MINUTES OF THE MEETING OF THE ADULTS & HEALTH SCRUTINY PANEL HELD ON THURSDAY 19th SEPTEMBER 2024, 6.30 - 9.30pm

PRESENT:

Councillors: Pippa Connor (Chair), Cathy Brennan, Thayahlan lyngkaran, Mary Mason, Sean O'Donovan and Felicia Opoku

Co-optees: Helena Kania

12. 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'.

13. APOLOGIES FOR ABSENCE

Apologies for absence were received from Cllr Mary Mason.

Cllr Sheila Peacock had given apologies for not being present in the meeting room, though she attended the full meeting online.

Apologies for absence were also received from Cllr Lucia das Neves, Cabinet Member for Health, Social Care & Wellbeing.

14. ITEMS OF URGENT BUSINESS

None.

15. DECLARATIONS OF INTEREST

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

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

Cllr Thayahlan lyngkaran declared an interest as a consultant radiologist and a deputy medical director.

Helena Kania declared an interest as a co-Chair of the Joint Partnership Board.



16. DEPUTATIONS/PETITIONS/ PRESENTATIONS/ QUESTIONS

None.

17. MINUTES

Referring to the action points from the previous minutes, Cllr Connor requested an update on the Council's liaison with the Osborne Grove co-production group. Beverley Tarka, Director of Adults, Health & Communities, confirmed that Cllr das Neves had written to the group and had shared financial details following the meeting at which they had made a deputation. She added that various options were being worked through in relation to the site and that they would share further information more widely when this had been progressed. Vicky Murphy, Service Director for Adults Social Services, added that a further meeting with the group would be suggested to be scheduled for February 2025 at which they would provide as much updated information as possible.

Cllr Connor recommended that the action tracker for the Panel be included in the agenda papers under the minutes in future. **(ACTION)**

It was noted that the updates on Continuing Healthcare were not yet available as a meeting between the Director of Operations for Adult Community Services at the Whittington (who had presented the report) and the NCL CHC team (which would provide much of this information) had been postponed. An update would be provided to the Panel after this meeting had taken place.

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

RESOLVED – That the minutes of the meeting held on 30th July 2024 be approved as an accurate record.

18. APPOINTMENT OF NON-VOTING CO-OPTED MEMBER

Dominic O'Brien, Scrutiny Officer, reported that the recommendation to the Panel, following advice from Legal Services, was to defer the report due to the need for further due diligence of the process to be carried out, including references. Apologies were given for this delay. It was noted that the recruitment process was currently being reviewed and that a further update would be provided at the next meeting. **(ACTION)**

RESOLVED – That the report on the Appointment of a non-voting Co-opted Member be deferred.

19. DEMENTIA SERVICES UPDATE

The report for this item was presented in two parts, with the first part on community aspects introduced by Laura Crouch, Senior Services Manager at the Council, and the second part on NHS and partnerships introduced by Tim Miller, Assistant Director of Place, Integration, Transformation & Delivery (Haringey) at the NCL ICB. Also in attendance was Sade Olutola, Service Lead for Haringey Mental Health Services.

Slides presented by Laura Crouch covered the following points:

- An increasingly ageing population was expected to lead to increased demand for dementia services in the future with more people and more complex diagnoses. There were around 2,300 residents in Haringey thought to be living with dementia in Haringey in 2023/24, around two-thirds of which had been diagnosed with the condition.
- To prepare for the increased demand, it was necessary to look beyond traditional care models and to maximise community strengths, partners and resources. A dementia co-ordinator post had been created to enable partners to engage, network and create a more accessible and robust Borough.
- A set of Dementia Friendly Haringey Priorities had been developed through a number of sessions and activities across the Borough, involving carers, professionals and people with a diagnosis of dementia. These priorities included that Dementia Friendly Haringey will be a place where people with dementia and their carers:
 - Will be respected and experience a greater level of dementia awareness in the community.
 - Will have greater access to health and social care support services.
 - Will have access to a range of local social activities.
- 30 local services and organisations had signed up to a minimum of two actions to make their services more dementia friendly. These included GP practices and care providers.
- A list of key achievements on the 'Greater Level of Dementia Awareness' programme of work was provided (also available in the supplementary agenda papers) which included:
 - Funding for carers in a creative group.
 - A new 'Singing for the Brain' session twice per month at Tottenham Hotspur Stadium.
 - Nine dementia-friendly events with 40-50 attendees at each.
 - An uptake in referrals, walk-ins and signposting.
 - New dementia-friendly webpages had recently gone live.
 - Delivery of training for GPs, including double appointments for those with a diagnosis of dementia and phone calls in the morning to remind patients of their booked appointments.
 - Improvement of long-term cognition from new community activities in partnership with Jacksons Lane.
- New events were taking place at the Haynes Dementia Hub. Independent networks were being developed and activities such as carers' lunch clubs and

an evening-based carers group, led by carers, was due to be launched soon. SEN students were gaining qualifications and work experience in the kitchens and other activities. The next wave of social care workers were being actively trained to be dementia-friendly in their practices.

- The assessment and referral pathways were now working well and the localities model had enabled people to be seen more quickly.
- A communications plan was being developed with the Grace Organisation and it was hoped that they could be supported further and built into what was being delivered Borough-wide.
- The Dementia Reference Group was continuing to grow and was attended by carers and people with dementia.
- The Learning Disability Partnership team was working across localities to identify, track and support those with a dementia diagnosis and those at higher risk. People with learning disabilities and especially people with Downs Syndrome were more likely to be affected by dementia and at an earlier age. A social component of that offer was being developed including a nostalgic music and dance group, chair-based exercises and a new memory café to be hosted at Winkfield Resource Centre.
- There were a range of core goals for 2024/25 to deliver on what the groups were saying that they wanted to see in the community. The aim was to create a Borough that was capable and adaptable in a demanding social and financial climate.
- A Dementia Friendly Parks Audit had been conducted and actions were being considered to make the signage more dementia friendly in Finsbury Park and Downhills Park, make seating more accessible and review the paving and walkways. A similar process would also be conducted with the leisure centres.
- Partnerships were being developed across the North Central London (NCL) area, especially with young onset dementia, and by looking at programmes of activities across NCL where referrals could be made.
- Members of the Panel were invited to sign up for the new Dementia-Friendly pledges and training which was now being delivered.

Laura Crouch then responded to questions from the Panel:

- Asked by Cllr Peacock about swimming facilities for people with dementia in Haringey, Laura Crouch reiterated the commitment to carry out an audit of facilities at leisure centres and said that this process would include dementiafriendly swimming.
- Cllr Peacock expressed concerns about the condition of the toilets at the Tom's Club at Chestnuts Community Centre. Laura Crouch agreed to provide this feedback to the organisers. (ACTION)
- Cllr Peacock commented that attendance at Singing for the Brain at Tottenham Hotspur Stadium was poor and that it should be advertised more prominently. She added that it could also be confusing to find the correct room. Laura Crouch noted that it had taken some time to negotiate the space for this and so the room location had been changed a few times. However, a new designated

area near the café had been requested so that attendees would not have to walk so far. The team was also looking for other venues in the area that could also host these sessions. Laura Crouch agreed to pass on the feedback on low numbers and promoting the sessions. **(ACTION)** She added that there would be further opportunities for digital advertising through the new dementia-friendly web pages. New printed leaflets about services were also being circulated in the community including to libraries and GP practices.

- Cllr Peacock informed the meeting that there was a new proposal to start a dementia café at the Tottenham Sports Centre.
- Asked by Helena Kania how service provision would be able to keep up with the expected rising demand in future, Laura Crouch said that there was a focus on building up community resources and that the whole dementia-friendly programme aimed to make more places accessible across the Borough. The team had been working closely with the Cypriot Centre on hosting events and there had also been discussion on working with Grace Organisation as previously mentioned. She added that a drop-in service was offered so that people could drop in and attend activities when they wanted to rather than requiring a full-time space. There was also no current waiting list for people referred into the service.
- Helena Kania expressed concern about the transport options available for people who wanted to attend the dementia centres. Laura Crouch responded that each service had its own transport method, mainly using minibuses with some use of taxis and cars. The Haynes Centre was currently able to pick people up from across the Borough and this was done on a needs basis with independent travel encouraged where possible.
- Asked by Cllr lyngkaran about the organisations that had signed up to the dementia-friendly actions, Laura Crouch said that this included around 12 GP practices so far, noting that this was quite a detailed process to set up with good achievable targets. The initial areas had been targeted with the aim of building up clusters of GP practices over time and to spread this across the Borough. She added that GP-specific dementia-friendly training was having the biggest impact and so they were working with local health providers to release more GPs and other health professionals to attend training sessions. Cllr lyngkaran suggested that other parts of the Council, including perhaps the Public Health team could use their links to help promote this initiative with GP practices. Will Maimaris, Director of Public Health indicated that he would be happy to look at how his team could help with this. (ACTION)
- Cllr Opoku suggested that dementia-friendly policies could be built into the premises for all new or expanded GP practices. Laura Crouch noted that she always promoted dementia-friendly, accessible and autism-friendly practices when meeting with the Haringey GP Federation or with the ICB. Tim Miller confirmed that the work on dementia-friendly practices was supported by the ICB and the Haringey GP Federation. He added that there was a clinical lead GP for the west of Haringey who had done a lot of work in this area. Cllr Connor suggested that an update to the Panel in 8-9 months' time on how this work with GP practices was progressing would be welcomed. (ACTION)

- Helena Kania requested figures on dementia service users. Laura Crouch said that there were currently 40 regular attendees at the Haynes while the Tom's Club tended to have around 60-70 people at each session. There was also a small group of regulars attending the drop-in activities. In the past 12 months there had been 27 referrals received, of which 16 had been offered places straight away. Cllr Connor suggested that an update on the figures to the Panel in 8-9 months' time would also be useful. (ACTION)
- Cllr O'Donovan commented that, in his experience of attending the dementia events and activities, it brought together people who were living with dementia and their carers with professionals to discuss issues and problems and also facilitated valuable activities. He also highlighted the barriers for some people in obtaining a diagnosis and reaching support services because of issues with isolation and stigma or with dementia not being quickly identified. He also highlighted the waiting times for the Haringey Memory Service as another barrier. It was noted that Tim Miller would address these points in his presentation.

Slides presented by Tim Miller covered the following points:

- The Haringey Memory Service was the key service for dementia diagnosis and post-diagnostic support in the Borough and was well connected and integrated with the Haynes Centre and with the dementia navigators and other dementia roles.
- The quality standard for referral to the service (typically from a GP) to completion of a diagnostic assessment was 6 weeks. Performance on this had recently been relatively stable and well-performing, comparing well to neighbouring boroughs. Those with longer waits would typically be up to 3 weeks longer due to logistics or capacity issues but there were not any hidden long waits.
- There was a measure used across the country on the number of people thought to have dementia compared to the number of confirmed diagnoses in order to see how well dementia was being detected and assessed for. Haringey performed slightly better than the London average on this measure with 66.3% of the expected number of people with dementia assessed and diagnosed. This was still a significant gap but was in line with what was seen nationally.
- The merger of the two Mental Health Trusts in NCL (Barnet, Enfield & Haringey Mental Health Trust and Camden & Islington NHS Foundation Trust) had been planned for some time and was expected to be completed in November 2024. As a result of this, the older people services would be generally moving towards a needs-led approach that was age-cohort based and this would further support people with the right care from the right teams. He also noted that there had been a lack of responsive crisis support for older people with dementia compared to working-age adults with mental health conditions and that a benefit of the merger would be a more consistent model of care that would see dementia crisis teams being introduced in Haringey.

Tim Miller and Laura Crouch then responded to questions from the Panel:

- Cllr O'Donovan highlighted the rise in dementia rates, particularly in minority communities, and noted that issues of stigma may be preventing people from presenting to services. Laura Crouch highlighted the networks being developed with the Cypriot Centre and other local groups and added that there had also been some success at the Black Health Fair this year. The team had been invited to present to the diversity leads who link in with local community/religious leaders and the aim was to find community-based facilitators to help communicate key information, including about services. Cllr Connor noted that, in terms of outreach, the Panel had previously spoken about the centre of excellence approach provided by the Haynes Centre but that the concern had been whether this was being duplicated across the Borough. It would therefore be useful for the Panel to receive further updates on the progress on this, including in relation to the Cypriot Centre, the Grace Organisation and any other organisations that would be involved in this kind of outreach. (ACTION)
- Referring to the figures on the 6-week wait quality standard, Cllr lyngkaran welcomed the improvement from April 2023 to October 2023 but noted that there had been some slippage since then. He also requested details on the longest wait times. Sade Olutola responded that there had been some logistical challenges including some periods of staff sickness, cancellation of appointments due to clashes with other medical appointments for service users and requests for postponement of appointments from carers due to other commitments. She added that resources had been put in place to get this process back on track. She also noted that the longest current wait time was 12 weeks but that this resulted from the individual being hospitalised due to an unrelated issue.
- Cllr Connor highlighted a previous recommendation of the Panel which was to establish a secure online portal to enable service users, carers and social workers to be able to quickly access documents relating to assessments and care plans. Laura Crouch responded that the recent focus had been on rolling out the localities model and making sure that there were good customer-facing spaces across the Borough. The next phase would be to consider the digital approach on dementia. Tim Miller added that a digital portal would be challenging to implement with information across different sectors that would need to be pulled together. One area that had been discussed was having a named professional that would be the main contact for an individual (and their carer/family), based on their needs and their relationship with services, as a point of contact and advice. While he acknowledged that this was a different solution to the digital portal, it did have the potential to address some of the same issues such as on personalised and up to date information. He added that the NHS was ambitious about what could be achieved through the NHS App in terms of medical records and how this could be enhanced in future. However, this was still at the stage of testing and learning how these technologies could work for patients. He added that there was a technology provider called Patient Knows Best that worked in this area which may be of interest to the Panel. Cllr Connor requested further information to be provided

in a future update to the Panel on how the named person approach would be introduced and how individuals and their families would be able to access details on care plans and other relevant information. **(ACTION)**

- Cllr Opoku added that there were plans to expand the Universal Care Plan (a shared care planning system) in areas such as sickle cell disease and that it would be helpful to input into this process to enable dementia to also be included in future. (ACTION)
- Cllr Brennan highlighted the importance of directly involving the individual experiencing dementia in the process of shared records and any digital offer. Laura Crouch noted that the ongoing wider digital work was being designed to be accessible for people with neurodiverse needs. This would be an easier pathway for people to follow in the way that events were advertised and there would also be a reminder text service for events where people had expressed an interest.
- Asked by Cllr O'Donovan asked about outcome measures, Laura Crouch said that feedback was gathered after all events and compiled into a monthly dementia-friendly report. Data was also collected on the number of attendees at activities, referrals being made and the type of phone calls/contacts made.

20. SMOKE FREE GENERATION BY 2030 INITIATIVE

Will Maimaris, Director for Public Health, introduced this item noting that smoking remained the biggest contributor to the life expectancy gap between the richest and poorest parts of the country. He also noted that the new Government appeared to be continuing the previous Government's proposals to tighten the law on smoking and vaping.

Bezuayehu Gubay, Public Health Strategist and Commissioner, then presented details of Haringey's new plan to create a smokefree generation by 2030:

- Smoking is the single most entirely preventable cause of ill health, disability and death in the UK, leading to around 80,000 deaths a year and one in four of all cancer deaths.
- In Haringey, 17% of the GP registered population were smokers as of November 2023, which equated to 59,620 people.
- Various groups in Haringey had higher rates of smoking including people in routine and manual occupations (33% prevalence), people with long-term mental health conditions (28%), people from certain ethnic communities including the Turkish (28%), Polish (31%) and Romanian (31%) speaking communities and people living in the most deprived areas (20%). In addition, 5.4% of pregnant women were identified to be smokers at the time of delivery.
- Haringey had the second highest mortality rate in NCL for smoking attributable mortality in persons aged 35 years or more and had higher hospital admission rates than London as a whole.
- The economic impact of smoking on Haringey was estimated to be around £100m. The cost on an individual's finances was also significant with someone

smoking 20 cigarettes per day spending an average of £4,182 per year. An average smoker spends £1,945 per year.

- There were opportunities created through the Government's Smoke Free Generation by 2030 initiative including increasing the age of sale, strengthening enforcement on illicit tobacco and vaping sales as well as initiatives to support and incentivise people to stop smoking. Additional funding for anti-smoking in Haringey this year was £332,932.
- A process of assessment and self-evaluation was being carried out while strategic actions included writing a tobacco control strategy, embedding the tobacco control agenda in the Health and Wellbeing Strategy and the signing of a Tobacco Control Declaration by elected members.
- Other policy actions included school initiatives, promoting smoke-free environments, public education and enforcement actions. The overall goal was to achieve 5% of smoking prevalence by 2030 which was the national target.
- The equality focus included a targeted approach on the higher-risk groups referred to previously, using the swap to stop scheme to encourage smokers to switch to vaping, efforts to reach those most in need through health ambassadors from key community groups, a multilingual website and improved referral pathways. There was also increased workforce capacity to support these initiatives including more smoking advisers and speciality training on mental health.
- The Council had committed to supporting the Tobacco and Vapes Bill and there were options for elected members to provide support, including by signing up to the London Smoke Free Councillor Network.

Will Maimaris and Bezuayehu Gubay then responded to questions from the Panel:

- Cllr Connor requested further details on how high-risk groups would be targeted. Will Maimaris said that regulation was likely to have the most success but there was also additional resources going into smoking cessation services along with the community ambassador approach. Bezuayehu Gubay added that the direct engagement with local community organisations was combined with identifying current smokers through health records to encourage them to engage with interventions.
- Asked by Cllr Connor how children in schools would be prevented from vaping, Will Maimaris acknowledged that there was not yet a clear formulated plan around Personal, Social, Health and Economic (PSHE) education because this was still an emerging picture. Regulation may be required as the number of young people vaping was rising. Cllr Connor suggested that it would be useful to be updated on how work in schools on vaping progresses at a future date. (ACTION)
- Cllr Peacock expressed concern that some Council staff could be seen smoking outside some Council buildings which should be discouraged. Will Maimaris said that there had been some firm messaging to Council staff about smoking outside the premises. Some investment for workplace NHS health checks had also recently been secured which included smoking advice for staff.

Bezuayehu Gubay added that staff were also supported by linking to initiatives such as 'Stoptober'.

- Cllr Peacock highlighted the high prevalence of smoking in the Turkish community and also the marketing of vaping to children and young people. Will Maimaris said that the proliferation of colourful vapes that appeal to young people was recognised as a national issue. While the Council's trading standards team could enforce existing regulations, a shift in national levers would be required for further action.
- Cllr O'Donovan highlighted the potential mixed messaging of discouraging youth vaping but also encouraging smokers to switch to vaping. Will Maimaris responded that, although the harm from vaping wasn't fully understood, it was clearly much less harmful than smoking which is why there were efforts to switch smokers over to vaping. He acknowledged that there was a challenge of reconciling this with the message around potential harm for children and this is why further regulation and support was required nationally.
- Cllr O'Donovan highlighted research which indicated that managing stress/anxiety was a factor in young people vaping and also that young people wanted more reliable educational information about whether vaping was harmful. Cllr Connor requested that Cllr O'Donovan circulate any relevant research on this issue to the Panel. (ACTION) Will Maimaris observed that there were some similarities between the trend on vaping and young people and the use of smoking and alcohol in previous generations of young people. However, the trend around anxiety and stress was also reflected by increasing rates of self-harm in young people. He added that there was a forthcoming seminar on this that he could report back on at a later date. Cllr Connor agreed that it would be useful for the Panel to be updated on this along with any future plans to engage with pupils via PSHE education and linking up with mental health teams if this was felt to be a factor. (ACTION)
- Asked by Cllr Opoku whether people who chew tobacco were included in the strategy, Bezuayehu Gubay said that they would still be supported if presenting to services but that there wasn't a specific workstream on this. Cllr Connor recommended that the wording of the strategy be amended to include 'tobacco products' as a way of including practices such as this. (ACTION) Will Maimaris agreed that there could be some consideration given to understanding the cultural practices around chewing tobacco.
- Cllr lyngkaran referred to the graph on smoking prevalence in Haringey and queried the sharp drop in 2021 which was followed by a subsequent rise. Will Maimaris said that short term trends in the data should be treated with some caution as they tended to fluctuate and were based on a questionnaire that only a certain number of people were asked to complete. He also noted that there was some national evidence around increasing smoking prevalence in young people which hadn't been seen for some time.

21. HARINGEY SAFEGUARDING ADULTS BOARD - ANNUAL REPORT 2023/24

Dr Adi Cooper, Independent Chair of the Haringey Safeguarding Adults Board (HSAB), presented the Board's annual report for 2023/24, explaining that this set out the statutory duties of the Board and the work of the Board and its partners over the past year. Further key points in the report that she highlighted were:

- Details of the two Safeguarding Adults Reviews that were published last year, one of which highlighted issues around self-neglect, housing provision and multi-agency working and the other which focused on commissioned care in a care home and multiple areas of physical and mental health needs. The reviews included recommendations which were responded to.
- Details of the recent work with colleagues in the Joint Partnership Board to update, revise and co-produce the five-year strategy based on the concerns and interests of residents in Haringey.
- The Board's subgroups had changed slightly with two new subgroups to help clarify and focus on two major areas of focus for the Board:
 - Under the Safeguarding Adult Review subgroup there was now a subgroup looking at the implementation of recommendations emerging from Safeguarding Adult Reviews. She noted that there was a particular challenge, not just in learning from the Reviews but also in maintaining ongoing improvement with the churn in staffing and organisational structures and the pressures on the public sector. It was therefore necessary for the sub-group to go back to look at earlier Reviews carried out some years previously.
 - There was now a Practice & Improvement subgroup. There had previously been a Prevention & Training subgroup but these had now been split into two with an Engagement & Prevention subgroup focusing more on working with the voluntary sector, planning events for safeguarding adults and enhancing understanding of safeguarding across communities in Haringey. The new Practice & Improvement subgroup was focused more on practitioners engaged in safeguarding practices.
- Case studies gave examples of some difficult situations that practitioners were engaged with and delivering the outcomes that people want.
- A range of initiatives from partners around improvements in training, process and practice to support ongoing improvements in safeguarding.

Dr Cooper also informed the Panel that the Board received reports on a Quarterly basis where issues were raised which could lead to deep dives to check whether there was something more significant ongoing that was indicated by the data. She noted that data on safeguarding was not there as performance data but to prompt questions about issues that may be happening beneath the surface.

Dr Cooper then responded to questions from the Panel:

• Cllr Connor referred to Recommendation 8 of the 'Paulette' Safeguarding Adult Review, which said that the Board should consider conducting an audit of commissioned placements and care packages to ensure that social, cultural and emotional needs were recognised. She also referred to the 'Steve'

Safeguarding Adult Review, noting the detailed aspects of multi-agency communication and co-ordination in Recommendation 1. She asked how the Board would be able to keep abreast of important but detailed recommendations such as this. In relation to the recommendation on the 'Steve' Review, Dr Cooper explained that the multi-agency panel would be reporting to the Board on an annual basis about progress so the way that this recommendation was being implemented was by doing so on a routine basis rather than having to follow it up periodically. Similarly, the audit of cases within adult safeguarding was coming to the Board in a routine way. However, she acknowledged that the volume of recommendations was guite challenging and so when looking at these it was important to ensure that there was no duplication in the actions taken as some of the recommendations tended to cluster within Reviews as well as across Reviews. The new subgroup was trying to manage that process as the previous subgroup had found the volume of recommendations very high. This was not an issue unique to Haringey as the number of Reviews gradually increased following the introduction of the Care Act. She also commended the support provided by Council officers in managing this work. She noted that that the subgroup looking at historic Reviews was medium to long-term work, with a deep dive into one Review at a time, and identifying key themes that required focus on an ongoing basis. Some issues may become more or less important over time or may rely on changes to national guidance or legislation to be fully implemented.

- Asked by Cllr Connor about the joined-up approach through the Multi-Agency Solutions Panel, Vicky Murphy, Service Director for Adults Social Services, responded that the Panel was well known across all partners and internally as well as being promoted within the Safeguarding Adults Board and its subgroups. To get a referral through to the Panel, someone would need to be known to a provider and there would need to be consent under the Mental Capacity Act, so it wasn't always straightforward, but the ability to draw on expertise across partners was there.
- Helena Kania noted the high level of Violence Against Women & Girls (VAWG) referred to in the report and gueried what more could be done. Dr Cooper explained that it was routine for the partners to speak to the Board on an annual basis to explain what they were doing in this area and to examine the crossover with the safeguarding adults work. She acknowledged that this was a particularly challenging area and that this was not just an issue in intimate relationships but also in wider family relationships so there needed to be the right training available so that this could be properly identified. Asked by Helena Kania about the unreported aspects of VAWG, Dr Cooper observed that pain and shame were issues connected to safeguarding which people were reluctant to talk about and this also applied to VAWG and domestic abuse making it difficult to disclose. She agreed that there was a lot of hidden abuse, coercion and control and that what was seen in safeguarding adults data was only the tip of the iceberg. This was why the work of the Engagement and Prevention subgroup was so important as this involved a focus on raising awareness in the community, including on how to report VAWG. Cllr Connor

noted that VAWG was referred to on page 57 of the agenda pack but that it wasn't clear where this was being addressed in terms of the Board and subgroups so recommended that this be clarified in future reports. **(ACTION)**

- Cllr Brennan queried why VAWG and domestic abuse did not appear to be sufficiently prioritised and why statistics were not properly publicised, for example through police ward meetings. Dr Cooper clarified that Adult Safeguarding was primarily about people with care and support needs and so VAWG was an area that overlapped with the Board's responsibilities but was a broader agenda. In relation to prosecutions, Dr Cooper said that an ongoing challenge was that victims with care and support needs were not always seen as credible witnesses or there was not enough evidence to prosecute. That wasn't to say that the Police weren't trying hard to build these cases, but it was a very challenging area.
- A member of the public asked a question about members of the community raising safeguarding issues with the Council but finding it difficult to receive a response. Beverley Tarka said that there were channels to report directly to safeguarding teams if there was a safeguarding concern relating to someone who was in receipt of care and support through the adult social care team and this would be prioritised. However, if this related to someone in the general population then this would not be something to be sent to the adult social care team. Asked by Cllr Connor about communications on these issues more generally, Will Maimaris said that there was an issue to consider on coordination and channels of communication when issues were raised around service provision or how a resident was being supported. Vicky Murphy said that she was happy to have a conversation after the meeting to understand the issues relating to the specific case referred to and taking this to the right team. (ACTION) In relation to the wider point about communications, she said that the methodology about locality working was strengthening the way that safeguarding worked to ensure that the team was in a position to respond quickly and in person.
- Cllr O'Donovan asked if there were specific safeguarding contacts at Alexandra Palace and Tottenham Hotspur Football Club as they hosted events with large numbers of people. Dr Cooper said that she wasn't aware of any specific contact with Alexandra Palace, but that Tottenham Hotspur had given a good presentation to the Board some years ago about raising awareness around safeguarding which had led to some follow up work.
- Noting the references to gambling harms and adult safeguarding in the report, Cllr O'Donovan queried whether the sponsorship of Tottenham Hotspur by gambling organisations sat well with their wider safeguarding policies. Dr Cooper responded that the Council's Public Health team, which worked specifically on gambling harms, was likely to be better placed to engage with Tottenham Hotspur on this type of issue as this did not fit with the Board's duties and responsibilities.
- Cllr lyngkaran observed that Haringey had one of the highest proportions of gambling premises in London and, while acknowledging that national policy/legislation was relevant to this, asked what more could be done locally.

Dr Cooper explained that the outcome of the Board's conversation on gambling was to raise awareness with partner agencies in the context of adult safeguarding, including in relation to financial abuse. Will Maimaris acknowledged that gambling was a significant public health issue and that the Council had a gambling harms programme that was supported by the Cabinet Member for Health, Social Care and Wellbeing. The Council was limited on what it could do on the activities of gambling organisations, but he was happy to share information about the Council's work in this area at a future meeting. **(ACTION)**

- Cllr lyngkaran referred to a case study in the report of physical abuse from a carer and queried why there were still difficulties in bringing this to prosecution despite the incident being captured by CCTV. While Dr Cooper was not able to elaborate further on the details of the specific case, she explained that there were a number of parallel processes alongside the safeguarding inquiry relating to cases such as this and that this related to the difficulties that the Police experienced in bringing prosecutions, as discussed earlier in the meeting. She emphasised that these case studies provided some insight into the sort of issues that practitioners deal with in relation to safeguarding adult issues.
- Referring to page 75 of the agenda pack, Cllr Connor noted that the number of safeguarding concerns had decreased by 38% in 2023/24 compared to the previous year, while the number of Section 42 enquiries had increased by 29% and the proportion of concerns leading to Section 42 enquiries had also increased. Dr Cooper commented that the data suggested that people were getting better at referring concerns through more appropriate pathways so this should not be seen as performance data but rather as an illustration about how something was changing. Vicky Murphy concurred with this and said that teams were getting better at managing concerns and partners had an improved understanding of what safeguarding was and the most appropriate way to manage concerns. Additionally, the safeguarding team had been brought back in-person 18 months previously following the pandemic and were better able to review initial concerns and ensure that a Section 42 process was followed.
- Referring to page 84 of the agenda pack, Cllr Connor noted that the NCL ICB was developing a Safeguarding Case Review Tracker and asked whether the Board had something similar. Dr Cooper explained that the ICB's tracker was to record roles and responsibilities across the local NHS organisations in relation to Safeguarding Adults Reviews which was welcome. The Board tracked the implementation of recommendations from Safeguarding Adults Reviews as previously described in relation to the work of the Implementation subgroup.
- In relation to the Board's priorities and objectives, under Section 8 of the report, Cllr Connor commented that, while she had understood the work of the subgroups and of ensuring that processes were in place, she hadn't understood as clearly from the report about the impact made for residents. Dr Cooper acknowledged that this was tricky because of the complexities relating to safeguarding and also because the role of the Board was to seek assurance that certain things were happening and that practice was being maintained at the right level. However, it was possible to assess impact and improvements in

practice through case file audits. Referral analysis was also relevant as, when referrals of concerns from members of the public increased for example, this could be an indication of greater awareness of safeguarding in the community. While the Board looked at various indicators of impact, it could be quite difficult to demonstrate directly. In addition, wider societal factors that impacted on safeguarding were beyond the control of the Board, for example the cost-of-living increases driving increases in financial abuse.

Cllr Connor then summarised the discussion and described the creation of the two new subgroups as a particularly significant development. She noted that the Panel would welcome further detail on progress with their work in the following year's report, including on the implementation of Safeguarding Adults Review recommendations and on how changes in practice were impacting on the lives of residents. With regards to the Practice & Improvement subgroup, it would be useful to understand the mechanisms to support practice improvement and safeguarding across the partnership. **(ACTION)**

22. WORK PROGRAMME UPDATE

Cllr Connor highlighted the scrutiny community consultation event, known as the 'Scrutiny Café' which was due to take place the following day. This would help to inform the issues for inclusion in the Panel's work programme for both Panel meetings and Scrutiny Review topics.

Scrutiny Officer, Dominic O'Brien, noted that the feedback from the Scrutiny Café would be provided in a report to the Overview & Scrutiny Committee on 14th October. He also informed the Panel that future Panel dates would need to be changed due to the Budget Scrutiny process being brought forward to November rather than December. This would mean that the next Panel meeting scheduled for 5th November would be cancelled and that a new Panel meeting on the budget would take place on 14th November. The next meeting date on 17th December would remain in place but would be used for regular agenda items rather than the budget.

Dominic O'Brien reported that the Panel had previously requested an agenda item on preparedness for a future pandemic and that, following liaison with the Director for Public Health, it seemed likely that February 2025 would be a suitable date for this item.

23. DATES OF FUTURE MEETINGS

- Thurs 14th November (6.30pm)
- Tues 17th December (6.30pm)
- Mon 10th February (6.30pm)

CHAIR: Councillor Pippa Connor

Signed by Chair

Date