

## **Adult Social Care and Health Select Committee**

A meeting of Adult Social Care and Health Select Committee was held on Tuesday, 24th July, 2018.

**Present:** Cllr Lisa Grainge(Chairman), Cllr Lauriane Povey, Cllr Kevin Faulks, Cllr Lynn Hall, Cllr Mohammed Javed,  
Cllr Norma Stephenson (substitute for Cllr Evaline Cunningham), Cllr Barry Woodhouse

**Officers:** Michael Henderson, Peter Mennear, Leanne Maloney Kelly, Mandy MacKinnon, Kerry Anderson, Sarah Bowman-Abouna, Rose Hammond-Mckie

**Also in attendance:** Cllr Jim Beall (Cabinet Member for Adult Social Care and Health), Christine Mayne(NECA), Anna Hemmings Catherine Sweet (GamCare) (via a video link)

**Apologies:** Cllr Evaline Cunningham, Cllr John Gardner, Cllr Sylvia Walmsley,

### **ASH 21/18 Evacuation, Housekeeping & Audio Recording Procedures**

The Evacuation, Housekeeping and Audio Recording procedures were noted by the Committee.

### **ASH 22/18 Declarations of Interest**

There were no declarations of interest.

### **ASH 23/18 Quality Standards Framework**

Members considered a report that provided an update on the current status of Stockton on Tees Borough Council's Quality Standards assessment approach in relation to residential care homes and care at home providers.

It was explained that the Council was currently looking to procure and implement a web based quality assessment tool, called Provider Assessment and Market Management Solution (PAMMS), which would help to produce real time data on trends, provide benchmarking against providers and other local authorities and allow the Council to monitor services effectively.

Providers would also be subject to periodic CQC inspections.

Discussion:

- it was noted that PAMMS would provide early signaling of any issues that may need support. The tool would be developed to suit the Council's needs.

- PAMMS would not pick up every eventuality, and there would still be a role for individuals, carers and ward members to highlight issues that may not be going right in terms of front line provision. Members may also raise safeguarding issues if they were concerned about the care of individuals in the community.

RESOLVED that the update report and discussion be noted.

### **ASH 24/18 Scrutiny Review of Gambling**

The Committee received information from representatives of GamCare, which was an independent charity, providing information, advice, support and free treatment for anyone affected by gambling-related harm across Great Britain. The Committee also received information from a representative of the North East Council on Addictions (NECA), which was commissioned by GamCare to provide local face to face psychosocial interventions in the North East.

Members received a presentation from GamCare that:

- detailed GamCare's strategic focus and services.
- service activity
- the impact gambling could have on local services
- risk reduction work
- campaigns

Discussion:

- members noted support and treatment plans offered to individuals, including a national helpline, CBT and motivational interviewing. Treatment was generally short term.
- There were practical measures gamblers could take to manage their behaviour, like self exclusion, giving their money to someone else to look after.
- most people self referred into the service, however, referrals could be made by anyone/any organization.
- it was noted that, generally, the majority of calls to the helpline were from problem gamblers. In the first quarter of 2018, 5000 calls had been from gamblers with around 1,500 from people affected others.
- 87% of calls were answered within 15 seconds.
- members felt that there was a lack of advertising of problem gambling support, compared with other issues, such as smoking and drinking. It was noted that advertising was a challenge, as funding was limited. It was explained that gambling premises were required, under their licence, to advertise GamCare Engagement with local authorities helped to get the message out.
- a successful outcome for a gambler engaging with GamCare was considered to be a client completing a treatment plan and the Problem Gambling Severity Index score of an individual reducing.
- it was explained that NECA was funded by GamCare to cover the Stockton and Middlesbrough areas. It was contracted to provide face to face assessments, counselling, plus advice and information services.
- from initial contact NECA aimed to have people into services within 2 - 3 weeks. Telephone based support was provided in the meantime.
- the closest NECA area office and walk in centre was based in Middlesbrough.

- members were curious about how gambling prevalence in the Borough compared with other areas and this data was being provided by GamCare.
- it was explained that last year there had been 54 referral in the Middlesbrough area and 47 in the Stockton area.
- NECA also provided support to affected family members.
- members highlighted the importance of ensuring that, individuals, referred to NECA, were also referred on to other services if necessary.
- local statistic, in terms of treatment completion reflected national figures of around 70%.
- members queried proposed links between Citizens' Advice Bureau and Gambling Aware and it indicated that an answer would be provided, so referrals could be made.
- it was noted that local CAB had been provided with additional training around gambling and money management and were aware of local services.
- It was agreed that the profile of problem gambling and the available services needed to be raised.
- Members agreed that it was vital that problem gambling was on the radar of local GPs.

Members were informed of other planned evidence gathering opportunities and noted details of evidence recently received from the Stockton Youth Assembly.

The Cabinet Member recognised that the issue had grown in prominence recently including at the national level via the Local Government Association. He recognised that there were measures that local authorities could take.

Reference was made to the huge amount of gambling advertising that people were exposed to via the internet and during prime time television.

Members recognized that gambling in itself was not necessarily a major problem and versions of it were used, every day, for leisure and enjoyment , bringing people together and addressing social isolation. However, problem gambling was increasing and this had devastating consequences on people's lives.

It was explained that the Committee would be developing its recommendations, at its September meeting, and the final report would go to Cabinet in October.

RESOLVED that the presentation and information provided and discussed be noted.

**ASH  
25/18**

### **Minutes of the Health and Wellbeing Board**

Members considered the minutes of the Health and Wellbeing Board's meetings held on

- 20 December 2017
- 31 January 2018
- 28 March 2018

RESOLVED that the minutes be noted.

**ASH  
26/18**      **Regional Health Scrutiny Update**

Members considered an update on the work of the Regional and Tees Valley Joint Health Scrutiny Committees.

RESOLVED that the update be noted.

**ASH  
27/18**      **Work Programme 2018-19**

Members considered the Committee's Work Programme.

RESOLVED that the Work Programme be noted.

**ASH  
28/18**      **Chair's Update**

There were no updates from the Chair