure is currently £285,000 per year <b>plus</b> savings made by the NDC which the Council has been carrying forward every year - this amounts to £225,000 at the end of 2008/09)</li> </ul>
The Trust does not have the capacity to take over and manage the asset	<ul style="list-style-type: none"> <li>➤ Clear definition of the required people resource and capabilities required</li> <li>➤ The composition and skills of the Board of Trustees</li> <li>➤ Develop an organisational development plan and adopt relevant quality standards.</li> <li>➤ Effective transition plan pre transfer</li> </ul>
The asset is not managed effectively and remains under-utilised	<ul style="list-style-type: none"> <li>➤ Viable business plan</li> </ul>
The asset is not used in the public interest- taken over by an unrepresentative or unaccountable minority. Access to the asset is not inclusive	<ul style="list-style-type: none"> <li>➤ Establishing The Trust as a charity with the asset lock and subject to public benefit assessment</li> <li>➤ Composition of the Board</li> <li>➤ The provision of space for community development support to smaller community and voluntary organisations</li> <li>➤ Leasehold and "Expectations Document" which set out how the assets can be used</li> <li>➤ Establishment of a Service User Participation Group</li> </ul>
The Trust is unsuccessful in securing the projected income through commissioning, grant and bid funding	<ul style="list-style-type: none"> <li>➤ Modest income projections until The Trust is fully established</li> <li>➤ Establish a diverse income stream</li> <li>➤ Build expertise and capability within the team re securing funding/building relationships etc</li> <li>➤ Prove track record of delivery, and the contribution the Trust can make to LAA and NHS Haringey targets</li> </ul>
The former Café space is not let	<ul style="list-style-type: none"> <li>➤ Explore various options for use of the space including pharmacy and other usage by NHS Haringey and VCS.</li> </ul>
Further assets are not forthcoming	<ul style="list-style-type: none"> <li>➤ Demonstrate to London Borough of Haringey that the Trust is not just 'a safe pair of hands' but also innovative by making a success of the Laurels as a</li> </ul>

	community facility. ➤ Strong and effective governance
The Trust is not recognised as a representative voice of the community	➤ Demonstrate to Key Stakeholders that all interests are accommodated and ensure the organisation has transparent governance and operation

### **13. Transition Plan**

A plan for the transition to The Trust is detailed in the attached project plan. This shows the key issues to be addressed before the NDC funding ends and a proposed timeline.

This affords The Bridge NDC a significant period of time to gear up to the following challenges:

- Provision of crucial support and resourcing from the NDC whilst it is operational
- Working with NHS Haringey and MHT to develop a plan of action for NHS Haringey and MHT services delivered within the Laurels and to refine operating practices
- To pilot and plan a range of community based health and wellbeing services
- To test the rental and pricing policy for the Trust space and refine procedures
- To promote and market The Trust in advance of its official launch
- To build relationships with the statutory bodies and other organisations
- To gear up capacity for tendering for contracts
- To refine the services based on ongoing consultation and feedback with the local community
- To achieve the rental of the former café space

### Transition Plan June 2009 - March 2011

	<b>Apr-June 2009</b>	<b>Jul-Sept 2009</b>	<b>Oct-Dec 2009</b>	<b>Jan-Mar 2010</b>	<b>Apr-June 2010</b>	<b>Jul-Sept 2010</b>	<b>Oct-Dec 2010</b>	<b>Jan-Mar 2011</b>
Appoint three initial Trustees from the NDC Board to manage the transition plan								
Set up Company limited by guarantee								
Apply for and secure Charitable Status								
Recruitment of Full Board of Trustees (x10)								
Utilise the Health Theme Working Group as consultative group during the transition								
Initiate and agree Forward strategy for The Laurels with the Council, NHS Haringey & MHT								
Develop & deliver marketing plan to promote the Laurels space								
Secure ongoing external contracts								
Recruit key staff starting with Director and project delivery staff								
Review governance and operations of the Trust and implement changes as appropriate								

## Appendix 1 Financial Plan

### Year 1 - 5

#### Income and expenditure account

	Yr 1	Yr 2	Yr 3	Y4	Yr 5	Total
<b>INCOME</b>						
<u>Rental Income</u>						
The Laurels- Gifted income	£285,000	£285,000	£285,000	£285,000	£285,000	<b>£1,425,000</b>
Room rental income	£8,000	£10,000	£12,000	£14,000	£16,000	<b>£60,000</b>
Pharmacy rental income		£10,000	£10,300	£10,609	£10,927	<b>£41,836</b>
Laurels Start Up Fund (from unspent income from the Laurels)	£225,000					<b>£225,000</b>
<u>External Contracts</u>						
NDC Projects	£15,000					<b>£15,000</b>
Health Projects (NHS/MHT)	£20,000	£75,000	£100,000	£100,000	£100,000	<b>£395,000</b>
Employment Projects		£25,000	£50,000	£50,000	£50,000	<b>£175,000</b>
Other Bids Projects (eg capacity building etc)		£25,000	£50,000	£50,000	£85,000	<b>£210,000</b>
<b>TOTAL INCOME</b>	<b>£553,000</b>	<b>£430,000</b>	<b>£507,300</b>	<b>£509,609</b>	<b>£546,927</b>	<b>£2,546,836</b>
<b>EXPENDITURE</b>						
<u>Facility Costs</u>						
Service charge payable to Circle 33	£9,456	£9,692	£9,935	£10,183	£10,438	<b>£49,704</b>
Rent payable to NHS Haringey	£95,000	£95,000	£95,000	£95,000	£95,000	<b>£475,000</b>
<b>TOTAL FACILITY COSTS</b>	<b>£104,456</b>	<b>£104,692</b>	<b>£104,935</b>	<b>£105,183</b>	<b>£105,438</b>	<b>£524,704</b>
<u>Staff Costs</u>						
Chief Executive	£50,000	£51,500	£53,045	£54,636	£56,275	<b>£265,457</b>
Programme Manager	£35,000	£36,050	£37,132	£38,245	£39,393	<b>£185,820</b>
Finance and Admin Assistant	£20,000	£20,600	£21,218	£21,855	£22,510	<b>£106,183</b>
On costs (@ 20%)	£21,000	£21,630	£22,279	£22,947	£23,636	<b>£111,492</b>
Staff Training (@4% of payroll)	£3,400	£3,502	£3,607	£3,715	£3,827	<b>£18,051</b>
Staff Travel	£1,500	£1,500	£1,500	£1,500	£1,500	<b>£7,500</b>
<b>TOTAL STAFF COSTS</b>	<b>£130,900</b>	<b>£134,782</b>	<b>£138,780</b>	<b>£142,899</b>	<b>£147,141</b>	<b>£694,502</b>
<u>Direct Costs towards Charitable Objectives</u>						
Scholarships (Medical/Health Fileds)		3000	6000	9000	12000	<b>£30,000</b>
Laurels Funded Projects	40000	40000	40000	40000	40000	<b>£200,000</b>
NDC Projects	£13,500.0	£0.0	£0.0	£0.0	£0.0	<b>£13,500</b>
Health Projects (NHS/MHT)	£18,000.0	£67,500.0	£90,000.0	£90,000.0	£90,000.0	<b>£355,500</b>
Employment Projects	£0.0	£22,500.0	£45,000.0	£45,000.0	£45,000.0	<b>£157,500</b>
Other Bids Projects (eg capacity building etc)	£0.0	£22,500.0	£45,000.0	£45,000.0	£76,500.0	<b>£189,000</b>
<b>TOTAL CHARITABLE OBJECTIVES</b>	<b>£71,500</b>	<b>£155,500</b>	<b>£226,000</b>	<b>£229,000</b>	<b>£263,500</b>	<b>£945,500</b>
<u>Marketing and Promotion</u>						
Marketing materials	£5,000	£2,500	£2,500	£2,500	£2,500	<b>£15,000</b>
Events	£2,000	£2,060	£2,122	£2,185	£2,251	<b>£10,618</b>
Website development	£10,000	£1,000	£1,000	£1,000	£1,000	<b>£14,000</b>
<b>TOTAL MARKETING COSTS</b>	<b>£17,000</b>	<b>£5,560</b>	<b>£5,622</b>	<b>£5,685</b>	<b>£5,751</b>	<b>£39,618</b>
<u>Other Overheads</u>						
Evaluation	£1,500	£1,545	£1,591	£1,639	£1,688	<b>£7,964</b>
Set up costs	£20,000	£0	£0	£0	£0	<b>£20,000</b>
Equipment, Purchase, Hire and Repair	£1,000	£1,030	£1,061	£1,093	£1,126	<b>£5,309</b>
Printing Stationery and Office Expenses	£1,500	£1,545	£1,591	£1,639	£1,688	<b>£7,964</b>
Photocopier hire	£500	£515	£530	£546	£563	<b>£2,655</b>
Computer Costs	£500	£515	£530	£546	£563	<b>£2,655</b>

Telephone and broadband	£1,200	£1,236	£1,273	£1,311	£1,351	<b>£6,371</b>
Post and courier	£200	£206	£212	£219	£225	<b>£1,062</b>
IT support	£600	£618	£637	£656	£675	<b>£3,185</b>
Payroll services	£300	£309	£318	£328	£338	<b>£1,593</b>
Bank Fees	£200	£206	£212	£219	£225	<b>£1,062</b>
Legal Fees	£1,000	£1,030	£1,061	£1,093	£1,126	<b>£5,309</b>
Audit	£500	£515	£530	£546	£563	<b>£2,655</b>
Insurance	£2,000	£2,060	£2,122	£2,185	£2,251	<b>£10,618</b>
Other Professional Fees	£2,000	£2,060	£2,122	£2,185	£2,251	<b>£10,618</b>
Board expenses and trustee training	£1,600	£1,648	£1,697	£1,748	£1,801	<b>£8,495</b>
Depreciation	£250	£258	£265	£273	£281	<b>£1,327</b>
<b>TOTAL OTHER OVERHEADS</b>	<b>£34,850</b>	<b>£15,296</b>	<b>£15,754</b>	<b>£16,227</b>	<b>£16,714</b>	<b>£98,841</b>
<b>TOTAL EXPENDITURE</b>	<b>£358,706</b>	<b>£415,830</b>	<b>£491,092</b>	<b>£498,994</b>	<b>£538,544</b>	<b>£2,303,165</b>
<b>RETAINED NET SURPLUS/CONTINGENCY</b>	<b>£194,294</b>	<b>£14,171</b>	<b>£16,208</b>	<b>£10,615</b>	<b>£8,384</b>	<b>£243,671</b>

### Financial Forecast Year 6 - 10

	Yr 6	Yr 7	Yr 8	Yr 9	Yr 10	Total
<b>TOTAL INCOME</b>	<b>601,620</b>	<b>661,782</b>	<b>727,960</b>	<b>800,756</b>	<b>880,832</b>	<b>6,219,787</b>
<b>TOTAL FACILITY COSTS</b>	108,074	118,881	130,769	143,846	158,231	<b>1,184,506</b>
<b>EXPENDITURES</b>						
TOTAL STAFF COSTS	150,819	165,901	182,491	200,741	220,815	<b>1,615,269</b>
TOTAL CHARITABLE OBJECTIVES	270,088	297,096	326,806	359,486	395,435	<b>2,594,411</b>
TOTAL MARKETING COSTS	5,895	6,484	7,133	7,846	8,631	<b>75,607</b>
TOTAL OTHER OVERHEADS	17,132	18,845	20,729	22,802	25,082	<b>203,431</b>
<b>TOTAL EXPENDITURE</b>	<b>552,007</b>	<b>607,208</b>	<b>667,929</b>	<b>734,722</b>	<b>808,194</b>	<b>5,673,225</b>
<b>RETAINED NET SURPLUS/CONTINGENCY</b>	<b>49,613</b>	<b>54,574</b>	<b>60,031</b>	<b>66,035</b>	<b>72,638</b>	<b>546,562</b>

## Appendix 2: Rental Income from The Laurels 2009/10 - 2013/14

### Appendix 2: Rental Income from The Laurels 2009/10 - 2013/14

Space	Rental Basis	Unit Cost	Full Occupancy Calculation  (based on 44 weeks per year)	Year 1 40%	Year 2 50%	Year 3 60%	Year 4 70%	Year 5 80%
<b>NHS HARINGEY space 1392.50 sqm</b>	Sub lease	£285,000 pa	n/a	£285,000	£285,000	£285,000	£285,000	£285,000
<b>The Trust Space</b>								
<b>Shared Community Room 52.80 sqm</b>	Rental	4 desk spaces	6000	£2,400	£3,000	£3,600	£4,200	£4,800
<b>Pharmacy (former Kitchen and store) 46.1sqm</b>	Rental	£190 psm	£8,759		£8,759	£9,022	£9,292	£9,517
<b>Consulting Room 1 12sqm</b>	Sessional	£10 per hour	£13,200	£5,280	£6,600	£7,920	£9,240	£10,560
<b>Consulting Room 2 12sqm</b>	Sessional	£10 per hour	£13,200	£5,280	£6,600	£7,920	£9,240	£10,560
<b>Consulting Room 3 12.2 sqm</b>	Sessional	£10 per hour	£13,200	£5,280	£6,600	£7,920	£9,240	£10,560
<b>NDC Groom Room (next to consulting rooms) 23.3sqm</b>	Waiting area							
<b>Sub Total (Trust Space)</b>			54359	£18,240	£31,559	£36,382	£41,212	£45,997
<b>Total (Gifted and Rental)</b>				£303,240	£316,559	£321,382	£326,212	£330,997

### Notes and Assumptions

- Assumes no increase in rental costs over the 5 year period



### Appendix 3: Summary of Consultation

Cllr Bob Harris	Cabinet Member for Adult Social Care and Well-being, London Borough of Haringey
Cllr Clare Kober	Leader, London Borough of Haringey
Cllr Isidoros Diakedes	Councillor, Former Cabinet Member for Housing Services, London Borough of Haringey
Niall Bolger	London Borough of Haringey, Director of Urban Environment
Helena Pugh	London Borough of Haringey, Health Development, Adult Services
James Slater	Haringey NHS HARINGEY, Director of Commissioning and Performance
Christina Gradowski	Haringey NHS HARINGEY, Former Director of Corporate services and Partnership
Maria Kane	Chief Executive, Haringey MHT
Paul Head	Vice Chair, Haringey Strategic Partnership
Pam Pemberton	HAVCO
Yolande Burgess	Partnerships Director LSC London North Wellbeing Theme Group

### References

(i)Community Assets and Community Ownership  
[www.communities.gov.uk/publications/communities/communityassets](http://www.communities.gov.uk/publications/communities/communityassets)

(ii)The Quirk Review  
[www.communities.gov.uk/publications/communities/makingassetswork](http://www.communities.gov.uk/publications/communities/makingassetswork)