

Date: Tuesday 19 September 2023 at 4.00 pm

Venue: Jim Cooke Conference Suite, Stockton Central Library, Church Road,
Stockton-on-Tees TS18 1TU

Cllr Marc Besford (Chair)
Cllr Nathan Gale (Vice-Chair)

Cllr Carol Clark
Cllr Kevin Faulks
Cllr Susan Scott
Cllr Paul Weston

Cllr John Coulson
Cllr Lynn Hall
Cllr Vanessa Sewell

AGENDA

- 1 Evacuation Procedure** (Pages 7 - 8)
- 2 Apologies for Absence**
- 3 Declarations of Interest**
- 4 Minutes**
To approve the minutes of the last meeting held on 18 July 2023 (Pages 9 - 16)
- 5 Healthwatch Stockton-on-Tees - Annual Report 2022-2023** (Pages 17 - 48)
- 6 CQC / PAMMS Inspection Results - Quarterly Summary (Q1 2023-2024)** (Pages 49 - 72)
- 7 PAMMS Annual Report (Care Homes) - 2022-2023** (Pages 73 - 76)
- 8 Monitoring the Impact of Previously Agreed Recommendations - Care Homes for Older People**
Progress report for the previously completed Care Homes for Older People review. (Pages 77 - 82)
- 9 Scrutiny Review of Access to GPs and Primary Medical Care**

- To receive a background briefing in relation to this scrutiny topic. (Pages 83 - 100)
- To consider and agree the scope and project plan for the review.

10 Chair's Update and Select Committee Work Programme 2023-2024 (Pages 101 - 102)

Members of the Public - Rights to Attend Meeting

With the exception of any item identified above as containing exempt or confidential information under the Local Government Act 1972 Section 100A(4), members of the public are entitled to attend this meeting and/or have access to the agenda papers.

Persons wishing to obtain any further information on this meeting, including the opportunities available for any member of the public to speak at the meeting; or for details of access to the meeting for disabled people, please

Contact: Scrutiny Support Officer, Rachel Harrison on email rachel.harrison@stockton.gov.uk

KEY - Declarable interests are:-

- Disclosable Pecuniary Interests (DPI's)
- Other Registerable Interests (ORI's)
- Non Registerable Interests (NRI's)

Members – Declaration of Interest Guidance



Table 1 - Disclosable Pecuniary Interests

Subject	Description
Employment, office, trade, profession or vocation	Any employment, office, trade, profession or vocation carried on for profit or gain
Sponsorship	Any payment or provision of any other financial benefit (other than from the council) made to the councillor during the previous 12-month period for expenses incurred by him/her in carrying out his/her duties as a councillor, or towards his/her election expenses. This includes any payment or financial benefit from a trade union within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992.
Contracts	Any contract made between the councillor or his/her spouse or civil partner or the person with whom the councillor is living as if they were spouses/civil partners (or a firm in which such person is a partner, or an incorporated body of which such person is a director* or a body that such person has a beneficial interest in the securities of*) and the council — (a) under which goods or services are to be provided or works are to be executed; and (b) which has not been fully discharged.
Land and property	Any beneficial interest in land which is within the area of the council. 'Land' excludes an easement, servitude, interest or right in or over land which does not give the councillor or his/her spouse or civil partner or the person with whom the councillor is living as if they were spouses/ civil partners (alone or jointly with another) a right to occupy or to receive income.
Licences	Any licence (alone or jointly with others) to occupy land in the area of the council for a month or longer.
Corporate tenancies	Any tenancy where (to the councillor's knowledge)— (a) the landlord is the council; and (b) the tenant is a body that the councillor, or his/her spouse or civil partner or the person with whom the councillor is living as if they were spouses/ civil partners is a partner of or a director* of or has a beneficial interest in the securities* of.
Securities	Any beneficial interest in securities* of a body where— (a) that body (to the councillor's knowledge) has a place of business or land in the area of the council; and (b) either— (i) the total nominal value of the securities* exceeds £25,000 or one hundredth of the total issued share capital of that body; or (ii) if the share capital of that body is of more than one class, the total nominal value of the shares of any one class in which the councillor, or his/ her spouse or civil partner or the person with whom the councillor is living as if they were spouses/civil partners have a beneficial interest exceeds one hundredth of the total issued share capital of that class.

* 'director' includes a member of the committee of management of an industrial and provident society.

* 'securities' means shares, debentures, debenture stock, loan stock, bonds, units of a collective investment scheme within the meaning of the Financial Services and Markets Act 2000 and other securities of any description, other than money deposited with a building society.

Table 2 – Other Registerable Interest

You must register as an Other Registrable Interest:

- a) any unpaid directorships
- b) any body of which you are a member or are in a position of general control or management and to which you are nominated or appointed by your authority
- c) any body
 - (i) exercising functions of a public nature
 - (ii) directed to charitable purposes or
 - (iii) one of whose principal purposes includes the influence of public opinion or policy (including any political party or trade union) of which you are a member or in a position of general control or management

Jim Cooke Conference Suite, Stockton Central Library **Evacuation Procedure & Housekeeping**

If the fire or bomb alarm should sound please exit by the nearest emergency exit. The Fire alarm is a continuous ring and the Bomb alarm is the same as the fire alarm however it is an intermittent ring.

If the Fire Alarm rings exit through the nearest available emergency exit and form up in Municipal Buildings Car Park.

The assembly point for everyone if the Bomb alarm is sounded is the car park at the rear of Splash on Church Road.

The emergency exits are located via the doors between the 2 projector screens. The key coded emergency exit door will automatically disengage when the alarm sounds.

The Toilets are located on the Ground floor corridor of Municipal Buildings next to the emergency exit. Both the ladies and gents toilets are located on the right hand side.

Microphones

During the meeting, members of the Committee, and officers in attendance, will have access to a microphone. Please use the microphones, when directed to speak by the Chair, to ensure you are heard by the Committee.

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Adult Social Care and Health Select Committee

A meeting of Adult Social Care and Health Select Committee was held on Tuesday, 18th July, 2023.

Present: Cllr Marc Besford (Chair), Cllr Nathan Gale (Vice-Chair), Cllr Carol Clark, Cllr John Coulson, Cllr Kevin Faulks, Cllr Lynn Hall (sub for Cllr Emily Tate), Cllr Susan Scott, Cllr Vanessa Sewell

Officers: Carolyn Nice, Emma Champley, Sarah Bowman-Abouna (A,H&W); Darren Boyd, Gary Woods (CS)

Also in attendance: Cllr Ann McCoy (SBC Cabinet Member for Adult Social Care), Cllr Steve Nelson (SBC Cabinet Member for Health, Leisure and Culture), Cllr Pauline Beall (SBC Assistant Cabinet Member for Adult Social Care)

Apologies: Cllr Emily Tate

ASH 1/23 Evacuation Procedure

The evacuation procedure was noted.

ASH 2/23 Declarations of Interest

There were no interests declared.

ASH 3/23 Minutes

Consideration was given to the minutes from the Committee meeting held on 21 March 2023.

AGREED that the minutes of the meeting on 21 March 2023 be approved as a correct record and signed by the Chair.

ASH 4/23 Overview Report 2023

As part of the annual opportunity to hold Cabinet Members and services to account, as well as understand the challenges and issues arising at the start of the current year's work programme, the Committee was presented with the overview report from the Stockton-on-Tees Borough Council (SBC) Adults, Health and Wellbeing directorate. Introduced by the new SBC Director of Adults, Health and Wellbeing, and supported by the SBC Director of Public Health and SBC Assistant Director – Adult Strategy and Transformation, the report drew attention to the following:

Adult Social Care

Priorities for the year ahead and support for these, including:

- Reviewing the intermediate care offer.
- Focusing on developing further opportunities for supported and residential living within the Borough to enable less out-of-area placements.
- Developing a Workforce Strategy.
- Continuing to work with care providers to develop the care market within the Borough and improve quality of care.
- Developing co-production with people with lived experience.

Challenges and opportunities, including:

- Several key frameworks will be recommissioned in the next 18 months.
- Market Position Statement (MPS) for 2023-2026 completed – will be used to ensure sufficient provision for projected future need.
- Service demand, inflation / financial challenges and recruitment issues continue to impact upon the sector.
- Transformation Programme will continue, with a focus on recruitment and retention, leadership development / networks, activity programmes, and staff skills. Success of the SBC Well-Led Programme (finalist in MJ Awards 2023) and the Care Home Legends initiative highlighted.
- Recognising the importance of resident wellbeing, a L2 Activity Provision in Care qualification was developed by the Learning and Skills Team – initial intake in June 2023 oversubscribed; second intake in September 2023.
- Responding to medication management issues identified via CQC and PAMMS inspections – commissioned support from NHS Medicines Optimisation Team, created Care Home Quality Group to upskill staff around medication, and created L3 Medication Management qualification (accredited and recognised by the Care Quality Commission (CQC)).
- Nationally recognised local systems in place to enable timely hospital discharge (including use of Rosedale Centre and Rapid Response (care at home) options) – integration key and SBC focused on what more can be done to maintain / enhance this success.
- Created a new Lived Experience Co-ordinator role in November 2022 to transform the Council's co-production approach.

Officers highlighted the new CQC inspection regime for Adult Social Care within Local Authorities which was introduced from April 2023 – more information on this, and the Council's preparations for an inspection of its existing offer, would be shared with the Committee in the future.

The SBC Cabinet Member for Adult Social Care spoke of the importance of raising the status of people working within the care sector (which also had the potential to help with ongoing recruitment challenges). The Council's Well-Led Programme had supported this drive and had enabled / encouraged managers to more effectively share best practice / ideas / concerns. The positive quality assurance audit of SBC by the Teeswide Safeguarding Adult Board (TSAB) was noted, as was the successful partnership-working with local NHS Trusts to facilitate more timely hospital discharges (whilst maintaining checks on readmission rates to ensure individuals were being discharged appropriately). Involvement in a regional group looking at recruitment to the care sector and how to attract people into the area was also outlined.

Acknowledging the benefits of good quality leadership in creating better care, a brief overview of the established SBC Well-Led Programme was provided. Feedback from participants had demonstrated the value of the course, with senior staff now seeing each other more as colleagues (willing to assist where possible) rather than competitors.

The new SBC Director of Adults, Health and Wellbeing reflected on her recent appointment and early stages in the role, including the national awareness of

the positive work going on within the Borough, particularly around good practice, partnership-working and regeneration. The locality had a strong sense of identity and there were firm foundations upon which to develop future plans. Members queried why Stockton-on-Tees was held in such regard by others and heard that relationships with local NHS Trusts, end-to-end thinking around hospital discharge, and the close proximity of community health and acute health services were not the norm for all local systems.

Public Health

Priorities for the year ahead and support for these, including:

- Driving forward the Asset-Based Community Development approach.
- Continuing to address inequalities across all areas of work.
- Developing and implementing a local health and wellbeing model and offer for children, young people and families.
- Further develop the approach to working with the adult population (including transition from childhood) to ensure services are available and accessible.
- Further develop 'healthy places', creating the environment for good health.
- Protect the health of the population (e.g. screening / major incident plans).
- Support local / regional development of the Integrated Care System (ICS).

Challenges and opportunities, including:

- Recruitment to high-level roles remains an issue – national gap for Consultants in Public Health and Public Health Specialists.
- Asset-Based Community Development model provides opportunities around how the Council and its partners support communities as both facilitators and enablers. Pilot being developed to support those with multiple complex needs.
- Building on previous health inequality work, further development of relationships with Primary Care is envisaged (aided by a new 'place'-based Stockton-on-Tees Committee involving co-working with NHS colleagues).
- Health and Wellbeing Strategy to be refreshed – framework for capturing impact to be devised.
- Established links to family and parent groups will inform the developing model for the 0-19 provision (up to 25 years for SEND).
- Demand for adult services continues to grow – looking at provision of earlier intervention which can prevent escalation into more intense support needs.
- Work ongoing around wider determinants of health (e.g. employment, safety, access to green space, etc.).

The SBC Cabinet Member for Health, Leisure and Culture referenced Health and Wellbeing Board discussions around tobacco control / vapes. Vaping had become a fast-evolving issue which the Council and its partners should be vigilant over and would potentially need to take a stance on.

AGREED that the Adults, Health and Wellbeing overview report be noted.

**ASH
5/23**

CQC / PAMMS Inspection Results - Quarterly Summary (Q4 2022-2023)

Consideration was given to the latest quarterly summary regarding Care Quality Commission (CQC) inspections for services operating within the Borough (Appendix 1). 15 inspection reports were published during this period (January

to March 2023 (inclusive)), with attention drawn to the following:

Providers rated 'Good' overall (7)

- Oxbridge House, Roseville Care Centre and Real Life Options – Darlington Road had all been upgraded from a previous overall rating of 'Requires Improvement'.
- Royal Mencap Society – 71 Middleton Avenue and Real Life Options – 2 Frederick Street had maintained their grading following a previous overall rating of 'Good'.

Providers rated 'Requires Improvement' overall (7)

- Cherry Tree Care Centre and Chestnut Lodge Nursing Home had breaches in relation to safe care / treatment and good governance which led to the services being downgraded from their previous overall rating of 'Good'.
- Mandale Care Home had breaches in relation to safeguarding and good governance (as well as a breach of CQC regulations regarding the failure to notify the CQC of important incidents) which led to the service being downgraded from the previous overall rating of 'Good'.
- Churchview Nursing and Residential Home had breaches in relation to the need for consent and good governance, and Piper Court had breaches in relation to good governance – no change in grading following a previous overall rating of 'Requires Improvement'.
- North East Ambulance Service NHS Foundation Trust were served with a notice under Section 29A of the Health and Social Care Act 2008 and told to make significant improvements to governance systems, seeking and acting upon staff feedback, incident reporting / investigating / monitoring of actions, and medicines management. It was noted that the Trust would be responding to the outcomes of this inspection at the next Tees Valley Joint Health Scrutiny Committee meeting on 28 July 2023.

Providers rated 'Inadequate' overall (1):

- Ashwood Lodge Care Home had breaches in relation safe care / treatment and good governance which led to the service being downgraded from the previous overall rating of 'Good'. The home had since closed, with the last resident being moved out on 12 February 2023.

The Quality Assurance and Compliance (QuAC) Manager presenting the report noted that most CQC inspections now tended to be focused on the 'Safe' and 'Well-Led' domains, though can be opened up to include the other three previously established domains ('Effective', 'Caring' and 'Responsive') should issues be found during a focused inspection.

Regarding the now closed Ashwood Lodge Care Home, Members praised the QuAC Team for flagging-up issues prior to the CQCs subsequent visit, and were also reassured by the speed of the action taken in relation to residents once concerns had been identified.

With specific reference to Piper Court, the Committee asked for clarification of the CQC timescales around re-inspections should a provider be graded either 'Requires Improvement' or 'Inadequate'. Officers stated that services were usually re-visited within six months if they were rated below 'Good', though the

new CQC monitoring framework had made this less clear. The CQC would therefore be approached to confirm the present arrangements.

Attention was then turned to the section on Provider Assessment and Market Management Solutions (PAMMS) reports (Appendix 2). 17 reports were published during this period (January to March 2023 (inclusive)), with attention drawn to the following:

Providers rated 'Good' overall (10)

- Windsor Court Residential Home had been upgraded from their previous overall rating of 'Requires Improvement'.
- Hadrian Park, Ayresome Court, Teesdale Lodge Nursing Home, Green Lodge, The Hollies Residential Care Home, Reuben Manor, Piper Court, Roseworth Lodge Care Home and Edwardian had maintained their grading following a previous overall rating of 'Good'.

Providers rated 'Requires Improvement' overall (6)

- Ingleby Care Home had been downgraded from their previous overall rating of 'Good' following concerns identified in relation to the environment and infection prevention control, recruitment and retention of housekeeping staff, and medication management.
- Churchview Nursing and Residential Home had no change in grading following a previous overall rating of 'Requires Improvement'. Issues were identified in relation to care plans, staff checks / supervision / training, and provider engagement with service-users / families and its staff.
- Cherry Tree Care Centre had been downgraded from their previous overall rating of 'Good' following concerns identified in relation to care plans and the sharing of feedback on the quality of service.
- Woodside Grange Care Home (older people's service only) had been downgraded from their previous overall rating of 'Good' following concerns identified in relation to the consistency of care plan quality, risk assessment, medication management / administration, and the home environment.
- The Maple Care Home had no change in grading following a previous overall rating of 'Requires Improvement'. Issues were identified in relation to the consistency of Mental Capacity Assessments and Best Interests decisions, medication administration / storage, and staff supervision.
- Allison House Care Home had been downgraded from their previous overall rating of 'Good' following concerns identified in relation to medication administration, staff training, and quality assurance systems.

Providers rated 'Poor' overall (1)

- Ashwood Lodge Care Home had been downgraded from their previous overall rating of 'Requires Improvement' following concerns identified in relation to care plans, staff supervision, recruitment, and training.

The Committee queried how Roseworth Lodge Care Home could receive a PAMMS grading of 'Good' in March 2023 when the CQC had published its report only three months earlier (December 2022) which rated the provider 'Inadequate'. Officers stated that the specific elements of each report would need to be checked, but that significant improvements can be made in a relatively short space of time.

With reference to Allison House Care Home, the Committee asked if concerns raised during a PAMMS inspection can lead to a subsequent visit by the CQC. Members were reminded that the CQC has its own inspection regime, but that SBC has meetings with CQC representatives every six weeks which are used to feed-in PAMMS outcomes and determine future action.

In order to address any emerging issues as quickly as possible, Members queried what was in place to allow providers to flag problems (i.e. early warning systems). Officers responded by outlining the existing contract management of providers by the QuAC Team that puts an onus on services to raise concerns (duty of candour), a process which works more effectively now than in the past due to the mechanisms in place for regular contact / feedback. Local services are RAG-rated as part of an 'intelligence' dashboard, and Provider Forums, Leadership and Activity Co-ordinator Networks are offered on a regular basis. SBC Transformation Managers also engage with providers and encourage networking.

The Committee once again praised officers for the content and detail of the PAMMS reports (echoed by the SBC Cabinet Member for Adult Social Care) which, in contrast to many of the CQC published outcomes, always reflected inspections which looked at all of the established domains. Concerns were also raised about the CQC seeking assurance about provider practice via telephone as opposed to in-person visits – ensuring robust oversight around the safeguarding of vulnerable residents was paramount.

To assist the Committee, officers proposed the submission of a briefing on the number of care providers currently operating across the Borough – this would be forwarded to the Scrutiny Officer for circulation to Members. The benefits of going to visit services was also noted, something which may help Members further understand the existing offer and any issues / concerns.

AGREED that the Care Quality Commission (CQC) Inspection Results – Quarterly Summary (Q4 2022-2023) report be noted.

ASH Regional Health Scrutiny Update

6/23

Consideration was given to the latest Regional Health Scrutiny Update report summarising developments regarding the Tees Valley Joint Health Scrutiny Committee, the Sustainability and Transformation Plan (STP) / Integrated Care System (ICS) Joint Health Scrutiny Committee, and the North East Regional Health Scrutiny Committee. Attention was drawn to the following:

- Tees Valley Joint Health Scrutiny Committee: The last Committee meeting was held on 17 March 2023 (note: the meeting was not quorate) and included consideration of an NHS England (North East and Yorkshire) update on NHS Dental Services, information from Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV) relating to its latest Quality Account, and a presentation from the North East and North Cumbria Integrated Care Board (NENC ICB) updating

Members on the Clinical Services Strategy.

Stockton-on-Tees Borough Council would be hosting the Joint Committee during 2023-2024. The first meeting of the new municipal year was scheduled for 28 July 2023, with agenda items to include a North East Ambulance Service NHS Foundation Trust (NEAS) response to their latest CQC inspections and the independent review of its services, NENC ICB updates regarding Community Diagnostic Centres (deferred from the March 2023 meeting) and Breast Services, and a TEWV report on the role and impact of their Lived Experience Directors.

Discussion ensued around the current state of NHS dentistry, in particular capacity and the costs for dental practices to provide the necessary treatment. On a more positive note, the SBC Cabinet Member for Adult Social Care highlighted the significant success of the school supervised toothbrushing programme which was helping children to get into good habits regarding oral hygiene.

- Sustainability and Transformation Plan (STP) / Integrated Care System (ICS) Joint Health Scrutiny Committee: No further developments regarding this Joint Committee since the previous update in January 2023. In related matters, the ICBs new commissioning responsibilities for NHS dentistry were highlighted, as were further developments around efforts to address long-standing health inequalities, and an animation celebrating the one-year anniversary of the NENC ICB

AGREED that the Regional Health Scrutiny Update report be noted.

**ASH
7/23**

Minutes of the Health and Wellbeing Board

Consideration was given to the minutes of the Health and Wellbeing Board from the meetings in February 2023 and March 2023. Attention was drawn to the following:

- 29 March 2023: With reference to the 'Post Covid' item, Members were reminded that the Adult Social Care and Health Select Committee had previously asked for further details from North Tees and Hartlepool NHS Foundation Trust (NTHFT) about its long-COVID service. Despite being originally requested in March 2022, this had still not been received – the Trust had therefore been contacted again in recent weeks regarding this.

Regarding the 'Members' Updates' item, clarification from the North East and North Cumbria Integrated Care Board (NENC ICB) would be sought in relation to the announcement that a dentistry provider was ceasing services in Stockton.

AGREED that the minutes of the Health and Wellbeing Board from the meetings in February 2023 and March 2023 be noted.

ASH

Chair's Update and Select Committee Work Programme 2023-2024

Chair's Update

The Chair noted a recent informal meeting he had held with senior representatives of North Tees and Hartlepool NHS Foundation Trust (NTHFT). These six-monthly catch-ups provided additional opportunities to exchange information outside the formal Committee environment, and the notes would be circulated to the Committee (for Members' information only) once finalised.

Separately, the Committee was informed of the forthcoming Cancer Research UK 'Race for Life Tees Valley' which was taking place on 2 September 2023 (12.00pm) at Middlesbrough Sports Village.

Work Programme 2023-2024

Consideration was given to the Committee's current work programme. The next meeting was due to take place on 19 September 2023 and was scheduled to consider the Healthwatch Stockton-on-Tees Annual Report for 2022-2023, the next CQC / PAMMS quarterly report (Q1 2023-2024), and a draft scope and plan for the Committee's first in-depth review of the current municipal year regarding Access to GPs and Primary Care. An update on the one outstanding element of the Action Plan in relation to the previously completed Care Homes for Older People review would also be presented.

AGREED that the Chair's Update and Adult Social Care and Health Select Committee Work Programme 2023-2024 be noted.

Chair.....

Agenda Item

Adult Social Care and Health Select Committee

19 September 2023

HEALTHWATCH STOCKTON-ON-TEES – ANNUAL REPORT 2022-2023

Summary

The Committee is requested to consider the Healthwatch Stockton-on-Tees Annual Report for 2022-2023 and comment as appropriate.

Detail

1. Local Healthwatch organisations are required to produce an Annual Report setting out their aims and achievements.
2. Healthwatch Stockton-on-Tees has produced its latest report, and this is attached for the Committee's consideration. The report will also be shared with the SBC Children and Young People Select Committee.
3. Members are reminded of the discussion points raised when the last Healthwatch Stockton-on-Tees Annual Report (2021-2022) was presented in October 2022 – these can be found at the following link (see item ASH 22/22, including in the 'Preamble' section (second table)):

<http://www.egenda.stockton.gov.uk/aksstockton/users/public/admin/kab12.pl?cmte=ACH&meet=64&arc=71>

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Together

we're making health
and social care better

Annual Report 2022–23

healthwatch
Stockton-on-Tees



How can I
find a new GP
or dentist?

How do I
get help for
an elderly
relative?

What do I do
if I am unhappy
with my care or
treatment?

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"In the last ten years, the health and social care landscape has changed dramatically, but the dedication of local Healthwatch hasn't. Your local Healthwatch has worked tirelessly to make sure the views of local people are heard, and NHS and social care leaders use your feedback to make care better."

Louise Ansari, Healthwatch National Director

Message from our Chair



It's hard to believe we have arrived at this point in the year, both a time for reflection and a time to look forward, ensuring continued confidence with our partners and stakeholders of the valuable impact that Healthwatch and the public can make to the delivery of health and care services, both locally in Stockton-on-Tees and nationally via the transformation agenda.

This year the Stockton-on-Tees Healthwatch team organised a North East regional event to celebrate the 10th birthday of Healthwatch. Fourteen local Healthwatch came together to highlight the positive work and impact that has been made across the region, championing the voice of the public and their views of health and care services.



Peter Smith,
Chair of Healthwatch
Stockton-on-Tees

We know the need to maintain our focus as local Healthwatch has never been greater, finding ways to help maintain stability for the people we represent. The entire health and social care system faces many challenges, from reducing waiting times for vital surgery and treatment; making it simpler to access primary care services; recruiting new doctors, nurses and social workers; ensuring professional social care assessments and the very real issue regarding the lack of NHS dentistry. These issues affect the general population on a day-to-day basis and through their comments and suggestions impacts on how services are planned and delivered.

After 75 years of the NHS, we still face huge challenges alongside social care services in managing to provide quality services whilst under extreme financial pressure. Is change needed? Do services need more investment; or can we develop creative ways of preventing illness and stop the rise in health inequalities whilst supporting our ageing population. Can the NHS, public health and social care organisations work more closely together to provide improved, collaborative, and efficient care? Are we harnessing the best use of technology and available data to provide more control for patients?

Working with the public across the Borough of Stockton-on-Tees our local Healthwatch has managed to demonstrate the power of public feedback, and this has helped to identify what works, to spot issues and to make recommendations on potential improvements. This report demonstrates much of the work we have undertaken over the past 12 months.

I would like to thank Natasha and the Healthwatch team for all their hard work and continuing support to the people and patients of Stockton-on-Tees.



Peter Smith, Chair, Healthwatch Stockton-on-Tees

About us

Healthwatch Stockton-on-Tees is your local health and social care champion.

We make sure NHS leaders and decision-makers hear your voice and use your feedback to improve care. We can also help you to find reliable and trustworthy information and advice.



Our vision

A world where we can all get the health and care we need.



Our mission

To make sure people's experiences help make health and care better.

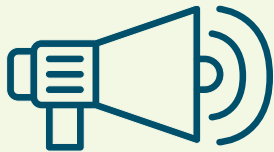


Our values are:

- **Listening** to people and making sure their voices are heard.
- **Including** everyone in the conversation – especially those who don't always have their voice heard.
- **Analysing** different people's experiences to learn how to improve care.
- **Acting** on feedback and driving change.
- **Partnering** with care providers, Government, and the voluntary sector – serving as the public's independent advocate.

Year in review

Reaching out



1,514 people

shared their experiences of health and social care services with us, helping to raise awareness of issues and improve care.

14,971 people

came to us for clear advice and information about topics such as mental health and the cost-of-living crisis.

Making a difference to care

We published

5 reports

reports about the improvements people would like to see to health and social care services.

Our most popular report was

Accessible Information Standards in Health & Care

which highlighted the struggles people face in receiving health information from health and care services.



Health and care that works for you



We're lucky to have

13

outstanding volunteers who gave up **31 days** to make care better for our community.

We're funded by our local authority. In 2022-23 we received

£129,079

which is **0.7 % less** than the previous year.

We currently employ

4 staff

(full time equivalent) who help us carry out our work.

How we've made a difference this year

Spring



Youthwatch

This year we have worked closely with Youth Focus North East to begin the development of Youthwatch, a platform for young people to have their say about health and care services.



Integrated Care System (ICS)

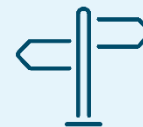
As the transformation of health and care services is developing, we have worked with our ICS colleagues to ensure that we have a role at a strategic level and that the voice of service users and the public are embedded within new structures.

Summer



Bee Happy

We collaborated with Stockton-on-Tees Borough Council Community Based Learning Disability Day Services to engage with people with a learning disability to find out their views and experiences of their health and wellbeing over the past year.



Coffee Mornings

We have delivered coffee mornings throughout the area to provide an opportunity for people to have their say, while distributing food parcels to those most in need with the support of 'Feeding Families.'

How we've made a difference this year

Autumn



10-Year Event

We celebrated 10 years of Healthwatch by bringing together partners and colleagues from across the North East to share valuable learning and provide an opportunity to determine our collective ambition for the future.



0-19 Growing Healthy

Working with the Stockton Community Wellbeing Champions we supported the Public Health Growing Healthy Stockton-on-Tees consultation, to ensure that the voices of those accessing services were able to contribute to the development of the future commissioning and delivery of the 0-19 health services.

Winter



Accessible Information Standards

We engaged with the community to understand how the Accessible Information Standard is working on a local level and to find out how people experience receiving health information from health and care services.



Waiting Well

We provided valuable feedback to the North East and North Cumbria Integrated Care Board on their Waiting Well programme which aims to support patients to prepare for surgery.

10 years of improving care

This year marks a special milestone for Healthwatch. Over the last ten years, people have shared their experiences, good and bad, to help improve health and social care. A big thank you to all our Healthwatch Heroes that have stepped up and inspired change. Here are a few of our highlights:

How have we made care better for you

Accessing Primary Care Services

Due to intelligence gathered we were able to help the NHS identify and remove barriers to improve access and delivery of health services.



Community Mental Health

Our period of consultation gave us valuable information about how mental services could work more effectively, which helped to provide an insight to commissioners. We are continuing our involvement to ensure service users are at the heart of the Community Mental Health Transformation Programme.



Improving Hospital Visiting

North Tees and Hartlepool NHS Trust welcomed feedback that led to reviewing hospital visiting policies, procedures and guidance.



Care Homes

Our programme of Enter & View visits supported improvements to the care of those living with dementia both in care homes throughout the borough and within North Tees and Hartlepool NHS Trust.



NHS dentistry

We continued to voice public concerns that improvements to NHS dentistry are too slow, leaving thousands of people in pain. Our findings highlight a serious shortage of NHS Dentists and poor access to treatment.



- To improve our service
- Take on board your suggestions to understand your needs
- To leave feedback anonymously
- Any form of feedback is welcome
- For you to express your concerns and suggestions



Healthwatch Hero



Celebrating a hero in our local community

We are delighted to have had the opportunity to work with Catherine from Starfish Health & Wellbeing and gather the voices of those accessing the service to ensure the voice of service users are embedded within the transformation of mental health services.

We received lots of feedback about the drop-in service 'A Place to Be' and the passion shown by Catherine to make a positive change for the residents of Stockton-on-Tees.

While attending a 'lived experience group' information was gathered that highlighted the need for an out of hours drop-in service.

Catherine acted on this feedback and established a 5pm-8pm drop-in service that is well attended, demonstrating local need.

"It's been very helpful, lots of support and able to get out of the house and feel safe with the people I am with, absolutely great support." *Place to Be attendee*

"Catherine is marvellous." *Place to Be attendee*

"Love it when Catherine is here, she is so kind and helpful." *Peer Mentor*

"Catherine is helping, me so much I don't know what I would have done without her support." *Place to Be attendee*

"Catherine is just amazing." *Peer Mentor*

We are very glad to welcome Catherine as a Healthwatch Champion who will continue to share with us the voice of service users, championing what matters to them.



Listening to your experiences

Services can't make improvements without hearing your views. That's why over the last year we have made listening to feedback from all areas of the community a priority. This allows us to understand the full picture, and feed this back to services and help them improve.

Advocating for fairer NHS dentistry

NHS dentistry is in desperate need of reform and this year local Healthwatch came together nationally to successfully move NHS dentistry up the political agenda with our ambition to make it easier for people to find a dentist taking on NHS patients.

With living costs on the rise, our new findings show widening health inequalities as people in every part of the country struggle to pay for dental care.

We have seen a shortage of NHS appointments, which has affected people on the lowest incomes the most, meaning they were less likely to have dental treatment than those on higher incomes.

We made renewed calls on NHS England and the Department of Health and Social care to put a reformed dental contract in place.

Changes to NHS dental contracts

Our findings achieved widespread media attention and as a result NHS England announced changes, including:



- Increasing the payments for dentists when treating patients with complex needs, for example, people needing work done on three or more teeth.
- Requiring dental practices to regularly update the national directory as to whether they are taking new NHS patients.
- Moving resources from dental practices that are underperforming.

What difference will this make?

This announcement showed the power of people's feedback – with decision makers listening to your voice and taking action.

With these changes in place, it should be easier for people to find a new dentist taking on NHS patients, alleviating the stress and worry so many suffer when they cannot afford to go private.



“Since I moved to Stockton-on-Tees I have tried to find a dentist who accepts new NHS patients. Every single dentist I contacted, stated that they do not accept new NHS patients or are private patients' practices only. As I understand, I have the right to get access to dental care, yet I end up paying for my check-ups every 6 months. I also paid for fillings twice and had to pay for a tooth to be removed. I was in pain for 2 weeks, but no dentist would have accepted me. The situation is unbearable as well as unaffordable for me.”

Stockton-on-Tees resident



Experiences of the Accessible Information Standards in Health & Care

At the beginning of this year Healthwatch England launched the 'Your Care, Your Way' campaign. The campaign called for improved accountability and implementation of the Accessible Information Standard (AIS) in health and care.

The AIS gives disabled people and people with sensory loss the legal right to get health and care information they can understand, and the communication support they need. By law, all publicly funded health and social care providers must fully comply with the AIS and ensure people are given information about their health and care in accessible formats (Healthwatch England, 2022).

Healthwatch Stockton-on-Tees collaborated with Stockton-on-Tees Borough Council Community Based Learning Disability Day Services to find out about the views and experiences of people with a learning disability in relation to their health and wellbeing over the past year.

Our recommendations:

1. Health and care services to be accountable for delivering the Accessible Information Standard.
2. Every health and care service to have an accessibility champion so that health and social care staff know who is responsible for leading local accessible information policy and delivery, and to support staff awareness of their compliance with the standard.
3. To involve people with communication needs in designing better services.
4. To provide mandatory training on accessible information for all health and care staff - to enable staff to understand the standard and regularly provide information in the formats patients need, and to proactively ask patients about their communication needs.

What difference will this make?

The findings highlight the importance, for those covered by the AIS, of receiving support from family, carers, and support staff to access and understand information, and to communicate with health and care services. The amount of support that people receive from family, carers and support staff has been stated as the main factor that could affect people's ability to ask health services to provide information or communicate with them in a way that can be easily understood, when needed.

People who are covered by the AIS experience disadvantages in accessing health and care information when needed, and that this has an impact on the quality of care that they've received. This includes missing appointments, not being able to contact the service that was needed, not being able to understand how to take medication, taking the wrong dose of medication, missing out on important information about their health, and that their mental health and wellbeing has been affected because of this.

By raising the profile of the Standard, organisations will be better informed about how they should make sure that people get support from a communication professional if they need it, and about changing working practices to support effective communication, promoting equality and inclusion.

Three ways we have made a difference for the community

Throughout our work we gather information about health inequalities by speaking to people whose experiences aren't often heard.

Creating empathy by bringing experiences to life

It's important for services to see the bigger picture. Hearing personal experiences and the impact on people's lives provides them with a better understanding of the problems.



Healthwatch Stockton-on-Tees have developed a programme of coffee mornings that provide an opportunity for individuals to meet with us for an informal chat, information and signposting, and providing an opportunity for our partners to attend in collaboration to address concerns and provide a coordinated approach to help tackle health and wellbeing concerns.

In December 2022 we were able to utilise our coffee mornings to work alongside 'Feeding Families' and help to distribute food parcels to families struggling due to the cost-of-living crisis, while speaking with individuals about their personal concerns accessing health and care services.

Getting services to involve the public

Services need to understand the benefits of involving local people to help improve care for everyone.

Our work to highlight inequalities in accessing health and care for those who are covered by the Accessible Information Standard, has helped to raise the profile of what service providers need to do to ensure access is equitable throughout the area.

Those who are covered by the AIS are between two-three times more likely to have been refused a request for support to understand health care information when they have asked, and to have not been provided with health care information that they could understand or access. It's important to those who require communication support, that they are made to feel comfortable in asking for information from health and care services in a way that can be easily understood.

Our findings show that people who are covered by the AIS experience disadvantages in accessing health and care information when needed, and that this has an impact on the quality of care that they've received. This includes missing appointments, not being able to contact the service that was needed, not being able to understand how to take medication, taking the wrong dose of medication, missing out on important information about their health, and that their mental health and wellbeing has been affected because of this.

By working together with the public, we can help to tackle inequalities in accessing health and social care.



Three ways we have made a difference for the community

Throughout our work we gather information about health inequalities by speaking to people whose experiences aren't often heard.

Improving care over time

Change takes time. We often work behind the scenes with services to consistently raise issues and bring about change.

'Waiting Well' is a regionwide programme that aims to support patients who are waiting for planned care such as knee and hip replacements.



Evidence shows that taking simple steps before surgery or treatment to improve fitness, diet and mental health plays a crucial role in helping patients to recover more quickly and reduces the chance of being re-admitted to hospital. By empowering them to manage elements of their own health and be in as good shape as they can for their treatment means that there is much less chance of their planned care being cancelled.

To explore public perception, we undertook a piece of engagement to find out what the local views were of the programme. Overall people thought the idea was good and that it would motivate people to take better care of their wellbeing. Our findings were shared with the North East and North Cumbria Integrated Care Board (NENC ICB) to inform future planning and delivery.





Hearing from all communities

Over the past year we have worked hard to make sure we hear from everyone within our local area. We consider it important to reach out to the communities we hear from less frequently, to gather their feedback and make sure their voice is heard and services meet their needs.

This year we have reached different communities by:

- Developing a programme of coffee mornings targeting specific areas.
- Facilitated local services coming together to help support those struggling from socio-economic deprivation.
- Supported and contributed to engagement ahead of the re-commissioning of the 0-19 service in Stockton-on-Tees, ensuring decision makers hear the voices of the public.
- Worked with partners to continue to build our network and help overcome barriers to accessing services.
- Developed an easy read format of intelligence gathering that can be used to support people to have their voice heard.

Tees Valley Youthwatch

Tees Valley Youthwatch

Youth Focus North East and Healthwatch across the Tees Valley have collaborated to develop a Young Persons Advisory Board. The aim of this project is to ensure meaningful young person representation is included within service commissioning and planning.

Throughout the ongoing development of 'Youthwatch' it has highlighted the challenges that can be faced engaging with diverse communities and how strategic planning and commissioning needs to ensure that a variety of engagement mechanisms are used to ensure meaningful engagement, both for the communities it is working with and to better inform the delivery of health and care services now and in the future.



Improved access for 0-19 services

Healthwatch Stockton-on-Tees collaborated with the Stockton-on-Tees Wellbeing Champions and Stockton-on-Tees Public Health to support the review of 0-19/25 Service.

The purpose of the engagement was to ensure that the voices of local children, young people, their families, and those involved in supporting them are central to the review and re-commissioning of the 0-19/25 service.

The Public Health vision is to enable children and young people with the building blocks to secure the foundation for a healthy life, working with families to promote wellbeing, protect from illness and injury and prevent ill health at the earliest opportunity through prevention and early intervention.



“

“We would like to thank Healthwatch who have collaborated with the Stockton-on-Tees Community Wellbeing Champions to produce this report reviewing our Public Health 0-19 (up to 25 with SEND) offer. Together they were able to collect responses from almost 100 residents, including harder to reach groups.

“The valuable insights and recommendations collated in the [report](#) will, along with other information collected during consultation, contribute to our service review and the ongoing development of a model of support and the commissioning process, working with communities, children and young people and their caregivers.”

”

Director of Public Health, Sarah Bowman-Abouna

Collaborating to ensure service user voice is at the heart of future service delivery

This year Healthwatch celebrated its 10th birthday. Fourteen local Healthwatch came together who work collectively across the North East and North Cumbria Integrated Care System (NENC ICS) region to add value and service user voice to the changing health and care landscape. Staff past and present, Board members, volunteers and partner organisations came together to share in the success that Healthwatch has achieved to date and identify how we can continue to build on our success and support the transformation of health and care services.

We were delighted that Claire Riley from the NENC ICS was able to attend the event and share with us her ambition for the future of health and care services.

With the ICS transformation underway Claire spoke of her desire to ensure insight and feedback from the public was used at both a national and local level. She welcomed the opportunity she has had to work alongside Healthwatch and is looking forward to continued collaboration that will support system wide planning and service delivery.

Claire acknowledged there will be challenges and ‘hard conversations’ along the way and that positive system change will only be achieved through meaningful partnership working. She welcomed the opportunity to answer questions raised and provided honest feedback on the challenges ahead, with a determination to ensure positive outcomes for health and care services.

“Thank you for inviting me to join the Healthwatch 10-year celebration. It is important to celebrate the great work of the Healthwatch teams and the impact this has had on patients, carers and the public. Now we have the opportunity to learn from this work and ensure the voices of our communities are at the heart of health and care services.”

Claire Riley Executive Director of Corporate Governance, Communications & Involvement, North East & North Cumbria ICS





Advice and information

Healthwatch is here for every person living in Stockton-on-Tees. We can provide confidential support and free information to help you understand your options and get the help you need. Whether it's finding an NHS dentist, how to make a complaint or choosing a good care home for a loved one – you can count on us.

This year we've helped people by:

- Providing up to date information people can trust.
- Helping people access the services they need.
- Helping people access NHS dentistry.
- Supporting people to look after their health during the cost of living crisis.

Help to find medication in Stockton

Healthwatch Stockton-on-Tees were contacted by a lady whose husband had suffered a stroke and had to feed via a feeding tube after hospital discharge.

The initial medication was in liquid form, however when this ran out the pharmacist would only dispense the medication in tablet form, proving difficult to administer and causing concern that the correct dosage was not being given as it was blocking the tube. The lady raised this with her GP and the pharmacist and was advised they were not able to provide liquid form. We were able to source advice from the NHS Patient Care Team who contacted her and were able to offer support to rectify the problem.

Helping residents with an NHS complaint

During 2021 – 2022, a client contacted Healthwatch Stockton-on-Tees and requested help to make a complaint on behalf of her husband. She was signposted to the Stockton Independent Complaints Advocacy Service (SICA) and the case was successfully resolved. The North East Ambulance Service (NEAS) have used the learning and proposed plans to prevent repeat future experiences.

The complaint was received about the poor care and treatment received from the NEAS after a nasty fall and head injury.

An ambulance did not arrive until 9 hours after the initial call. When the ambulance did arrive and the paramedics attended to the patient, they found that his temperature was very high and immediately thought he had COVID-19.

The paramedics and the NEAS call operators deemed the client's husband not critical because he was able to respond when they spoke to him. However, when the paramedics took him to the hospital and a scan was carried out, it showed that he had suffered a fractured skull, signs of having a bleed on the brain.

It was strongly felt by the client that NEAS failed in their duty of care, by making a judgement on how serious his condition was based on his ability to answer when spoken to. The injury sustained has had a very adverse impact on their ability to manage most daily functions without difficulty and impacted adversely on the general wellbeing of the whole family.

As an outcome the complaint, the client wanted the NEAS to admit that they failed in their duty of care. A number of questions were put to the NEAS to bring the case to a successful resolution and the outcomes of the complaint were:

- In their complaint response NEAS apologised for letting the client's husband down on the day.
- They acknowledged that on the first call, the health advisor should have probed further to determine whether her husband would have described the headache as severe. They stated in their response that if his headache was severe then this may have resulted in advice to attend an Emergency Department within an hour if they had transport, or a category 3 ambulance being assigned.
- They further stated that as the pain level was not probed enough to determine this, the outcome was to see his GP within 3 days. They admitted that this does not appear to be sufficient for her husband's condition.

All the issues raised in client's complaint were adequately answered, a resolution was reached, and the client was happy with the outcome of the complaint.



Volunteering

We're supported by a team of amazing volunteers who are at the heart of what we do. Thanks to their efforts in the community, we're able to understand what is working and what needs improving.

This year our volunteers:

- Have gathered information from local communities, while promoting Healthwatch Stockton-on-Tees.
- Visited services to gather services user, carer and friends and family feedback.
- Attended forums and meetings to build capacity and ensure Healthwatch representation.
- Read and provided comments on local policies and initiatives to embed public voice.
- Represented us at planning meetings as services begin to change within the Integrated Care System.

Jon Carling, Board Member

"I am delighted to be part of the Healthwatch Board in Stockton. It's inspiring to see the enthusiasm of the staff and volunteers, and to contribute to the variety of actions they have taken to make a difference in our Borough. The report on mental health provision was very influential on services, especially in the voluntary sector, for example."



Leonie McGrother, Board Community Representative

"As Development and Engagement Officer for the Stockton Community Wellbeing Champion Project, being on the Healthwatch Board has been a brilliant opportunity to build on the relationship with Healthwatch Stockton and increase capacity to provide health and wellbeing support to the residents of Stockton-on-Tees. I have learned a lot being a Healthwatch board member and look forward to continuing to work towards improving health and wellbeing outcomes in the area."



Do you feel inspired?

We are always on the lookout for new volunteers, so please get in touch today.



www.healthwatchstocktonontees.co.uk/volunteer



01642 688312



healthwatchstockton@pcp.uk.net

Finance and future priorities

To help us carry out our work we receive funding from our local authority under the Health and Social Care Act 2012.

Our income and expenditure

Income		Expenditure	
Funding from local authority	£129,079	Expenditure on pay	£76,030
Additional income	£5,316	Non-pay expenditure	£25,868
		Office and management fee	£9,416
Total income	£134,395	Total expenditure	£111,314

Additional income is broken down by:

- **£816 funding** received from Healthwatch Norfolk for website migration funding
- **£4,500 funding** received from NENC ICB for ICS funding

Next steps

In the ten years since Healthwatch was launched, we've demonstrated the power of public feedback in helping the health and care system understand what is working, spot issues and think about how things can be better in the future.

Services are currently facing unprecedented challenges and tackling the backlog needs to be a key priority for the NHS to ensure everyone gets the care they need. Over the next year we will continue our role in collecting feedback from everyone in our local community and giving them a voice to help shape improvements to services.

We will also continue our work to tackling inequalities that exist and work to reduce the barriers you face when accessing care, regardless whether that is because of where you live, income or race.

Top three priorities for 2023-24

1. Growing Older Project – this Tees Valley project aims to deliver a local review to support a response to the national requirement to improve planning process for when families can no longer support their family member to stay at home. The particular focus of this project is to improve support for family, carers and older people with learning disability.
2. Building on our programme of engagement, focusing on the communities we don't regularly hear from.
3. Continuing to ensure the voices of our community are embedded within the ICS and the health and social care transformation – particularly mental health and the development of the local Mental Health Hub.



Statutory statements

The organisation holding the Healthwatch contract is the Pioneering Care Partnership (PCP). PCP is a multi-award-winning health and wellbeing charity operating across the North East.

For further information, please visit www.pcp.uk.net

Registered Charity No: 1067888. Company Registered in England No: 3491237

Registered address: Pioneering Care Centre, Carer's Way, Newton Aycliffe, County Durham, DL5 4SF

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The way we work

Involvement of volunteers and lay people in our governance and decision-making

Our Healthwatch Board consists of five Executive members and five Community Representatives who work on a voluntary basis to provide direction, oversight and scrutiny to our activities. Our Board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community.

Throughout 2022/23 the Board met seven times and made decisions on matters such as:

- Our work regarding the accessible information standards.
- Collaborating with Youth Focus North East to enhance the voice of young people.
- Supporting staff to ensure public representation within the new Integrated Care System (ICS).
- Leading regional Healthwatch as we celebrated 10 years of making difference as a North East region sharing learning and skills.

We ensure wider public involvement in deciding our work priorities.

Methods and systems used across the year to obtain people's experiences

We use a wide range of approaches to ensure that as many people as possible have the opportunity to provide us with insight about their experience of using services. During 2022/23 we have been available by phone, email, provided a webform on our website and through social media, as well as attending meetings of community groups and forums.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We will publish it on our website, present it to the Health & Wellbeing Board and Scrutiny Committee, and it will be disseminated amongst our partners and commissioners, including North Tees & Hartlepool Foundation Trust and the Care Quality Commission.

Responses to recommendations

All our reports throughout the year have received responses from the relevant partners and recommendations made will form part of the future planning and commissioning of services.

There were no issues or recommendations escalated by us to Healthwatch England Committee, so no resulting reviews or investigations.

The way we work

Taking people's experiences to decision makers

We ensure that people who can make decisions about services hear about the insight and experiences that have been shared with us.

In our local authority area, for example, we work closely with the Stockton-on-Tees Public Health team to ensure the voice of the public is embedded with plans for future service delivery.

We have good working relationships with North Tees and Hartlepool NHS Foundation Trust to support the planning of their patient and engagement strategy, and we also attend the Patient & Carer Experience Committee

We attend meetings and forums throughout the area to ensure collaboration and a joined-up approach to consultation and engagement.

We are members of the Teeswide Safeguarding Adults Board and actively promote raising awareness and safeguarding campaigns.

We also take insight and experiences to decision makers in the Integrated Care System. For example, we collaborated with other local healthwatch within the region to support the consultation of the 'Waiting Well Programme.'

We provide regular update reports to the Integrated Care System of local engagement and grass root intelligence to help identify trends and concerns and steer priorities at a local, regional and national level.

We also share our data with Healthwatch England to help address health and care issues at a national level.



Working with partners

This year we have continued to ensure the relationships built with our partners continue to develop in strength, ensuring the voice of the residents of Stockton-on-Tees remain embedded in-service transformation and delivery.

We work closely with Catalyst, our strategic infrastructure organisation, to look at innovative ways to support health and wellbeing. In particular the development of the Mental Health Hub, which aims to bring services together in a joined coordinated approach to offer service users streamlined delivery of support and care.

We are also members of the Integrated Mental Health Steering Group, a forum that brings together an array of skills and experience to add value and expertise to the transformation of services.



"I am looking forward to the continued input of Healthwatch as we progress with the agreed changes in our local communities, and I very much welcome their continued support to understand and address the key health inequalities that impact upon access, effectiveness, and experience of our mental health services."



Dominic Gardner Care Group Director MHSOP/AMH, Durham Tees Valley Care Group Tees, Esk and Wear Valleys NHS Foundation Trust

Healthwatch representatives

Healthwatch Stockton-on-Tees is represented on the Stockton Health and Wellbeing Board (HWBB) by Peter Smith, Healthwatch Chair.

During 2022/23 our representative has effectively carried out this role by regular attendance at the HWBB meetings, contributing to discussions, sharing intelligence, and raising awareness of the Healthwatch workplan. Facilitating bi-monthly Healthwatch Stockton-on-Tees board meetings, involvement regionally in Healthwatch discussions and planning relating to the new Integrated Care System. Reviewing reports and recommendations, providing feedback and responses as required.

We also take insight and experiences to decision makers in North East and North Cumbria (NENC) Integrated Care Board. While we have worked together informally for many years, recent funding from the ICB has enabled the Network to formalise working arrangements through our Operational Protocol, so that it can systematically represent the views of service users, families and carers with partners across the Integrated Care System. Local intelligence is collated across each of the four sub-regional areas and shared at Area ICP meetings.

Healthwatch representatives

At regional level, the Healthwatch Regional Coordinator represents service-user voice from across the region at the NENC Integrated Care Partnership Strategic meeting, Quality & Safety Committee, Primary Care Strategy & Delivery sub-committee, Healthy & Fairness Advisory Group, Equality, Diversity & Inclusion meetings and System Quality Group meetings.

The network of local Healthwatch has also been commissioned to undertake additional research to ensure local opinions are represented in the ICB's work priorities, including focus groups for the Waiting Well, and consultation around the development of the ICB strategy.

We also share our data with Healthwatch England to help address health and care issues at a national level.

Healthwatch Stockton-on-Tees has been represented on the Integrated Care Partnerships in the South ICP area of NENC ICS by Toni McHale and Christopher Akers-Belcher. The Regional ICP is attended by Christopher Akers-Belcher, Healthwatch Regional ICB Coordinator. The Integrated Care Board Participant for the network is David Thompson, Chair of Healthwatch Northumberland.

2022–2023 Outcomes

Project / activity	Changes made to services
Experiences of the Accessible Information Standards in health and care.	Stockton-on-Tees Borough Council adult social care are currently undertaking a review of its day opportunities and wider community options.
Provide better access to local areas for people who use wheelchairs.	Stockton-on-Tees Borough Council has been successful in two grant awards to develop changing places within Stockton to enable people to have their personal needs met within the community.
Provide more opportunities for people with a learning disability to participate in local activities that are enjoyable and meaningful, and that enhance learning.	Stockton-on-Tees Borough Council has made a commitment to work with people and their carers to participate, at all levels, in shaping and delivering service delivery. To strengthen and grow the relationships people have in their communities working with them to be active and valued members of their communities.

2022–2023 Outcomes

Project/ activity	Changes made to services
Growing Healthy – Stockton-on-Tees Service Review.	The valuable insights and recommendations collated in the report will, along with other contribute to the service review and the ongoing development of a model of support and commissioning process, working with communities, children and young people and their caregivers. The Public Health team are using the recommissioning process as an opportunity to review our current offer and the needs of children, young people and families in the borough.
Waiting Well across the North East and Cumbria.	Healthwatch Stockton-on-Tees were able to gather valuable insight into the public perception of the ‘Waiting Well’ initiative to improve health. Overall, the findings were that the programme is supported, this information along with areas to consider, was shared with the NENC ICS and this programme is continuing to be rolled out regionally.
Experiences of Dental Care Services.	Following on from previous work we continue to be involved in ensuring that dentistry remains a high priority within the commissioning arena. A dentistry myth buster was developed and disseminated; we currently have representation within the Dentistry Workforce Development where all intelligence to date will be shared. There are plans to continue our work with the ICB throughout 2023-2024.
Youthwatch working together across Tees Valley.	The collaboration with Youth Focus North East and Healthwatch colleagues has enabled a joint working agreement that focuses solely on the challenges faced by young people. This work has identified how, by combining expertise and knowledge we can begin to add value and consistency throughout the area, developing mechanisms to enable us to work differently so that engagement meets the needs of the community.
Healthwatch 10th Anniversary.	This year 14 local Healthwatch came together to share learning, knowledge, and expertise to ensure as we move forward within the Integrated Care System, we have a coordinated approach, adding strength to the public voice.



healthwatch

Stockton-on-Tees

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**CARE QUALITY COMMISSION (CQC) INSPECTION OUTCOMES
&
STOCKTON-ON-TEES BOROUGH COUNCIL (SBC)
PROVIDER ASSESSMENT AND MARKET MANAGEMENT SOLUTIONS
(PAMMS) ASSESSMENT REPORTS**

QUARTER 1 2023-2024

The CQC is the national inspectorate for registered health and adult care services. Inspection reports are regularly produced, and these are published on a weekly basis.

The CQC assesses and rates services as being 'Outstanding', 'Good', 'Requires Improvement', or 'Inadequate'. Where providers are found to be in need of improvement or inadequate, the CQC make recommendations for improvement and / or enforcement action. Specific actions taken in each case can be found in the relevant inspection report.

Where inspections are relevant to the Borough, a summary of the outcome is circulated to all Members each month. An update from Adult Services is included which summarises the position in relation to service provision and any actions taken at that time.

Quarterly Summary of Published CQC Reports

This update includes inspection reports published between April and June 2023 (inclusive). These are included at **Appendix 1** and contain the results of all inspections of services based in the Borough (irrespective of whether they are commissioned by the Council).

During this quarter, **10** inspection results were published. Please note: there is a time lag between dates of the inspection and the publication of the report. In addition, where concerns are identified by the CQC, re-inspections may take place soon after the initial report is published. When the outcomes are made available within the same quarter, the result of the most recent report is included in this update.

The main outcomes from the reports are as follows:

- 8 Adult Services were reported on (5 rated 'Good'; 3 rated 'Requires Improvement')
- 1 Primary Medical Care Services was reported on (1 'Not rated')
- 1 Hospital / Other Health Care Services was reported on (1 rated 'Good')

A summary of each report and actions taken (correct at the time the CQC inspection report was published) is outlined below. Links to the full version of the reports, and previous ratings where applicable, are also included.

PAMMS Assessment Reports

SBC are utilising the Provider Assessment and Market Management Solutions (PAMMS) in the quality assurance process. PAMMS is an online assessment tool developed in collaboration with Directors of Adult Social Services (ADASS) East and regional Local Authorities. It is designed to assist in assessing the quality of care delivered by providers. The PAMMS assessment consists of a series of questions over a number of domains and quality standards that forms a risk-based scoring system to ensure equality of approach. The PAMMS key areas are:

- Involvement and Information
- Personalised Care and Support
- Safeguarding and Safety
- Suitability of Staffing
- Quality of Management

Following the PAMMS assessment, the key areas are scored either 'Excellent', 'Good', 'Requires Improvement' or 'Poor', and an overall rating is assigned to the assessment using these headings. **Appendix 2** shows **0** reports published between April and June 2023 (inclusive).

APPENDIX 1**ADULT SERVICES**

(includes services such as care homes, care homes with nursing, and care in the home)

Provider Name	Stockton-on-Tees Borough Council	
Service Name	Stockton-on-Tees Shared Lives Scheme	
Category of Care	Community-Based Adult Social Care Services	
Address	Kingsway House, West Precinct Billingham TS23 2NX	
Ward	Billingham Central	
CQC link	https://api.cqc.org.uk/public/v1/reports/a7271db0-a511-46e9-bf77-b5e4844e0c7d?20230414120000	
	New CQC Rating	Previous CQC Rating
Overall	Good	n/a
Safe	Good	n/a
Effective	Good	n/a
Caring	Good	n/a
Responsive	Good	n/a
Well-Led	Good	n/a
Date of Inspection	17th, 21st & 31st March 2023	
Date Report Published	14th April 2023	
Date Previously Rated Report Published	n/a	
Further Information		
<p>Stockton-on-Tees Shared Lives Scheme is a shared lives scheme which provides people with long-term placements, short breaks and respite care within shared lives carers (SLC) own homes. This service was registered with the CQC on the 17th January 2022 and this was its first inspection. At the time of the inspection, one person was using the service.</p> <p>'Right support, right care, right culture' is the guidance the CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people, and providers must have regard to it. The CQC found that:</p> <ul style="list-style-type: none"> • Right Support: Staff focused on the person's strengths and promoted what they could do, so the person had a fulfilling and meaningful everyday life. The person was supported to take part in activities and pursue their interests in their local area, and to interact with people who had shared interests. The person was supported to have maximum choice and control of their lives, and staff them in the least restrictive way possible and in their best interests. The policies and systems in the service supported this practice. 		

- Right Care: The person received kind and compassionate care. Staff protected and respected the person's privacy and dignity. They understood and responded to their individual needs. The service had enough appropriately skilled staff to meet the person's needs and keep them safe. Staff and the person co-operated to assess risks the person might face. Where appropriate, staff encouraged and enabled the person to take positive risks.
- Right Culture: The person led an inclusive and empowered life because of the ethos, values, attitudes and behaviours of the management and staff. Staff knew and understood the person well and were responsive, supporting their aspirations to live a quality life of their choosing. Staff placed the person's wishes, needs and rights at the heart of everything they did.

Provider Name	Dale Care Limited	
Service Name	Dale Care – Stockton Home Care	
Category of Care	Care at Home (Standard)	
Address	Concorde House, Concorde Way, Concorde Business Centre, Preston Farm Industrial Estate, Stockton-on-Tees TS18 3RB	
Ward	n/a	
CQC link	https://api.cqc.org.uk/public/v1/reports/87b36645-db7c-4c3a-8bb7-bea23dc9ce7d?20230415120000	
	New CQC Rating	Previous CQC Rating
Overall	Good	Good
Safe	Good	Good
Effective	Good	Requires Improvement
Caring	Good	Good
Responsive	Good	Good
Well-Led	Good	Good
Date of Inspection	15th – 27th March 2023	
Date Report Published	15th April 2023	
Date Previously Rated Report Published	5th August 2017	
Breach Number and Title		
n/a		
Level of Quality Assurance & Contract Compliance		
Level 1 – No Concerns / Minor Concerns (Standard Monitoring)		
Level of Engagement with the Authority		
Engagement with the Transformation Team is good; the service take part in all the Care at Home consultations, attend Provider Forums, and are currently working on a pilot around assistive technology.		
Supporting Evidence and Supplementary Information		
This inspection was unannounced. Inspection activity started on the 15 th March 2023 and ended on the 27 th March 2023; the location's office was visited on the 16 th March 2023.		
There were systems and processes in place to safeguard people from abuse. Staff understood how to raise concerns and had received safeguarding training. Risk assessments and care plans included step-by-step guidance for staff to keep service-users as safe as possible, while promoting their independence.		

Service-users were safely supported with their medication. Staff received medication training and competency checks on administering medication were carried out.

It was recommended that the provider continues to review the deployment of staff to ensure timely and consistent care. Improvements could be made around communication over visit times so that service-users have clear information about the delivery of their care.

The service was effective in identifying and responding to changes in need, promptly accessing healthcare services and support. Staff assisted people to follow advice from the relevant professionals and support plans were updated to reflect any changes in care delivery.

Support documentation included information for staff about service-users life histories and social preferences. Staff were prompted to spend time speaking to people about their interests.

The provider had systems in place to gather feedback from service-users and their relatives, such as care reviews, surveys, and spot checks. Where feedback was received, it was used to improve the service.

The Registered Manager was a member of several networks to share good practice and learn from others.

Participated in Well Led Programme?	Yes	
PAMMS Assessment – Date (Published) / Rating	23/06/2021	Good

Provider Name	Positive Individual Proactive Support Limited	
Service Name	PIPS Office	
Category of Care	Supported Living	
Address	Endeavour House, 12 Ellerbeck Way, Stokesley Business Park, Stokesley, Middlesbrough TS9 5JZ	
Ward	n/a	
CQC link	https://api.cqc.org.uk/public/v1/reports/c7ab50d8-04d8-4b0d-9f54-522a8585c6d8?20230512120000	
	New CQC Rating	Previous CQC Rating
Overall	Requires Improvement	Good
Safe	Requires Improvement	Good
Effective	Not inspected	Good
Caring	Not inspected	Good
Responsive	Not inspected	Good
Well-Led	Requires Improvement	Good
Date of Inspection	2 nd , 9 th & 14 th March 2023 (focused inspection)	
Date Report Published	12 th May 2023	
Date Previously Rated Report Published	28 th March 2020	
Breach Number and Title		
<p><u>Regulation 12 HSCA RA Regulations 2014 Safe care and treatment</u></p> <ul style="list-style-type: none"> The provider failed to properly and safely manage medicines. This placed people at risk of harm. Regulation 12(1) and (2)(g) <p><u>Regulation 17 HSCA RA Regulations 2014 Good governance</u></p> <ul style="list-style-type: none"> The provider failed to have in place effective and consistent quality assurance processes. Regulation 17(1) and (2)(a) 		
Level of Quality Assurance & Contract Compliance		
Level 2 – Moderate Concerns (Supportive Monitoring)		
Level of Engagement with the Authority		
<p>The Manager has a positive relationship with the Quality Assurance & Compliance (QuAC) Officer, maintaining honest and open communications and responding to requests for information in a timely manner.</p> <p>Transformation Team have not done any direct work; they attend Provider Forums and generally engage well.</p>		

Supporting Evidence and Supplementary Information

The CQC undertook a focused inspection to review the key questions of ‘safe’ and ‘well-led’ only. They found that people’s medicines were not always safely managed. Medicine records were not always accurate and clear guidance was not always in place to help staff support people to take their medicines safely.

Staff supported people to have the maximum possible independence, choice and control over their own lives. Staff focused on people’s strengths and promoted what they could do, so people had a fulfilling and meaningful everyday life. Staff supported people to make decisions following best practice in decision-making and communicated with people in ways that met their needs.

The provider used effective infection, prevention and control measures to keep people safe, and staff supported people to follow them. People were supported by staff who were recruited safely and who had appropriate inductions.

Systems to safeguard people from the risk of abuse were in place. However, areas of oversight needed to be more robust to ensure the provider was doing all they could to identify and deal with concerns at the earliest stage possible. The CQC have made a recommendation about this.

People’s care, treatment and support plans reflected their range of needs, and this promoted their wellbeing and enjoyment of life. Service-users reported they were happy and liked the staff teams supporting them, and appeared settled, relaxed and comfortable.

Governance processes were not always effective in identifying issues and driving improvement. Quality assurance audits were not always comprehensive enough or had not always been completed accurately. The management team was visible in the service, approachable and took a genuine interest in what people, staff, family, advocates and other professionals had to say.

Positive improvements had been observed in people’s quality of life, and staff were passionate and enthusiastic about person-centred support.

The provider sought and encouraged feedback from staff, people supported and relatives. The provider and staff worked well with other professionals. The provider was responsive to the inspection feedback and put actions in place immediately.

Participated in Well Led Programme?	Yes
PAMMS Assessment – Date (Published) / Rating	Not inspected

Provider Name	The Poplars (Thornaby) Limited	
Service Name	The Poplars Care Home	
Category of Care	Nursing / Residential	
Address	375 Thornaby Road, Thornaby, Stockton-on-Tees TS17 8QN	
Ward	Village	
CQC link	https://api.cqc.org.uk/public/v1/reports/c785aac7-25c5-4d98-84a9-fcca8897b478?20230516120000	
	New CQC Rating	Previous CQC Rating
Overall	Good	Good
Safe	Good	Good
Effective	Not inspected	Good
Caring	Not inspected	Good
Responsive	Not inspected	Good
Well-Led	Good	Good
Date of Inspection	28th March 2023 & 4th April 2023 (focused inspection)	
Date Report Published	16th May 2023	
Date Previously Rated Report Published	17th May 2019	
Breach Number and Title		
None.		
Level of Quality Assurance & Contract Compliance		
Level 1 – No Concerns / Minor Concerns (Standard Monitoring)		
Level of Engagement with the Authority		
Provider engagement with the Quality Assurance & Compliance (QuAC) Officer is improving; engagement with Local Authority initiatives is minimal; currently accessing one project opportunity.		
Supporting Evidence and Supplementary Information		
<p>An unannounced CQC inspection was prompted by a review of the information held about the service and, in part, due to concerns received about staffing and record-keeping. A focused inspection was carried out in two domains: 'Safe' and 'Well-Led'.</p> <p>The inspection found risks to people were safely managed; risks were assessed and plans to reduce risk are person-centred. Risks were reviewed and developed as people's needs changed. Daily monitoring charts were completed inconsistently, including records of checks around personal care, dental care, and repositioning. The Registered Manager had tried to address the consistency of recording in daily monitoring charts with staff through a series of reminders. Systems and audits were being developed to ensure checks were made; it was</p>		

recommended the provider reviewed their processes to ensure daily monitoring charts accurately document the care given.

Systems and processes to safeguard people from risk of abuse were in place; people and relatives said they felt staff kept people safe and staff were trained in safeguarding and knew how to recognise the signs of abuse.

The service was working within the principles of the Mental Capacity Act (MCA), and people were asked for their consent when care was delivered.

Staff were found to be recruited safely with recruitment checks carried out before staff were appointed. The home was using consistent agency staff who were inducted to the home and were familiar with people’s needs.

Medicines were found to be managed safely; people received their medication when required, by appropriately trained staff. Management made regular checks on medication management and on staff competency. Where medication error had taken place, actions had been taken to ensure lessons were learnt and competency was rechecked.

The home asked that visitors booked ahead so they could ensure staff answered the door and assist them in a timely way; some relatives stated they would prefer not to make an appointment. The Registered Manager gave assurances there were no restrictions on visiting and people could have visitors when they wished, with or without appointment.

Systems were in place to monitor accidents and incidents to identify patterns, trends and lessons learnt. Actions for improvement were shared with staff.

Participated in Well Led Programme?	No	
PAMMS Assessment – Date (Published) / Rating	11/11/2022	Requires Improvement

Provider Name	Thumhara Centre	
Service Name	The Robert Atkinson Centre	
Category of Care	Homecare Agency	
Address	Thorntree Road, Stockton-on-Tees TS17 8AP	
Ward	n/a	
CQC link	https://api.cqc.org.uk/public/v1/reports/a75d43e1-5105-4559-aaa9-67cb5a1cdcd7?20230523120000	
	New CQC Rating	Previous CQC Rating
Overall	Requires Improvement	Good
Safe	Requires Improvement	Good
Effective	Not inspected	Good
Caring	Not inspected	Good
Responsive	Not inspected	Good
Well-Led	Requires Improvement	Good
Date of Inspection	4 th & 12 th April 2023 (focused inspection)	
Date Report Published	23 rd May 2023	
Date Previously Rated Report Published	5 th January 2019	
Further Information		
<p>The Robert Atkinson Centre is a domiciliary care agency providing support for people in their own homes. The service was supporting 5 people at the time of the inspection.</p> <p>The CQC received concerns in relation to the recruitment and management of staff. As a result, it undertook a focused inspection to review the key questions of 'safe' and 'well-led' only.</p> <p>People were happy with the care and support provided. The Registered Manager ensured people had a regular team of staff. Staff were introduced to people prior to providing support. People stated they looked forward to staff visiting. People and families were involved in assessments. The provider had systems in place to investigate safeguarding concerns. Staff had completed safeguarding training. Individual and environmental risks were identified and mitigated against. Systems were in place to ensure people would continue to receive support in the event of an emergency. The Registered Manager conducted regular visits to gather feedback. The service liaised with healthcare professionals and their information was included in care plans.</p> <p>However, the provider did not ensure staff were recruited safely. Appropriate checks were not completed prior to staff supporting people – this placed people at risk of harm. As such, the following regulations were not being met:</p> <ul style="list-style-type: none"> • <u>Regulation 17 HSCA RA Regulations 2014 Good governance</u>: The provider did not have effective systems in place to monitor and improve the quality and safety of the service. • <u>Regulation 19 HSCA RA Regulations 2014 Fit and proper persons employed</u>: The provider did not have effective systems in place to ensure staff were recruited safely. 		

For those key questions not inspected, the CQC used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from 'good' to 'requires improvement' based on the findings of this inspection.

The CQC have already requested an Action Plan from the provider to understand what they will do to improve the standards of quality and safety. It will work alongside the provider and Local Authority to monitor progress. The CQC will continue to monitor information it receives about the service, which will help inform when it next inspects.

Provider Name	Care UK Community Partnerships Ltd	
Service Name	Hadrian Park	
Category of Care	Residential	
Address	Marsh House Avenue, Billingham, Stockton-on-Tees TS23 3DF	
Ward	Billingham East	
CQC link	https://api.cqc.org.uk/public/v1/reports/93556bc0-9c1d-46d3-b525-f60aff48fbf8?20230615120000	
	New CQC Rating	Previous CQC Rating
Overall	Good	Good
Safe	Good	Requires Improvement
Effective	Not inspected	Good
Caring	Not inspected	Good
Responsive	Not inspected	Good
Well-Led	Good	Good
Date of Inspection	22 nd & 24 th May 2023 (focused inspection)	
Date Report Published	15 th June 2023	
Date Previously Rated Report Published	23 rd February 2018	
Breach Number and Title		
None.		
Level of Quality Assurance & Contract Compliance		
Level 1 – No Concerns / Minor Concerns (Standard Monitoring)		
Level of Engagement with the Authority		
The provider engages very well with the Local Authority and the Quality Assurance and Compliance (QuAC) Team. They participate in almost all activities / opportunities presented to them and have collaborated with Transformation Managers with smaller activity planning projects.		
Supporting Evidence and Supplementary Information		
The CQC carried out a focused inspection of the domains 'Safe' and 'Well-Led'.		
The CQC found medicines were managed safely, with staff following appropriate guidance for management, storage and disposal, and people received their medication as prescribed. Systems were in place to reduce the risk of abuse and harm, and staff have completed safeguarding training. The Registered Manager had investigated concerns raised and referred on to the appropriate authorities, analysing information gathered from safeguarding concerns, accidents and incidents to identify trends or patterns. Any learning points were cascaded across the provider's services and implemented to minimise risk of further incidents.		

Health and safety checks were regularly completed, plans are in place to ensure people have continuity of care in the event of an emergency, and the Registered Manager is proactive in the management of fire safety. Fire evacuation simulations were conducted, and staff were confident to support people in the event of an emergency. The CQC were assured that the provider's infection prevention and control policy was up-to-date and the IPC measures in place.

The home was working within the principles of the MCA. DoLS were applied for and monitored. The Registered Manager ensured lasting power of attorney documentation was obtained and recorded.

Robust recruitment process was in place and enough staff were deployed to meet people's needs. The Registered Manager regularly reviewed the dependency tool and conducted observations throughout the home, including night visits.

The service was consistently managed and well-led; leaders and the culture they created promoted high-quality, person-centred care. The provider had a clear vision and values; this outlined how best to support people to live happy lives and staff demonstrated these values. Staff regularly have gone above and beyond including fundraising and volunteering.

Comprehensive quality assurance system are in place and learning points cascaded throughout the service. Staff worked well together and told the CQC how the management team were supportive and promoted their development. People, relatives and staff were encouraged to give feedback which was used to make improvements with actions displayed. The home had introduced 'Namaste', a sensory experience for people, which looked at touch, sound and smell. The Registered Manager had also recently completed a mental health first aid course aimed to support staff and had started a project to create a 'safe' area for staff. There are strong partnerships with health and social care professionals.

Participated in Well Led Programme?	Yes	
PAMMS Assessment – Date (Published) / Rating	25/01/2023	Good

Provider Name	Partners4Care Limited	
Service Name	Partners4Care Limited	
Category of Care	Care at Home (Standard)	
Address	Suite 40, Durham Tees Valley Business Centre, Orde Wingate Way, Stockton-on-Tees TS19 0GA	
Ward	n/a	
CQC link	https://api.cqc.org.uk/public/v1/reports/fcfeed98-5063-4b8e-9c4d-6c69425388be?20230623120000	
	New CQC Rating	Previous CQC Rating
Overall	Requires Improvement	Good
Safe	Requires Improvement	Good
Effective	Not inspected	Good
Caring	Not inspected	Good
Responsive	Not inspected	Good
Well-Led	Requires Improvement	Good
Date of Inspection	4 th , 5 th , 11 th , 15 th & 16 th May 2023 (focused inspection)	
Date Report Published	23 rd June 2023	
Date Previously Rated Report Published	9 th July 2021	
Breach Number and Title		
<p><u>Regulation 17 HSCA RA Regulations 2014 Good Governance</u></p> <ul style="list-style-type: none"> The provider had failed to keep complete accurate and up-to-date records relating to medicine management. The provider's quality assurance systems had failed to identify the concerns found during inspection. 		
Level of Quality Assurance & Contract Compliance		
Level 2 – Moderate Concerns (Supportive Monitoring)		
Level of Engagement with the Authority		
<p>The Partners4Care management team have a positive relationship with the Quality Assurance & Compliance (QuAC) Officer, maintaining honest and open communications and responding to requests for information in a timely manner.</p> <p>The provider has engaged well with the Transformation Team attending Provider Forums, Leadership meetings and participated in some engagement sessions, and has also linked in for support with International Students.</p>		

Supporting Evidence and Supplementary Information

The inspection was carried out due to a number of concerns the CQC received in relation to staff training, particularly around medicines, timing of calls, staff welfare and the attitude of office staff. The CQC undertook a focused inspection in the 'Safe' and 'Well-Led' domains.

The overall rating for the service has changed from 'Good' to 'Requires Improvement' based on the findings of the inspection.

The inspection found medicines were not always managed safely, some medications were missed or administered with less than the required gap between doses due to calls being scheduled too close together, there was no guidance in place for 'when required' / variable medications, and administration records were not always complete for patch applications. Staff had been training in the safe handling of medication, however, the provider failed to ensure regular competency checks were conducted and medication audits had not been completed regularly, therefore issues were not being identified or acted on. The provider responded immediately during and after the inspection.

The provider struggled to ensure all calls were on time and people often had different staff to support them. The provider had ongoing issues with staff turnover. The provider assured the CQC they were doing everything possible to recruit and retain staff, staff were recruited safely, and appropriate pre-employment checks were carried out. New staff had access to an improved induction programme and shadowed experience colleagues until they were confident to work alone. The CQC recommends the provider review the way in which late calls and changes to staff are communicated to people to minimise distress.

Risks to people were identified, assessed and measures put in place to minimise risks and care plans, included information on the steps staff should take to meet people's needs.

The CQC found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

The Registered Manager and staff understood their responsibilities in relations to safeguarding.

Staff received training in Infection Prevention Control and were provided with appropriate PPE.

Participated in Well Led Programme?	No	
PAMMS Assessment – Date (Published) / Rating	13/07/2021	Requires Improvement

Provider Name	Voyage 1 Limited	
Service Name	Saxon Lodge	
Category of Care	Learning Disabilities	
Address	South Road, Norton, Stockton-on-Tees TS20 2TB	
Ward	Norton South	
CQC link	https://api.cqc.org.uk/public/v1/reports/dd8c92e5-85a2-4156-808e-58b7e89219f8?20230630120000	
	New CQC Rating	Previous CQC Rating
Overall	Good	Good
Safe	Good	Good
Effective	Not inspected	Good
Caring	Not inspected	Good
Responsive	Not inspected	Good
Well-Led	Good	Good
Date of Inspection	5 th & 7 th June 2023 (focused inspection)	
Date Report Published	30 th June 2023	
Date Previously Rated Report Published	18 th December 2019	
Breach Number and Title		
None.		
Level of Quality Assurance & Contract Compliance		
Level 1 – No Concerns / Minor Concerns (Standard Monitoring)		
Level of Engagement with the Authority		
Saxon Lodge engages with the Quality Assurance and Compliance (QuAC) Officer when required, but engagement with other Local Authority initiatives is minimal.		
Supporting Evidence and Supplementary Information		
<p>The CQC carried out a focused inspection on the domains 'Safe' and 'Well-Led'.</p> <p>The environment was clean, large and spacious, and maintenance of the service is of a good standard. Adaptations were in place to support people to be independent and personalisation was evident throughout.</p> <p>Feedback from visitors and relatives was extremely positive, with relatives and advocates reporting good levels of communication and involvement in care planning and reviews. Staff are familiar with the residents and their needs, and support them to have maximum choice and control of their lives in the least restrictive way possible, and in their best interests. People were supported by staff who understood best practice in relation to the wide range of strengths,</p>		

impairments or sensitivities people with a learning disability have. Staff promoted equality and diversity, and provided culturally appropriate, person-centred care. They communicated with people in the way they preferred and consistently understood individual communication needs.

Staff have the right skills, experience and training, and there were appropriate staffing levels to provide safe care. The care people received reflected their range of needs, wishes and preferences, including their capacity, and activities were planned with the same focus. Residents were encouraged to access the community, and where there were shared interests, people went out together. People led inclusive and empowered lives because of the ethos, values, attitudes and behaviours of the management and staff.

People were supported to access healthcare and ensured they received timely care and support. Medicines are managed safely and administered as prescribed by trained staff. The service was working within the principles of the MCA and, if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

The Registered Manager had the skills, knowledge and experience to perform their role, and a clear understanding of people's needs and oversight of the services they managed. Appropriate policies and procedures were in place, and the service was committed to a culture of improvement and regularly sought feedback.

Participated in Well Led Programme?	No (not available for LD services)	
PAMMS Assessment – Date (Published) / Rating	03/10/2019	Good

PRIMARY MEDICAL CARE SERVICES

Provider Name	Dr Baber Khan	
Service Name	The Dental Healthcare Centre and Cleveland Cosmetic and Dental Implant Clinic	
Category of Care	Dentists	
Address	21 Wellburn Road, Fairfield, Stockton-on-Tees TS19 7PP	
Ward	Fairfield	
CQC link	https://api.cqc.org.uk/public/v1/reports/eb9e992b-6e6a-4d88-8a80-ed283de0b5f6?20230406070043	
	New CQC Rating	Previous CQC Rating*
Overall	Not rated	n/a
Safe	No Action	n/a
Effective	Not inspected	n/a
Caring	Not inspected	n/a
Responsive	Not inspected	n/a
Well-Led	Enforcement Action	n/a
Date of Inspection	30 th January 2023 (focused inspection)	
Date Report Published	6 th April 2023	
Date Previous Report Published	6 th October 2012 (* different provider)	
Further Information		
<p>The provider has two dental practices – this report is about The Dental Healthcare Centre and Cleveland Cosmetic and Dental Implant Clinic which provides private dental care and treatment for adults and children.</p> <p>This focused inspection was led by a CQC inspector who was supported by a specialist dental advisor. Key findings were:</p> <ul style="list-style-type: none"> • The dental clinic appeared clean and well-maintained. • The practice had infection control procedures. Minor areas where the provider could improve to reflect guidance were identified. • Staff knew how to deal with medical emergencies. Appropriate medicines and life-saving equipment were not available in-line with recommended guidance (items were ordered following the inspection). • The practice's systems to manage risks for patients, staff, equipment and the premises were ineffective. • Safeguarding processes were in place and staff knew their responsibilities for safeguarding vulnerable adults and children. • The practice's staff recruitment procedures did not reflect current legislation. • Efficient leadership was not evident. 		

- Staff were not fully supported by managers.

Regulations the provider was not complying with were identified. They must:

- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.
- Ensure recruitment procedures are established and operated effectively to ensure only fit and proper persons are employed.

HOSPITAL AND COMMUNITY HEALTH SERVICES
(including mental health care)

Provider Name	South Tees Hospitals NHS Foundation Trust	
Service Name	South Tees Hospitals NHS Foundation Trust	
Category of Care	Hospitals	
Address	The James Cook University Hospital, Middlesbrough TS4 3BW	
Ward	n/a	
CQC link	https://api.cqc.org.uk/public/v1/reports/1f8501d4-8c4f-4f75-85f1-9159d77b609b?20230524080138	
	New CQC Rating	Previous CQC Rating
Overall	Good	Requires Improvement
Safe	Good	Requires Improvement
Effective	Good	Requires Improvement
Caring	Good	Good
Responsive	Good	Good
Well-Led	Good	Requires Improvement
Date of Inspection	8th, 9th, 10th, 17th November 2022 & 10th January 2023 (part insp.)	
Date Report Published	24th May 2023	
Date Previously Rated Report Published	25th May 2022	
Further Information		
<p>South Tees Hospitals NHS Foundation Trust provides acute and community health services to a population of around 1.5 million people living in Middlesbrough, Northallerton and surrounding areas. There are two main hospital sites – The James Cook University Hospital, a regional major trauma centre and tertiary hospital offering a wide range of specialist services, and Friarage Hospital, a busy acute hospital serving a mainly rural population of 135,000. The Trust also operates from several primary care hospitals and community locations.</p> <p>The CQC carried out this unannounced inspection of four of the acute services provided by this Trust to check that the Trust had made improvements since its last inspection in February 2022. The CQC checked that the Trust had taken action to comply with the Warning Notice it served under Section 29A of the Health and Social Care Act following the last inspection which told the Trust to make significant improvements in the quality of healthcare provided.</p> <p>The CQC inspected urgent and emergency care and critical care services at The James Cook University Hospital, and medical wards (including services for older people) and surgery at both The James Cook University Hospital and Friarage Hospital. It also inspected the well-led key question for the Trust overall.</p> <p>The CQC did not inspect end-of-life care, maternity, gynaecology, services for children and young people, outpatients, diagnostics, or community services at the Trust during this</p>		

inspection. The CQC are monitoring the progress of improvements to services and will re-inspect them as appropriate.

The CQCs rating of services improved. The Trust was rated 'good' because:

- The Trust had made significant improvement since the last CQC inspection and throughout the pandemic, particularly in critical care.
- Emergency and urgent care services were rated as 'good'. The CQC rated safe, effective, caring and well-led as 'good', and rated responsive as 'requires improvement'.
- Medical care was rated 'requires improvement'. The CQC rated safe and effective as 'requires improvement', and rated caring, responsive and well-led as 'good' at both hospitals.
- Surgery was rated as 'good' overall at both hospital sites. The CQC rated safe, effective, caring, responsive and well-led as 'good' at both hospital sites.
- Critical care was rated as 'good' overall and in all domains. The safe domain had improved significantly since the last inspection.
- In rating the Trust, the CQC took into account the current ratings of the five services it did not inspect at this time.

The CQC told the Trust that it must take action to bring services into line with 10 legal requirements. This action related to emergency and urgent care services, medical care, surgery and critical care, as well as some Trust-wide requirements.

APPENDIX 2

PAMMS ASSESSMENT REPORTS (for Adult Services commissioned by the Council)

None published.

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PAMMS Care Home Annual Report 2022-2023

Introduction

SBC are utilising the Provider Assessment and Market Management Solutions (PAMMS) in our quality assurance process. PAMMS is an online assessment tool developed in collaboration with Directors of Adult Social Services (ADASS) East and regional Local Authorities. It is designed to assist us assess the quality of care delivered by providers. The assessment is a requirement of the Framework Agreement (the Contract) with providers, and they are contractually obliged to engage with the process.

The PAMMS Assessment

The PAMMS assessment consists of a series of questions over a number of domains and quality standards that forms a risk-based scoring system to ensure equality of approach.

The PAMMS domains are:

- Assessment, Care Planning & Review.
- Service User Experience.
- Staff Knowledge & Understanding.
- Staff Training & Recruitment.
- Environment, Equipment & General Safety; and
- Leadership, Quality Assurance & Management.

Having a clear set of quality standards within PAMMs provides a framework and baseline for assuring the quality of CQC regulated adult services in Stockton-on-Tees. The system ensures that the degree of oversight, monitoring and support is applied in a consistent way across all providers and is a key component utilised in our Quality Assurance Strategy for CQC Regulated Adult Services.

The summary table below details the PAMMS assessments undertaken by the Quality Assurance and Compliance (QuAC) Team throughout 2022-23. They are listed in overall PAMMS rating order and covers contracted care homes on the 'Older Persons Care Home Ranked List' and 2 Mental Health (MH) Care Homes. For comparison and trend analysis, the PAMMS Assessment Summary for 2021-22 is included below.

PAMMS Assessment Summary for Contracted Care Homes

Care Home	Overall PAMMS Rating 22/23	Date Published	Overall PAMMS Rating 21/22	Date Published
The White House	Good	Oct - 22	Good	Dec -21
Chestnut Lodge	Good	Oct - 22	Good	Oct -21
Hadrian Park	Good	Jan - 23	Good	Nov -21
Piper Court	Good	Mar - 23	Good	Mar -22
Primrose Court	Good	Mar - 23	Good	Oct -21
Reuben Manor	Good	Mar - 23	Good	Mar -22
Roseworth Lodge	Good	Mar - 23	Good	Mar -22
Teesdale Lodge	Good	Feb - 23	Good	Nov -21
Wellburn House	Good	Aug - 22	Good	Jun -21
Windsor Court	Good	Jan - 23	Requires Improvement	Feb -22
Allington House	Good	Aug - 22	Good	May -21

Roseville	Good	Sep - 22	Good	Jul -21
The Hollies - MH	Good	Mar - 23	Good	Mar -22
Ayresome Court	Good	Feb - 23	Good	Feb -22
Elton Hall	Good	Oct - 22	Good	Oct -21
The Edwardian- MH	Good	Mar - 23	Good	Mar -22
Greenlodge	Good	Feb - 23	Good	May -21
Millbeck	Requires Improvement	Dec - 22	Good	Jan -22
The Beeches	Requires Improvement	Jan - 23	Good	Oct -21
Cherry Tree	Requires Improvement	Feb - 23	Good	Mar -22
Highfield	Requires Improvement	Sept - 22	Good	Jun -21
Stockton Lodge	Requires Improvement	Aug - 22	Good	Oct -21
Victoria House	Requires Improvement	Nov - 22	Good	Jul -21
Willow View	Requires Improvement	Dec -22	Good	Nov -21
Church View	Requires Improvement	Feb - 23	Requires Improvement	Feb -22
Ingleby	Requires Improvement	Jan - 23	Good	Mar -22
Mandale House	Requires Improvement	Aug - 22	Good	Feb -22
Allison House	Requires Improvement	Mar - 23	Good	Oct -21
The Maple	Requires Improvement	Mar - 23	Requires Improvement	Aug -21
The Poplars	Requires Improvement	Nov - 22	Good	Nov -21
Woodside Grange	Requires Improvement	Mar - 23	Good	Feb -22
Ashwood Lodge	Poor (Home Now Closed)	Jan - 23	Requires Improvement	Oct -21

Key themes from assessments that scored a 'Good' rating.

- Care plans were very comprehensive, clear, concise, and easy to follow with lots of personalised detail, including people's preferences and routines.
- Medication was well managed. Staff had a very polite, patient, and pleasant manner with the residents and checked consent before starting to administer medication.
- Robust processes and procedures in place to ensure safe staff recruitment.
- Staff offered choices to residents and promoted independence.
- Residents spoken with confirmed they were happy with the food provided and were offered a choice of meals each day.
- Residents and their families provided positive feedback.
- There was evidence of a varied activity programme which was being carried out in the home which were tailored to the individual as well as groups.

Key Themes from assessments that scored a 'Requires Improvement or Poor' rating.

- Staff recruitment records were not complete, including gaps in previous employment and missing DBS checks.
- Care Plans lacked consistency in their quality and information recorded. Areas of note were around person centred care, capacity assessments not being completed and staff unable to discuss the principles around Mental Capacity Act (MCA) and resident's individual likes / dislikes and preferences.
- Management of medicines were not observed to be in good order, including staff not checking consent with residents, medicines rooms not being secured, and poor dispensing and recording of PRN and Variable dose medicines.
- There were areas where Infection, Prevention and Control (IPC) procedures were not observed, PPE not being worn as per guidance, waste not disposed of correctly.
- The care home's décor was in need of investment to stop it looking tired.
- Some shortfalls were identified in relation to the provider's contractual compliance regarding staff induction, supervision, and training.

Coordinated approach with NECS Medicines Optimisation Team

Throughout 2022 /23 we undertook a coordinated support approach with providers around the medicine's elements of the PAMMS assessments. NECS Meds Op team are now combining their own provider Annual Assurance Meds Audits with our PAMMS assessments, and we are utilising their knowledge and expertise as 'experts by experience' and they are providing evidence to support the answers around Meds specific questions of the PAMMS inspections.

This combined visit method to supporting providers is focussed on improving the quality and robustness of Meds Management and processes to provide safe care delivery.

Next steps

Following on from a provider PAMMS Assessment, an action plan is developed highlighting those areas identified that need an improvement in quality/ compliance to ensure they are being delivered to a 'Good' standard. The action plans are monitored regularly by the responsible QuAC Officer for progress and will be only signed off as compliant and complete when all identified areas demonstrate and evidence the required level of quality and service delivery.

PAMMS Assessments are shared with CQC to help inform their own intelligence gathering.

The key themes from the PAMMS assessments are shared with the Council's Transformation Managers and Public Health so they can use the evidence to design projects and further interventions to support all care homes improve quality of care.

The PAMMS ratings are provided to social workers who can share with families searching for a care home so they can access up to date information about our view of quality.

A new PAMMS assessment programme is currently being finalised for 2023/24.

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Agenda Item

Adult Social Care and Health Select Committee

19 September 2023

PROGRESS UPDATE ON PREVIOUSLY AGREED RECOMMENDATIONS – REVIEW OF CARE HOMES FOR OLDER PEOPLE

Summary

Members are asked to consider the evidence and assessment of progress contained within the attached Progress Update on the implementation of previously agreed recommendations in relation to the review of Care Homes for Older People (the final report of which can be accessed via the following link (see item CAB 105/19): <http://www.egenda.stockton.gov.uk/aksstockton/users/public/admin/kab12.pl?cmte=CAB&meet=214&arc=71>).

Detail

1. Following the Cabinet consideration of scrutiny reports, accepted recommendations are then subject to a monitoring process to track their implementation.
2. Two main types of report are used. Initially this is by means of Action Plans detailing how services will be taking forward agreed recommendations. This is then followed by a Progress Update report approximately 12 months after the relevant Select Committee has agreed the Action Plan (unless requested earlier). Evidence is submitted by the relevant department together with an assessment of progress against all recommendations. Should members of the Select Committee agree, those recommendations which have reached an assessment of '1' are then signed off as having been completed.
3. If any recommendations remain incomplete, or if the Select Committee does not agree with the view on progress, the Select Committee may ask for a further update.
4. The assessment of progress for each recommendation should be categorised as follows:

1	Achieved (Fully)	The evidence provided shows that the recommendation has been fully implemented within the timescale specified.
2	On Track (but not yet due for completion)	The evidence provided shows that implementation of the recommendation is on track but the timescale specified has not expired.

3	Slipped	<p>The evidence shows that progress on implementation has slipped.</p> <p>An anticipated date by which the recommendation is expected to become achieved should be advised and the reasons for the delay.</p>
4	Not Achieved	<p>The evidence provided shows that the recommendation has not been fully achieved.</p> <p>An explanation for non achievement of the recommendation would be provided.</p>

5. To further strengthen the monitoring process, from August 2020, the Progress Update report will also include references on the evidence of impact for each recommendation.
6. For Progress Update reports following the completion of a review, the relevant Link Officer(s) will be in attendance.
7. **Appendix 1** (Review of Care Homes for Older People) sets out the outstanding recommendations for this Committee. Members are asked to review the update and indicate whether they agree with the assessments of progress.

Name of Contact Officer: Gary Woods
Post Title: Senior Scrutiny Officer
Telephone No: 01642 526187
Email Address: gary.woods@stockton.gov.uk

APPENDIX 1

Progress Update – Review of Care Homes for Older People

SCRUTINY MONITORING – PROGRESS UPDATE	
Review:	Care Homes for Older People
Link Officer/s:	Emma Champley
Action Plan Agreed:	July 2020

Updates on the progress of actions in relation to agreed recommendations from previous scrutiny reviews are required approximately 12 months after the relevant Select Committee has agreed the Action Plan. Progress updates must be detailed, evidencing what has taken place regarding each recommendation – a grade assessing progress should then be given (see end of document for grading explanation). Any evidence on the impact of the actions undertaken should also be recorded for each recommendation.

Recommendation 6:	That all care homes be required to work towards Dementia Friendly accreditation as part of the new contract arrangements.
Responsibility:	Yvonne Cheung
Date:	March 2022
Agreed Action:	<p>18) Target group of 5 homes are used to act as pathfinders for implementing the dementia guide and to service as ambassadors for other homes.</p> <p>19) Deliver further Positive Approach to Care (PAC) training to reinforce good practice in the dementias guide.</p>
Agreed Success Measure:	<ul style="list-style-type: none"> • PAC post training evaluation. • Review of impact of dementia guide.
Evidence of Progress (May 2021):	<p>18) Following a launch event in November 2019, 6 care homes showed their interest in working towards dementia friendly. Two care homes completed the guide as a baseline and were planning to make more improvement. Although the project has been suspended due to restrictions and change in priorities caused by the COVID-19 Pandemic, 2 additional care homes have started making their homes more dementia friendly.</p> <p>Allison House have made their physical environment dementia friendly and introduced comprehensive falls management plan. Woodside Grange has also made extensive changes to its physical environment. The Manager stated that the residents really enjoy the activities in various newly decorated rooms and staff are happy that they have been involved in the transformation.</p> <p>19) Planning for a bespoke PAC training programme for care homes (shorter sessions for care staff) before the first lockdown. TEWV (provider) has suspended all face-to-face training in March 2020. The development of a virtual training programme is being trialled in Durham and waiting for approval from TEWV and Teepa Snow (training company). Due to limited</p>

APPENDIX 1

Progress Update – Review of Care Homes for Older People

	staff capacity, TEWV needs to deliver the remaining 2 training sessions for SBC staff before starting the training programme for care homes.
Assessment of Progress (May 2021): (include explanation if required)	3 (Slipped)
Evidence of Impact (May 2021):	Allison House recorded significant reduction in number of falls following changes to the environment and introduction of a falls management plan.
Evidence of Progress (December 2021):	18) Homes that originally signed up to implement the Dementia guide have continued to implement the standards. Although Allison House has a new manager in post, they are following the practice and environmental guidelines within the guide. Woodside Grange continue to ensure the environment is dementia friendly. 19) PAC training is currently on hold until January 2022. This was due to the impact of COVID, including access to venues and restricted numbers.
Assessment of Progress (December 2021): (include explanation if required)	18) 3 (Slipped) 19) 3 (Slipped)
Evidence of Impact (December 2021):	Allison House: Their Monthly review of Datix, their reporting system for incidents shows slips trips and falls continue at the reduced rate identified in the last review.
Evidence of Progress (June 2022):	18) White House and Allington House are working towards completing the Dementia Guide and achieving the dementia friendly accreditation. 19) Whilst it is anticipated delivery of the sessions will be delayed due to backlog caused by COVID and staffing issues the PAC training programme has now Restarted.
Assessment of Progress (June 2022): (include explanation if required)	18) 2 (On-Track) 19) 3 (Slipped)
Evidence of Impact (June 2022):	18) White House and Allington House have taken their residents to join activities organised by the Stockton Dementia Network during the Dementia Action Week. Feedback from the residents and staff were very positive. Recent visit to the White House showed that all staff have awareness of dementia and they have applied principle of dementia friendly environment around the home. Relatives of 2 residents with dementia in Woodside Grange stated that they have made significant improvement in behaviour since moving into the care home and it is all down to the staff knowing how to work with someone with dementia, the physical environment and a variety of activities offered.

APPENDIX 1

Progress Update – Review of Care Homes for Older People

Evidence of Progress (February 2023):	<p>18) White House and Mandale House have been accredited as dementia friendly and the Council is actively working with Highfield, Ingleby and Woodside Grange.</p> <p>19) PAC training now in place. 2 remaining planned sessions of PAC training programme were delivered to SBC staff in September/December. However, due to staffing issues with TEWV, they have no capacity to deliver the sessions at present. SBC will continue to liaise with TEWV to ensure further sessions are scheduled once staff resources are available.</p>
Assessment of Progress (February 2023): (include explanation if required)	<p>18) 1 (Fully Achieved)</p> <p>19) 1 (Fully Achieved)</p> <p><i>With reference to action 19 and the stated staffing issues within Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV) which were prohibiting the future delivery of Positive Approach to Care (PAC) training, the Committee was keen that this was not allowed to fall by the wayside. The Council was encouraged to continue pushing the need for this training with TEWV, and a further update on developments would therefore be required later in 2023 (note: assessment of progress grade to be amended from 'fully achieved' to 'slipped').</i></p>
Evidence of Impact (February 2023):	Several Care homes have taken their residents to attend dementia friendly activities in the community such as the Happy Hippy Shake Tea Dance at ARC and Monthly Sing Along at the Globe.
Evidence of Progress (September 2023):	<p>18) The Dementia Friendly Care Homes Project restarted in 2022 after a COVID delay. We have seen a growth in care homes are taking part in the project during 23/24, including Willow View Care Home, Cherry Tree Care Centre, Hadrian Park and Mandale House.</p> <p>19) Through the BCF, we have commissioned Hand-in-Hand ULO (a non-profit making organisation) to deliver PAC for staff in care homes for older people, mental health and learning disabilities (TEWV did not have the capacity to deliver the Positive Approach to Care training). Starting in September (21/9/23 and 25/9/23 already in the diary) we will deliver 20 half day sessions for care staff and 4 full days sessions for managers and senior staff will be delivered in 12 months.</p>
Assessment of Progress (September 2023): (include explanation if required)	<p>18) 1 (Fully Achieved)</p> <p>19) 1 (Fully Achieved)</p>
Evidence of Impact (September 2023):	18) In total, 7 care homes have been accredited as being dementia friendly. White House, Maple, Ingleby and Rosedale were accredited in 22/23. Roseville, Woodside Grange and Beeches were accredited in 23/24.

Assessment of Progress Gradings:	1 Fully Achieved	2 On-Track	3 Slipped	4 Not Achieved
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**North East and
North Cumbria**

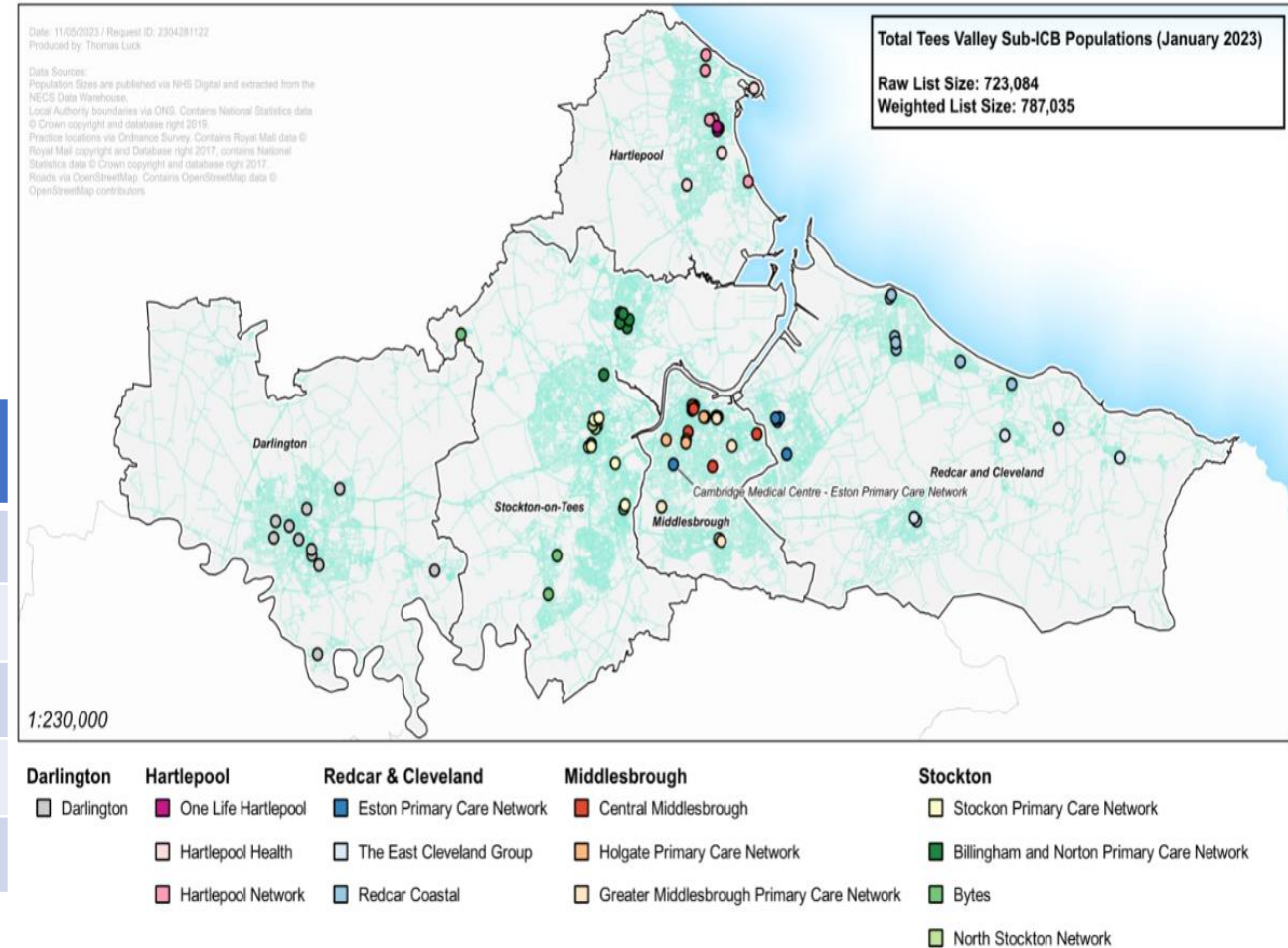
Primary Care Access: Brief Overview

Emma Joyeux – Commissioning Lead, Primary Care

Overview of general practice in Tees Valley (as of Jan 2023)

- 5 Local Authority areas
- 78 Practices
- 14 Primary Care Networks (PCNs)
- Tees Valley patient population 723,084

Locality	No. of practices	Smallest list size	Largest list size	Average list size	Number of PCNs
Hartlepool	11	3,806	18,728	8,865	3
Stockton	21	2,303	21,555	9,808	4
Darlington	11	4,718	15,302	10,185	1
Middlesbrough	20	751	20,117	8,125	3
Redcar	15	3,342	14,615	8,530	3



GMS/PMS/APMS Contract

- Practices must provide essential services at such times, within core hours, as are appropriate to meet the reasonable needs of its patients
- Core hours are 8.00am until 6.30pm, Monday to Friday, except Good Friday, Christmas Day or bank holidays
- Practices must also keep aside appointments for NHS 111 to book
- Practices must offer and promote online consultations and video consultations

Primary Care Network Contract Directed Enhanced Services (DES)

- **Enhanced access** – from 1st October 2022 each Primary Care Network (PCN) is required to provide 60 minutes of additional General Practice Capacity per 1,000 Adjusted Population between 6.30pm – 8.00pm on weekday evenings and 9.00am - 5.00pm on Saturdays
- **Investment and Impact Fund (IIF)** - Points based scheme similar to Quality and Outcomes Framework (QoF). Redesigned for 23/24 to focus on 5 indicators worth £59 million nationally
 - Remaining IIF put in to a ‘capacity and support payment and the ‘capacity and access improvement payment’, which is a combined total of £246m nationally
 - 70% of the funding is paid unconditionally to PCNs [Avg £11.5k per PCN]
 - 30% of the funding is paid on the basis of a local capacity and access plan covering; patient experience of contact, ease of access and demand management and accuracy of recording in appointment books

Enhanced Access

Patients registered at GP practice	Opening times and location of Enhanced Access provision		
Marsh House Medical Centre Kingsway Medical Centre Roseberry Practice Queenstree Practice Melrose Medical Centre Dr Rasool Norton medical Centre	Monday to Friday	18:30 - 21:00	Abbey Health Centre
	Saturday	09:00 – 17:00	Norton Medical Centre
Eaglescliffe Medical Practice Park Lane Surgery Yarm Medical Practice Thornaby & Barwick Medical Group Queens Park Medical Centre Tennant Street Medical Practice Alma Street Medical Practice Woodlands Family Medical Centre Dovecot Surgery Densham Surgery Riverside Practice Arrival Medical Practice Elm Tree Surgery Woodbridge Medical Practice	Monday to Friday	18:30- 21:00	Tennant Street and Woodbridge (Ingleby Barwick site)
	Saturday	09:00-17:00	Tennant Street and Woodbridge [Ingleby Barwick site)
	Sunday	09:00 – 17:00	Eaglescliffe

Primary care appointment activity

Stockton practices	April 2023	May 2023	June 2023
Total number of appointments	73,727	83,357	89,189
Average appointments per 1,000 population	357.9	405.1	433.0
% of appointments where the time between booking and the date of the appointment was either same day or 1 day	46%	45.6%	44.5%
% of appointments where the time between booking and the date of the appointment was over 2 weeks	38%	38.5%	38.6%
% of appointments categorised as face to face	84.9%	85%	84.2%
% of appointments categorised as telephone or video	12.4%	12%	12.9%

Urgent and emergency care contacts	June 2023
A&E attendances	3,430
Emergency admissions	2,285
Urgent Care Centre contacts	5,189

GP Patient Survey 2023 – Stockton results

- 52% of patients surveyed found it easy to get through to someone at their GP practice on the phone (National average is 50%). Range 9% - 98%
- 89% of patients surveyed found the receptionists helpful (Nat. av. 82%). Range 70% - 99%
- 59% of patients surveyed were satisfied with the GP appointment times available to them (Nat. av. 53%). Range 26% - 93%
- 77% of patients surveyed were satisfied with the appointment(s) offered (Nat. av. 72%). Range 54% - 96%
- 62% of patients surveyed would describe their experience of making an appointment as good (Nat. av. 54%). Range 41% - 96%
- 78% of patients surveyed would describe their overall experience of their GP practice as good (Nat. av. 71%). Range 51% - 99%

Causes of access challenges

- Covid ways of working – total triage
- Staff sickness and isolations
- Back log of care - long term condition management
- Continued high-level demand for same-day access
- Public health concerns in press e.g. mpox, Strep A
- Increased call waiting times
- Patient frustrations leading to increased complaints
- Increased abuse to practice staff
- Recruitment and retention difficulties
- Estates limitations



Practice workforce

- June 2023 workforce data from NHS Digital:
 - 152 GPs (131.18 WTE)
 - 94 Nurses (66.09 WTE)
 - 49 Direct Patient Care (37.91 WTE)
 - 369 Admin/ Non-Clinical (275.22 WTE)
- Practices work as a Multi-Disciplinary Team [MDT] and these figures provide a snapshot of the workforce data for the roles outlined
- Workforce data can fluctuate month to month and this data should be looked at in conjunction with the Primary Care Network additional roles workforce

Increased PCN workforce

- PCNs can claim funding [Additional Role Reimbursement Scheme- ARRS] to bring in a new workforce to support primary care to ensure a multi-disciplinary approach
- Staff funded through ARRS must be to support the DES requirements and be in addition to current practice workforce
- PCNs across Tees Valley have employed/ engaged 303 ARRS staff (277.17 WTE) as at the end of Q1 [June 23] from the roles available
 - Stockton- on-Tees- 61 headcount (58.04 WTE)

Links to key documents

- National GP contract: <https://www.england.nhs.uk/gp/investment/gp-contract/>
- National PCN DES contract: [NHS England » Network Contract DES – contract specification for 2023/24 – PCN requirements and entitlements](#)
- Access Recovery Plan: [NHS England » Delivery plan for recovering access to primary care](#)
- Capacity and Access guidance: [NHS England » Network Contract DES – capacity and access improvement payment for 2023/24](#)

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Adult Social Care and Health Select Committee
Review of Access to GPs and Primary Medical Care
Outline Scope

Scrutiny Chair (Project Director): Cllr Marc Besford	Contact details: marc.besford@stockton.gov.uk
Scrutiny Officer (Project Manager): Gary Woods	Contact details: gary.woods@stockton.gov.uk 01642 526187
Departmental Link Officer: Sarah Bowman-Abouna (SBC: Director of Public Health) Emma Joyeux (NENC ICB: Commissioning Lead – Primary Care)	Contact details: sarah.bowman-abouna@stockton.gov.uk emma.joyeux@nhs.net

<p>Which of our strategic corporate objectives does this topic address?</p> <p>The review will contribute to the following Council Plan 2023-2026 key objectives (and associated 2023-2024 priorities):</p> <p><i>A place where people are healthy, safe and protected from harm</i></p> <ul style="list-style-type: none"> • Support people to live healthy lives and address health inequalities through a focus on early prevention, long-term conditions, substance misuse, smoking, obesity, physical activity and mental health. • ... continue to collaborate with the NHS to ensure health and care services work effectively together. • Work with our communities and partners to develop our approach to healthy places, in the context of regeneration plans and the Health and Wellbeing Strategy.

<p>What are the main issues and overall aim of this review?</p> <p>Accessing the help and advice of General Practitioners (GPs) and other professionals working in primary care general medical practices within the UK has long elicited a range of experiences and, indeed, opinions. Exacerbated by the recent COVID-19 pandemic and its subsequent knock-on effect to all health and care providers, the ability to make contact with and then use such services in the context of changed systems, working practices and workforce capacity has further sharpened views on this topic.</p> <p>Conscious of the ongoing debate around these existing challenges, the Government released a new plan in May 2023 to make it easier for patients to see their GP and, in collaboration with the NHS, recently announced a major new primary care access recovery plan which aims to facilitate faster, more convenient care. Regionally, the North East and North Cumbria Integrated Care Board (NENC ICB) publicised a three-year programme bringing together the NHS and Councils with voluntary, community and social enterprise (VCSE) organisations to tackle long-standing inequalities and poor health, an investment which included extra support for the 'Deep End' network of GP practices in the region's most deprived communities, and steps to attract and</p>

retain more GPs to work in deprived areas, with extra training and support to encourage trainee doctors to build their careers in these practices.

Locally, this scrutiny topic was proposed back in February 2022 (though was unable to be undertaken during the 2022-2023 municipal year due to competing work programme demands). At that point, several related concerns were highlighted around processes involved in accessing general practice, including call wait times, the need to complete online questionnaires, and the initial requirement to tell call-handlers of very personal issues before receiving an appointment. Whilst it is acknowledged that work will have taken place in relation to this topic since early-2022, recent national and regional announcements regarding primary care (general practice) access demonstrates the ongoing high-profile nature of what is a key frontline health service.

The aim of this review will be to:

- Understand the existing local 'access to GPs' landscape in the context of national / regional developments around this ongoing issue.
- Ascertain current systems for accessing general practice services, the communication of these to the public, and how effective they are (including any variations across the Borough's providers).
- Determine any areas which may assist in improving the experience of the local population, and practices themselves, when individuals wish to contact and / or access general practice services.
- Share any identified good practice within the Borough's Primary Care Networks (PCNs).

The Committee will undertake the following key lines of enquiry:

What is meant by 'primary care' (including definitions of terminology to be used within the review such as general practice, primary medical care, general practitioners (GPs), etc.)?

How does primary care (general practice) work – how is it commissioned / paid for; what are the contractual mechanisms / expectations? Who are the key stakeholders around the issue of general practice access and what role do they play (individually and in partnership)?

What is, and who decides on, the population density, spread and location of the Borough's practices? How are professionals allocated to practices? Who are practices accountable to / regulated by?

How has access to general practice changed since the COVID-19 pandemic emerged (as a result of either national policy or local decisions)? What systems can the public use to contact their practice; how are these communicated (by who, how, how often)? Do these create barriers to access?

When are practices accessible / open, and how do they manage patient contact (prioritisation / triage)? How effective is this?

What do we know about issues within the Borough – are these confined to specific areas? Do experiences vary when contact is made with practices at different times of the day?

Is there a variation in access according to population characteristic (e.g. disproportionate impact on more deprived, those with disabilities, different ethnic groups, older people)?

How is the public encouraged to raise concerns about access? What mechanisms are in place to report issues and how are these communicated?

Do practices actively seek feedback from its registered patients around access – if so, how has this informed arrangements?

<p>What views do GPs and other practice staff have about access to their expertise? What contact is reasonable when balancing available resources with patient demand, and how has this changed over time?</p> <p>What are the key priorities within nationally published recovery plans for local stakeholders and how are these being implemented? What are the associated opportunities (e.g. reducing demand on hospitals) and challenges / risks?</p>	
<p>Who will the Committee be trying to influence as part of its work?</p> <p>Council, Cabinet, North East and North Cumbria Integrated Care Board (NENC ICB), Primary Care Networks (PCNs), GP Federation, local practices, public.</p>	
<p>Expected duration of review and key milestones:</p> <p>6 months (report to Cabinet in April 2024)</p>	
<p>What information do we need?</p> <p>Existing information (background information, existing reports, legislation, central government documents, etc.):</p> <ul style="list-style-type: none"> • NHS England: Delivery plan for recovering access to primary care, including <i>Implement 'Modern General Practice Access'</i> (May 2023) • Healthwatch: Primary care recovery plan – what does it mean for you and your loved ones? (May 2023) • Royal College of General Practitioners: General practice in crisis: An action plan for recovery. 	
<p><i>Who can provide us with further relevant evidence? (Cabinet Member, officer, service user, general public, expert witness, etc.)</i></p> <p>North East and North Cumbria Integrated Care Board (NENC ICB)</p> <p>Local Medical Committee (LMC)</p> <p>Hartlepool & Stockton Health GP Federation</p> <p>Primary Care Networks (PCNs)</p> <p>Individual Practices</p> <p>Healthwatch</p>	<p><i>What specific areas do we want them to cover when they give evidence?</i></p> <ul style="list-style-type: none"> ➤ National / regional context (recovery plans) ➤ Existing Primary Care arrangements ➤ Borough's current GP provision / contracts ➤ Patient feedback / complaint handling ➤ Current / future challenges re. GP access <p> } <ul style="list-style-type: none"> ➤ Views / input on published recovery plans ➤ Engagement with NENC ICB and local PCNs / practices re. access to GPs </p> <ul style="list-style-type: none"> ➤ Current systems for contact / access to GPs (and changes since COVID-19) ➤ Existing issues / opportunities re. GP access ➤ Patient feedback / complaint handling (e.g. Patient Participation Group (PPG)) ➤ Local population feedback re. GP access

<p>Residents of the Borough</p>	<ul style="list-style-type: none"> ➤ Experiences of contacting / accessing local practices ➤ Awareness / understanding of local services and ways to report access issues
<p>How will this information be gathered? (eg. financial baselining and analysis, benchmarking, site visits, face-to-face questioning, telephone survey, survey)</p> <p>Committee meetings, reports, research, reviewing existing service feedback.</p>	
<p>How will key partners and the public be involved in the review?</p> <p>Committee meetings, information submissions, analysis of historical feedback on services.</p>	
<p>How will the review help the Council meet the Public Sector Equality Duty?</p> <p>The Public Sector Equality Duty requires that public bodies have due regard to the need to advance equality of opportunity and foster good relations between different people when carrying out their activities. This review will be mindful of these factors.</p>	
<p>How will the review contribute towards the Joint Strategic Needs Assessment, or the implementation of the Health and Wellbeing Strategy?</p> <p><u>Stockton Joint Strategic Needs Assessment (JSNA)</u>: The review outcomes will support context and action on access to primary care. Access to services forms part of the JSNA process, in informing the Joint Health and Wellbeing Strategy.</p> <p><u>Stockton-on-Tees Joint Health and Wellbeing Strategy 2019-2023</u>: The review outcomes will support and inform delivery of the Strategy through informing work on access to primary care. Primary care is an important part of the health and wellbeing system.</p>	
<p>Provide an initial view as to how this review could lead to efficiencies, improvements and/or transformation:</p> <ul style="list-style-type: none"> • Better understanding of primary care / GP pressures. • Helping optimise appropriate use of primary care by the public. • Encouraging that feedback on general practice access is done in a respectful / informed way. • Understanding and addressing inequitable access across communities. • Input of communities to work on improving access to general practice. 	

Project Plan

Key Task	Details / Activities	Date	Responsibility
Scoping of Review	Information gathering	August 2023	Scrutiny Officer, Link Officer
Tri-Partite Meeting	Meeting to discuss aims and objectives of review	25.08.23	Select Committee Chair and Vice Chair, Cabinet Member(s), Director(s), Scrutiny Officer, Link Officer
Agree Project Plan	Scope and Project Plan agreed by Committee	19.09.23	Select Committee
Publicity of Review	Determine whether Communications Plan needed	TBC	Link Officer, Scrutiny Officer
Obtaining Evidence		24.10.23 21.11.23 19.12.23 23.01.24	Select Committee
Members decide recommendations and findings	Review summary of findings and formulate draft recommendations	20.02.24	Select Committee
Circulate Draft Report to Stakeholders	Circulation of Report	February 2024	Scrutiny Officer
Tri-Partite Meeting	Meeting to discuss findings of review and draft recommendations	TBC	Select Committee Chair and Vice Chair, Cabinet Member(s), Director(s), Scrutiny Officer, Link Officer
Final Agreement of Report	Approval of final report by Committee	19.03.24	Select Committee, Cabinet Member, Director
Consideration of Report by Executive Scrutiny Committee	Consideration of report	[07.05.24]	Executive Scrutiny Committee
Report to Cabinet / Approving Body	Presentation of final report with recommendations for approval to Cabinet	18.04.24	Cabinet / Approving Body

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ADULT SOCIAL CARE AND HEALTH SELECT COMMITTEE
Work Programme 2023-2024

Date (4.00pm unless stated)	Topic	Attendance
20 June (1.00pm) (informal)	Scrutiny Training	Scrutiny Team
18 July	Overview Report: SBC Adults, Health and Wellbeing CQC / PAMMS Quarterly Update: Q4 2022-2023 Regional / Tees Valley Health Scrutiny Update Minutes of the Health and Wellbeing Board (February & March 2023)	Cllr Ann McCoy / Cllr Steve Nelson / Carolyn Nice / Emma Champley / Sarah Bowman-Abouna Darren Boyd
19 September	Healthwatch Stockton-on-Tees: Annual Report 2022-2023 CQC / PAMMS Quarterly Update: Q1 2023-2024 PAMMS Annual Report (Care Homes): 2022-2023 Monitoring: Progress Update – Care Homes for Older People Review of Access to GPs and Primary Medical Care <ul style="list-style-type: none"> • Background Briefing • (Draft) Scope & Project Plan 	Peter Smith Darren Boyd Darren Boyd Rob Papworth Sarah Bowman-Abouna / Emma Joyeux
24 October	Review of Access to GPs and Primary Medical Care <ul style="list-style-type: none"> • TBC Monitoring: Progress Update – Day Opportunities for Adults Well-Led Programme Update Regional / Tees Valley Health Scrutiny Update Minutes of the Health and Wellbeing Board (May, June & July 2023)	TBC TBC Julie Nisbet
21 November	CQC / PAMMS Quarterly Update: Q2 2023-2024 Review of Access to GPs and Primary Medical Care <ul style="list-style-type: none"> • TBC North Tees and Hartlepool NHS Foundation Trust (NTHFT): Maternity Services Update (TBC)	TBC TBC
19 December	CQC State of Care Annual Report 2022-2023 (TBC)	TBC

ADULT SOCIAL CARE AND HEALTH SELECT COMMITTEE Work Programme 2023-2024

Date (4.00pm unless stated)	Topic	Attendance
	Review of Access to GPs and Primary Medical Care <ul style="list-style-type: none"> • TBC 	TBC
23 January 2024	Teeswide Safeguarding Adults Board (TSAB): Annual Report 2022-2023 (TBC)	TBC
	Review of Access to GPs and Primary Medical Care <ul style="list-style-type: none"> • TBC 	TBC
20 February	CQC / PAMMS Quarterly Update: Q3 2023-2024	
19 March	North Tees and Hartlepool NHS Foundation Trust (NTHFT): Quality Account (TBC)	TBC

2023-2024 Scrutiny Reviews

- Access to GPs and Primary Medical Care
- Adult Safeguarding

Monitoring Items

- Care Homes for Older People – Sep 23
- Day Opportunities for Adults (Progress Update) – Oct 23
- Care at Home (Progress Update) – TBC

Performance and Quality of Care (standing Items)

- SBC Adults, Health and Wellbeing – Overview Report
- SBC Director of Public Health – Annual Report
- SBC PAMMS (Care Homes) – Annual Report
- Healthwatch Stockton-on-Tees – Annual Report
- Care Quality Commission (CQC) – State of Care Annual Report
- Teeswide Safeguarding Adults Board (TSAB) – Annual Report
- North Tees and Hartlepool NHS Foundation Trust (NTHFT) – Quality Account

Regular Reports

- 6-monthly Adult Care Performance Reports (including complaints/commendations) (new format tbc)
- 6-monthly Public Health Performance Reports (new format tbc)
- Regional / Tees Valley Health Scrutiny – Updates
- Care Quality Commission (CQC) / PAMMS – Quarterly Inspection Updates
- Health and Wellbeing Board – Minutes
- Quality Standards Framework (QSF) for Adult Services (new format tbc)

Other Reports (as required)

- Healthwatch Stockton-on-Tees – Enter and View Reports
- Care Quality Commission (CQC) – Inspection Reports (by email / by exception at Committee)