

Scrutiny Review of Engaging with ‘Hard to Reach Communities’



Empowering

Collaborating

Involving

Consulting

Listening

Informing

A REVIEW BY THE OVERVIEW AND SCRUTINY COMMITTEE
March 2010

Chair's Foreword



Cllr Gideon Bull

There is an increasing government agenda to ensure that all residents have a say in the services which they receive. In the Local Government and Public Involvement in Health Act 2007 this includes a duty placed on local authorities and health trusts to ensure that people are able to have their say.

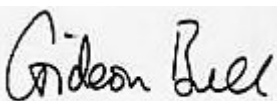
Haringey is one of the most diverse boroughs in London with nearly half of its population from ethnic minorities. Within this there are a number of communities and groups which do not engage with organisations whether this is because they do not feel empowered to do so or because they do not know how to access the organisations.

This review has looked at who in Haringey is considered hard to reach and what we, as a partnership, can do to ensure that these groups have an input into the services they receive and are able to access the services which they are entitled to. Without a coherent and partnership approach we are missing out on valuable knowledge and the ability to ensure that people are able to fully participate and make the most of the services available.

By improving our engagement with hard to reach groups we are also ensuring that the people in our community are able to fully participate in the borough in which they live. I hope that the recommendations within this report build on the progress which is already being made in the borough.

I have found this review not only extremely interesting in subject but have also been fascinated by the input which voluntary and community groups and members of the public have made and the work they carry out with hard to reach groups in Haringey.

I would like to thank all of those who participated in this review; BUBIC, SHOC, BME Carers, Caris Haringey, Afrikcare, Crucial Steps, North Middlesex University Hospital Trust, Whittington NHS Trust, Haringey Borough Police, LGBT Network, Haringey Council departments, HAVCO, Young people and members of the public



Gideon Bull

For further information:

Melanie Ponomarenko
Principal Scrutiny Support Officer
Overview & Scrutiny
7th Floor River Park House
High Road
Wood Green N22 4HQ
Tel: 020 8489 2933
Email: Melanie.Ponomarenko@haringey.gov.uk

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Executive Summary

The Overview and Scrutiny Committee commissioned a review into what is being done to engage with hard to reach groups across the partnership.

The review had a number of aims:

- Identify Haringey's hard to reach groups
- Identify barriers which prevent these groups engaging with organisations
- Identify improvements which can be made
- Share best practice

Key findings of the review:

- The 'hard to reach' group can be very dependent on the service area which you are focusing on.
- Barriers to engagement include:
 - Lack of contact points across the partnership
 - Staff not necessarily being aware of dual need and cultural aspects
 - Practicalities e.g. the timing of events.
 - Information provision e.g. language used.
- There is a wide range of good data and knowledge across the partnership which should be built on and more widely used.
- There is a strong commitment to improving engagement with hard to reach groups across the partnership.
- Partners are actively looking at ways in which to improve the co-ordination of engagement with hard to reach groups and progress is being made.
- Greater communication of events and consultations would be beneficial, however this is acknowledged and steps are being taken to address this.

Recommendations

Recommendation	Link to the Community Engagement Framework ¹ (where relevant)
1. A multi-agency consultation network should be set up and include the following pieces of work in its work programme. ○ The Consultation calendar should be further developed to include information on consultations being carried out by partners. ○ Consideration should be given to an events calendar which would be accessible to all partners. ○ An exercise going into the community and talking to specific groups identified in section 4.2 of this review report to establish how they prefer to be engaged with. ○ Share good practice ○ Ongoing review of who Hard to reach groups are ○ Ensuring appropriate people on network from all levels of the partnership organisations.	Priority 2: Promote inclusive community engagement processes Undertake review of how different communities (including businesses) prefer to engage and support required Priority4: Share community engagement good practice Build on existing Council consultation management system to establish a partnership management system to: • Record details of upcoming engagement activities (for use by HSP partners and the public) • Record results and analysis of engagement activities • Undertake Equalities Impact Assessments
2. A customer journey mapping exercise to be undertaken for specific service user groups e.g. sex workers and personalisation agenda pathways. This should identify contact points with service providers and ways of overcoming barriers e.g. lack of Identification. ○ Following on from this the information should be widely disseminated to both front line staff and elected Members; and ○ Reviewed and updated regularly.	
3. That the Haringey Strategic Partnership consider how the	

¹ Haringey Community Engagement Framework, 2009

borough is divided to ensure area boundaries are consistent and coherent across the partnership agencies, enabling localised joint working to engage with residents and communities.	
4. All consultation training provided should include specific sections on: • Cultural awareness • How to engage with 'hard to reach groups' • Inclusive engagement e.g. not just consulting LGBT on sexual health or Drug users on drug services.	Priority 3: Increase community engagement capacity Establish a cross-sector engagement development programme (that can be undertaken by staff, community groups and community representatives)
5. Raising awareness of Dual Needs should be incorporated into the review of the Haringey Compact (please see recommendation below).	
6. That the Haringey Compact is reviewed to ensure that all HSP organisations work to it. • All elected Members should receive a copy of this renewed Compact.	Priority 4: Share community engagement good practice Ensure community engagement awareness and COMPACT way of working included in staff induction programmes across HSP partners
7. That the Council Consultation Charter, Plain English Protocol and Community Engagement Framework Principles are adhered to and enforced. • That awareness raising of the use of plain English be carried out across all HSP partners. The Council could raise awareness through All Users emails, use of Team Brief and internal websites. • That the Overview and Scrutiny Committee, Cabinet, Haringey Strategic Partnership and Theme Groups ensure appropriate language is used on all documents that each body considers.	
8. Support available to voluntary and community sector organisations in terms of capacity building and application/bid writing assistance should be mapped across the partnership and the information consolidated and widely publicised in a range of community languages.	
9. All organisations commissioned by the Council and its statutory partners are clear in their publicity about who can	

access their services.	
10. The as part of the Information Governance work Business Units explore with IT Services the options to enable accessibility data to be shared between the services.	
11. That the Haringey Strategic Partnership work with HAVCO to create and maintain a voluntary and community sector database as part of the action plan leading from the Third Sector Mapping exercise. This should: • User friendly • Publicly accessible • Categorised <i>(this has since been agreed at HSP)</i>	
12. The existing population needs assessment approach should be extended to include the following: • Increased use of complaints and feedback information. • Effective equalities monitoring of services and use of information to inform service planning. • Systematic use of data from Equalities Impact Assessments. • Use of Neighbourhood Managers as experts in the local communities they serve. • Further use of MOSAIC data. • Further use of borough profile data available on the web-pages. With this in mind the panel supports the implementation of the Local Information System for the partnership.	
13. That “Access to Service” days continue to run and that further possibilities of working more closely with partner agencies should be investigated to maximise resources. • The co-ordination of Access to Service days should be linked with the above population needs assessment approach to ensure that all communities, including new communities, are considered in each cycle.	
14. That the Overview and Scrutiny Committee commission a review into the services and resources that prevent children and young people (aged up to 14 years of age) becoming involved in youth crime.	
15. That the Overview and Scrutiny Committee commission a review into Drug and Alcohol abuse.	

1. Background

1.1. The Overview and Scrutiny Committee commissioned a review into Engaging with Hard to reach communities as part of its 2009/10 work programme based on a view that there may be more that could be done in Haringey to engage with these groups and to query whether we knew who these groups are.

1.2. The review was conducted by a panel of Councillors:

- Cllr Gideon Bull (Chair)
- Cllr Ron Aitken
- Cllr Gina Adamou

With the support of a range of statutory and voluntary organisations. Including; Adults, Neighbourhood Management, Safer Communities, Borough Police, North Middlesex Hospital, Whittington Hospital, NHS Haringey, BME Carers, Haringey LINK, Crucial Steps, Caris Haringey, Afrikcare, Sexual Health on Call, Bringing Unity Back into the Community, Lesbian, Gay, Bi-sexual and Transgender Network, Young people in conflict with the law.

1.3. The terms of reference for the review were as follows:

“To identify who the hard to reach groups in Haringey are with a view to gaining a shared understanding of ideas and best practice to remove, avoid or reduce barriers to engagement and participation.”

1.4. The panel discussed whether the term ‘hard to reach’ was the most appropriate but agreed that as this is a recognisable term it should be used.

2. Introduction

2.1. For the purpose of this review the definition of the term ‘engagement’ is based on the agreed definition in the Haringey Community Engagement Framework which includes the following activities:

- Informing
- Listening
- Consulting
- Involving
- Collaborating
- Empowering²

2.2. For the purpose of this review the term ‘hard to reach’ is defined as:

“Those groups which are difficult to engage with from an organisational perspective because they do not feel empowered to do so, or due to barriers which may be overcome.”

2.3. It is important to note at this stage that the review has two streams which are intertwined. These are engagement, in terms of consulting with hard to reach

² Haringey Community Engagement Framework, 2009

groups, and also in terms of enabling hard to reach groups to access services/information.

2.4. The panel is aware of the financial constraints currently faced by organisations and anticipates that the recommendations included in this report can be covered within existing resources.

2.5. **Haringey Population** - Key factors of the Haringey population are as follows (further details can be found in the Borough Profile³):

- Haringey's population is estimated to be 226,200⁴.

Diversity

- Haringey's is the 5th most diverse borough in London.
- Over 50% of our population overall, and three-quarters of our young people, have a non white British ethnic group.
- Almost 50% of residents born outside the UK are from Asia and Africa.
- The most prevalent countries for new national insurance registrations are Poland, Turkey, Italy, France, Australia, Hungary and Lithuania.

Deprivation

- Haringey is the 18th most deprived authority nationally and the 5th most deprived in London⁵.
- 27% of Haringey Super Output Areas are amongst the most deprived in the country.

Age

- Over half of the Haringey population is under 35 years of age.

Age group	2008 Mid Year Estimate	Age group	2008 Mid Year Estimate	Age group	2008 Mid Year Estimate	Age group	2008 Mid Year Estimate
0	4200	20-24	16300	45-49	15600	70-74	5600
1-4	13900	25-29	24300	50-54	11300	75-79	4300
5-9	12700	30-34	24900	55-59	9300	80-84	2600
10-14	11200	35-39	21800	60-64	7800	85-89	1500
15-19	12200	40-44	20000	65-69	6200	90+	900

Religion⁶

- 11.3% of Haringey residents stated their religion as Muslim,
- 2.1% of residents stated their religion as Hindu,
- 20% of Haringey residents stated that they did not have a religion.

Other

- 13.6% of households are lone parents.

³ Haringey Borough Profile, www.haringey.gov.uk

⁴ Office of National Statistics, Mid-year Population estimates – 2008, August 2009

⁵ Haringey Council, www.haringey.gov.uk, Key Facts

⁶ 2001 Census

3. Policy Context

3.1. Local Context

- The Use of Resources Assessment forms part of the Comprehensive Area Assessment and has a number of Key Lines of Enquiry (KLOE) to assist auditors in making judgements. KLOE 2.1 asks whether the “organisation commission[s] and procure[s] quality services and supplies, tailored to local needs, to deliver sustainable outcomes and value for money⁷”. Specifically with regards to Involvement in Commissioning Local Authorities and Police Forces are expected to show that they are “engaging with a range of stakeholders and people who use services, including those groups who are difficult to engage with...”⁸
- The draft feedback from the 2008/09 Use of Resources self evaluation from auditors, states that Haringey should “improve arrangements for understanding minority or ‘seldom heard’ groups and use this to inform service planning and commissioning”.
 - KLOE 2.1 does not currently include Primary Care Trusts in order to avoid duplication with the World Class Commissioning assessment.
- The World Class Commissioning programme aims to will deliver a more strategic and long-term approach to commissioning services. There are four key elements to the programme; a vision for world class commissioning, a set of world class commissioning competencies, an assurance system and a support and development framework⁹. These competencies include ‘engaging with public and patients’ where Primary Care Trusts are expected to show “proactive listening and communication...to seek and engage the voice of those who are seldom heard”¹⁰.
- A Community Engagement Framework¹¹ was agreed by the Haringey Strategic Partnership (HSP) in April 2009. This Framework outlines key principles to be used when organisations carry out community engagement activities in Haringey and aims to enable the HSP “to engage with local communities and empower them to shape policies, strategies and services that affect their lives”. The principles as laid out in the framework are:
 - “Work in partnership to join up our engagement activities
 - Engage when it will make a difference
 - Be clear about what we are asking
 - Be inclusive and aim to engage with all communities
 - Communicate the results of our engagement activities
 - Build capacity of communities to take part in engagement activities”

⁷ Use of Resources, Auditor Guidance, Audit Commission, June 2009

⁸ Use of Resources, Auditor Guidance, Audit Commission, June 2009

⁹ <http://www.dh.gov.uk/en/Managingyourorganisation/Commissioning/Worldclasscommissioning>

¹⁰ World Class Commissioning Competencies, Department of Health, December 2007

¹¹ Haringey’s Community Engagement Framework, Haringey Strategic Partnership, April 2009

- The Framework also has a list of defined methods of community engagement:
 - Informing
 - Listening
 - Consulting
 - Involving
 - Collaborating
 - Empowering

3.2. National Context

- Comprehensive Area Assessment Framework¹² document states that scrutiny reviews carried out locally will provide valuable evidence that can feed into the CAA and may help inspectors understand issues without having to carry out additional work. The three key area assessment questions are as follows:
 - How well do local priorities express community needs and aspirations?
 - How well outcomes and improvements needed being delivered?
 - What are the prospects for future improvement?
 - Specific to this review is the question “How well do local priorities express community needs and aspirations?” as this question considers how well local partners understand their communities and listen and respond to local people.
- The Strengthening Local Democracy¹³ consultation document was published in July 2009 and further builds on the principle of empowering local communities. The consultation document states that the “founding principle of local government is that citizens have the right to influence the decisions that affect their lives and their communities”¹⁴. This principle is also highly relevant to the other organisations in the partnership and is key to ensuring that the services provided reflect the needs and wishes of the community which they serve, particularly alongside the drive for more personalised service provision.
- Section 242 of the NHS Act 2006 (as amended by the Local Government and Public Involvement in Health Act 2007) places a duty on NHS trusts, primary care trusts and strategic health authorities to make arrangements to involve patients and the public in service planning and operation, and in the development of proposals for changes. This duty is supported by the guidance Real involvement: working with people to improve health services¹⁵.
 - With regards to hard to reach groups this guidance states that “it is easy to overlook these [groups], and it will help to make sure that you involve the right people if you are clear from the outset exactly who you need to involve in the work you are planning”¹⁶.

¹² Comprehensive Area Assessment Framework, Audit Commission, February 2009

¹³ Strengthening Local Democracy, Department for Communities and Local Government, July 2009

¹⁴ Strengthening Local Democracy, Point 2

¹⁵ Real Involvement, Working with people to improve health services, Department of Health, 2008

¹⁶ Real Involvement, Working with people to improve health services, page 66

- Section 138 of the Local Government and Public Involvement in Health Act 2007 (LGPIH Act 2007) places a duty of involvement mainly on Local Authorities which came into force on 1st April 2009. This duty aims to ensure that “people have greater opportunities to have their say.....[and] embed a culture of engagement and empowerment”¹⁷. The guidance also states that this engagement should include those who can be seen as hard to reach and that ‘consultation and involvement opportunities are not limited to those with the loudest voice’¹⁸.

¹⁷ Creating Strong and Prosperous Communities, Statutory Guidance, Department for Communities and Local Government, July 2008

¹⁸ Creating Strong and Prosperous Communities, Statutory Guidance, Page 23

4. Main Report

4.1. The panel spoke to a range of organisations, both voluntary and statutory, with a view to identifying those groups which are seen as 'hard to reach'. However, on speaking with various organisations the panel concluded that there is no single set of groups and that it depends on which services are trying to engage and what they were engaging for. For a full list of all those groups identified during the review please see Appendix C.

4.2. At the same time there were a number of groups which were mentioned by more than one organisation. These were:

- Drug users
- Alcohol users
- Sex workers
- Lesbian, Gay, Bi-sexual and Trans-gender
- Young people, particularly young white males
- Young people in conflict with the law
- Those with dual diagnosis
- Carers
- Those who are limited in free time e.g. young professionals with families
- Those not registered with a GP
- Newly arrived communities/Economic migrants
- Somali
- Charedi Jewish
- Faith Groups

4.3. As mentioned above the panel heard from a variety of organisations, both statutory and voluntary and identified a number of barriers to engagement.

4.4. Partnership Working

- There was agreement by all involved in the review that good partnership working is key to successfully engaging with 'hard to reach' groups. Both in terms of consulting and in enabling access to services. It was felt that when there are good partnerships at all levels of organisations information can, and often will be, shared more widely.
- Whilst examples of strong and effective partnership working were shared throughout the review it was felt that more could be done in areas such as information sharing, particularly about consultation and engagement events, information on communities and best practice. The panel heard that there is a consultation network in the council and that there are plans to develop this to include partner organisations. The panel feels that it is important that this network includes the most appropriate players for it to be effective e.g. both at strategic level and at a front line level.

- The panel also heard of the consultation calendar which includes council consultations and felt that this would be an extremely useful tool on a partnership level if all information across the partnership was on this calendar. Not only would this ensure that the information is easily accessible to all in one place but also that organisations could ‘tag on’ to consultations to prevent duplication and maximise resources.
- The panel also discussed the benefits of having a partnership community engagement calendar events/activities e.g. the Access to Service days run by Neighbourhood Management which would again enable other organisations to access the information and possibly become involved had they not already been.
 - The panel has recently heard that the Well-being HAVCO group is also considering this.
- It was also noted that for partnerships to be effective they should be ‘equal’ with no one partner holding the ‘power’ in the partnership even when the organisation may be providing the majority of the funding. Some voluntary and community sector organisations do not necessarily understand the benefits of partnership working. This may be because they feel that they hold specialist knowledge and are more effective alone, they are concerned that another organisation may ‘take over’ and there is mistrust of statutory organisations. The panel felt that the benefits of partnership working and joining together of organisations under a consortium or umbrella were beneficial, not just to the service users but also to the organisations, in terms of sharing skills but also their ability to lever in funding and maximise resources.
- A recurring issue throughout the review was the lack of contact points in different organisations which can make it very difficult for outcomes to be achieved for service users. The panel heard of a number of examples where a service user or an organisation trying to help them had not been able to contact the right person/team to get assistance. This led to delays or to the person in question slipping through the net and not receiving any help. As this type of situation can often arise in times of crisis, the panel felt that a customer journey mapping exercise should be undertaken for a number of client groups, for example sex workers including examples of dual need for example, sex workers who are also homeless.
 - The exercise should include simple steps like:
 - What happens when a person in this situation reaches crisis point?
 - What do they need e.g. housing, identification?
 - Who do they speak to and where for each need?
 - What happens next?

RECOMMENDATIONS:

1. A multi-agency consultation network should be set up and include the following pieces of work in its work programme.

- The Consultation calendar should be further developed to include information on consultations being carried out by partners.
- Consideration should be given to an events calendar which would be accessible to all partners.
- An exercise going into the community and talking to specific groups identified in this review to establish how they prefer to be engaged with.
- Share good practice
- Ongoing review of who Hard to reach groups are
- Ensuring appropriate people on network from all levels of the partnership organisations.

2. A customer journey mapping exercise to be undertaken for specific service user groups e.g. sex workers. This should identify contact points with service providers and ways of overcoming barriers e.g. lack of Identification.

- Following on from this the information should be widely disseminated to both front line staff and elected Members; and
- Reviewed and updated regularly.

3. That the Haringey Strategic Partnership consider how the borough is divided to ensure area boundaries are consistent and coherent across the partnership agencies, enabling localised joint working to engage with residents and communities.

4.5. Staff Awareness

- The panel heard how important it is for staff at all levels to have an understanding of the community that they are working with and the needs that they have, for example cultural, service and dual needs as well as hearing examples of highly skilled staff across all organisations.
- The panel heard from BUBIC (Bringing Unity Back into the Community) and SHOC (Sexual Health on Call) examples where service users with dual needs had difficulty with accessing services due to a lack of understanding of these needs, for example a sex worker who is also a drug user or victim of domestic violence.
- Whilst this in part should be improved through the customer journey mapping exercise the panel felt that there could be more done to raise awareness amongst those who may come into regular contact with people with dual needs, both at an officer level and at a Member level to ensure that people are appropriately sign-posted and able to access services. The panel felt that this was also the case in respect of cultural needs.
 - The panel felt that community engagement and consultation training for staff should include cultural needs awareness information on consulting with hard to reach groups.

- The panel heard evidence on the need for 'inclusive engagement' and for recognition that all service user groups should be consulted on all mainstream council and partnership policy and not just on the areas which may be associated with their service need. For example, representatives from the Lesbian, Gay, Bi-sexual and Transgender (LGBT) Network, Sexual Health on Call, Bringing Unity Back into the Community (BUBIC) and the Drug and Alcohol Service, all spoke of not being consulted on mainstream issues. The LGBT Network felt they were only consulted about sexual health, BUBIC service users about drugs etc.

RECOMMENDATIONS:

4. All consultation training provided should include specific sections on:

- **Cultural awareness**
- **How to engage with 'hard to reach groups'**
- **Inclusive engagement e.g. not just consulting LGBT on sexual health or Drug users on drug services.**

5. Raising awareness of Dual Needs should be incorporated into the review of the Haringey Compact (please see recommendation below).

4.6. Practicalities

- Haringey Council and its partners have a Community Engagement framework setting out the principles for engagement. The partnership also has 'Haringey Compact' which was launched in 2005 and sets out principles for organisations, both statutory and voluntary, working together. The barriers identified in this section are, on the whole, covered within these two documents and therefore the panel feels that the Compact should be re-launched and embed the Community Engagement Framework principles and its accompanying action plan.
- Practical barriers which were identified during this review included:
 - Cases where people do not have time to engage - The panel heard of successful methods for engaging with the 'time poor' which included phone surveys and drop-in sessions which enable people to engage at a time which suits them.
 - Timing of events should be considered to ensure those you are trying to target can actually attend the consultation/engagement event.
 - Language barriers.
 - The panel heard examples where the use of phrases may prevent people from understanding, for example the phrase 'income maximisation' is not necessarily clear to everyone. A better phrase for this may be 'getting all the money you are entitled to'. The panel

therefore felt that the use of plain and simple English, both when speaking to groups and in writing, would be more appropriate.

- Some people may feel they do not have a real say in the topic they are being asked about and therefore the panel strongly supports the principal laid out in the Community Engagement Framework of 'engaging when it makes a difference', and not when there is a foregone conclusion.
- Targeting – the panel felt that it is important to know from the out-set who you want to engage with so that the consultation/engagement can be tailored accordingly. With this in mind it is important to remember to be inclusive at the planning stage for engagement and consultation and to remember that service users have a life outside of their perceived 'need' e.g. a person with a disability also has views and needs outside of their disability.

RECOMMENDATIONS:

6. That the Haringey Compact is reviewed to ensure that all HSP organisations work to it.

- **All elected Members should receive a copy of this renewed Compact.**

7. That the Council Consultation Charter, Plain English Protocol and Community Engagement Framework Principles are adhered to and enforced.

- **That awareness raising of the use of plain English be carried out across all HSP partners. The Council could raise awareness through All Users emails, use of Team Brief and internal websites.**
- **That the Overview and Scrutiny Committee, Cabinet, Haringey Strategic Partnership and Theme Groups ensure appropriate language is used on all documents that each body considers.**

4.7. Capacity building

- The panel heard that some voluntary and community sector organisations, particularly as they become formalised or reach a stage where they would like to bid for funding, may not necessarily understand the accountability structures or responsibilities associated. Also, they may not be versed in the 'local government' language of 'outcomes' and 'objectives' which may increase their ability to gain funding. The panel heard of a number of initiatives and staff posts across organisations which are able to assist in bid writing and understanding governance information, including HAVCO run courses. The panel felt that it would be beneficial to map this information across the partnership and to publicise it, particularly to the organisations which were newly identified by the HAVCO third sector mapping exercise.

- The panel noted the importance of practical help which can be given to organisations e.g. in terms of office space. The panel heard a number of examples relating to this, for example the Selby Centre has a number of voluntary and community organisations which use the building for office space and this is provided by the council as part of a circular grant¹⁹. The panel also heard the example of the Haringey Carers Centre which has recently moved to Hornsey Neighbourhood Health Centre.

RECOMMENDATIONS

8. Support available to voluntary and community sector organisations in terms of capacity building and application/bid writing assistance should be mapped across the partnership and the information consolidated and widely publicised in a range of community languages.

4.8. Information

- The way in which information was presented was a recurring barrier. Whilst there were examples of excellent information provision, whether in leaflets, websites or signage, it was felt there were improvements which could be made overall. This includes the language which is used which the panel felt should be clear, concise and plain English to allow people to access it, preferably with accompanying diagrams.
- The panel also felt that there is a need for clarity on who can access particular services and felt that those services run and commissioned by the Council and other partners should be clear in their publicity material to prevent any confusion or prevent people from accessing the service.
- The use of the voluntary and community sector as an access point for information and advice was also noted.
- The Panel discussed the possibility of information held by one service on a service user who needed letters in large print or who can not speak English, being shared with other services. For example, if Adults knows that a service user needs letters in large print and has this on their system, would it be possible for Housing Benefits to access this information to ensure that letters they send out are also in large print?
 - Panels felt that the possible benefits would include:
 - Better customer experience
 - Reduced duplication
 - Increased value for money

¹⁹ Cabinet Member evidence submission, November 2009

RECOMMENDATIONS

9. All organisations commissioned by the Council and its statutory partners are clear in their publicity about who can access their services.

10. That Business Units explore with IT Services the options to enable accessibility data be shared between the services

4.9. Use of Data/Research/Methodology

- The panel compared demographic data from the Place survey with the Mid Year population estimates/2001 census data to try to ascertain whether there was any groups not responding to the survey or over representation of any groups. Nothing of significance came up during this exercise. An example of this comparison work can be found in the Appendices.
- The panel heard of a number of data/information sources available and/or currently being developed:
 - [‘The Joint Strategic Needs Assessment’](#) (JSNA). The JSNA is a continuous process of gathering information about the current and future health, care and well-being needs of the population. The JSNA will be used to inform service planning and commissioning strategies, by looking at the ‘big picture’ of the local population and specifically groups whose needs are not being met.
 - The [Borough Profile](#) draws upon a wide variety of information and data to build a detailed and comprehensive picture of Haringey. It provides statistical data and analysis on demographics and socio-economic factors within the borough’.²⁰
 - MOSAIC is a community profiling database which brings together a variety of data sources and can be used for targeted information provision.
 - Maps can be created using [Geographical Information Systems](#) to show the geographical location of data groups e.g. age groups, ethnicity, deprivation indices, income etc. The panel heard how useful these systems can be in ensuring that hard to reach groups can be targeted for information provision as well as for consultation and engagement exercises. It felt that increased use of MOSAIC, particularly as a starting point for engaging/consulting with hard to reach groups would be beneficial.
 - [Equalities Impact Assessments](#) (EIA’s) look at the effects that a policy, strategy or function may have and are a requirement of the Public

²⁰ Adult, Culture and Community Services evidence submission

Duties outlined under Race, Gender and Disability Legislation. They consider the policy/strategy/function along the lines of the six equalities strands (Ethnicity, Disability, Age, Sexuality, Gender and Religion). The panel was presented with the Equalities Impact Assessment for the Community Engagement Framework which identified possible barriers for engagement along the above equalities strands and was a very useful source of data for the review.

- The panel agreed that EIA's are an extremely useful tool, not only for looking at the effects of the policy/strategy/function but also as a data source which can be used when considering consulting with hard to reach groups.
- The panel was extremely impressed with the work carried out by the Voluntary and Community Sector organisations and other volunteers which contributed to the review and noted from the HAVCO third sector mapping exercise that there are over 1000 voluntary and community sector organisations operating in Haringey. The panel felt that information on these organisations should be widely available and allow access to information to facilitate work with the organisations when consulting and engaging. This would be particularly beneficial when consulting and engaging with hard to reach groups who may be linked up with smaller organisations which can be used as an access point.
- Other information sources, like complaints data and feedback information are invaluable, as is the knowledge and expertise of the Neighbourhood Managers and Community Development Officers. The panel felt that increased use of this intelligence would be highly beneficial to hard to reach groups, as well as for planning and delivering services effectively according to the needs and wishes of the communities in Haringey.
- The panel heard that Haringey is planning to implement a **Local Information System** (LIS). The primary purpose of the Local Information System will be to enable sharing and presenting of non identifying information by all HSP partners in an accessible format from one place. The LIS has a number of benefits for the partnership:
 - Reduction of duplication.
 - Resources needed to produce data and reports will be reduced.
 - Costs incurred for research such as: the Borough Profile; the Mental Health Needs assessment and the Sexual Health Needs assessment will be minimised in the future.
 - A reduction in the time and effort needed to source, disseminate and present this data to users who may not have the skill and time to access the information.
 - With this in mind the panel supports the implementation of the Local Information System for the partnership.

RECOMMENDATIONS:

11. That the Haringey Strategic Partnership work with HAVCO to create and maintain a voluntary and community sector database as part of the action plan leading from the Third Sector Mapping exercise. This should:

- **User friendly**
- **Publicly accessible**
- **Categorised**

(this has since been agreed at HSP)

12. The existing population needs assessment approach should be extended to include the following:

- **Increased use of complaints and feedback information.**
- **Effective equalities monitoring of services and use of information to inform service planning.**
- **Systematic use of data from Equalities Impact Assessments.**
- **Use of Neighbourhood Managers as experts in the local communities they serve.**
- **Further use of MOSAIC data.**
- **Further use of borough profile data available on the web-pages.**

With this in mind the panel supports the implementation of the Local Information System for the partnership.

4.10. Partnership Approach

- The panel heard from seventeen organisations/individuals/groups as part of the evidence gathering for this review and was impressed with the range of ways in which organisations are reaching out to the community and to hard to reach groups, both in terms of formal and informal mechanisms.
- All organisations/groups/individuals that the panel heard from were actively committed to improving engagement and consultation with hard to reach groups, whether this was through Partnership Boards for service users, Community representatives on Trust Boards, availability of interpreters in acute trusts or Area Assemblies etc. Due to the wealth of information received on this by the panel and the agreed objective of the review of sharing information, the panel has included submissions to the review as part of the appendices so that all information is available alongside this report.

5. Best Practice

5.1. Below is a selection of best practice examples which the panel has identified throughout the review as well as some key messages/tips which the panel felt are important considerations when engaging with hard to reach groups.

Cultural awareness community events

- Haven Day Centre- a Turkish breakfast to celebrate the last day of Ramazan Byrami, Diwali celebration and a two day Black History celebration.
- Abyssinia Court Drop-in Centre Black History Month celebration

These celebrations linked in with the Council's values of working together, offering choice, life long learning and the opportunity to socialise to service users, in the wider context of the Well-being Strategy for Adults 2007-10.

Contact:

Len Weir

Service Manager, Adults

Len.Weir@haringey.gov.uk

Carers Survey 2008/09

150 carers who have been assessed since April 2008 were selected through using Department of Health techniques for picking random samples.

Translated surveys were provided when required, at the service user's request and support was offered in completing the survey if a disability/ language barriers prove completion difficult at the service user's request.

Contact:

Camille Tyser

Performance & Quality Assurance Officer

Camille.Tyser@haringey.gov.uk

Claim-It

In September 2008 officers from across the Council, in partnership with staff from Haringey Citizens Advice Bureau, Haringey Carer's Centre, Haringey Age Concern and the Department for Works and Pensions, ran a week long awareness campaign in Wood Green High Road to promote the uptake of benefits. Members of the public were given leaflets as they passed on the street and invited to a benefits check in the Wood Green Library. 500 people were provided with advice through the Claim It initiative and 200 people were identified as likely to be entitled to some additional benefits.

Contact:

Bernard Lanigan

Service Manager, Adults

Bernard.Lanigan@haringey.gov.uk

Carers Partnership Board

We have revitalised our Carers' Partnership Board; it is now chaired by the dignity in care champion, a councillor who is herself a carer, and has 19 other carers as members, with a high representation from BME communities.

Contact:

Renee Harrison

Renee.Harrison@haringey.gov.uk

Carers Commissioning Manager

Borough Police Diversity Project

Each new probationary Officer, as part of their initial Borough familiarisation training, undertakes a Diversity Project to find out about another section of the community and their issues. They are assigned one of the Borough's communities to research, make contact and links with. Towards the end of their initial training on the Borough, they give a presentation sharing their research with their colleagues. Community Leaders and members are invited to the presentations. At the half way stage of their probation, 12 months from joining, building on their links they give another presentation updating colleagues. Towards the end of their probationary period, at about 1 year 11 months, they give a final report of their community activity. Officers are encouraged to maintain and strengthen these links throughout their Service on the Borough.

Contact:

Paul Cooper

Paul.Cooper@met.pnn.police.uk

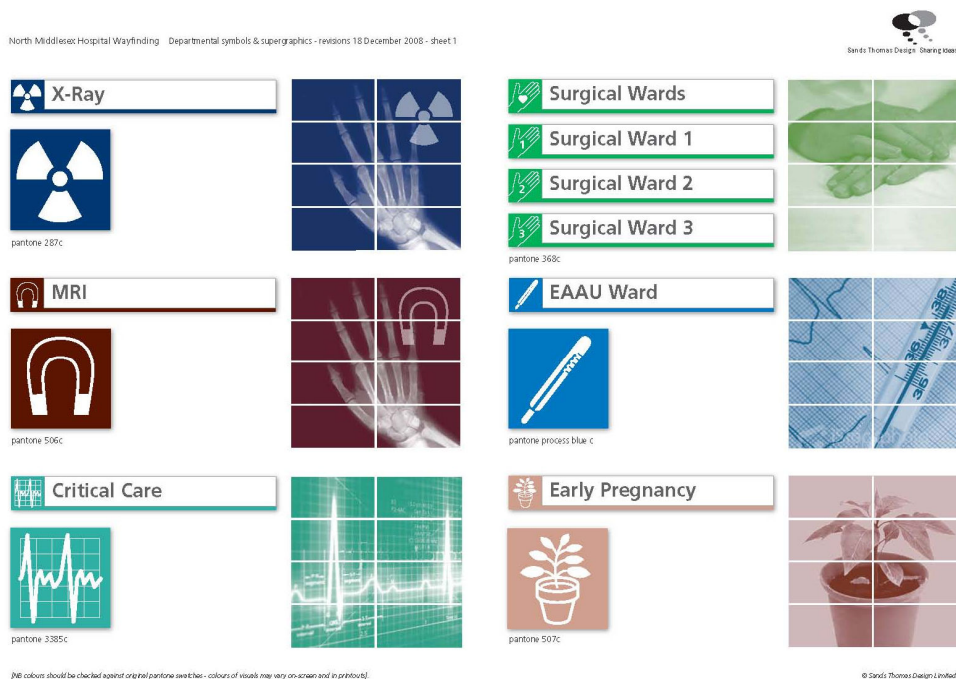
North Middlesex Hospital Way-finding

As part of the North Middlesex redevelopment new signage has been created with pictorial images associated with departments to make it easier for people to identify where they are meant to be going.

Contact:

Richard Milner

Richard.Milner@nmh.nhs.uk



DAAT Integrated Care Pathways

The DAAT Integrated Care Pathway (ICP) is a multi-disciplinary outline of anticipated care, placed in an appropriate timeframe in order to help a client move progressively through a clinical experience to a positive outcome. They are flexible to allow for client choice and clinical freedom. They help reduce unnecessary variations and help manage expectations in client care and outcomes.

Contact:

Kelvin O'Mard

Kelvin@bubic.org.uk

Treatment Pathway Vision Document

Through the Haringey DAAT Communities and Availabilities Strategy and in partnership with BUBIC a series of Drug and Alcohol overview sessions were provided for front line housing staff (tenancy management) in January 2010. The 2 hour sessions are designed to give participants a greater understanding of drugs and their effects and the effects of alcohol abuse: The desired outcome is to support tenancy management strategies such as rent recovery and ensure tenancies are not lost.

Contact:

Kelvin O'Mard

Kelvin@bubic.org.uk

Young People: Haringey's **Youth Council** and the **Young Advisors to the Council** provide young people with the opportunity to influence their services. However, we are very aware that many young people do not wish to engage through meetings or through coming to see us. The Haringey [Youthspace](#) website has a special 'have your say' section where young people can give us their views on a range of services. The Children and Young People's Service runs parents forums for Somali, Kurdish and Turkish parents to enable them to engage with and understand the different services provided for their children.

Contact:

Alexandra Russell

Youth Council Development Officer

Alexandra.Russell@haringey.gov.uk

Neighbourhood Management Access to Service days

Access to Service Days are targeted at different communities in the borough, and aim to increase awareness and take up of local services and enable them to influence service provision. Although the Council organises these events, partner input is essential to ensure that communities are aware of all the services available to them. Each event is advertised in the local press appropriate to the community being targeted. Flyers and posters are developed in English and the appropriate community language. Interpretation services are also available. Where possible, consultation has taken place with the community prior to the event. Events have so far attracted between 150 and 300 attendees, and have been held for the following communities:

- Polish
- Charedi Jewish
- Kurdish
- Greek Elders
- Somali

Contact:

Patrick Lee

Strategic Manager, Neighbourhood Management

Patrick.Lee@haringey.gov.uk

Recommendation:

13. That Access to Service days continue to run and that further possibilities of working more closely with partner agencies should be investigated to maximise resources.

- **The co-ordination of Access to Service days should be linked with the above population needs assessment approach to ensure that all communities, including new communities, are considered in each cycle.**

Margaret Fowler – teaching English with the use of leaflets

A volunteer working on my own initiative in Haringey teaching ESOL to small groups of African and Asian women. Many of these women are not literate in their own language and find it very difficult to cope in integrating into their environment. As their husbands, children and relatives who often act as translators for them are away from the house during the day, the women are left unable to cope with daily activities. They do not know how to find information, read instructions or travel in their neighbourhood.

I collect brochures, leaflets, flyers and posters from the libraries and other information points in the borough and construct English language lessons around the contents. We concentrate mainly on reading and discussion so that the women learn the language and also how to find a Doctor, Hospital, Advice Centre, ask for items in the supermarket, talk to their children's teachers, read the bus timetable, speak to their neighbours, know what activities are happening in the local parks and community centres etc.

They enjoy the discussions and gain a lot of confidence in being able to express themselves and can find their way when out travelling. We also collect forms which they need to fill in for benefits and other applications and practice filling in their personal information and details in the fields which all forms require. We hope to get round to writing small life stories in the future.

Some of the younger participants have gained sufficient language skills and confidence to approach the local college for information about future courses.

Contact:

Margaret Fowler

Margaretfowler638@btinternet.com

Homes for Haringey Youth film project

Two years ago, we found that we had almost no engagement with young people. We decided to fund a year's contract for one full time equivalent youth worker, in practice two half time posts, and we set out to find out what this section of the community thought of our services.

Initial attempts were largely failures. Young people have more interesting things to do than to commit to a long term formal group. Attempts to bribe them into discussion with pizza or to offer MP3 players in prize draws for completing surveys gave us very little real insight. Schools are not only for the children of Council tenants so it was difficult to address their issues in classes from mixed tenures.

Our workers kept saying that the national thinking is that something must be in it for young people; in other words, payment, pizza and so on. When we turned to video, we finally found something. It turns out that, given the right approaches, some young people are perfectly happy to spend some time telling us about where they live through video, with a professional film crew making it and teaching young people about the process.

On four estates we collected some really clear points about issues that affected young people there. Not all, or even most, were about housing. We were able to test the films with the wider communities to see if they agreed, and largely they did. It was then possible to take the issues out to service providers and try to provide solutions.

Contact:

Simon Godfrey

Involvement & Equalities Manager

Simon.Godfrey@HomesforHaringey.org

Useful tips for engagement as identified throughout the course of the review:

- Ensuring that all hard to reach groups are proactively consulted where relevant.
- Remember that groups have a life outside of their classified 'need'
- Use existing networks when consulting e.g. faith groups, community leaders, cultural groups, voluntary groups.
- Utilise knowledge and data already in existence e.g. Neighbourhood Management, MOSAIC and Equalities Impact Assessments.
- Be aware of the more vocal groups who may take the attention away from smaller groups/individuals.
- Use Plan English and pictures where possible.

- Remember the practicalities e.g. timing.
- Refer to the Community Engagement Framework, Haringey Compact and Consultation Management system.
- Remember that it can often be officers who are the hard to reach!

6. Suggestions for future reviews

6.1. The panel visited a Youth reparation programme session where it spoke to a group of low level offenders to gain their insight into the review. The panel found this an extremely interesting session.

- When asked about how they would like to be engaged with the panel was told that mechanisms like Facebook would be useful but only if branded in the correct way. No one present would join a group which clearly identified as being Haringey Council. This was due partly to mistrust of the Council and partly due to their perceptions of the Council (and other statutory organisations) as 'boring' and not relevant to their lives. The panel was interested to hear that they are however, happy to talk to Police Community Support Officers and they may therefore be a useful route to get information out to young people. Young people also commented on posters in buses which they have read whilst travelling around the borough, thereby being another way of communicating with young people.
- The panel was particularly impressed with the work carried out by the youth offending service and stressed its view of the importance of this service and the excellent work which it carries out.
- The panel was interested to hear the reasons why young people were involved in crime in the first place. The recurring theme for everyone present was that it was because they were 'bored'. Each individual present expressed aspirations for the future as well as a profound frustration that they were unable to get a job even in the supermarket 'just to keep them busy' and they were also interested in opportunities for work experience.
- Another recurring theme was the desire for youth centre provision and facilities such as pool and table tennis in these facilities, as opposed to computer games which 'stop people talking to each other'. The young people felt if they had more structured ways of spending their time it would prevent them getting into trouble in the first place.

Recommendation:

14. That the Overview and Scrutiny Committee commission a review into the services and resources that prevent children and young people (aged up to 14 years of age) becoming involved in youth crime.

6.2. The panel heard from a number of representatives about funding concerns post 2011, when the funding becomes part of the Area Based Grant as opposed to being ring fenced.

- The panel supports the view that in addressing the cross cutting nature of substance misuse also means that priorities of the Community Strategy will also be addressed and recognises that drug and alcohol users are marginalised groups. Also that there is a direct link to the health inequalities agenda and wider determinants of health.
- The panel therefore recommends that a review in drug and alcohol abuse be undertaken. Which considers:
 - Partnerships working both internal to the council and across the partnership;
 - The contribution of the public health agenda; and
 - Feasibility of mainstreaming.

Recommendation:

15. That the Overview and Scrutiny Committee commission a review into Drug and Alcohol abuse which includes the points mentioned above.

