



**ADULTS, WELLBEING & HEALTH SCRUTINY &  
IMPROVEMENT COMMITTEE  
MONDAY, 23 JANUARY 2023 AT 10.00 AM  
REDCAR AND CLEVELAND CIVIC CENTRE**

**CONTACT**

Sarah Connolly  
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Friday, 13 January 2023

**CIRCULATION**

Councillors S Holyoake (Chair), L Pallister (Vice-Chair), C Cawley, W Davies, D Dowson, T Gray, K King, Sandra Smith, P Thomson, A Turner, A Watts, B Wells and M Wilson

Councillors Kay, Lanigan, Ovens and Westbury (Cabinet Members - for information)

All Members of the Council (for information)

Corporate Director for Adult & Communities

Director of Public Health

The Press [except for Confidential item(s)]

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**A G E N D A**

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	<u>Pages</u>
1. Apologies for Absence	
2. To confirm the minutes of the meeting held on 12 December 2022 and note the attendance matrix	3 - 10
3. Declarations of Interest	
4. Relevant Cabinet Reports	
<b>Would Members please bring their copy of the Cabinet Workbook with them to the meeting (these papers will follow)</b>	
5. Teeswide Safeguarding Adults Board Annual Report 2021/22 - See Cabinet Workbook.	
6. Tees Port Health Authority - Presentation (To Follow)	
7. Use of Resources 21/22 - Presentation	11 - 27
8. Crustaceans Mass Deaths Initial Meeting - Verbal Update	
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11. Any Items the Chair Certifies as Urgent

12 December 2022

## **ADULTS, WELLBEING & HEALTH SCRUTINY AND IMPROVEMENT COMMITTEE**

A meeting of the Adults, Wellbeing & Health Scrutiny and Improvement Committee was held on 12 December 2022 at the Civic Centre

**PRESENT** Councillor Holyoake (Chair), Pallister (Vice-Chair), Cawley, Gray, Head (substitute for Dowson), King, Thomson, Turner, Watts, Wells and Wilson.

**OFFICIALS** F Anderson, S Connolly, E Grunert, A Haver, P Rice, S Slater

**IN ATTENDANCE** Councillors Kay, Lanigan and Ovens

### 37. **APOLOGIES FOR ABSENCE**

An apology for absence was received from Cllr Dowson.

### 38. **MINUTES**

**AGREED** that the Minutes of the Adults, Wellbeing & Health Scrutiny and Improvement Committee held on 31 October 2022 be confirmed and signed by the Chair as a correct record.

### 39. **DECLARATIONS OF INTEREST**

Councillor Holyoake declared an interest in any discussions relating to Health Visiting in the borough, Guisborough Library and Guisborough Town Hall.

### 40. **RELEVANT CABINET REPORTS**

The Executive Director for Adults and Communities informed Members that all Cabinet Reports which contained information about Adults and Communities Services were scheduled to be discussed at a meeting of the Resources Scrutiny and Improvement Committee, which would take place later that week.

A Member queried whether the potential closure of libraries across the borough, and the suggestion of the reduction of Elected Members Ward allowances were relevant to the Adults, Wellbeing & Health Scrutiny and Improvement Committee. The Executive Director advised Members that libraries fell under the Climate Change, Environment and Culture Portfolio and would therefore be discussed at the next meeting of the Climate and Environment Scrutiny and Improvement Committee, he further confirmed that Members Ward Allowances would be discussed at the next meeting of Resources Scrutiny and Improvement Committee, both of which were scheduled to be held later that week.

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Another Member expressed concerns about the suggested closure of libraries. :-**NOTED**.

### **ADULT SOCIAL CARE REFORMS**

The Executive Director for Adults and Communities gave a presentation to update committee on the position surrounding adult social care reforms.

The presentation covered the following:

- What had happened since the last update
- The fair cost of care exercise
- Autumn Budget Statement
- CQC Assurance Process Update and Preparations
- Highlights from the work so far
- Risk Update

As part of the ensuing discussion, Members raised the following points and asked the following questions:

- A Member questioned whether Adult Social Care Reforms had been delayed for a year, as what had happened with the Charging Reforms? The Executive Director explained that there were a lot of different reforms with similar names, but confirmed he wasn't aware of a delay to the Adult Social Care Reform.
- A Member questioned whether the CQC had changed its name when the boundaries had changed? Members were advised that it was the CCG which had experienced boundary changes, not the CQC.
- A Member queried what data the assurance process would be looking at when it commenced. The Executive Director advised that data would be from the 2021-22 year. He advised that analysis of the data would be shared at a future meeting of the Committee.
- Concerns were expressed about amount of work which had been identified as outstanding. One Member advised that it was disappointing that work was outstanding, and queried whether sufficient resourcing was in place to complete tasks within the relevant timescales?
- Some Members felt it was disappointing to see the risks that had been presented. The Executive Director explained that there were a lot of positive elements, however it was felt that there was little merit in highlighting those elements to Members, which is why they hadn't been listed.
- A Member felt it was important for Members to be aware of risks and issues, so that they could be addressed.
- The Executive Director advised Members that future updates would include details of completed tasks as well as ongoing tasks.
- A Member raised concerns about the pressures to compete with commercial services. It was queried what had been done to provide equipment and training to staff, as well as retention of staff

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incentives and the allocation of resources. Members were advised that there were debates to be had about the adequacy of some resources, however despite the budget restrictions that were being faced at that time, action had been taken to proactively address any staffing problems.

- A Member questioned whether there was a lack of staffing resources across the entire authority at that time? The Executive Director advised Members that Adults Services were in a better position than other departments, as they had previously built up their back-office staff. However, this didn't mean that sufficient resources were in place.
- It was important to ensure staff felt valued, in order to discourage them from looking for employment elsewhere.
- All Local Authorities were experiencing similar problems, due to the cost of care and lack of funding nationally.
- It was positive to see that care homes were opening across the borough. :-**NOTED**.

### **SALTBURN WATER QUALITY**

The Service Manager – Health Protection & Healthcare Quality gave a presentation on Saltburn Water Quality, which covered the following points:

- Background to the report
- Saltburn designated beach
- 2022 Bathing Water Season Results

As part of the ensuing discussion, Members raised the following points and asked the following questions:

- It was questioned why a report had been presented to Committee, when Members received regular updates on water quality. It was felt that this was unnecessary.
- A Member advised that the mapped blue flag area at Saltburn was different to that mapped as the designated beach. :-**NOTED**.

### **PUBLIC HEALTH UPDATE**

The Director of Public Health provided Members with a verbal update on the position on Public Health at that time.

The update covered the following topics:

- Group A Streptococcus
- Scarlet Fever
- Covid-19
- Flu
- Cost of Living
- Make Every Contact Count
- Cold Weather Plan

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- Integrated Care Board

As part of the ensuing discussion, Members raised the following points and asked the following questions:

- A Member questioned whether any provisions had be implemented to prevent parents taking children to hospital unnecessarily? The Director of Public Health advised Members that it was hard to discourage hospital attendance, however a large volume of information had been circulated to make individuals and schools aware of national advice.
- A Member raised concerns about the availability of antibiotics locally. The Director of Public Health advised Members that the national supply of antibiotics was sufficient at that time; any lack of availability locally would have been a short-term problem.
- Concerns were raised about the length of time it could take to get an appointment with a GP and the risk of spreading infections whilst waiting for those appointments.
- Members were advised that at that current time, the threshold for the issue of antibiotics had been lowered to ensure patients were able to obtain them.
- A Member advised that they had been informed that local cases of hand, foot and mouth had risen. The Director of Public Health was unable to confirm whether this was factually correct.
- Concerns were raised about the services available at Redcar Primary Care Hospital, with particular relation to blood tests, following discussions about the Hospital potentially increasing it's opening hours to 24/7. The Director of Public Health advised Members that service provision was based upon facilities at each hospital, in the case of bloods, there was no on-site laboratory for undertaking blood tests at Redcar Primary Care Hospital.
- A Member raised concerns about commercial companies charging for vaccinations which should have been provided free of charge to eligible individuals. Members were reassured that whilst some commercial companies did offer vaccinations for a set charge, those who had been entitled to receive a vaccine on the NHS, such as a flu vaccine, were not charged.
- Members asked to be provided with statistical information about the number of people who had been assisted as part of the cost-of-living action plan.
- Support was given for the Make Every Contact Count programme.
- Concerns were raised about the standards of housing in the UK and the impact this had on Public Health matters. **:-NOTED.**

## **DECEASED CRUSTATIONS**

The Executive Director for Adults and Communities provided Members with a verbal update on deceased crustations.

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Members were advised that following the last meeting of the Committee, the Tees Valley Authorities had been invited to establish a working group to progress with the motion which had previously been raised at Borough Council. At that time, Hartlepool, Middlesbrough, and Stockton-on-Tees had responded to confirm that they were willing to partake in the working group.

As part of the ensuing discussion, Members raised the following points and asked the following questions:

- A Member queried whether the working group would be feeding back to the national investigation? The Executive Director confirmed that it would be for the group to decide what was fed back to the Government
- Members felt that it was positive that the other Authorities were willing to form a working group, particularly those not on the coast.  
: - **NOTED.**

## **QUARTER 2 PERFORMANCE REPORT**

The Executive Director for Adults and Communities gave a presentation to provide Members with an update on the Performance for Adult Care for the 2<sup>nd</sup> Quarter of the 2022/23 year.

The presentation included the following:

- Corporate Plan Update
- Contact, Referral & Assessment
- Safeguarding & Deprivation of Liberty Safeguards
- Occupational Therapy
- Mental Health Assessments
- Initiatives for Adult Care
- Practice Quality
- Reablement at Home
- Commissioned Care and Support
- Winter Pressures
- Hospital Discharges
- Risks, Issues & Solutions

As part of the ensuing discussion, Members raised the following points and asked the following questions:

- A Member expressed support for the work community groups had delivered to help residents, however felt that there was a lack of mental health support available.
- It was questioned whether views could be sought from staff, rather than management when looking at the voice of the work force.
- A Member asked to be presented with a report from the task and finish group once it had been completed.
- Concerns were raised by Members about those staff who had been

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employed on zero-hour contracts. The Executive Director advised Members that some employees preferred the flexibility zero hours contracts offered.

- A suggestion of employment for benefits other than payment, such as grocery vouchers, was made by a number of members who raised concerns about the loss of staff, or inability to recruit due to a loss of benefits if they were to be paid a wage.
- The Executive Director advised Members that some care provisions provided bonuses as an incentive to reduce sickness and leave over key time periods, such as Christmas and New Year.
- Concerns were raised about the lack of payment to carers in relation to travelling between jobs. The Executive Director advised Members that legally staff had to be paid for travelling time, however some care providers paid an enhanced hourly rate rather than paying specifically for travel time.

The Assistant Director for Health and Communities, then proceeded to present to Members an update on the Performance for Communities and Health for the 2<sup>nd</sup> Quarter of the 2022/23 year.

The presentation included the following:

- Corporate Plan Update
- Books for Ukraine Children
- Electric Blankets
- Food Hygiene Inspections
- Events across the Borough
- Customer Service and Libraries Data and Events
- STEAM Data
- Cost of Living Action Plan and Initiatives
- Service Data - Sexual Health, Stop Smoking, Leisure Centre attendances and MIND & Cruse
- Suicide prevention
- Risks, Issues & Solutions

As part of the ensuing discussion, Members raised the following points and asked the following questions:

- Support was given for the pension credit campaign.
- A Member felt that it was disappointing that income from events across the borough was still significantly lower than before the Covid-19 pandemic.
- Concerns were raised about the amount of time it was taking for the Tees, Esk and Wear Valley Hub to be set up.
- One Member advised the Committee that Dormanstown Primary School had been the first in the borough to achieve a gold award for the Headstart programme. It was felt that it was important that all Councillors, in their role of Corporate Parents, received Headstart training.



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- A Member raised concerns about the volume of paperwork which community groups had to complete when delivering a community event. It was queried whether this could be slim lined for events which take place year upon year, so that a requirement only to provide updated information, such as the latest public liability insurance documents, was in place.
- A Member advised that 2023 was the year of Saltburn Pier. It was questioned what events were to be scheduled in celebration of this.
- A Member raised concerns about the lack of Mental Health support in Guisborough and questions why there had been plans for a Hub in East Cleveland and in Redcar, but not Guisborough.
- A number of Members expressed support for the books for Ukraine scheme, however raised concerns that a suggestion of library closures was running parallel to this. Members were advised that the Ukraine Scheme was a national approach.
- A Member questioned whether Barclays Bank had been charged to operate out of Guisborough Library? This was confirmed. Further to this, a number of Members raised concerns that the use of the room at Guisborough Library prevented use of that space for other activities which had previously been hosted there. Suggestions were made around Banks operating out of a mobile venue on Market Days, or being forced to use their own buildings, which were sat unused at that time.
- It was felt that more local events could easily attract visitors back to the borough.
- A Member questioned why the Heroin Assisted Treatment Programme had been discontinued? The Executive Director advised Members that due to funding a choice had had to be made regarding the continuation of that programme or other services continuing. Members were advised that the decision to close the Heroin Programme had been made as the other services supported more individuals. The Director for Public Health agreed to provide a report to a future meeting of the Committee on the Heroin Assisted Treatment Programme. **:-NOTED.**

### **ACTION UPDATE**

The Committee noted the updated Action Update from the meeting held on 31<sup>st</sup> October 2022. **:-NOTED.**

## Adult & Communities Scrutiny Committee

### ATTENDANCE RECORD - 2022/23

Surname	First name	14.06.22	26.07.22	20.09.22	31.10.22	12.12.22	dd.mm.yy	dd.mm.yy	dd.mm.yy	dd.mm.yy	Total Meetings Attended / total possible
Holyoake	Shelagh	✓	RA	✓	✓	✓					
Pallister	Lynn	✓	✓	RA	✓	✓					
Cawley	Ceri	✓	✓	RA	✓	✓					
Dowson	Deborah	✓	✓	Apols	✓	RA					
King	Karen	Apols 2	Apols	Apols	✓	✓					
Wilson	Margaret	Apols 1	✓	✓	✓	✓					
Thomson	Phillip	✓	✓	✓	✓	✓					
Gray	Tim	X	Apols	✓	Apols	✓					
Wells	Billy	Apols 2	✓	✓	✓	✓					
Lockwood	Mike	X	n/a	n/a	n/a						
Brook	Adam	X	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	
Watts	Anne	✓	✓	✓	✓	✓					
Turner	Andrea	✓	✓	X		✓					
Smith	Sandra	n/a	Apols	✓							
Davies	Wayne	n/a	Apols	X							

#### Substitutes

Head	Malcolm					✓					

Key	
✓	Attended
RA	Apologies Submitted (replacement attended)
Apols	Apologies Submitted (no replacement)
X	Did Not Attend (no apologies received)
C	Cancelled Meeting
n/a	Not a Member

Reason for Absence (NB Full details may not be provided for reasons of confidentiality)	
1	Personal Commitment
2	Work Commitment
3	Illness/Medical
4	Conflicting Council Commitment
5	Other



# **Adult Social Care Performance Information Use of Resources 2021/22**

**Adults, Health & Wellbeing Scrutiny & Improvement Committee  
23 January 2023**

# Adult Social Care Data Returns



Mandated data collections for 2022/23 as outlined by NHS Digital

Collection name	Collection open date	Mandated submission deadline	Validation/Data quality reports available	Refresh submission deadline	Publication date (provisional)
Safeguarding Adults Collection	3 April	8 June	21 June	5 July	August 2023
Deprivation of Liberty Safeguards	3 April	17 May	31 May	14 June	August 2023
Guardianship <sup>1</sup>	3 April	17 May	31 May	14 June	September 2023
Adult Social Care Survey	3 April	10 May	24 May	14 June	October 2023
Short and Long Term Support <sup>2</sup>	10 April	24 May	7 June	5 July	October 2023
Adult Social Care Finance Return	24 May	5 July	19 July	16 August	October 2023
Deferred Payment Agreements	24 May	5 July	19 July	16 August	October 2023
Registered Blind & Partially Sighted <sup>1,2</sup>	10 April	24 May	7 June	5 July	December 2023
Adult Social Care Workforce Data Set <sup>3</sup>	11 September	13 October	-	-	To be confirmed

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# National Benchmarking Analysis



Local Government Association

Adult Social Care Use of Resources Report for Redcar and Cleveland Council 2021/22, October 2022

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Written by LGA Research from Local Government Association

LG Inform

Adult Social Care Use of Resources Report for Redcar and Cleveland Council 2021/22, October 2022

**For Discussion today**

Local Government Association

Adult Social Care Outcomes Framework (ASCOF) - Detailed Report for Your Area

Written by LGA Research from Local Government Association

LG Inform

**For Discussion next time**

# Usefulness of Data



Comparative information can be invaluable in helping to understand performance and assist in making data informed decisions.

However.....

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- Achieving consistent data recording is almost impossible, so there is a danger of comparing 'apples with pears'
  - No single indicator can give a complete picture of performance
  - Need to be careful how results are interpreted. For example, low spend could mean great efficiency or could mean poor or inadequate service offer
  - There are a multitude of external factors that can affect cost / volume in any one locality
  - The data is a starting point for assessing performance not the end point

# Factors that can affect performance – Population Profile



Young People



Working Age



Over 65+

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<b>Redcar and Cleveland</b>	<b>20.1%</b>	<b>57.1%</b>	<b>22.8%</b>
<b>Rest of Teesside Combined</b>	<b>22.5%</b>	<b>59.4%</b>	<b>18.1%</b>

# Factors that can affect performance – Population Profile



We have 31,288 over 65's in our borough, that is over 20% more than the rest of Teesside would have for our size of population

If we had the same age profile as the rest of Teesside, we would have 6,373 fewer over 65's. The high elderly population will affect our total spend.

There are approximately 3 working age adults for every over 65 in the rest of Teesside, in Redcar and Cleveland that number is 2.5.

That means we have 17,132 fewer working age adults for our over 65 population. Is this a key factor in our care worker recruitment issues?



# Factors that can affect performance – Deprivation



	IMD - ALL	IMD - Older People
Redcar & Cleveland	36.3	18.8
Hartlepool	49.7	22.8
Middlesbrough	57.1	23.3
Stockton	30.2	16.0
NEADASS	36.0	18.6
England	22.4	16.4

Not only is Multiple Deprivation a causal factor in an individual having a poorer health outcome and therefore, more likely to need social care, it is also a factor in determining their increased likelihood of requiring social care to fund their care costs.

The IMD Factor for older people in R&C is lower than the Teesside average by 0.9.

# What is a Weighted Average

We will compare our performance in the next few slides to the weighted average of the rest of Teesside

## A Simple Average:

We would add together the performance for Middlesbrough, Hartlepool and Stockton and divide by 3.

Example,

We purchase a care home placement for £700 per week

We purchase a home care package for £100 per week

The average price is £400

## A Weighted Average:

We give a relative weighting, depending on the volume.

Example:

We purchase a care home placement for £700 per week

We purchase two home care packages for £100 each per week

Total price paid was £900 for 3 packages making a weighted average of £300

# ASC Spend Per Person 65+ 2021/22



	ASC Spend on 65+ £	Population 65+	Spend Per 65+ £
Redcar & Cleveland	28,923,000	31,288	924
Hartlepool	18,704,000	18,371	1,018
Middlesbrough	26,111,000	23,214	1,125
Stockton	30,103,000	36,948	815
NEADASS			976
England			848

The average weighted spend in the other Tees authorities is £954 per 65+, therefore we are spending £30.12 less per 65+, which is a saving of £942,451.

We will analyse our 65+ spend in more detail later.

# Number of Requests for Support



	Age 18 – 64	Age 65+
Redcar & Cleveland	1,605 (2.1%)*	4,670 (14.9%)
Hartlepool	1,355 (2.5%)	2,590 (14.1%)
Middlesbrough	2,055 (2.4%)	3,115 (13.4%)
Stockton	1,965 (1.7%)	3,915 (10.1%)
NEADASS		(15.7%)
England		(13.1%)

\* As a percentage of the population

We received 837 more requests for support from the 65+ population than the weighted average of the rest of Teesside

# Service users Receiving Long Term Support



	Age 18 – 64	Age 65+
Redcar & Cleveland	995 (1.3%)*	2,005 (6.4%)
Hartlepool	660 (1.2%)	1,570 (8.6%)
Middlesbrough	1,370 (1.6%)	2,005 (8.6%)
Stockton	1,225 (0.9%)	2,425 (6.6%)
NEADASS		(7.0%)
England		(5.7%)

\* As a percentage of the population

We are providing long term support to 6.4% of our 65+ population, which is the lowest percentage on Teesside.

This is the equivalent of us supporting 385 fewer service users 65+ than the weighted average of the rest of Teesside.

# Spend Per Service User Supported – 18 - 64



	ASC Spend on 18 - 64 £	No. service users 18 - 64	Spend Per service user £
Redcar & Cleveland	18,585,000	995	18,678
Hartlepool	9,635,000	660	14,598
Middlesbrough	26,445,000	1,370	19,303
Stockton	25,748,000	1,225	21,019
NEADASS			24,658
England			29,297

The Teesside weighted average spend is £18,995, therefore we are spending £317 per service user less. With 995 service users that is a total saving of £315,415.

# Variance Analysis – An Explanation



To understand why you may have spent more or less than expected, you need to determine whether the difference is related to the price you paid or the quantity you bought

## Predicted Outcome:

You Expect to Purchase 5 care home placements for £700 each, total cost £3,500 per week

## Actual Outcome:

You Purchase 6 care home placements for £600 each, total cost £3,600 per week

## Variance Analysis:

**Price Variance:** You paid £100 less per placement, as you bought 6 you saved £600 on the expected price. This is a positive price variance.

**Volume Variance:** You bought 1 more placement than expected, the predicted cost was £700, this is a negative volume variance.

Overall, you spent £100 more, due to the negative volume variance being greater than the positive price variance

# Spend Per Service User Supported – 65+



	ASC Spend on 65+ £	service users 65+	Spend Per service user £
Redcar & Cleveland	28,923,000	2,005	14,425
Hartlepool	18,704,000	1,570	11,913
Middlesbrough	26,111,000	2,005	13,023
Stockton	30,103,000	2,425	12,414
NEADASS			14,020
England			16,767

**Price Variance:** The Teesside weighted average spend is £12,486 per service user, therefore we are spending £1,939 more per service user. With 2,005 service users that is a total cost of £3,887,695.

**Volume Variance:** As an earlier slide showed we are supporting 385 fewer service users than the Teesside average, at a average cost of £12,486, we are saving £4,807,110 on service user numbers.

In summary, we are supporting fewer people, but at a higher cost per person.



# Long Term Support Needs Met by Admission to Residential Care Per 100,000 Population – 18 - 64



	Admissions in Year	Population	Number Per 100,000
Redcar & Cleveland	30	78,333	38.3
Hartlepool	3	55,357	5.4
Middlesbrough	36	84,942	42.4
Stockton	21	116,450	18.0
NEADASS			18.0
England			13.9

The expected number of admissions for our population based on the Teesside average would have been 18.

As an earlier slide showed, we are supporting a similar number to our neighbours overall, but last year, a higher proportion went into residential care.



# Long Term Support Needs Met by Admission to Residential Care Per 100,000 Population – 65+

	Admissions in Year	Population	Number Per 100,000
Redcar & Cleveland	335	31,288	1,070.7
Hartlepool	104	18,371	566.1
Middlesbrough	319	23,214	1,374.2
Stockton	166	36,948	449.3
NEADASS			775.3
England			538.5

The expected number of admissions for our population based on the average for the rest of Teesside would have been 235.

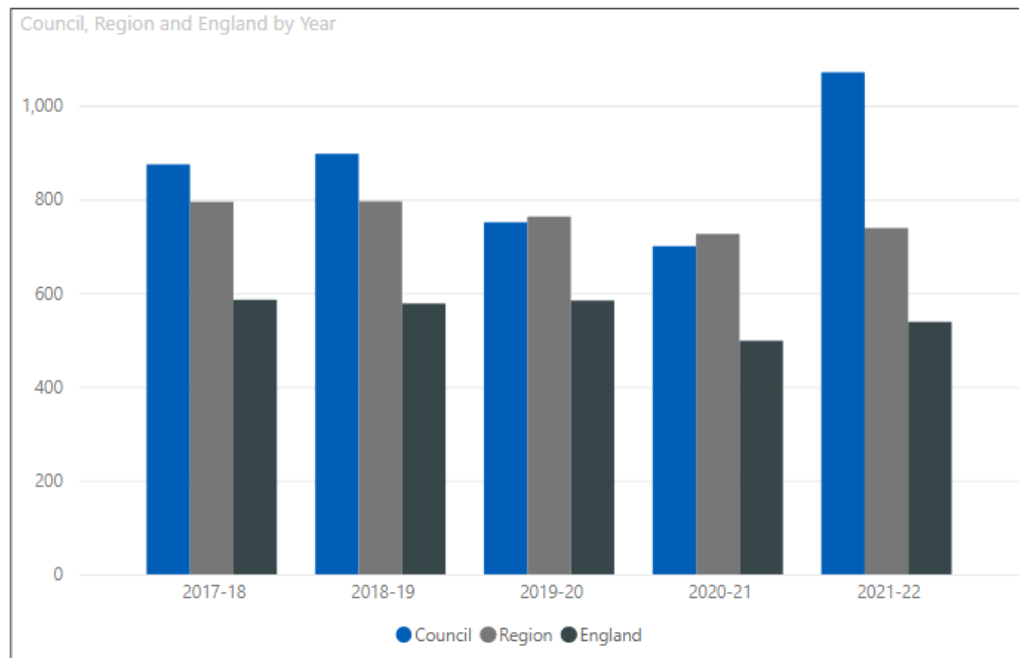
We are supporting fewer 65+'s overall, despite a higher care home admission rate.

# Redcar & Cleveland 65+ Care Home Admissions Per 100,000 65+ Population



Council, Region and England score by year

Year	Council score	Region score	England score
2017-18	874.3	794.5	585.6
2018-19	897.0	795.4	577.6
2019-20	750.8	763.0	584.0
2020-21	699.9	726.1	498.2
2021-22	1,070.7	738.6	538.5



Admission rates across the region and England have stayed relatively steady in recent years, where our rate fell, then rose sharply last year. Why?



# Member Report – For Information

## Joint Health Scrutiny Committee - Update

**Report to:** Adult, Wellbeing & Health Scrutiny & Improvement Committee

**Report from:** Governance Manager

**Portfolio:** Health and Welfare

**Report Date:** 23 January 2023

**Decision Type:** For Information

**Council Priority:** Meeting Residents' Needs

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## HEADLINE POSITION

### 1.0 Summary of report

- 1.1 To provide an update on the work of the Tees Valley Joint Health Scrutiny Committees for Members' information.

## DETAILED PROPOSALS

### 2.0 What are the objectives of the report and how do they link to the Council's priorities

- 2.1 This briefing note provides an update on the key issues that are being considered through our joint health scrutiny arrangements. Links to agendas and minutes are provided to enable Members to read a fuller report of the meeting discussions.

### 3.0 Background and detail

- 3.1 Councils with social care functions can hold health providers to account for the quality of their services through powers to obtain information, ask questions in public and make recommendations for improvements that have to be considered. In some circumstances, proposals for major changes to health services can be referred to the Secretary of State for determination if they are not considered to be in the interests of local health services. This is the responsibility that is usually referred to as 'Health Scrutiny'.
- 3.2 Where relevant issues fall within the local authority's boundaries, these will normally be dealt with through the Adult and Communities Scrutiny & Improvement Committee as the Committee through which the Council's health scrutiny function is discharged.
- 3.3 In some cases, issues cover more than one Local Authority area, and as such, are more appropriate to be dealt with through the Joint Health Scrutiny arrangements that exist. Where there are proposals for significant changes in services provision that affect more than one Local Authority area, the regulations require these to be dealt with through a joint committee.

## **Tees Valley Joint Health Scrutiny Committee**

(Representatives: Cllrs A Watts, Rees and Sandra Smith)

- 3.4 The Committee is chaired on a rotating basis between the Tees Valley Authorities. Darlington Council has chairing responsibilities for 2022/23.
- 3.5 A meeting of Tees Valley Joint Health Scrutiny was held on Friday 16 December 2022. The key issues discussed at the meeting are set out in the following paragraphs:

### Winter Planning

- 3.6 Representatives from the North East and North Cumbria Integrated Care Board outlined the plans for managing the winter pressures which followed on from a significant and sustained demand pressure which had continued through the year. These included: urgent community response; further developing virtual wards to reduce admissions and support earlier discharge; using national funding to increase bed capacity; a range of measures to support discharge; continuing to support elective activity; infection prevention and control measures; staff vaccinations programmes and the oversight and incident management arrangements, particularly to respond to surge pressures.

### Integrated Urgent Care Engagement

- 3.7 Representatives from the North East and North Cumbria Integrated Care Board advised that there had been a positive response overall to the proposals for a new model of integrated urgent care for the populations of Middlesbrough and Redcar and Cleveland. This would bring them in line with the model in place across other boroughs within the Tees Valley and would:

- Relieve the strain on GPs/A&E departments
- Improve signposting of patients
- Increase 24/7 urgent care provision
- Improve access to GP out of hours service for some localities

Following the engagement exercise, further consideration was being given to:

- Accessibility of the JCUH site including public transport options
- Availability and cost of parking at JCUH
- Capacity of and impact on the JCUH site, considering existing pressures
- Capability and confidence of the NHS111
- Staffing the new model

### North East Ambulance Service

- 3.8 Representatives from North East Ambulance Service provided an update on NEAS performance to the period ending October 2022.
- 3.9 NHS 111 Call volume had increased over the course of the year which had led to a corresponding decline in speed to answer calls. In October, an additional 10,000 NHS 111 calls were received compared to the previous month. Call

handling capacity had increase across the year with 100 more health advisors recruited to meet the demand on both 999 and 111 services.

- 3.10 For emergency care, daily average incident volumes saw a reduction in October 2022 which was consistent with a service wide trend, however, significant pressure remained on the service due to the increased acuity of cases.
- 3.11 Hospital handovers continue to present a pressure with only 21% of handovers completed within the 15 minute target timeframe. October saw 3,400 hours lost in handover delays – the highest recorded figure to date.
- 3.12 Members discussed how this was a result of system wide pressure where hospitals do not have bed availability to accept new patients due to lack of capacity for discharge into other settings.

#### TEWV NHS Foundation Trust Quality Account

- 3.13 Representatives from Tees, Esk and Wear Valleys NHS Foundation Trust provided an update on their Quality Account, focusing in particular, on the Quality Improvement Actions.
- 3.14 Members sought further explanation of the reason for the increase in the number of incidents of physical intervention/restraint per 1000 occupied bed days and were advised that a very small number of complex patients had affected this measure. Further narrative would be included in future reports to provide more context around the measures.
- 3.15 The role of Lived Experience Directors, who were now in place, was discussed and it was agreed to explore this role in more detail at a future meeting.

#### TEWV Inspection Update

- 3.16 Representatives from Tees, Esk and Wear Valleys NHS Foundation Trust provided an update on the CQC Inspection of their services, in particular the Adult Learning Disability Services where the service was rated Inadequate. The outcome of the inspection had been published on 5 October 2022.
- 3.17 The report highlighted the areas for improvement leading to the inadequate inspection rating, but also identified a number of areas of good practice. There were some specific 'must do' actions required to ensure services were delivered in line with relevant regulations. These were being progressed along with a range of other actions to address the findings from the inspection.
- 3.18 The committee also received an update on the CQC reinspection of the CAMHS service which had identified that significant improvements had been made but there were issues with staffing, waiting times for treatment and compliance with mandatory training.
- 3.19 Members discussed the findings and improvement actions. These issues would continue to be kept under review by the joint committee.

## **4.0 Appendices and Background Papers**

4.1 Papers for this joint committee can be found using the link below: [Tees Valley Joint Health Scrutiny Committee](#)

## **5.0 Recommendation**

5.1 Members are requested to:

1. Note the information
2. Seek further information or feed in any comments via the Council's nominated representatives on each of the Joint Committees.

## **6.0 Contact Officer**

**6.1 Name:** Alison Pearson

**6.2 Position:** Governance Manager

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**Adults, Wellbeing & Health Scrutiny and Improvement Committee – Action list**

Actions from 20 September 2022		
<p><b>TEESPORT HEALTH AUTHORITY</b></p> <p>A presentation to be given at a future meeting on the Tees Port Health Authority.</p>	<p>FA</p>	<p>Presentation scheduled in for January Scrutiny meeting</p>
Actions from 12 December 2022		
<p><b>PUBLIC HEALTH UPDATE</b></p> <p>Statistical information on the numbers of individuals who had been supported as part of the cost of living action plan to be given at a future meeting.</p>	<p>MA</p>	
<p><b>QUARTER 2 PERFORMANCE REPORT</b></p> <p>Assurance to be provided on the availability of antibiotics</p> <p>Councillors expressed concern regarding access to GPs and requested assurances re availability of appointments</p>	<p>MA</p> <p>MA</p>	<p>The Chief Pharmacist for the ICB Al Monk – there are sufficient antibiotics and if there are any shortages the supply chain would have capacity to respond to any identified shortages</p> <p>The ICB Medical Director clarified that Primary Care are working through to respond as best they can to ensure they reach those needing treatment. Triage is being deployed to focus upon those with urgent / emergency or immediate need.</p>