

MINUTES OF JOINT PARTNERSHIP BOARD (JPB) MEETING

Date: 26 October 2023

Location: Station Road, Council Offices and MS Teams

Time: 13.30 - 15.30

Present

Helena Kania	Co-Chair, JPB (Joint Partnership Board)
Sharon Grant	Co-Chair of the JPB, Chair of Public Voice
Isha Turay	Chair of Carers Reference Group
Vida Black	Chairs of Carers Forum, and SCALD member
Amanda Jacobs	Chair of City of London Access Group and Haringey Resident
Jano Goodchild	Partnerships Manager, Public Voice
Lourdes Keever	Member of Older People's Reference Group
Paul Allen	Head of Integrated Commissioning (Integrated Care & Frailty)
Alexandra Domingue	Programme Manager, Adult Social Care Commissioning
Jessica Russell	Participation Lead, Haringey Council
Qasim Quereshi	Co-Chair of the LD Reference Group
Sara Sutton	Assistant Director
Abigail Wycherley	VAWG Lead, Haringey Council
Susan Oti	Independent Chair, JPB Review.
Tanya Murat	Engagement and Communications Manager, Public Voice
Debra Ayipeh	Community Engagement Lead, Public Voice

Apologies: Andrea Kelly, Rachel Sanders, Graham Day, Anne Gray, Mary Langan, Cathy Stastny

1. Last meeting actions:

Action	Assigned to	Deadline
Action 1: JG to look at AJ's recommendations from the last meeting (September) minutes.	JG	Nov 2023
Action 2: Paul to update the JPB on how they are providing dementia support to underserved communities and to report on the data when it is available.	PA	March 2024
Action 3: Amanda to link Abi in about work she has done about VAWG and the London Mayor's office for Policing and crime	AJ	Nov 2023

work with the Greater London Authority (GLA's) s consultative forum.		
Action 4: To add to the agenda for the next JPB - the JPB to discuss how to challenge the delays in assessments and response times from the First Response team.	PA/JS	Jan 2024
Last meeting minutes		
Action 1: To add Alexandra Domingue and the project to involve the JPB in Commissioning to the agenda for the next JPB.	RS/AD	Complete
Action 2: Jessica Russell to forward cabinet feedback on the Scrutiny co-production report.	JR	Complete
Action 3: JR/JT to update the JPB on the Council's on making information accessible.	JR/JT	Complete
Action 4: Amanda to pass on details of the publication - Design for the Mind by Jean Hewitt	AJ	Complete
Action 5: RS/JG to raise the need to look at diagnosis for different types of dementia at the next DRG and discuss with the new Dementia Coordinator	JG/RS	Nov 2023
Action 6: To set up a meeting to discuss the next steps for the LD reference group with Pat and Michael.	RS/JG	Complete
Action 7: Jano to talk to Cathy about where her son will fit best in terms of groups.	JG	Complete – discussed offline

Actions from March meeting	Assigned to	Deadline
Action 5: Beth has reported back what the council are using now for weed control and noted that the Parks service are looking at alternatives from Glyphosate. Concern has been raised by members with Beth including Cathy regarding the use of Glyphosate weed killers and the council has stated that they are trialling alternatives as they are committed to looking at viable alternatives.	BW/CS	Priority for this needs to be decided by the JPB.

2. Introductions

There was a technology failure at the council and their system was not working. We had to use staff's individual laptops.

3. Last meeting minutes and actions.

Amanda raised some accessibility points and missing action points which she has actioned which were forwarded to Rachel and asked that Jano have a relook at them.

Action 1: Jano to look at Amanda's recommendations from the last meeting (September) minutes.

Lourdes asked if Health could look at the different ethnic groups and how they are affected by dementia and noted that the Irish are prone to vascular dementia. Can we monitor this data to develop an appropriate action plan?

Paul updated that he can work out GP practices which have higher proportions of ethnic groups, but it is hard to pull together the definitive data as the data is at a practice level and there are issues of confidentiality, but associations can be made around ethnic groups. Sara raised that this was discussed at the Racial Equity partnership group and that part of this programme is about building the data which is not fully there at the moment. Paul added that they have only just signed off secondary data and it will be a while before this can be analysed. Paul asked for feedback from Lourdes and JPB members on underserved communities and will liaise with Clare Davies, Dementia Co-ordinator.

Action 2: Paul to update the JPB on how they are providing dementia support to underserved communities and to report on the data when it is available.

4. Haringey Borough Partnership Update – Sara Sutton

See also slides.

Sara updated the group on Haringey Borough Partnership and explained that work is being done to strengthen the governance structure, to refresh priorities and to create an outcomes framework to track progress against the priorities. This is being developed with Rachel Lissauer from the Integrated Care Board (ICB) and other members of the partnership. The borough partnership is a collaboration of the Council, the ICB and local groups of partners with the aim to improve the integration of health and social care.

Sara informed the group that research showed that there was a disconnect between strategic ambitions and operational practices and delivery. To remedy this, they have implemented operational groups with senior leaders to focus on interdependent services, an example of this is the discharge process. Sara wanted to bring this to the JPB to ensure that residents are appropriately represented.

Feedback:

Helena asked what the Key Performance Indicators (KPIs) will be so that items can be tracked.

Isha raised that the voluntary sector voice is not heard.

Sara replied that the Bridge and Public Voice are the voice of the Voluntary and Community Sector (VCS) around the table, and they represent the groups that sit beneath them, but they do need to look at how this can be strengthened and how the resident voice is represented. Sara would like feedback on this as part of the JPB review.

5. London Ambulance Survey – Tanya Murat

The report has just been published by the London Ambulance Survey – see slides.

Our comments were fed into the Healthwatch Haringey report and Tanya has analysed how our feedback has been taken into account:

The issues raised by Healthwatch Haringey (which includes the Joint partnership board and reference groups) include:

- Invest in staff –including pay.
- Invest in equipment and ensure equipment is well maintained.
- Ensure patient records are joined up and can be shared.
- Patients need to be given access to their own records.
- Disabled people needs need to be taken into account.

From the report they have included that they will:

- Respond to emergencies more quickly. They will answer phone calls in less than 10 secs, be there in less than 7 mins for Category 1 emergencies and be there in 18 mins for category 2 emergencies. These times have not been changed.
- There is nothing specifically about pay, they talk about career progression and development.
- They have said they will raise awareness of equality, inclusion and diversity.
- We asked how they deal well with disabled people and people with autism when they have a record of bullying staff. They have said that they will work to improve the workplace for disabled people.
- Joined up patient records and access to records –they want to offer linked up data and outcomes for patients by 2028.
- Same day access to GPs – they are offering to share to improve services.
- Invest in equipment, ambulances – they refer to improvements in vehicle sustainability and IT facilities.
- Ensure disabled people are accommodated – eg wheelchairs able to go in ambulances – there is nothing in the report about this.

Please see below the link to the report and the easy read version:

<https://www.healthwatchharingey.org.uk/news/2023-10-24/london-ambulance-service-strategy-feedback-healthwatch-haringey>

Helena raised that the London Care record will give access to all records which is driven by NHS London.

Lourdes – was unhappy about the response to the feedback given and that it will take up to 2028 to implement.

Helena asked how Healthwatch will monitor this strategy and suggested that this be put on future agendas.

6.Update from Jessica Russell, Participation Manager

Jessica has given updates from June meeting when she attended with Jean Taylor and Brendan Gallagher, and these have been forwarded to members prior to the meeting.

Action 3 on accessibility guidelines – Jessica shared the accessibility toolkit which has been co-produced with members of the Disability and Illness network in the Council.

Second document on easy read is available on the internet.

[Haringey Learning Disabilities Partnership](#)

Jessica said that they are able to give more advance notice of forthcoming engagements:

20 November – Tottenham Voices
2024 Launch of the Borough vision.

Jessica will update on engagement on this and how the reference groups can be involved.

Helena asked about a diary for JPB members of things that are coming up.

7.Update on Commissioning Co-production Board – Alexandra Domingue

An outcome from the Adult social care peer review from the statutory commissioning team in Sep 2022 was the need to set up a Commissioning co-production board.

See slides.

The Council has been looking at different styles of co-production and currently feels this is around informing and consulting but wants to move towards full collaboration. Commissioners want to do more co-production, but there has not been a mechanism to do this. They are planning a workshop on 29 Nov and have been advertising for residents, social care users and the voluntary sector to be part of this board.

The first task will be to agree the Terms of reference and then they will look at other projects that are coming through from commissioning. They are proposing 2 co-chairs – 1 from the Commissioning team, 1 carer/adult social care user.

Alex asked if people could register if they want to come in person, the meeting will be hybrid.

Feedback:

Lourdes said that she is a co-optee member of Overview and Scrutiny and sees lots of reports that never become operational and is anxious that this does not happen with this. Lourdes added that Scrutiny needs to be reviewed and doesn't see evidence of co-production working effectively and wants to see this in place and then projects that have said they will be co-designed need to be monitored.

Alex responded that this will be iterative. Jessica, the participation manager is committed to this, and Alex comes from an operational social care background. This board will be accountable to Haringey Borough partnership and recognises the need for measuring the impact. The responsibility of the board will be to work out how this will be measured and feedback on this.

Amamda asked what are the opportunities for recognition and reward for residents who will be involved. The lack of reimbursement is self-limiting for people who might want to be involved and people do a lot of work that could be done by officers.

Alex responded that they cannot fully commit to paying people for reward and recognition and that there are other ways that reward can be given for example support, references, or training. They are aware that a lot of people are involved in engagement, and they want to get new people involved in this.

Sharon asked that this is quite technical work which will need training on this. Who do you envisage sitting on the boards?

Alex responded they will include council officers, people from health and residents to ensure equal representation.

An example of how the board might be used is in the commissioning contract for a care home. They would develop a specification and would like to develop this with the co-production board which officers would take back and then feedback to the board

Amanda added that Haringey does need to look at financial recompense as Haringey gets a lot of work done on the cheap.

Lourdes added that there used to be a committee where people could be involved in commissioning from the beginning – even interviewing people who submitted for contracts which worked well this and was run by Sharon.

Isha asked how we get the message about the board out to the grassroots.

Alex would like everyone here to share widely and forward the information onto different community areas, which will hopefully involve new people.

8.Recommissioning of VAWG (Violence Against Women and Girls) Provision – Abi Wycherley

See slides

Abi asked ‘ Do you know where people affected by VAWG should go for support?’

Amanda raised that a lot of women do not know where to go as there is no comprehensive, well-known source of information.

In Haringey Solace Women’s Aid is one of the council’s key partners.

They are carrying out surveys and workshops and are trying to recruit experts by experience to be on the working group and to help with monitoring the project when it is live.

Amanda – suggested that the London Mayor's office for Policing and crime has done a lot of work with the Greater London Authority (GLA's) s consultative forum.

Action 3: Amanda to link Abi in about work on VAWG

9.Updates on Reference groups.

9.1 Physical Disability Reference Group (PDRG) – met for the first time pre-covid. They had a discussion with Noreen Aslam about the Wood Green Community Diagnostic Centre. The centre will take referrals from GPs relating to Blood Tests, X-ray, Ultrasound and Ophthalmology.

As there is building work going on in the centre, until the end of this year, appointments for blood tests are currently running at a two-week waiting time. The centre currently carries out 700 blood tests a week. There is also a walk-in blood test service with a wait time of up to three hours. Following the completion of the building work in the centre there will be capacity to increase the provision of blood tests.

Members raised concerns about the lack of signage to the centre from within the shopping mall. Staff at the centre are speaking to the Shopping Mall management about increasing the use of signage within the mall.

Members also took part in the consultation on the councils Health and Wellbeing Strategy providing feedback to Miyo Yoshizaki who attended the meeting last week.

9.2 Older People's Reference Group (OPRG) met in September.

OPRG has focussed recently mainly on two groups of issues: NHS access and transport.

- NHS: difficulties continue to be reported: -
- Getting doctors' appointments
- Digitalisation, which affects both getting appointments and interaction with doctors. Older people with no/poor internet access must phone in, spending time in queues whilst those using computers bag appointment slots as soon as they are released.
- 111 is not working well
- GPs often limit appointments to one or two health issues, whereas people with multiple and possibly connected conditions need to raise more.
- Issues about hospital discharge and equipment at home
- Very useful lived experience has been provided by members of the NHS Retirement Federation (NHS RF), who were attracted to join the RG with several other over 50s Forum members after Helena's presentation to the Forum some months ago. This link enabled Debra to have a special meeting with the NHS RF. This group have also been concerned that care workers are not well trained in wheelchair transfer.

Transport:

- OPRG would like JPB to take up the closure of ticket offices, following letters to train companies about this from older people's groups in the borough. These closures clearly penalise passengers who have difficulty buying tickets online.
- Poor bus links across the borough from east to west create difficulties for those with mobility issues who need to change buses
- There is a need for community transport to enable those with mobility issues to access community facilities and events

Generally, discussions in the OPRG range over issues which span many Council and government departments - for example the lack of 'leisure oriented' adult education classes, isolation, housing repairs, energy costs and their indirect encouragement of bad food habits. The loneliness conference was well attended by group members and much appreciated.

The group is large and strong now although we still lack participation from Turkish/Kurdish speakers. OPRG was pleased to hear Age UK may bring back some services to Haringey and sort more information.

9.3 Carers Reference Group (CRG)

Ajibola Awogboro, Head of Safeguarding gave a presentation about the First Response team and talked about their workload and backlog – they receive 1500 calls and 1500 emails daily. They are working to improve this through a new phone system and the launch of neighbourhood working.

The Carers group would like to suggest other ideas to improve the system and noted that it is a statutory duty for social care users and carers to have assessments.

Carers have also been involved in workshops to spend £400,000 grant.

9.4 Dementia Reference Group (DRG)

The Memory service raised problems they are having arranging transport for people in the of the borough to the Haynes Dementia hub. A knock-on effect of the delays in assessments mentioned in the Carers report have resulted in Maggie Carroll, Admiral Nurse from the Memory service being a trusted assessor to refer patients to the Haynes dementia hub prior to their assessment from the Council. They can offer patients a place at the Haynes, but not the transport.

The chairs of the Dementia Reference group would like to meet with the Head of First Response to discuss how to improve the delays, backlogs and response times from First Response and would like the JPB's support in following this up.

Action 3: To add to the agenda for the next JPB - the JPB to discuss how to challenge the delays in assessments and response times from the First Response team.

The group also had a presentation from Emily Snelling and Darshan Savani on adaptations that can be made to the home to help people with dementia.

9.5 Autism Reference Group (ARG)

The ARG have had 3 meetings since May 2023. The first meeting was set up at the #Haringey Autism Hub to see if people were interested in joining and now meets monthly. Andrew Carpenter, who was the previous chair, has offered to be the current chair with a colleague Nnenna Agbasonu. Members from this group may attend the JPB meetings. At the second meeting Andrew gave an overview of Adults social care and health and how this works. At the third meeting autism responsibilities for diagnosis in the Council was discussed. 5-6 attend regularly.

9.6 Learning Disability Reference group (LDR)

Qasim updated that there was a workshop in October of the Let's Talk group. We have been working with Andrea Kelly, Head of the Learning Disabilities Partnership to restart the LD reference group, this group is called Let's Talk. About 12-15 people with LD (learning disability) met at the Winkfield in October. The meeting was very ably chaired by Pat Charlesworth and Qasim Qureshi. Council officers came to talk to the group covering wide topics including safeguarding, housing, connected communities and cost of living. Pat and Qasim will give feedback about the meeting at the next SCALD (Severe Complex Autism Learning Disability) meeting.

9.7 SCALD (Severe Complex Autism Learning Disability) Reference Group

SCALD met in September and discussed the Haringey Opportunities Day Review and is awaiting the report from the Council. They also discussed the LD reference group meeting which took place in October and gave feedback to the Health and Wellbeing consultation on the health needs of people with severe learning disabilities.

10.AOB – Parkland Walk Consultation

Helena and other JPB and reference group members are taking part in the consultation on the Parkland walk. If anyone wants to pass on views, they can pass them on through Helena.

Next meeting date: TBC