

**Access to Services for Older People  
Panel Meeting  
15<sup>th</sup> October 2007**

**Present:** Cllr Bull (Chair), Cllr Adamou, Cllr Alexander, Cllr Wilson, Celia Bower (OP Forum), Alex McTeare (PCT), Robert Edmonds (Age Concern), Tom Brown, John Haffenden, Verlyn Cowell, Chris Henderson, Maureen Dewar, Lloyd Fanusie,

Agenda Item	Notes	Action
Apologies	Zeedy Thompson Hazel Griffiths Manuela Toporowska	
Urgent Business	None	
Declarations of Interest	None	
Scope and Terms of Reference	Inclusion of Black and Minority Ethnic communities and geographic equity is welcome, discussion as to whether inclusion of gender balance in services should also be looked at.  Agreed that the review will remain open minded and flexible throughout to allow for other areas to be incorporated where appropriate.	

<p>Older People's Service Presentation</p>	<p>Tom Brown, Acting Assistant Director for Adults, Adult, Culture and Community Services (ACCS) Directorate spoke about the Older Peoples Service and the pathways taken by those accessing the service.</p> <p>Anyone over the age of 65years who is deemed as vulnerable is eligible for an assessment of need.</p> <p>Referrals generally come from other professionals and members of a person's family with the first point of contact being either the Initial Contact Team or the Stuart Crescent Health Centre. Assessment is then made as to whether Social Services is the most appropriate place (as opposed to health or the Department for Work and Pensions) and also ascertain the urgency of the person's situation.</p> <p>If it is found that Social Services is the appropriate place then the complexity and urgency of the case is and whether intervention from for example the Voluntary sector is more appropriate.</p> <p>The service endeavours to complete an assessment within 28days. This assessment includes detailed discussions with relevant parties, judgements on risk and a persons needs in relation to all aspects of their life are looked at and the four bandings of the Fair Access to Care Services (FACS) applied. Aim to try and reach a consensus with a person as to the best course of action.</p> <p>Haringey operates within the Substantial and Critical bandings of FACS).</p> <p>Unless there is clear urgency the case then goes to the Commissioning Panel in order to consider the allocation of services. The impact of providing or not providing a service is considered here.</p> <p>Both in-house and external providers are approached to see whether any of the</p>	
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	<p>low level needs can be met.</p> <p>A review is undertaken after 6-8 weeks and then approximately once a year. If the person's needs are more complex then contact is more regular. If a person's situation changes then contact is more frequent. This is often brought to light by a person's carer or someone at a centre the person attends e.g. a day centre.</p> <p>A Higher Needs Panel also exists. This panel is a multi-disciplinary, multi-agency group where people's needs are assessed as to whether they meet the NHS Continuing Care Criteria for funding. This is where the need is deemed to be primarily health.</p> <p>Ideal outcome = Independence.</p> <p>Carers The assessment also takes into consideration the Carers needs. Noted that carers provide a valuable service which saves a lot of money.</p> <p><b>Discussion Points</b></p> <p>Funding The only external funding that is received is from government grants. Examples of this are the Carers Grant and the Access and Systems Capacity Grant. At present these are ring-fenced grants.</p> <p>Discussion as to whether it is possible to find out how many people present at Critical and Substantial. This will be investigated and will report back to the panel.</p> <p>Most authorities have a Commissioning Panel. Advantages of this include:</p>	<p>Tom Brown/Melanie Ponomarenko</p>
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	<p>Equity and consistency of decision making.</p> <ul style="list-style-type: none"> <li>➤ Objectivity when looking at cases.</li> <li>➤ Ensures that all options have been looked at.</li> <li>➤ Ensures that the quality of assessment is high as it acts as a check on the process.</li> </ul> <p>Approximately 50% of those coming into contact with the service are filtered out before assessment. Discussion surrounding what happens to these and as to whether they are borderline eligible for services, also whether they would be likely to come back to the service at a later date should their situation deteriorate. Analysis is not always possible due to resources. Noted that health and social services jointly need to improve the management of people with lower levels of need in order to prevent them from moving into the higher level needs areas.</p> <p>The Social Care workforce in Haringey does reflect the diversity of the borough, this has been officially audited. There are also good links in place with faith groups and voluntary agencies which are able to reach the harder to reach groups.</p> <p>There are budgetary issues in the service. It is impossible to predict how many people will come into the services within a year, at the same time there is set budget for the service. Budget monitoring takes place on a regular basis, however due to the statutory requirement to provide a service to those who meet eligibility criteria there is a frequent overspend.</p> <p>An overview of the Access Pathways Project, currently taking place in Adult, Culture and Community Services was given by John Haffenden (Assistant Director, Commissioning and Strategy):</p>	
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	<p>Current routes into services are complicated and do need to be simplified.</p> <p>The end vision of the project is for universal services to be accessed by all, this includes those with lower level needs who are not eligible for a social care package. Emphasis is on preventative services.</p> <p>Current work includes looking at what is being done across each of the services in the ACCS Directorate and where the access points are. Service directories are being looked at. The Older Peoples service has a directory; it would be useful if every Councillor had a copy of this for when they are speaking to residents.</p> <p>Voluntary and community organisations will also be included and an aim is to ensure that the staff working in the Directorate will know what services are provided here.</p> <p>Noted that Melanie Ponomarenko has joined to Project Board so that the review and the project share information.</p>	Tom Brown
Draft Review Timetable	<p>Panel Members attendance at a Commissioning Panel meeting to be arranged asap. This will be Members only.</p> <p>Cabinet Member for Adult Social Care and Well-being to be invited to speak at a Panel meeting.</p> <p>Commissioners and Providers to be invited to panel meeting.</p>	<p>Melanie Ponomarenko</p> <p>Melanie Ponomarenko</p> <p>Melanie Ponomarenko</p>

	<p>Coordination of a list of places for panel to visit to be drawn up and scheduled in.</p> <p>Consideration to be given to the panel members having lunch at age concern to enable them to talk to people there.</p>	<p>Melanie Ponomarenko</p> <p>Melanie Ponomarenko</p>
Date of Next Meeting	19 <sup>th</sup> November 2007 10:00-12:00	
New Items of Urgent Business	None	