

**Scrutiny Review - Access to Services for Older People notes**  
**Panel Meeting**  
**17<sup>th</sup> December 2007**

**Councillors present:** Cllr Bull (Chair),

**Others attending:** Robert Edmonds (Age Concern), Delia Thomas (Teaching Primary Care Trust), Jane Havergal, Celia Bower, Zeedy Thompson, Manuela Toporowska (Haringey Forum for Older People), Lauritz Hansen-Bay, Matthew Pelling, Tom Brown, Chris Henderson, Trevor Cripps, Melanie Ponomarenko

Agenda Item	Subject/decision
1.	Cllr Alexander Cllr Wilson Cllr Adamou Llyoda Fanusie
2.	<b>Urgent Business</b> None
3.	<b>Declarations of Interest</b> None
4.	<b>Minutes</b> Carried forward to next meeting
5.	<b>Older People's Services Resources</b>  There have been large changes in those aged 65 years of age and over in recent years. For example, there has been an increase in the number of 'older older' people, especially in the 85 years of age plus population. Amongst the 85 years there is an increased prevalence of cognitive impairments. This will undoubtedly put pressure on statutory services.  Those present were taken through a number of projections for Haringey which were sourced from the Projecting Older People Population Information system (POPPI). POPPI has been developed by the Institute of Public Care for the Care Services Efficiency Delivery Programme designed to help explore the possible impact that demography and certain conditions may have on populations aged 65 and over. Office of National

Statistics (ONS) data is used for this projections and it is important to note that there are differences in these projections when put alongside the Greater London Authority (GLA) projections. However, ONS statistics are used to determine local authority budget allocations.

Haringey's over 65 years population is expected to increase by almost 2,000 over the next 17years with those over 85 years expected to increase by 600 over the same period.

Along side these it is also projected that there will be an increase in the number of;

- people receiving community based services;
- people helped to live at home;
- households receiving intensive home care;
- people projected to have dementia;
- people unable to manage at least one self-care activity on their own;
- people unable to manage at least one domestic task on their own.

All of the above will put increased pressures on the older people's service budget.

Resources are tied up in the acute end of services. Preventative services for older people receive approximately 5% (£937,000) of resources for the service as a whole.

2% (£417,000) of this is on drop-in centres.

There are investment proposals in the forthcoming budget for older people's services.

With regards to efficiency savings the service is looking at ways of providing services more efficiently whilst not compromising the quality or level of service and where possible improving these.

An example of this is the Community Transport System where vehicles that are linked to centres, and may be left unused for periods of time are being centrally coordinated and therefore able to provide a more flexible service to more groups. (

Noted that this needs to be widely publicised to address user concerns)

The Community Transport System will train drivers from groups who wish to hire the vehicles.

There is still an East/West divide with a 10 year difference in the East of the borough – people in the east of the borough are more likely to get the same type of illness as people in the west of the borough, but ten years earlier.

	<p><b>Points of Discussion</b></p> <p>There are concerns about the issues surrounding census data for Haringey, including the projections. This is due to a number of reasons including the high transience amongst the population and the 'hidden population'. This is noted as an area that Haringey needs to focus attention on before the next census to ensure that the government recognises the true Haringey population and is able to resource accordingly.</p> <p><u>Basic Foot care</u> At the Age Concern Annual Meeting at least half of the approximately 180 attendees raised basic foot care as an issue. This includes simple tasks such as cutting toe nails.</p> <p>Concern raised that if the 90 attendees with basic foot care issues is representative of the older people population in Haringey then this signifies a significant problem.</p> <p>Noted that Foot care is a NHS responsibility and that due to financial pressures this has been a service which has been reduced.</p> <p>There are four drop-in centres in Haringey which will cut older people's toe nails, this is being funded by the social care budget and not the TPCT. Noted that this is also a preventative measure as long toe nails can cause falls.</p> <p>Noted that there is a view that the TPCT should at least contribute to this cost.</p> <p>Age Concern has been running a campaign called 'Feet for Purpose' since August 2007. It is hoped that this is something that will be included in the Joint Strategic Needs Assessment.</p> <p>A Member of the Haringey Forum for Older People and Muswell Hill &amp; Highgate Pensioners Action Group has written to the TPCT requesting information about foot care services available in the borough.</p>
6.	<p><b>Teaching Primary Care Trust Resources</b></p> <p>Due to the absence of Alex McTeare, Tom Brown took the attendees through the figures provided by the TPCT.</p> <p>Noted that the definition of prevention may not be the same for the TPCT as for Haringey Council.</p>
7.	<p><b>Partnership working</b></p>

	<p>There is a good partnership working relationship between front line workers. For example, Social Workers, Occupational Therapists and Nurses.</p> <p>However, the partnership working has not been quite as good on a more formalised basis. For example, Joint Appointments. There are currently no joint appointments in Older People Services, however this is something that is being discussed. There is a desire to work towards a joint commissioning unit for improved service delivery.</p> <p>There are currently two pooled budget arrangements between the TPCT and Haringey. One of which is the Prevention Enabling Team which provides a range of services including Physiotherapy, Occupational Therapy and Domiciliary Care. This service identifies and intervenes in cases to prevent people going into hospital and works to enable independence. It is accessed via the home care service and receives a number of referrals from people who have gone to A&amp;E but who do not need to be admitted to hospital.</p> <p>The service receives forty plus referrals a month.</p> <p>An area for improvement is the joint working between Community Matrons and the Assessment and Care Management Teams, especially with regards to a more joined up system for identifying people in need of intervention.</p> <p>Another area for improvement is in budgeting, it is hoped that in the next financial year this will have greatly improved but both parties need to be wary of pushing budgetary pressures onto each other.</p>
8.	<p><b>Supporting People</b></p> <p>The Supporting People Programme is funded by Central Government and managed in partnership between Haringey Council, Probation and Haringey Teaching Primary Care Trust.</p> <p>There are two main areas that Supporting People is responsible for:</p> <ol style="list-style-type: none"> <li>1 – Supported Housing for example Sheltered Housing for older people. This is different from residential and Nursing Care.</li> <li>2 – Support services for example support workers who visit people in their own homes to provide support. The support they are offered includes benefit help (for example advocating on behalf of the client), money management (for example</li> </ol>

	<p>budgeting and managing arrears). This service is about people's independence and is very different from domiciliary home care.</p> <p>The emphasis is about enabling people to ultimately do things for themselves, however the issue can be slightly different for older people.</p> <p>Supporting People provides a robust monitoring framework for providers. For example:</p> <ul style="list-style-type: none"> <li>➤ Health and safety</li> <li>➤ Complaints procedures</li> <li>➤ Managing of support planning</li> <li>➤ Performance Indicators</li> </ul> <p>The programme currently receives £20,000,000 of funding annually. This is, at present, ring-fenced.</p> <ul style="list-style-type: none"> <li>➤ This supports approximately 19 client groups, including older people, people suffering from domestic violence and the community alarm service.</li> </ul> <p>The average age for a person entering sheltered housing is going up. It is now people aged 75 years and above that are entering whereas it was previously those aged 65 years and above.</p> <p>Supporting People undertook a needs mapping exercise approximately 18 months ago. The information showed that there is a need to consider alternate types of provision, for example Extra Care Sheltered Housing. It also showed that there would be a need for 300 units of extra care over the next 10-15 years in Haringey.</p> <p>Supporting People also funds the Sixty Plus scheme, which is a support service.</p> <p>This service is accessible over the telephone and anyone can refer someone to the service. For example, self referral, neighbour, councillors, doctors.</p> <p>The scheme offers a support worker who sets outcomes with the older person, if after these outcomes are met further ones are identified then support will continue.</p> <p>Supporting People is monitored through the Partnership Board and also through the Haringey Association Voluntary Community Organisations (HAVCO).</p> <p>The Audit Commission recently praised the Supporting People Programme for its strong governance arrangements.</p> <p>The Council does not have powers to inspect schemes that it is</p>
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not funding or where there is no contract in place (there is no statutory framework in place).

*Do Older People know this?*

#### Extra Care Sheltered Housing

Becoming increasingly popular.

Buildings are adapted, for example corridors are wide enough for wheel chair users.

There is overall a higher level of facilities than in normal sheltered housing. This can include hydro pools, rehabilitation rooms and assisted bathing facilities.

There is a 24/7 support service plus care services e.g. domiciliary care.

Extra Care Sheltered Housing can bridge the gap between supported housing and residential care or even provide an alternative to residential care.

There are currently two new Extra Care schemes going through the Planning Committee stages in Haringey:

1 – A site on Hornsey Lane has been acquired by One Housing Group for a 40 unit scheme. Subject to approval this site will be up and running in 2-3 years.

2 – A site has been acquired by Hill Homes in Highgate Village.

Both schemes are working with the Council and with Occupational Therapy.

#### **Points of discussion**

Discussion around the possibility of going from owner occupation to extra care sheltered housing. This is currently unclear in areas, for example, those with substantial capital assets.

The Urban Environment Directorate have set up a Project Board to look at the issues raised in the Supporting People Needs mapping exercise. Part of this will be to look at accessibility; including from owner occupation. It will also consider Older People Lease projects.

Discussion around the reality of an older person having to sell their home in order to get the level of care needed. The Council can only sell a person's home if the decision is taken that the older person needs long term care.

Anything over £20,000 is payable.

If the client has, for example, £5,000 in the bank a £250,000 home and a pension then a charge would be placed on the person's home until it is sold.

Noted that Supported Housing operates a different financial regime.

9.	<b>Feedback from the Older People's Commissioning Panel</b> Deferred
10.	<b>Date of next meeting</b> TBC

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