

JOINT PARTNERSHIP BOARD MEETING

WINKFIELD RESOURCE CENTRE

25th January, 12.30-3pm

Meeting Minutes

Present

Sharon Grant (Co-Chair)	Public Voice (PV)
Andrew Carpenter (Co-Chair)	Autism Reference Group (ARG)
Graham Day (Co-Chair)	Physical Disabilities Reference Group (PDRG)
Michael Fitzpatrick	Learning Disabilities Reference Group (LDRG)
Shelley Shenker	Haringey Clinical Commissioning Group (CCG)
Debbie Floyd	Advocacy/Learning Disabilities Reference Group (LDRG)
Beverley Tarka	London Borough of Haringey
Lourdes Kever	Older Peoples Reference Group (OPRG)
Sarah Miller	Complex Autism and Learning Disability Reference Group (CALD)
Martin Hewitt	Complex Autism and Learning Disability Reference Group (CALD)
Isha Turay	Carer
Anne Grey	Old Peoples Forum
Gordon Peters	Older People Reference Group (OPRG)
Mike Wilson	Public Voice (PV)
Sebastian Dacre	London Borough of Haringey
Charlotte Pomery	London Borough of Haringey
Cate Ablett	Mental Health Reference Group (MHRG)
Jennie Claxton	Mental Health Reference Group (MHRG)
Vida Black	Complex Autism and Learning Disability Reference Group (CALD)
Patrick Morreau	Dementia Reference Group (DRG)
Paul Deeney	London Borough of Haringey
Val Chinaglia (Minute Taker)	Public Voice (PV)

Apologies

Mary Langan	
Emel Teymur	
Helena Kania	
Pryial Shah	Clinical Commissioning Group (CCG)

1. Welcome and Introductions

- 1.1. Sharon welcomed everyone to the meeting.

2. Minutes of the Meeting 23rd November 2017

- 2.1. Minutes agreed.

3. Matters Arising

- 3.1. Anne informed the meeting that she did not receive the meeting papers. Val explained that the meeting papers were sent to Gordon as he is the Chair of the Older Peoples Reference Group. But, from now on Val will add Anne to the mailing list. (Action: Val)

4. Update on the Reference Groups and Issues Raised

- 4.1. Mike gave an overview of the current state of the Reference Groups.
- **Older People** - established and running.
 - **Physical Disability** - established and running.
 - **Complex Autism and Learning Disability**- established and running.
 - **Autism** - established. Will meet for the first time next month.
 - **Learning Disability**- established and running with Debbie's help.
 - **Dementia**- Patrick informed the group that the former Dementia Steering group will become the reference group.
 - **Mental Health**- in the process of being established with Mind.
 - **Carers**- to be established.
- 4.2. Sarah suggested that the Carers Forum could become the reference group for carers as it is well attended. Vida and Mike explained that they met to discuss this and Vida felt that not all carers are represented in the forum. Mike to develop the Carers Reference Group in consultation with Vida. (Action: Mike)
- 4.3. Issues raised by the Reference Groups:
- **Domiciliary Care**- Gordon informed the group that the Older People Reference Group will be discussing the new model for home care in more detail. Sharon enquired whether this was an issue for the elderly only or for all other groups. Shelley mentioned that it is worth looking at the model to see how those with multiple needs are cared for in the new model. Gordon will report back to the JPB on this matter. (Action: Gordon)
 - **BSL Interpreters**-Graham asked the Council and the CCG to consider the need for BSL interpreters at public meetings. He explained that one of the members of the Physical Disabilities Reference Group requires BSL interpreter and that she usually feels excluded from attending meetings. Beverley and Shelley acknowledged this issue as very important. Beverley mentioned that the council has provision in place and Shelley will raise this point with the CCG communications team. (Action: Beverley / Shelley)
 - **Carers Assessment Report**- members of the JPB mentioned that they are not receiving a copy of the final assessment report. Sarah mentioned that it would be good practice to receive a draft version of the report so that the person could give feedback before the final version is issued. Martin enquired if it would be possible for the JPB to do some research on this. Beverley mentioned that there is a monitoring procedure and quality assurance in place, but that she will look at this issue and report back to the JPB meeting as it is the first time she heard about this matter. (Action: Beverley)

- 4.4. There was a short discussion about who is the party responsible for conducting reviews, care coordination and personal budgets. Martin mentioned that the care act duty lies with the Local Authority, but that the NHS is responsible for drawing up plans. Beverley offered to do a presentation on Social Care Pathways at the next meeting. The group agreed to this. (Action: Council/PV).
- 4.5. It was also suggested that GPs could help promote the new reference groups. Val to circulate a list of all reference group Chairs' contact details to JPB colleagues. This is especially helpful with regard to people who are less likely to be using statutory services, such as those eligible for the new Autism Reference Group. (Action: Val).

5. Introduction of Co-Chairs

- 5.1. Sharon informed the meeting that two JPB colleagues have put themselves forward for the position of Co-Chairs, Andrew and Graham. They had an initial meeting to discuss how co-chairing would work between them, the meeting was very positive. Should the JPB members accept the new arrangements, Graham and Andrew would share chairing the meetings and Sharon would help on the administrative side. The meeting agreed to the new Co-Chairs arrangement.

6. Budget Proposal 2018/19 Presentation and Clarification

- 6.1. Charlotte and Beverley gave a presentation to the meeting (please see presentation slides as part of the email attachment). Beverley noted that they have consulted with, and listened to, experts in the area of Social Care and Public Health over the past few years as well as looked at outcomes in other Local Authorities in order to improve and reduce the cost of care.
- 6.2. Points to note:
- The council needs to save £15million in 2018/19
 - Some savings agreed in February 2015 and further savings agreed in February 2017 (new savings were based on evidence)
 - Current assumption is that all core funding for local government will be from council tax and business rates from 2019/20
 - Haringey spent much more than funding than it received and it has been using reserves to cover costs
 - Population rapidly increasing in London
 - Three areas under pressure; Temporary Accommodation, Adult Social Care and Children Social Care
 - Donut chart refers to Haringey. Biggest area that the funding is spent on is Adult Social Care.
 - Passported refers to children going to adult social care
 - 2/3 of Adult Social Care money is spent on care packages
 - The council has been closely working with the CCG
 - Numbers of step-downs means people who have moved from intensive to less intensive support.

- Budget Consultation has been extended in order to get feedback from JPB members. Next steps: 13 February – Cabinet meeting and 26 February – Full Council meeting.
- 6.3. Cate enquired how the extra money that Jeremy Hunt promised in July 2017 will be spent. Shelley mentioned that the money will be used towards national objectives over the next 5 years, for example, programmes such as: IAPT psychological therapy for service users with anxiety, diabetes and depression or for the psychiatric liaisons team based in hospitals.
- 6.4. Charlotte mentioned that at the moment she is doing some work with NCL on costs of care as there are different rates for the same services. They are trying to understand why the rates are different as well as attempting to get a consistent rate across services. Martin expressed concerns about the impact of putting pressure to lower costs on providers. Charlotte mentioned that they are not looking for a lower rate, but a fair and consistent rate as there is a huge amount of variation for the same service.
- 6.5. Graham thanked Charlotte and Beverley for the presentation.

7. Budget Proposal Table Discussion and Feedback

- 7.1. Mike informed the group that each table has been given a set of three questions to initiate the table discussion.
- 7.2. The co-chairs raised a concern that the Joint Partnership Board had very little time to absorb the contents of what was a very complex presentation. Whilst appreciating the level of detail in the document they considered the process one of information giving rather than a meaningful consultation and the table feedback below could only be regarded as an initial response. It was agreed to include the Budget on the agenda of the next JPB meeting in March.
- 7.3. Table feedback:
- Evidence-based research: Martin expressed concerns over the fact that the research underpinning the new savings are mainly Local Government Agencies (LGA) which raise the issue of not being independent. Beverley mentioned that they consulted with people who have a lot of experience in their field, for example, Professor John Bolton (appointed adviser to the Local Government Association's Adult Social Care Efficiency Programme (ASCEF), and that they also met with John Jackson a few times who is the LGA National Care & Health Improvement Adviser for Finance & Risks and also part of ADASS. The local evidence to date is that the enablement / reablement is working and significantly reducing costs.
 - LGA/Savings: Gordon believes that it will not be possible for the council to achieve the savings on the areas highlighted at the presentation as the demand for Adult and Children Social Care continue to grow. He

mentioned that the LGA has raised the issue and that the council needs to be more open about it. Beverley mentioned she is not going to disagree with the LGA, however, the presentation was about the council setting a legal budget highlighting the areas they could save on as well as the risks that could be encountered. This was shared with the Council's senior Chief Executive and Corporate Finance body. She also mentioned that for the past few years that council had to use its reserves to pay for services that they have almost nothing left.

- Prevention: Debbie agreed that there needs to be more work on prevention strategies and transitions so that in the long term there will be less people with high level needs. Charlotte mentioned that prevention is key and gave an example of the work done in relation to Strokes which resulted in a decrease of cases of strokes in the Borough.
- The strategy of "Diversion at the front door" explicitly states that community and voluntary organisations will be expected to play a greater role in supporting both service users and carers. The voluntary sector in Haringey would benefit from some "seed funding" to support their local activities as their survival is fundamental to the success of this strategy.
- Pressure on social workers and carers- Sarah highlighted that the new savings could lead to biased services with social workers reducing costs of packages and that carers might experience even greater pressure due to the impact of "diversion at the front door". Beverley mentioned that they have had a transformation and redesign of how they work and that there is a programme to support training, regular meetings, as well as regular checks. There is also a Care Authorisation Panel which offers a guideline to support packages where social workers have to go through the checklist to ensure that have done things in the correct way. They understand that more needs to be done in relation to providing support for carers and that they are working closely with the CCG to support carers.
- Direct Payments- the Council recognises this is an area of development as well as a key area of work. They would like to increase the number of people receiving Direct Payments and equally support people to live more independent lives. They are also working with the CCG in this area.
- Outsourcing Social Care- Sarah mentioned the collapse of Carillion has led to questions of outsourcing and she wonders if the council has considered a potential collapse in the area of outsourcing social care. Charlotte mentioned that they are required to MEAT, this stands for the Most Economically Advantageous Tender which needs to offer social value, quality and outcomes and the costs. Usually for Social Care, quality and outcome are the most important area, therefore this does not mean the lowest bidder will win the contract.
- London Living Wage - Charlotte confirmed that the Council signed up for the Ethical Care Charter and they do have a commitment wherever

possible to support the London living wage and they are working towards it.

- Provider services/'sleeping nights' - In response to a question from Andrew, Charlotte mentioned that they have done a lot of work in this area. Since a recent tribunal ruling HMRC has ruled that everyone working at night will need to be paid the minimum wage and that providers may need to back-pay staff for the last 6 years. This is a great source of concern for providers and it also means that the council will incur more costs. They are working closely with providers looking at different options

8. Next Meeting- Actions, Priorities and Agenda

8.1. It was agreed that the next meeting agenda will cover:

- Feedback on the outcome of the Budgets 2018/19 consultation (Council)
- Social Care Pathway (Council Presentation)
- Homecare Design (Gordon Update)

9. AOB

9.1. Mike informed the group that the final Terms of Reference (ToR) circulated contained all agreed changes. The meeting approved the new ToR.

