

Date: Tuesday 24 October 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 ClarkCllr John CoulsonCllr Lynn HallCllr Susan ScottCllr Vanessa SewellCllr Paul Weston

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 19 September 2023.	(Pages 9 - 16)
5	Well-Led Programme - Update	(Pages 17 - 30)
6	Monitoring the Impact of Previously Agreed Recommendations - Day Opportunities for Adults	
	Progress report for the previously completed Day Opportunities for Adults review.	(Pages 31 - 40)
7	PAMMS Annual Report (Care Homes) - 2022-2023	(Pages 41 - 44)
8	Scrutiny Review of Access to GPs and Primary Medical Care	
	To consider information on this scrutiny topic from the North East and North Cumbria Integrated Care Board (NENC ICB) (to follow).	



Adult Social Care and Health Select Committee

Agenda

9	Regional Health Scrutiny Update	(Pages 45 - 68)
10	Minutes of the Health and Wellbeing Board	(Pages 69 - 78)
11	Chair's Update and Select Committee Work Programme 2023-2024	(Pages 79 - 80)



Adult Social Care and Health Select Committee

Agenda

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 Harrsion 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

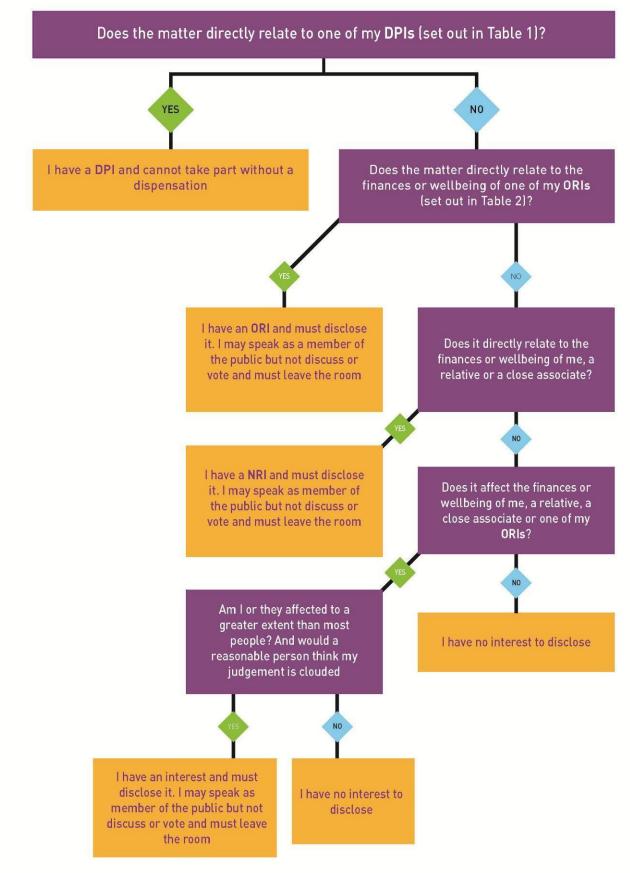




Table 1 - Disclosable Pecuniary Interests

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	
Contracts	 (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

Agenda Item 1

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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Agenda Item 4

ADULT SOCIAL CARE AND HEALTH SELECT COMMITTEE

A meeting of Adult Social Care and Health Select Committee was held on Tuesday 19 September 2023.

Present:	Cllr Marc Besford (Chair), Cllr Nathan Gale (Vice-Chair), Cllr John Coulson, Cllr Lynn Hall and Cllr Vanessa Sewell.	
Officers:	Sarah Bowman-Abouna, Rob Papworth (A,H&W) and Gary Woods (CS).	
Also in attendance:	Peter Smith (Healthwatch Stockton-on-Tees) and Emma Joyeux (North East and North Cumbria Integrated Care Board)	
Apologies:	Cllr Carol Clark, Cllr Susan Scott and Cllr Paul Weston.	

ASCH/9/23 Evacuation Procedure

The Evacuation procedure was noted.

ASCH/10/23 Declarations of Interest

There were no interests declared.

ASCH/11/23 Minutes

Consideration was given to the minutes from the Committee meeting held on 18 July 2023.

Further to the proposal at the conclusion of the 'CQC / PAMMS Inspection Results -Quarterly Summary (Q4 2022-2023)' item, a document charting the number of care providers currently operating across the Borough had subsequently been forwarded and then circulated to Members for information (a hard-copy of which was also tabled at this meeting).

AGREED that the minutes of the meeting on 18 July 2023 be approved as a correct record and signed by the Chair.

ASCH/12/23 Healthwatch Stockton-on-Tees - Annual Report 2022-2023

The Committee considered the Healthwatch Stockton-on-Tees – Annual Report 2022-2023. Local Healthwatch organisations are required to produce an Annual Report setting out their aims and achievements, and this latest document, an overview of which was given by the Chair of Healthwatch Stockton-on-Tees' who was in attendance, included the following:

- Message from our Chair
- About us
- Highlights from our year
- Listening to your experiences
- Advice and information
- Volunteers

- Finance and future priorities
- Statutory statements

With reference to an accompanying presentation which summarised the content of the Annual Report, it was noted that Healthwatch Stockton-on-Tees was commissioned by Stockton-on-Tees Borough Council (SBC) with the aim of understanding the needs and experiences of those who use local services. As an independent champion for people across the Borough, Healthwatch Stockton-on-Tees employ four staff members and have 13 volunteers (Healthwatch Champions) assisting its work.

Priorities and key achievements across the past year were noted, including the initial development of Youthwatch (a platform for young people to have their say about health and care services), involvement with the Integrated Care System (ICS) at a national, regional and local level, and contributions to the Public Health Growing Healthy Stockton-on-Tees consultation. The 10-year Healthwatch celebration event (which the local team led on) was also an important milestone during 2022-2023, as was the implementation of the Healthwatch Hero initiative which highlights individuals whose voice and determination to make a difference has supported improvement of services.

The top three priorities for 2023-2024 were outlined, namely a Growing Older Project (a local review to support a response to the national requirement to improve the planning process for when families can no longer support their family member to stay at home), Pharmacy (involving the Enter and View process), and a rolling programme of coffee mornings (to help reach deprived areas and aid in reducing health inequalities). An array of supporting intentions was also listed, including partnershipworking around the establishment of the new Mental Health Hub, the development of a Healthwatch Heroes cohort, and the continuing evolvement of the role within the ICS, particularly at 'place' (local) level.

Committee comments / questions began with some further probing around the Youthwatch concept. It was stated that a number of meetings had been held to progress this initiative which had included engagement with young people, some of whom had attended Healthwatch Stockton-on-Tees Board meetings. A suggestion was made that there may be benefits in contacting Bright Minds Big Futures (BMBF), a national award-winning youth-led movement, working together with SBC to make the Borough a great place to grow up.

In giving its support for the stated future priorities, the Committee queried whether one of these, namely the rolling programme of coffee mornings, would tap into existing gatherings or involve new opportunities. In response, Members heard that the focus was more on new offers as opposed to those already in existence, though the Chair was happy to discuss this further with Healthwatch colleagues. In related matters, Healthwatch Stockton-on-Tees had recently recruited an individual with specific experience of accessing communities which have traditionally been difficult to engage.

Examining other elements of the future priorities list, the Committee noted that health inequalities were prevalent across all geographic locations, not just within deprived areas, and also commended the intended Enter and View work around pharmacies. In terms of the latter, the recent closure of some of the Borough's services had led to increased pressure on remaining providers – Members felt this should be explored further.

Noting the reference to the new Mental Health Hub, the Committee asked for more detail on its structure and target audience. Developed through Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV) working alongside Catalyst, it would be located in Stockton High Street (Wellington Square) and provide opportunities for early intervention / support and a route into related initiatives. Plans were still developing and further information could be sought if desired. Members drew attention to the impact of the COVID pandemic on young people and felt there was a need for focus on this demographic.

AGREED that the Healthwatch Stockton-on-Tees – Annual Report 2022-2023 be noted.

ASCH/13/23 CQC / PAMMS Inspection Results - Quarterly Summary (Q1 2023-2024)

Consideration was given to the latest quarterly summary regarding Care Quality Commission (CQC) inspections for services operating within the Borough (Appendix 1). 10 inspection reports were published during this period (April to June 2023 (inclusive)), with attention drawn to the following:

Providers rated 'Good' overall (6)

• <u>South Tees Hospitals NHS Foundation Trust</u> (STHFT) had been upgraded from a previous overall rating of 'Requires Improvement'.

• <u>Dale Care – Stockton Home Care</u>, <u>The Poplars Care Home</u>, <u>Hadrian Park</u> and <u>Saxon Lodge</u> had maintained their grading following a previous overall rating of 'Good'.

• Stockton-on-Tees Shared Lived Scheme had not been previously inspected.

Providers rated 'Requires Improvement' overall (3)

• <u>PIPS (Positive Individual Proactive Support) Office</u> (based in Middlesbrough but which provided services within Stockton-on-Tees) had breaches in relation to safe care / treatment and good governance regulations which led to the service being downgraded from their previous overall rating of 'Good'.

• <u>The Robert Atkinson Centre</u> had breaches in relation to good governance and fit / proper persons employed regulations which led to the service being downgraded from the previous overall rating of 'Good'.

• <u>Partners4Care Limited</u> had breaches in relation to good governance regulations which led to the service being downgraded from the previous overall rating of 'Good'.

The remaining report was in relation to <u>The Dental Healthcare Centre and Cleveland</u> <u>Cosmetic and Dental Implant Clinic</u>. The CQC inspects but does not rate dentists, and this report identified enforcement action around the 'Well-Led' domain to ensure good governance and only fit / proper persons were employed. It was subsequently stated that the service had since closed (though this did not seem to be acknowledged on the CQC website).

It was noted that two of the three services receiving a 'Requires Improvement' rating during this quarter were Care at Home providers, a sector which the Committee had extensively reviewed during the 2022-2023 municipal year. An update on the agreed actions in relation to the Committee's final report recommendations was due in early-2024.

Members raised a number of questions around the content of this latest quarterly update. Firstly, it was queried when the CQC would start inspecting the 'Effective',

'Caring' and 'Responsive' domains on a more regular basis. Regarding The Robert Atkinson Centre report, the Committee wondered if the required post-inspection Action Plan had been received by the CQC and whether it was robust enough to improve quality and safety standards. Finally, whilst the CQC had upgraded STHFT to 'Good', it also told it to take action to bring services into line with 10 legal requirements (related to emergency and urgent care services, medical care, surgery and critical care, as well as some Trust-wide requirements) – as such, since the Trust was not meeting legal requirements, how could it be deemed 'Good'? These queries would be relayed to the CQC.

The section on Provider Assessment and Market Management Solutions (PAMMS) inspections (Appendix 2) was noted – there were no reports published during this period (April to June 2023 (inclusive)). However, a copy of a report which should have been included within the previous quarterly update (considered at the last Committee meeting in July 2023) was tabled for information – this was in relation to <u>Primrose</u> <u>Court Nursing Home</u> which had maintained its 'Good' overall rating since the previous inspection which was published in October 2021.

Further to a Committee query raised during consideration of the last quarterly report (Q4 2022-2023) in July 2023, local CQC representatives were approached in relation to clarity around the re-inspection criteria should a provider receive an overall rating of 'Requires Improvement' or 'Inadequate'. It was since confirmed by the CQC that internal work was ongoing with regards to prioritising inspections and the introduction of the Single Assessment Framework and their new ways of working, and that the CQCs approach to inspection remained risk informed.

AGREED that the Care Quality Commission (CQC) Inspection Results – Quarterly Summary (Q1 2023-2024) report be noted and requests for further information be submitted to the CQC.

ASCH/14/23 PAMMS Annual Report (Care Homes) - 2022-2023

Due to illness, the officer who was scheduled to present the PAMMS Annual Report (Care Homes) – 2022-2023 could not be in attendance. As such, it had been agreed by the Chair to defer this agenda item until the next Committee meeting in October 2023.

AGREED that the PAMMS Annual Report (Care Homes) – 2022-2023 agenda item be deferred until the next Committee meeting in October 2023.

ASCH/15/23 Monitoring the Impact of Previously Agreed Recommendations - Care Homes for Older People

Consideration was given to the assessments of progress on the implementation of the recommendations from the Committee's previously completed review of Care Homes for Older People. This was the fifth progress update following the Committee's agreement of the Action Plan in July 2020, with developments in relation to the outstanding agreed action noted as follows:

• <u>Recommendation 6 (That all care homes be required to work towards Dementia</u> <u>Friendly accreditation as part of the new contract arrangements.)</u>: Through the Better Care Fund (BCF), SBC had commissioned Hand-in-Hand ULO (a non-profit making organisation) to deliver Positive Approach to Care (PAC) training for staff in care homes for older people, mental health and learning disabilities (Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV) did not have the capacity to deliver this training as originally envisaged). Starting in September 2023, 20 half-day sessions for care staff (reaching in the region of around 150-200 employees) and 4 full-day sessions for managers / senior staff would be delivered in 12 months.

It was also noted that, in addition to the seven care homes which had already been accredited with dementia friendly status (surpassing the original target group of five), the Council was working with a further five providers to achieve a similar standing.

Reflecting on the progress outlined, the Committee expressed its desire for all providers to reach the required level around the issue of dementia since they cared for some of the most vulnerable people in the sector. In response, officers echoed this ambition and stated that work would continue with the 30+ homes across the Borough so that dementia friendly accreditation would be viewed as the norm rather than the exception.

AGREED that the Care Homes for Older People progress update be noted, the assessment for progress be confirmed, and the overarching Action Plan approved by the Committee following the original review be signed-off as complete (no further updates required).

ASCH/16/23 Scrutiny Review of Access to GPs and Primary Medical Care

Prior to the consideration of the scope and project plan for the Committee's next indepth scrutiny review regarding Access to GPs and Primary Medical Care, a background briefing was provided by the North East and North Cumbria Integrated Care Board (NENC ICB) Commissioning Lead – Primary Care. This included:

- Overview of general practice in Tees Valley (as of January 2023)
- GMS / PMS / APMS Contract
- Primary Care Network Contract Directed Enhanced Services (DES)
- Enhanced Access
- Primary Care appointment activity
- GP Patient Survey 2023 Stockton results
- Causes of access challenges
- Practice workforce
- Increased PCN workforce
- · Links to key documents

During the briefing, several key elements were highlighted including the use of a triage process to assess need and navigate to the most appropriate service, and the primary care appointment activity statistics which, it was stressed, did not demonstrate the number of phone calls to practices. With regards the GP patient survey results, it was cautioned that the response rate was limited and that this represented a mere snapshot at a given time.

Access challenges were focused upon, with ways of working impacted by the COVID pandemic (i.e. digital / online offers significantly accelerated), and the appetite for medical training limited in the context of other career opportunities (something the ICB was trying to address). It was emphasised that GPs were 'generalists' and see people about anything and everything – however, some individuals with more urgent needs were trying to access them instead of more appropriate services.

Links to relevant background context was provided at the conclusion of the briefing, one of which involved the critical delivery plan for recovering access to primary care. The Committee looked forward to exploring this high-profile issue and noted specific interest in enhanced access provision (including within care homes) and the impact of missed appointments.

Consideration was then given to the draft scope and project plan for the Scrutiny Review of Access to GPs and Primary Medical Care. The key aims of this review would 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).

Several contributors had been identified for this work, namely the NENC ICB, Local Medical Committee (LMC), Hartlepool & Stockton Health GP Federation, Primary Care Networks (PCNs), individual practices, Healthwatch, and, crucially, residents of the Borough.

AGREED that the draft scope and project plan of the Access to GPs and Primary Medical Care review be approved.

ASCH/17/23 Chair's Update and Select Committee Work Programme 2023-2024

Chair's Update

The Chair noted the agenda items which were considered at the last Tees Valley Joint Health Scrutiny Committee meeting in July 2023 – these included Tees Valley Breast Care Services, Community Diagnostic Centres, a North East Ambulance Service NHS Foundation Trust (NEAS) response to recent CQC inspection outcomes and an independent review of the Trust, and a TEWV presentation on their Lived Experience / Co-Creation work and the impact of their Lived Experience Directors. The next meeting was scheduled for 6 October 2023 where agenda items were due to cover the implementation of the North East and North Cumbria Integrated Care Strategy (including the role of Integrated Care Partnerships (ICPs)), as well as TEWV updates on Child and Adolescent Mental Health Services (CAMHS) and Respite Provision.

Attention was also drawn to this week's NEAS Annual General Meeting (due to take place in Darlington on 21 September 2023 at 3.00pm) which the Chair would be attending. Members were reminded to use the previously circulated booking link if they too wished to access the AGM – this would be re-issued following the meeting.

Work Programme 2023-2024

Consideration was given to the Committee's current work programme. The next meeting was due to take place on 24 October 2023 and would involve the first main evidence-gathering session for the Access to GPs and Primary Medical Care review. Other scheduled items would include a Well-Led Programme update, the deferred PAMMS Annual Report (Care Homes) – 2022-2023, and the latest update on progress of the agreed actions following the previously completed Day Opportunities for Adults review.

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

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Well Led Leadership Programme

Adults and Health Presentation

Julie Nisbet, Transformation Manager Ben Brown, White House Care Home Sarah Stokes, Springwood





Why?

Well Led Leadership Programme

2018 – 50% of Care Homes had 'Leadership' as Requires Improvement and in, some cases, inadequate. Strategic Commitment

Feedback from Care Home Providers.



It's Not Normal Leadership Development ...



"Someone who is actively developing the skills, confidence, power, relationships and courage to make a positive difference"

(Helen Bevan)

Promotes and supports a new way of doing something.....moving from old to new ways of working; challenging the status quo; being brave with your changes



What?

Well Led Leadership Programme

Innovative and fresh approach to developing strong leadership cross the residential care home sector.

Benefit:

The programme has a person-centred offer and focuses on the individual as a leader rather than the current management programme for care home managers that centre on the role itself.

Values:

A collaboratively developed programme that reinforces compatibility with the values and needs of key stakeholders and the regulatory framework.

Accessibility:

Well Led was designed to be scalable and accessible for all managers: focusing on 4 key elements with Action Learning Sets to ensure it meets the unique needs of the individual participants. Well Led is straight forward to understand which is recognised by the waiting lists we have had since the first programme was completed in 2019/20.

Observability:

The focus on evaluation and impact ensures, both at a personal and organisational level, the results of Well Led are visible to others.



Well Led Leadership Programme



- Stakeholders wrapped around the Care Home Providers.
- Connection to regulation.
- NHS good practice.
- How the ICB collaborate and support leaders in social care.

Well Led Leadership Programme



How?

Collaboration & Co-production between key Stakeholders.



Good Practice – What has worked well?



Regulator – How they work and impact.



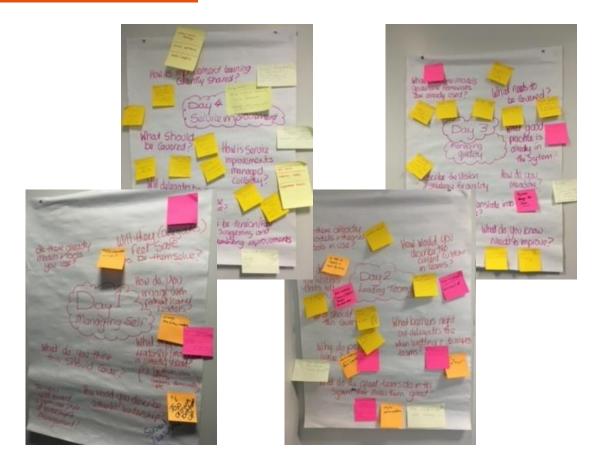
What providers wanted to achieve from the programme.



What happens once the training is over?



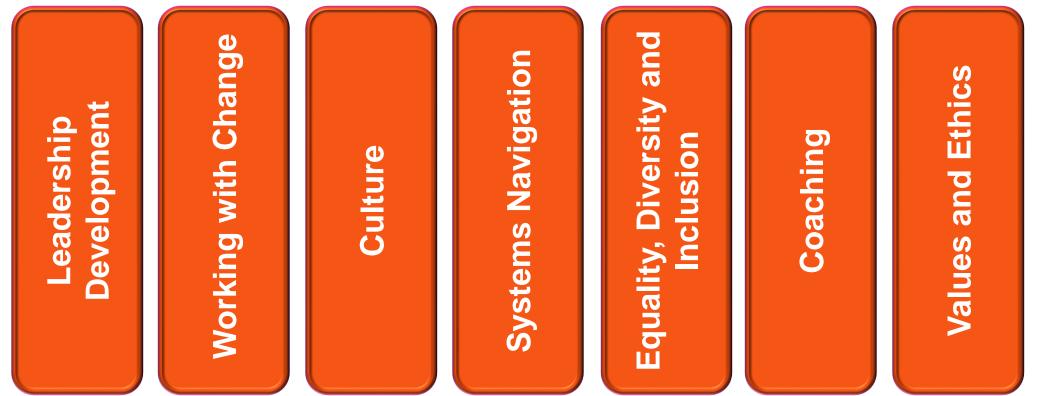
Links to assessment and ratings.





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Solving problems and improving professional practices begins with systematic observations and data collection



Well Led: Leadership Programme for Registered Care Home & Home Care Managers in Stockton on Tees

Impact of 1st and 2nd Cohort 2019-2020

Tracking changes to CQC ratings from the first inspection following participation in the Well Led Programme identified that it had made a tangible difference to managers in the work place and the quality of care offered.

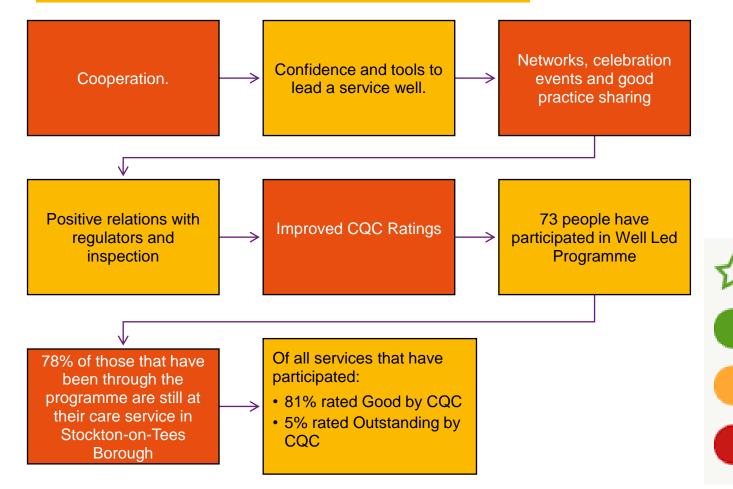
Overall CQC Rating		
Before Well Led Programme	After Well Led Programme	
2 Outstanding	2 Outstanding	
14 Good	20 Good	
8 Requires Improvement	2 Requires Improvement	

'Well Led' Domain of CQC Reports		
Before Well Led Programme	After Well Led Programme	
9 Requires Improvement	3 Requires Improvement. The other 6 providers improved their Well Led domain rating to 'Good'	





Impact 2019 - 2023





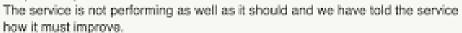
Outstanding

The service is performing exceptionally well.

Good

The service is performing well and meeting our expectations.

Requires improvement



Inadequate

The service is performing badly and we've taken action against the person or organisation that runs it.



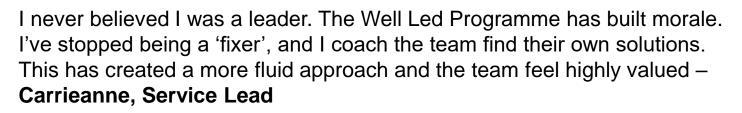


Well Led Leadership Programme

Impact?

I cannot praise this course enough, I feel I manage with new management skills, tackling issues head on and being more direct, when needed. Thank you so much, my job is so much easier and most importantly more enjoyable. One word left WOW!!! I have surprised myself, the impossible is possible – **Joanne, Registered Manager**

I was nervous and lacked confidence. I've since built better relationships with my team, gained confidence and now look forward to what the future holds – **Diane, Service Lead**



What resonates the most with myself was the discovery of Myers Briggs and MBTI. This I feel vital to a successful team and leadership. A great insight on well being. Apart from the actual learning I gained comfort, peace, insight and much appreciated support from fellow learners. We made connections and networked that will benefit ourselves and residents – Lisa, Senior Support Worker

I started to make changes from the first session and morale in the team has gone up. I'm utilising their talents, we've started joining up with other LD services. The Well Led gives you a vision! – **Sarah, Deputy Manager**

I was apprehensive at first, but then surprised at how relevant this was for me. Now I'm not scared of change, I build wellbeing chats into supervisions and I'm redesigning practices – **Julie, Senior Carer**



Previous Cohort – Big Changes

White House Care Home & Springwood

Research in Care Homes

National Institute of Health Research (NIHR)

Collaborative working across care homes

Peer support and workshop groups

Improving staff culture project

SUCCESS VISION

GOALS 🧭

Whole home approach





^wCohort 6 – 2023/24

Supporting Quality Improvement

Current Cohort started September 2023

- 8 Requires Improvement
- 12 Good
- 2 Outstanding

Adapting to the needs of the services and their current situations





Well Led Leadership Programme

What participants had to say





Well Led Leadership Programme

Thank you for your time



Any questions?





Agenda Item 6

Agenda Item

Adult Social Care and Health Select Committee

24 October 2023

PROGRESS UPDATE ON PREVIOUSLY AGREED RECOMMENDATIONS – REVIEW OF DAY OPPORTUNITIES FOR ADULTS

Summary

Members are asked to consider the evidence and assessments of progress contained within the attached Progress Update on the implementation of previously agreed recommendations in relation to the review of Day Opportunities for Adults (the final report of which can be accessed via the following link: https://moderngov.stockton.gov.uk/Data/Cabinet/202205191630/Agenda/att42653.pdf).

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

- 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 Day Opportunities for Adults) sets out the outstanding recommendations for this Committee. <u>Members are asked to review the update and indicate whether they agree with the assessments of progress.</u>

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

SCRUTINY MONITORING – PROGRESS UPDATE		
Review:	Day Opportunities for Adults	
Link Officer/s:	Peter Otter	
Action Plan Agreed:	June 2022	

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). <u>Any evidence on the impact of the actions undertaken should also be recorded for each recommendation.</u>

Recommendation 1:	SBC and its relevant partners continue working with people accessing services and their families / carers to understand demand for both traditional building-based day service provision and community-based activities. This should include:	
	e) Considerations around the potential for assisting with identified transportation needs (e.g. ensuring public / private transport options are accessible and respond to the needs of people who use day opportunities).	
Responsibility:	Licencing / Integrated Strategy and Dev	velopment
Date:	February 2023	
Agreed Action:	Research potential demand for wheelchair accessible vehicles (WAVs) and other needs relating to the use of licensed vehicles to inform future engagement with Stockton Hackney Carriage Association and private hire companies.	Public transport and licensed drivers to be offered training and information sessions to help them respond to the needs of people accessing Adult Social Care.
Agreed Success Measure:	Clear understanding of the needs of people accessing day opportunities in relation to the use / potential use of licensed vehicles.	All licensed trade and bus providers to be offered information and training about the needs of customers accessing day opportunities and the support available to help them respond to those needs.
Evidence of Progress (March 2023):	People accessing Council run day opportunity services have been asked, through their involvement groups, about their experiences of using public and private transport options.	The Council's Licencing Team have reviewed the content of the new applicant knowledge test and have updated this content to include information that will enable drivers to better respond to the needs of people who access day opportunities. This

 Key issues identified included: Taxi Attitude of driver (e.g. being surly, not speaking and not getting out of car to help when needed) Feeling anxious about travelling with a stranger / unsure about social norms Companies sending inaccessible vehicles or being restrictive about where in a vehicle people can sit Drivers asking for money upfront and being uncertain about pricing Availability of Wheelchair Accessible Vehicles and not having up to date information about what companies are available Buses Bus drivers being rude and unhelpful Difficulty getting on and off (e.g. drivers not allowing enough time before driving and not all drivers lowering the bus) Poor standards of cleanliness on buses Problems caused by other passengers who can make people feel uncomfortable Location of bus stands and quality of information about which buses are due when The issues identified have been recorded and are being used to inform future engagement with transport providers. 	 content is based on the issues that people accessing day opportunities have highlighted as important. The new content will be included when the updated knowledge test system is completed in Summer 2023. An information session has been designed to help taxi drivers gain a better understanding of how they can deliver their services to people who use day opportunities. This will include: Voices of people who access day opportunities explaining what makes a difference for them (through a pre-recorded video) Dementia Friends session Guidance on how taxi drivers can deliver their services in a way that is accessible for people who access day opportunities It has been agreed that attendance at this session can count towards the driver's annual mandatory training. Hackney Carriage Association have agreed to promote this session to their members. It is proposed that once the session has been piloted with the Hackney Carriage Association it can be offered to other providers. Initial sessions will be held on 13th, 15th, 28th, 29th and 30th March. An information sheet is being created by the Council's Licencing Team for people who access day opportunities. This sheet, which is expected to be completed by the 13 th March 2023 and will include information about the services people can expect from private hire vehicles, what drivers can't do and what to do when things go wrong. The Teeswide Dementia Friendly Community Network has agreed to provide awareness sessions for bus providers and contact has been made with the relevant team within the

		Council to support engagement with these providers.
Assessment of Progress	1 (Fully Achieved)	3 (Slipped)
(March 2023): (include explanation if required)		Engagement work with bus companies still needs to take place.
Evidence of Impact (March 2023):	As a result of this work there is now a better understanding of the issues people are experiencing when accessing public / private transport services. This information has been used to inform future engagement with transport providers which is being taken forward by the Council's Licensing Team and the Teeswide Dementia Friendly Community Network.	Feedback from involvement and co- production groups to be sought following the implementation of the changes.
Evidence of Progress (October 2023):		The Teeswide Dementia Friendly Community Network have continued to work with the Licensing team and have trained over 500 taxi drivers; no sessions for bus drivers have been completed.
Assessment of Progress		3 (Slipped)
(October 2023): (include explanation if required)		Engagement work with bus companies still needs to take place.
Evidence of Impact (October 2023):		N/A
	f) Changes to the existing budget for SBC in-house and commissioned services.	
Responsibility:	Adult Social Care Financial Services / Finance	
Date:	September 2022	
Agreed Action:	Financial data relating to day opportunities to be reviewed and included in regular data dashboard updates provided to senior managers. Review how financial information relating to Direct Payments is recorded and shared to ensure it is regularly reviewed	
Agreed Success Measure:	Regular summaries of financial position across day opportunities, including direct payments, are provided for Senior Managers within Adult Social Care.	

Evidence of Progress (March 2023):	 Financial data relating to day opportunities has been reported to the Day Opportunities Steering Group by the Council's Finance team to help monitor spending. To enhance the sharing of this information the Council's Information and Intelligence team are now producing a quarterly dashboard that will include data on day opportunities spending. The initial version of this dashboard is expected to be completed in March 2023.
Assessment of Progress (March 2023):	3 (Slipped)
(include explanation if required)	The dashboard is expected to be produced in March 2023.
Evidence of Impact (March 2023):	 As a result of the financial monitoring underspends have been identified in the Community Day Options team and across commissioned services. As a result it has been possible to: Reduce the planned budget for the Community Day Options team for 2023-24 (reflecting reduced demand) Move all commissioned services away from the support offered during the pandemic and back to payments by usage
Evidence of Progress (October 2023):	Dashboard produced in March and shared across the team.
Assessment of Progress (October 2023): (include explanation if required)	1 (Fully Achieved)
Evidence of Impact (October 2023):	N/A

Recommendation 3:	SBC Adults and Health and Children's Services directorates reinforce joint-working to identify and support opportunities that are most meaningful to younger people (including a reflection on any updated results from the Disabled Children's Team online survey), and strengthen the dissemination of information about existing services.
Responsibility:	Children's Services / Day Opportunity providers / Communications Team
Date:	December 2022
Agreed Action:	 Work with Children Services and education settings to improve access to information about options prior to transition through: Open days / sessions within current providers.
	 Working with education providers and Children's Services to support the dissemination of information.
Agreed Success Measure:	Younger people likely to access day opportunities and their families / carers will have had information about day opportunities made available to them prior

APPENDIX 1 PROGRESS UPDATE: Review of Day Opportunities for Adults

	to transitioning into Adult Social Care and the opportunity to visit in-house / commissioned providers.		
Evidence of Progress (March 2023):	A 'Planning for Adulthood' transitions event has been organised to be held at Abbey Hill School on the 23 rd March 2023. The event will provide an opportunity for people to receive information about what day opportunities are available and the options available to people at the point of transition.		
	To support the sharing of information, the content of the promotional materials for Allensway and the Community Day Options team are being updated to provide up-to-date, accurate information about what the teams can offer and how they work. The Council's Communications Team are currently finalising the design of these materials.		
	Drop-in sessions have been organised for both Allensway and Community Day Options. These will provide individuals and their families / informal carers with the opportunity to visit the services and learn more about what they offer prior to their transition into Adult Social Care. The drop-in sessions will be promoted at the transition event and through collaboration with Children's services.		
Assessment of Progress (March 2023):	1 (Fully Achieved)		
(include explanation if required)	With reference to the forthcoming 'Planning for Adulthood' event at Abbey Hill School later in March 2023, Members requested feedback on this as part of the next update on progress that would be required at a future Committee meeting.		
Evidence of Impact (March 2023):	Feedback on transitions will be collected as part of the work of the Council's new Lived Experience Coordinator.		
Evidence of Progress (October 2023):	Representatives from the Adult Social Care teams, as well as Lanark and day services attended a PFA event on the 23 rd March 2023. The event was well received and key staff will attend a follow-up PFA event at Newtown Community Centre on the 27 th November 2023.		
Assessment of Progress (October 2023): (include explanation if required)			
Evidence of Impact (October 2023):	N/A		

APPENDIX 1 PROGRESS UPDATE: Review of Day Opportunities for Adults

Recommendation 4:	SBC to follow-up with Catalyst regarding the views of the wider VCSE sector around future day opportunities involvement (e.g. promotion of / access to existing VCSE activity, potential funding streams, volunteering).
Responsibility:	Catalyst / Stockton-on-Tees Borough Council
Date:	August 2022
Agreed Action:	Regular meetings to be established between Catalyst and relevant officers from the Council to promote involvement of VCSE in the development of local opportunities.
Agreed Success Measure:	Regular meetings taking place between Catalyst and the Council.
Evidence of Progress (March 2023):	Monthly meetings have been taking place between colleagues from Catalyst and officers from the Council to promote collaboration between day opportunity providers and the VCSE sector.
Assessment of Progress (March 2023): (include explanation if required)	1 (Fully Achieved) Whilst accepting that the agreed action in relation to this recommendation was 'fully achieved', Members requested feedback from the stated monthly meetings between SBC and Catalyst as part of the next update on progress that would be required at a future Committee meeting.
Evidence of Impact (March 2023):	 As a result of these meetings Catalyst and SBC have collaborated to: Improve information sharing about what community-led activities are available in the Borough, this includes promoting the use of the SID among VCSE organisations Organise a workshop, due to take place in spring 2023 to promote greater collaboration between day opportunity providers and the VCSE sector
Evidence of Progress (October 2023):	The scheduled meetings have stalled following key members of the monthly meetings leaving the authority. This has been picked up with Catalyst and the 1:1 meeting reinstated.
Assessment of Progress (October 2023): (include explanation if required)	
Evidence of Impact (October 2023):	N/A

APPENDIX 1 PROGRESS UPDATE: Review of Day Opportunities for Adults

Recommendation 5:	SBC and its relevant health, social care and VCSE partners share and work towards an agreed vision for day opportunities across the Borough through the most appropriate mechanism (existing or new).
Responsibility:	Integrated Strategy and Development
Date:	July 2022
Agreed Action:	Day Opportunities to be included on the agenda for the Adults Health and Wellbeing Partnership.
Agreed Success Measure:	Partners from across health, social care and VCSE sector are aware of the Council's vision and are able to contribute to the implementation.
Evidence of Progress (March 2023):	A presentation on the review of day opportunities and proposed areas of development was delivered to the Adults Health and Wellbeing Partnership in July 2022. This included an opportunity for members of the partnership to identify potential opportunities to share ideas of how they could support the transformation of day opportunities.
Assessment of Progress	1 (Fully Achieved)
(March 2023): (include explanation if required)	The Committee considered that more evidence of the Borough's agreed day opportunities vision was required, therefore the assessment of progress for this recommendation would be amended to 'on-track'.
Evidence of Impact (March 2023):	As a result of the discussion at the AHWP links have been developed with the Public Health team's Healthy Places scheme with the hope that day opportunity providers will be able to support people to take part in community food growing initiatives.
Evidence of Progress (October 2023):	 Since March 2023, the Council has continued to implement the transformation of Day Opportunities, including: A decision was taken not to progress with the development of South Thornaby Day Centre but rather develop the officer through Community Day Options and Allensway. Engagement with the top 5 VCSE day services providers was undertaken to establish opportunities for more collaborative working. Alongside the Council's regulated services, we are looking at digital opportunities to enhance the service offered through our day services providers (e.g. Digital Social Care Record).
Assessment of Progress (October 2023): (include explanation if required)	
Evidence of Impact (October 2023):	N/A

Assessment of	1	2	3	4
Progress Gradings:	Fully Achieved	On-Track	Slipped	Not Achieved

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Agenda Item 7

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.

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

PAMMS Assessment Summary for Contracted Care Homes

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 9

Agenda Item

Adult Social Care and Health Select Committee

24 October 2023

REGIONAL HEALTH SCRUTINY UPDATE

Summary

The Committee is requested to consider an update on the work of the regional health committees.

Detail

Tees Valley Joint Health Scrutiny Committee

- 1. Stockton-on-Tees Borough Council (SBC) is hosting (providing the Chair and support function) this Committee during 2023-2024.
- 2. The first meeting of the current municipal year was held on 28 July 2023 and included the following agenda items:
 - Minutes of the meeting held on 16 December 2022
 - Notes of the meeting held on 17 March 2023 (see **Appendix 1**)
 - Tees Valley Joint Health Scrutiny Committee Protocol and Terms of Reference
 - Tees Valley Breast Care Services
 - Tees Valley Community Diagnostic Centres
 - North East Ambulance Service NHS Foundation Trust (NEAS) CQC Inspections / Independent Review
 - Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV) Lived Experience Directors

During the Community Diagnostic Centres presentation, it was emphasised that this offer would operate on a 'referral only' basis (from primary and secondary care services), and that the public would need to be clear what the new Stockton 'hub' (due to be open by mid-2024 – earlier than the original estimate of April 2025) was and how it worked – it was not a dropin centre, nor a hospital, but should instead be viewed as an additional imaging facility.

Further to their response to recent Care Quality Commission (CQC) inspections of its services, as well as the findings of an independent review of the Trust, NEAS held its Annual General Meeting (AGM) on 21 September 2023 at Mowden Park, Darlington. The presentation slides, including a look ahead to 2023-2024, can be found at the following link: https://www.neas.nhs.uk/media/209349/neas_agm_21_sept_2023.pdf.

- 3. The last meeting was held on 6 October 2023 (*note: the meeting was not quorate*) and included the following agenda items:
 - Minutes of the meeting held on 28 July 2023 (see Appendix 2)
 - North East and North Cumbria Integrated Care Strategy / Joint Forward Plan
 - Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV) CAMHS Update (see **Appendix 3** for additional submission)
 - Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV) Adult Learning Disability Respite Services Update

A number of discussion points emerged during the presentation on the recently agreed North East and North Cumbria Joint Forward Plan (JFP) which provides a bridge between the longer-term Integrated Care Partnership (ICP) strategy and annual NHS operating plans. Members raised questions around several of the stated individual service action plans, including autism, primary care, trauma-informed services, and women's health. The value of maximising the use of the voluntary sector was also emphasised.

The two TEWV updates provoked a range of comments and queries from the Committee. Regarding CAMHS, Members drew attention to out-of-hours access issues, probed which organisations the Trust was linking-in with in relation to children and young people services, highlighted concerns around self-harm (often hidden), and requested further details of Mental Health Support Team (school-based) coverage. Following the Adult Learning Disability Respite Services update, the Committee asked for confirmation of the current number of beds available at the Aysgarth and Bankfields Court sites, raised concerns around transition into the service for younger people, and questioned how service-users and their families / carers could input into service development (particularly in relation to maximising flexibility).

Sustainability and Transformation Plan / Integrated Care System Joint Health Scrutiny Committee

- 4. Following a lengthy hiatus, Durham County Council (who support this Joint Committee) contacted scrutiny teams across the region in November 2022 with the intention of arranging a meeting for late-November / early-December 2022. However, following liaison with senior NENC ICB representatives, it was deemed that in light of the ongoing ICS briefings to the Tees Valley Joint Health Scrutiny Committee, a meeting of this Joint Committee (which involved similar Councillors) was likely to be a duplication and would not add value.
- 5. In wider regional health matters, leaders and national health experts gathered in the North East on 27 September 2023 to explore how the region can condemn its biggest driver of ill health and death to history. New figures from the ONS Annual Population Survey (APS) survey show the North East has seen the largest fall in smoking rates in England since 2005, with smoking more than halving from 29% of adults smoking in 2005 to 13.1% smoking in 2022. However, smoking remains the single biggest cause of cancer and ill health because cigarettes are uniquely lethal, costing the North East nearly £1 billion a year in medical, health and social care, lost earnings and smoking-related unemployment. Reducing smoking would also provide a much-needed boost to household incomes and the economy.

The event explored a range of topics around smoking, including the role of vaping and harm reduction, media campaigns in helping raise motivation to quit and reduce smoking prevalence, how stop smoking support can help high priority groups, and key policy levers to reduce smoking further. Further details can be found at the following link:

https://northeastnorthcumbria.nhs.uk/news/posts/can-the-north-east-lead-the-way-to-a-smokefree-future/

6. Healthworks, a Newcastle-based community health charity which the ICB is partnering with to tackle the growing health inequalities that exist in the region, has published their latest Impact Report for 2022-2023 – this can be found at the following link:

https://www.healthworksnewcastle.org.uk/about-us/impact-review2022-23/

7. More locally, North Tees and Hartlepool NHS Foundation Trust (NTHFT) has now gone live with their patient engagement platform which will help patients book and amend appointments and receive their letters digitally. A new app-based booking system is being piloted for gastroenterology outpatients – further details can be found at:

https://www.nth.nhs.uk/news/trust-pilots-new-bookingsystem/?mc_cid=97c7e3651f&mc_eid=36e08daf91

North East Regional Health Scrutiny Committee

8. No meetings are currently scheduled.

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

TEES VALLEY JOINT HEALTH SCRUTINY COMMITTEE

Friday, 17 March 2023

PRESENT – Councillors Layton (Chair), Mrs H Scott, Creevy, Watts, Cunningham and Hall

APOLOGIES - Councillors Cook, Smith, Blades, Hellaoui, Rees and Smith

ABSENT – Councillors Marshall and Gamble

ALSO IN ATTENDANCE –Craig Blair (North East and North Cumbria Integrated Care Board), Pauline Fletcher (NHS England and NHS Improvement - North East and Yorkshire), Tom Robson (Durham and Darlington and Tees Local Dental Network), Dr Kamini Shah, Avril Lowery (Tees, Esk and Wear Valley NHS Foundation Trust) and Dominic Gardner (Tees, Esk and Wear Valley NHS Foundation Trust)

OFFICERS IN ATTENDANCE – Hannah Miller (Democratic Officer), Gemma Jones (Scrutiny and Legal Support Officer), Gary Woods (Scrutiny Officer), Sarah Connolly and Alistair Walker

NOTE:

As the meeting was inquorate for items TVH25, TVH27, TVH28, TVH29 and TVH30, no formal decisions were made for these items.

TVH24 DECLARATIONS OF INTEREST

There were no declarations of interest reported at the meeting.

TVH25 TO APPROVE THE MINUTES OF THE MEETING OF THIS SCRUTINY HELD ON 16 DECEMBER 2022

Submitted – The Minutes of the meeting of this Scrutiny Committee held on 16 December 2022.

TVH26 UPDATE ON NHS DENTAL SERVICES - TEES VALLEY

The Senior Primary Care Manager (Primary Care Dental Commissioning Lead – North East and North Cumbria), NHS England – North East and Yorkshire, Chair of Durham and Darlington and Tees Local Dental Network and Consultant in Dental Public Health, NHS England – North East and Yorkshire gave a presentation (previously circulated) updating Members on NHS Dentistry in the Tees Valley.

In providing a summary overview of NHS dentistry, Members were advised that as part of the NHS Dentistry offer there was no formal registration of patients with dental practices and as such a patient could contact any NHS dental practice to access care; dental contracts and provision were activity and demand led; contract regulations set out contract currency which was measured in units of dental activity (UDA) and these were attributable to a banded course of treatments; NHS dentistry regulations did not prohibit the provision of private

dentistry by NHS dental practices; and as a result of the prolonged COVID-19 pandemic period and the requirement for NHS dental practices to follow strict infection prevention and control guidance, a backlog demand for dental care remained high with the urgency and increased complexity of patient clinical presentation.

Reference was made to the commissioned capacity for general dental services and Primary Care Orthodontic Services across the Tees Valley; Members were advised of the additional services commissioned by NHS England; Members were informed that Burgess and Hyder Group Partnership practice operating from Firthmoor Community Centre in Darlington had handed back their contract as of 31 March 2023; and that procurement was underway to increase capacity for Primary Care Orthodontic Services in Redcar and Cleveland. Details were also provided for the other services commissioned by NHS England.

The continuing pressures and challenges were outlined, these included Covid-19 impacts, dental workforce recruitment and retention and NHS dental contract and system reform, with details were provided of the national package of initial reforms to the NHS dental contract, which were published by NHS England in July 2022.

Details were provided of the local actions taken to date, including incentives for all NHS dental practices to prioritise patients that were struggling to access an NHS practice and that presented with an urgent dental care need; encouraging practices to maintain short notice cancellation lists; investment into the provision of additional dental clinical triage capacity; and additional funding made available to practices who were able to offer additional clinical capacity above their contracted levels. Members noted that this scheme was extended into 2022/23 and that 13 practices across the Tees Valley had signed up, an increase from 7 practices in 2021/22.

Members also noted that engagement had been undertaken with dental providers where contracts had been handed back and that interest had been generated following an improved offer; Darlington had been identified as a priority area for the recently launched workforce recruitment and retention initiatives; a funded advert had been placed in the British Dental Journal to attract overseas dentists into the area; and work was ongoing with Dental Clinical and Professional Leaders and Health Education North East Partners to further explore opportunities to improve dental workforce recruitment and retention.

Details were provided of the dental decay prevalence trend across the Tees Valley; Members noted the improvements from 2007/08 to 2016/17 and that the areas with lowest dental decay were those with fluoridated water supplies; reference was also made to the uptake of supervised toothbrushing programmes across the Tees Valley; and that a pilot safeguarding dental access referral pathway for children had been launched.

The next steps were outlined and included a review of the impact of the initial national reforms which were introduced from November 2022; the impact of the local initiatives; and continued work with local dental professional leads and wider partners to continue to explore local opportunities in order to improve NHS Dentistry access for patients. Reference was also made to the advice for patients and key messages.

Discussion ensued regarding the recruitment of overseas dentists; Did Not Attend's; and Members raised concern regarding the number of Looked After Children (LAC) not receiving

dental care. Members were informed that specific work was being undertaken with foster parents and LAC in relation to the barriers to access dental care and that the links with Virtual Heads would be explored.

Discussion also ensued regarding fluoridation, Members noted that this was one of the most effective ways to reduce dental decay in the population and that the Secretary of State for Health was progressing the agenda; and Members requested details of the schools that had signed up to the supervision toothbrushing programme.

RESOLVED – That the Senior Primary Care Manager (Primary Care Dental Commissioning Lead – North East and North Cumbria), NHS England – North East and Yorkshire, Chair of Durham and Darlington and Tees Local Dental Network and Consultant in Dental Public Health, NHS England – North East and Yorkshire be thanked for their informative update.

TVH27 TEES, ESK AND WEAR VALLEY NHS FOUNDATION TRUST - QUALITY ACCOUNT

The Director of Quality Governance, Tees, Esk and Wear Valley NHS Foundation Trust Gave a presentation updating Members on Tees, Esk and Wear Valley NHS Foundation Trust quality journey and quality improvement priorities for 2023/24.

It was reported that the National Quality Board had refreshed the definition of quality, a shared single view of quality where people working in systems deliver care that is safe, effective, a positive experience – responsive and personalized, well led, sustainably resourced and equitable; reference was made to the NHS Patient Safety Strategy which had been published in 2021 and was underpinned by Insight, Involvement and Improvement; and the three goals for the Trust's journey to change were outlined.

In relation to the Trust's quality journey to safer care, it was reported that the key areas of focus were suicide prevention and self harm reduction, reducing physical restraint and seclusion, promoting harm free care, improving psychological and sexual safety and providing a safe environment and promoting physical health; and the key actions to achieve the Trust's goals for each area of focus were outlined. Particular reference was made to the implementation of the national patient safety incident reporting which had a mandated deadline of September 2023.

The presentation outlined the key actions being undertaken to deliver on the Trust's key areas of focus for their journey to effective care; Members noted that each service would have a suite of clinical outcome measures and patient reported outcomes in place; and a key priority was the digital systems and solutions, with CITO going live in the summer; and the key actions being undertaken to deliver on the Trust's key areas of focus for their journey to excellence in patient experience and involvement were also outlined.

Details were provided of the quality and learning dashboard; Members were informed of the positive response in relation to the Friends and Family Test, with 91 per cent of people rating the Trust's services as good or very good; and a positive and safe dashboard had been developed, showing the individual detail for each patient.

The presentation outlined the key quality markers and details of performance against the quality metrics for Quarters 1 to 3 2022/23. In relation to the quality metric – Number of

incidents of physical intervention/restraint per 1000 bed days, Members were advised that whilst this remained above target, it had started to reduce and 75 per cent of the incidents related to Learning Disability services, mostly relating to one patient. Members were assured that the Trust were working with Mersey Care to reduce restrictive interventions and promote the least restrictive practices and that levels had decreased by 50 per cent in the last three months for that individual.

Reference was also made to the quality metric – Percentage of patients who report 'yes, always' to the question 'Do you feel safe on the ward?' which was not achieving its target; details were provided of the work being undertaken to improve performance, including focus groups, and the range of key factors identified to help patients to feel safe were outlined. Members also noted that a programme of work had commenced which included block booking agency staff, enhanced recruitment and additional peer support workers, activity coordinators and gym instructors.

In relation to the quality metric – Percentage of patients who reported their overall experience as very good or good, Members were informed that patients experience had been impacted by increased length of stay as a result of challenges in securing accommodation for patients and that the Trust worked closely with Local authorities in trying to address this issue.

The key quality risks, the key actions from the 3 published Niche reports and learnings about patient safety from West Lane Hospital were outlined; and details were provided of the Quality Account improvement priorities.

Discussion ensued regarding the Trust's ability to deliver on all of the actions identified to deliver on the priority for safer care; Members were assured that these were long term actions and that continuous improvements were being made. Members were also advised that positive developments had been made in the community and a video demonstrating engagement of the voluntary sector could be shared with Members.

Members raised concern regarding the Trust's performance against the quality metrics and were disappointed to note that the electronic system had not yet gone live; discussion also ensued regarding the actions undertaken following the focus groups; Members requested benchmarking with other trusts; and following a question, Members were informed that personalized care plans were recognized as best practice and there was a key focus on lived experience.

TVH28 COMMUNITY DIAGNOSTIC CENTRES

Item deferred to the next meeting of this Scrutiny Committee.

TVH29 CLINICAL SERVICES STRATEGY UPDATE

The Director, North East & North Cumbria Integrated Care Board submitted a presentation (previously circulated) updating Members on the Clinical Services Strategy.

It was reported that the Clinical Strategy aimed to continue to build on the work started under the Better Health Programme; the programme remained focused on the improvement and sustainability of acute hospital services; and that the wider partnership approach had been key to ensure service proposals were embedded within the agreed governance.

The presentation outlined the aims and objectives of the strategy; details were provided of the different workstreams and the workstream achievements over the last 18 months; and that moving forward, work was continuing within each of the clinically led workstreams to reconfirm the strategic intent, detail next steps and ensure sufficient and appropriate capacity to support work progression.

The ICB would continue to provide updates to this Scrutiny Committee in relation to developments and progress with the strategy.

TVH30 WORK PROGRAMME

The Assistant Director Law and Governance submitted a report (previously circulated) requesting that consideration be given to this Scrutiny Committee's work programme for the remainder of the 2022/23 Municipal Year.

Members suggested the inclusion of male suicide on the work programme.

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TEES VALLEY JOINT HEALTH SCRUTINY COMMITTEE

A meeting of Tees Valley Joint Health Scrutiny Committee was held on Friday 28 July 2023.

Present:	Cllr Marc Besford (SBC) (Chair), Cllr Rachel Creevy (HBC) (Vice- Chair), Cllr Ceri Cawley (R&CBC), Cllr Christine Cooper (MC), Cllr Brian Cowie (HBC), Cllr Lynn Hall (SBC), Cllr Mary Layton (DBC), Cllr Paul McInnes (R&CBC), Cllr Vera Rider (R&CBC), Cllr Jan Ryles (MC) and Cllr Susan Scott (SBC).
Officers:	Hannah Miller (DBC); Joan Stevens (HBC); Georgina Moore (MC); Sarah Connolly (R&CBC); Judy Trainer, Gary Woods (SBC)
Also in attendance:	Richard Morris (County Durham and Darlington NHS Foundation Trust); Mark Cotton, Helen Ray (North East Ambulance Service NHS Foundation Trust); Craig Blair, Charlotte Bourke, Anna Williams (North East and North Cumbria Integrated Care Board); Ruth Dalton, Rowena Dean, Kevin Etherson, Phil Woolfall (North Tees and Hartlepool NHS Foundation Trust); Leigh Trimble (Red Balloons); Mike Carr, Stuart Finn, Simon Milburn (South Tees Hospitals NHS Foundation Trust); Catherine Wakeling (Starfish Health and Wellbeing); Mike Brierley, Belinda Brooks, Dominic Gardner, Chris Morton (Tees, Esk and Wear Valleys NHS Foundation Trust)

Apologies: Cllr Jonathan Brash (HBC), Cllr Neil Johnson (DBC) and Cllr Jeanette Walker (MC).

TVH/1/23 Appointment of Chair for 2023-2024

Nominations for the position of Committee Chair were put forward for Councillor Lynn Hall and for Councillor Marc Besford. Following a vote, Councillor Besford was appointed as Chair for the 2023-2024 municipal year.

AGREED that Councillor Marc Besford be appointed as Chair of the Tees Valley Joint Health Scrutiny Committee for 2023-2024.

TVH/2/23 Appointment of Vice-Chair for 2023-2024

A nomination for the position of Committee Vice-Chair was put forward for Councillor Rachel Creevy who was appointed for the 2023-2024 municipal year.

AGREED that Councillor Rachel Creevy be appointed as Vice-Chair of the Tees Valley Joint Health Scrutiny Committee for 2023-2024.

TVH/3/23 Evacuation Procedure

The evacuation procedure was noted.

TVH/4/23 Declarations of Interest

There were no interests declared.

TVH/5/23 Minutes

Consideration was given to the minutes from the Committee meeting held on 16 December 2022.

AGREED that the minutes of the Committee meeting on 16 December 2022 be approved as a correct record.

TVH/6/23 Notes of the meeting held on 17 March 2023

Consideration was given to the notes from the Committee meeting (not quorate) held on 17 March 2023.

With reference to the Update on NHS Dental Services – Tees Valley item, Members highlighted the benefits associated with the school supervised toothbrushing programme and noted the discussion around the impact of water supply fluoridation.

AGREED that the record of the Committee meeting (not quorate) on 17 March 2023 be noted for information.

TVH/7/23 Tees Valley Joint Health Scrutiny Committee - Protocol and Terms of Reference

The Committee's existing protocol (including Terms of Reference) was considered. No changes were proposed.

AGREED that the existing protocol for the Tees Valley Joint Health Scrutiny Committee continues unchanged and is circulated for information to those organisations listed in paragraphs 2-6.

TVH/8/23 Tees Valley Breast Care Services

Consideration was given to an update on the continuing developments in relation to Tees Valley Breast Care Services. Following a brief introduction by the North East and North Cumbria Integrated Care Board (NENC ICB) Director of Place-Based Delivery, the North Tees and Hartlepool NHS Foundation Trust (NTHFT) Acting Chief Operating Officer, supported by managerial and clinical colleagues from both NTHFT and South Tees Hospitals NHS Foundation Trust (STHFT), gave a presentation (circulated in advance) which focused on the following:

- □ Breast Services Clinical Services Strategy
- □ Current screening population
- □ Current breast screening provision
- □ Current breast symptomatic service provision
- □ Recap on work undertaken pre-pandemic
- □ Post-COVID recovery
- □ The challenges to delivery
- □ Current progress

During the presentation, officers emphasised the importance of understanding the difference between 'screening' and 'symptomatic' services. In terms of the Tees Valley, the screening service had a catchment population of 55,000 per annum and was provided by NTHFT via mobile vans or static sites. 50- to 70-year-olds were invited to a screening every three years and were asked to attend specific sites based upon their GP registration.

For symptomatic patients, treatment diagnostic and treatment was provided in Darlington (Memorial Hospital), Hartlepool (University Hospital) and Stockton (University Hospital of North Tees), with the latter two involving longstanding close clinical collaboration with STHFT. Required surgery following diagnosis was mostly provided at the patients' local hospital Trust sites.

Whilst breast screening was suspended nationally from June 2020 due to the emergence of COVID-19, the Tees Valley offer was the first in the North East to recommence its services (in July 2021), and the second to fully recover the backlog. Current waiting lists were now at pre-COVID levels.

As with many areas of health and care, workforce challenges within breast services remained prominent, and there had been a reliance on retire-and-return Consultant Radiologists. Consultant Radiographer practitioners were in place and there were a number of trainee practitioners continuing their qualification journey, but this ultimately takes time (five years training) before it can assist in relieving pressure on services. The current radiology workforce gap was outlined, as were the estate / equipment needs to provide one-stop provision at some spoke sites.

Several strands demonstrating progress in the development of services were outlined, including the introduction of a breast pain pathway which reduced reliance on the radiology workforce and could be delivered at pace without additional specialist equipment (anticipated 15% of future referrals could follow this pathway). The direction of travel through training is for future Consultant Breast Surgeons to no longer take part in emergency surgery on-call rota and thereby increase capacity for breast surgery. The commencement of planning for the procurement of a mammography machine for the James Cook University Hospital to support the reintroduction of surveillance mammograms on this site, as well as improved access for patients who can be offered immediate breast reconstruction free-flap surgery (specialist procedures undertaken at a tertiary site), was also noted.

The Committee queried how many men were invited to the screening service as breast cancer was known to affect males as well as females. Clinical representatives present stated that breast cancer was around 100 times less common in men than women, and that a screening programme for males could not be justified due to these very low rates. However, assurance was given that men could be referred into the symptomatic service and would be treated in the same way as women were.

Referencing delays in diagnosis as a result of the COVID-19 pandemic, the Committee asked if this had had an impact on the severity of cases being seen within breast services. Officers felt that more time would be required to understand the effect of the pandemic as evidence would be determined to a large extent by survival times across a longer period (e.g. 5 years, 10 years, etc.). It was, however, acknowledged that services did have to prioritise during this period and that some individuals were put on medication to slow disease. In relation to the stated workforce gaps, Members questioned if there was anything more that could be done / considered to help with staffing resources, and were informed that a business case had recently been approved to boost recruitment (including from overseas).

AGREED that the Tees Valley Breast Care Services update be noted.

TVH/9/23 Tees Valley Community Diagnostic Centres

The Committee received an update on the continuing developments in relation to Community Diagnostic Centres (CDCs) across the Tees Valley footprint. Introduced by the Tees Valley Community Diagnostics Programme Director and supported by senior clinical and operational leads / directors from County Durham and Darlington NHS Foundation Trust (CDDFT), NTHFT and STHFT, a presentation (circulated in advance) was given which focused on the following:

- □ Background
- □ What are they (CDCs)?
- Diagnostic centre locations
- □ Key facts and figures
- □ Engagement and involvement

A key driver behind the development of CDCs was the independent review of NHS diagnostics capacity undertaken by Professor Sir Mike Richards CBE. The final report included 24 recommendations which included a focus on capacity (equipment, staff) and the splitting of acute and diagnostic services (which can assist with improving the patient experience).

Whilst not solely about radiology, diagnostics enabled increased identification of cancers and other serious health conditions at an earlier stage. Pressure on most diagnostic services was already growing prior to the COVID-19 pandemic (e.g. demand for CT scanning was currently growing at around 7% per annum) – waiting times had therefore inevitably risen.

The Tees Valley CDC sites were outlined, with the intended CDC 'hub' within Stockton-on-Tees currently being developed on the former Castlegate shopping centre (a temporary mini-hub was operating from Lawson Street in Stockton). South Tees 'spoke' sites existed (and were continuing to be developed) in Redcar and at the Friarage Hospital, Northallerton, with the North Tees 'spoke' offer nearing full capacity within Hartlepool. In terms of the CDDFT footprint, the ongoing service at Bishop Auckland had operated well (made easier due to the adaptation of an existing building) and was working alongside other Tees Valley sites in what was a real stepchange to partnership-working across the region – a five-year plan was in place which differentiated between acute and diagnostic activity, with the Trust working to ensure an educational programme around access and utilisation of these services.

Officers spoke of the opportunity to put diagnostics on the footing it should have been on years ago, with ongoing developments seeking to deliver an additional 150,000 diagnostic tests annually across the Tees Valley from 2024-2025 (with further growth planned based on demand). However, it was emphasised that CDCs would operate on a 'referral only' basis (from primary and secondary care services), and that the public would need to be clear what the new Stockton 'hub' was and how it worked – it was not a drop-in centre, nor a hospital, but should instead be viewed as an additional imaging facility. In that regard, referral processes would continue into each service as they did now, therefore the service would manage where these referrals were seen based on capacity at the time of booking patients in.

Further detail around the construction and resourcing of the Tees Valley CDC sites was provided, and it was stated that the aim was for the new 'hub' in Stockton to be open by mid-2024 (earlier than the original estimate of April 2025). CDDFT had replaced all of its diagnostic equipment as a result of the funding for the CDC programme and COVID-related financing.

In terms of public engagement around the CDCs, officers welcomed the input of the Committee as to the best way to communicate the Tees Valley offer. Some engagement had already taken place with GPs (though it was acknowledged that this needed to go further as GPs had a critical role in educating patients on available options), and the ICB would also be an important partner in raising awareness of diagnostic capacity. Crucially, there was a need to ensure services were accessible, with considerations around transport routes / options and parking capabilities central to this. It was also hoped that the enhanced facilities would help attract new professionals to the area.

Reflecting on the content of the presentation, the Committee welcomed the significant developments around diagnostics across the Tees Valley (particularly the focus on health in the community), and commended NHS Trusts for working collaboratively to ensure the best possible offer. Clarity was then sought around the exact services which would be available within the Stockton 'hub' site – Members were informed that there would be a small number of consulting rooms in addition to the diagnostic capacity, but that the exact disciplines were yet to be determined (clinical colleagues would be approached for a view on how best to use these spaces).

Regarding diagnostic equipment, the Committee asked whether maintenance was outsourced or conducted in-house. Members heard that this was mainly done by the companies who supplied the equipment, though, outside this, medical departments also had a role to ensure these operated effectively. CDDFT had a contract with Philips which automatically replaced equipment every 7-9 years, and had access to an external technician.

Discussion ensued around the key issue of accessibility, including the importance of Local Authorities working with NHS Trusts to facilitate adequate parking options, and the challenges associated with reduced bus provision. Members were assured that liaison with Councils over parking capacity had already been undertaken in order to maximise opportunities for patients to attend sites, and that the expansion of Patient Transport Services (PTS) was also being considered.

Continuing this theme, the Committee noted that there were some communities in Redcar and Cleveland which were not covered by PTS. Officers emphasised that it was pointless spending money on buildings / diagnostic equipment and then not enabling people to access them, and stated that any Member support in terms of linking-in with transport providers (e.g. Arriva) would be welcome.

Returning to the key issue of communications, the Committee asked if there was any specific funding earmarked for this critical element and heard that, whilst there was no formal budget, the collaborative nature of the CDC project meant that organisations were looking to pool their resources anyway. There was a big national agenda around

diagnostics (and health inequalities) at present, and work had already been undertaken with regional media partners to make it clear what CDCs were and dispel any myths. Members cautioned against the use of the word 'hub' which, to some, may imply a drop-in feature – officers responded that this would be considered as part of future public engagement around the CDC offer (it was noted that the term 'hub' was used in order to allocate funding) and that a further update on CDC developments could be provided to the Committee at a future meeting if desired.

AGREED that the Tees Valley Community Diagnostic Centres update be noted.

TVH/10/23 North East Ambulance Service NHS Foundation Trust - CQC Inspections / Independent Review

Senior representatives of the North East Ambulance Service NHS Foundation Trust (NEAS) were invited to provide the Committee with a response to recent Care Quality Commission (CQC) inspections of its services, as well as the findings of an independent review of the Trust. Led by the NEAS Chief Executive Officer and supported by the NEAS Assistant Director – Communications and Engagement, a presentation (circulated in advance) was given which drew attention to the following:

- □ Latest CQC Position
- □ Improvement Plan Overview
- □ Workstream Actions Progress
- □ Progress on Medicines Management
- Progress on Incident Reporting
- □ Progress on Governance
- □ Progress on Culture
- □ Response Time Benchmark Performance (June 2023)
- □ Draft June 2023 Position
- □ Independent Review NEAS Assurance Statement

It was stressed from the outset that NEAS had worked hard with the CQC to fully understand the concerns raised following the regulator's inspection of the Trust in July and September 2022 (published in February 2023). The CQC had subsequently revisited the Trust and the individual grading for its Emergency and Urgent Care (EUC) services had since improved from 'inadequate' to 'requires improvement' (with the Section 29A warning notice lifted).

As part of the Trust's ongoing improvement plan, it was stated that two full cycles of audit over a timeframe of a year would be needed before there was sufficient confidence that actions undertaken as a result of the CQCs findings had become embedded into practice, and that independent auditing would be used to determine this. It was acknowledged that organisational culture can take time to change and even longer to embed.

Progress against the four identified workstream actions was detailed. Specific reference was made to developments around 'medicines management' and the ability for paramedics to collect required drugs from a location other than their base station, as well as the strengthening of 'incident reporting' which included the intended introduction of a new patient safety incident review framework by the end of 2023-2024 (NEAS being the first ambulance Trust to roll this out). In terms of 'culture', progress around this would be monitored through staff surveys.

Despite the challenges identified by the CQC, comparative data indicated that, for June 2023, NEAS was the best performing ambulance Trust in the country in relation to category 1 (an immediate response to a life-threatening condition, such as cardiac or respiratory arrest) response times, an achievement which led to positive clinical outcomes for patients. NEAS was working towards being the best for category 2 (a serious condition, such as stroke or chest pain, which may require rapid assessment and / or urgent transport) response times too, though this continued to be a struggle, with all Trusts above the national target (some others significantly so).

A brief background to events which culminated in a NHS England-commissioned independent review into patient safety concerns and governance processes related to NEAS was given. Following issues raised by a whistle-blower back in 2018 regarding coronial processes, the Trust commissioned a review which culminated in significant change – however, despite the regulators being satisfied with these developments, the Trust was unable to agree with the whistle-blower that enough had been done. NEAS acknowledged that it did not do the right thing by the families in question and had since publicly apologised.

Most of the recommendations emerging from the independent review were already being addressed (or had been completed) by NEAS prior to the publication of the report in July 2023. There were some additional areas of focus identified, though, including the medical examiners model, the constitution of a committee (to be independently chaired) to allow families to see changes made (the Trust welcomed this and would be in contact with families in the future), and enhanced Board processes to ensure learning had been achieved.

The Committee drew attention to cases where independent services were being brought in to enhance the existing NEAS offer and queried whether Trust leaders had sufficient oversight of this. In response, Members were informed that the only external / consultancy support being used was in relation to the 'governance' workstream and that this was on a short-term basis.

Continuing with the theme of governance, the Committee sought further details on the NEAS executive management team buddying programme with directors from Northumbria Healthcare NHS Foundation Trust. Officers confirmed that support was being received for the benefit of the whole Trust, and that Northumbria had an excellent internal management programme which NEAS had been offered places on. Critically, this arrangement provided challenge to the executive.

With reference to the independent review outcomes, the Committee asked if progress on implementation of the recommendations would go back to the report author, Dame Marianne Griffiths DBE. Officers stated that ultimate responsibility sat with NHS England who commissioned the review, though a monthly quality improvement group that was co-chaired by NHS England and the North East and North Cumbria Integrated Care Board (NENC ICB) provided scrutiny of the Trust's response to the recommendations.

AGREED that the North East Ambulance Service NHS Foundation Trust update regarding recent CQC inspection / independent review outcomes be noted.

TVH/11/23 Tees, Esk and Wear Valleys NHS Foundation Trust - Lived Experience Directors

The Committee received a Lived Experience and Co-creation presentation (circulated in advance) from representatives of Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV), which included an update on the work and impact of the Trust's Lived Experience Directors. Introduced by the TEWV Assistant Chief Executive, and supported by colleagues including the TEWV Lived Experience Director for Durham, Tees Valley and Forensics, content highlighted:

- □ TEWV Journey to Change Progress
- □ The role of our Lived Experience Directors
- Durham, Tees Valley and Forensic Co-creation Board Terms of Reference
- □ Co-creation Board Overview / Early Action Areas
- □ Lived Experience Forums Aims / Journey So Far / Future Plans

From the beginning, it was emphasised that a lived experience and co-creation focus was at the heart of everything which TEWV was doing, and that this approach was a crucial feature of the strategic and cultural shift within the Trust which began a couple of years ago (indeed, co-creation was one of the five key pillars identified).

Reflecting on a poor personal experience of past care and a subsequent desire to help others have more positive involvement with health services, the TEWV Lived Experience Director for Durham, Tees Valley and Forensics gave a brief outline of the role, a vital element of which was to check and challenge ongoing provision to ensure the patient voice was heard. Driving forward what patients / carers wanted to see was fundamental, though it was important to acknowledge that TEWV were just one member of the overarching mental health offer, and that partnerships with other relevant organisations (e.g. Rollercoaster, Pioneering Care, etc.) were also significant.

A critical aspect of the Co-creation Board was around the concept of how people can challenge and speak to 'power' – to this end, membership included service-users, patients and carers, as well as TEWV staff. A host of aims and objectives were outlined, central to which was the creation of safe, informal creative spaces where people were equal, could speak openly and honestly, and could challenge the status quo.

Aided by representatives of two voluntary, community and social enterprise (VCSE) organisations, Red Balloons and Starfish Health and Wellbeing, an overview was given of Lived Experience Forums – collaborative platforms for using people's experience and knowledge to help services be the best they could be. With the intention of being independent from such services, seeking and enabling input from a wider cohort of voices also fed into the community transformation agenda.

Already established in Stockton and Hartlepool, work to ensure Forums were operational across the whole Tees Valley footprint continued. In addition, the recent Lived Experience Conference which took place in June 2023 was highlighted – a collaborative event which celebrated numerous Tees Valley organisations and used lived experience to inform future service delivery. From a TEWV perspective, listening and acting upon the work of the Forums represented an approach which went beyond the usual meaning of 'engagement' and was being adopted across all levels of the Trust.

The Committee was highly encouraged to hear of the work of the Lived Experience Forums and asked a number of questions around their composition and meetings. In response, Members were informed that anyone 16+ can attend and that for those who cannot physically be present, other mechanisms (emails, surveys, etc.) were used to connect individuals. There was also a dedicated lead for the younger Forum cohort as it was recognised that the usual adult model of connecting may not always be appropriate.

The value and importance of the Forums being independent from services was emphasised by the Committee who also queried where people were being referred from. Members heard that Red Balloons and Starfish Health and Wellbeing were linked-in with Catalyst (as the conduit for the wider VCSE sector), Stockton-on-Tees Borough Council (via an employee with lived experience) and TEWV (utilising a mailing list of around 200 individuals which information was relayed to) – a video had also been produced to highlight the Forums and invite input / attendance. TEWV officers noted that its Lived Experience Director was trying to be an enabler for the charities' endeavours and that the Trust wanted them to be involved in some programmed TEWV work too. The importance of connecting voices to wider mental health provision (not just TEWV) was emphasised, possibly via the new Tees Valley Integrated Care Partnership (ICP) 'place-based' group.

Involvement from Healthwatch into each of the Forums was noted, and it was stated that should any individuals wish to lodge an official complaint to a service, Healthwatch was there to support / signpost. TEWV officers added that the Trust had partnered with Healthwatch for its community transformation work as it attempted to seek views from those who did not already access its offer.

Highlighting a case of a retired older person struggling to get mental health support, the Committee probed whether older adults were getting appropriate access to services and were having their voices heard. In response, it was confirmed that there was no upper age limit for involvement in the Forums and that older adult support was certainly available depending on an individual's circumstances. Members were encouraged to relay relevant details of any specific cases which could be followed-up outside of this meeting.

Finally, the Committee commended the Lived Experience Conference initiative and welcomed any feedback which could be provided on this annual event. It was stated that Members were very much welcome to future conferences, particularly those with lived experience themselves.

AGREED that the Tees, Esk and Wear Valleys NHS Foundation Trust update on Lived Experience and Co-creation be noted.

TVH/12/23 Work Programme 2023-2024

Consideration was given to the Committee's work programme for 2023-2024.

An accompanying report drew attention to both standing items and other topics which had been on the Committee's radar for some time under the 'to be scheduled' section. Meeting dates for the remainder of the municipal year had been identified and included for agreement, and a suggested outline of potential items for these meetings was proposed.

Highlighting the dentistry update that the Committee received at the last meeting in March 2023, and given the ongoing high-profile attention surrounding these services,

Members felt this should again feature on the work programme at some point during the municipal year.

Discussion ensued around the possibility of holding hybrid Committee meetings which facilitated simultaneous in-person and remote attendance. It was noted that guidance on the hosting of meetings following the relaxation of COVID-19 social distancing measures in 2021 had been interpreted in differing ways by Councils, but that this Committee had returned to in-person formal meetings for some time now. Members subsequently expressed their preference for scrutinising organisations via a face-to-face approach, and felt that officers should be requested to physically attend as Members themselves are required to do.

AGREED that the Committee's work programme for 2023-2024 be noted and the proposed meeting dates for the remainder of the municipal year be approved.

Benchmarks and Performance Data – CAMHS Crisis APPENDIX 3

Tees, Esk and Wear Valleys NHS Foundation Trust

Local Quality Standard - Agreed Sub-ICB Ambition: 90% of patients are seen face-to-face within 4-hours by a suitably trained practitioner (urgent response – Crisis CYP)

CAMHS Crisis - seen in 4-hours

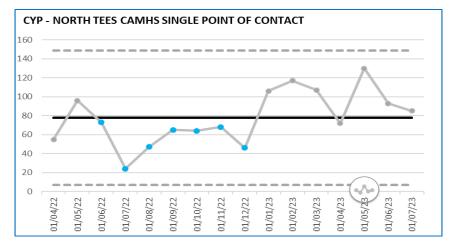


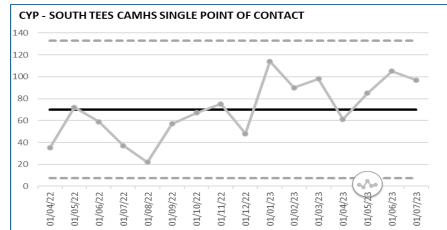
Significant improvement seen over the course of the last 12 months with sustained delivery above 90% standard since May 23

Benchmarks and Performance Data – C MHS Single Point of Contact

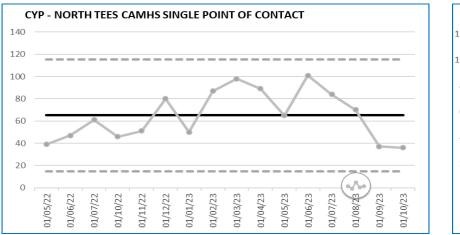


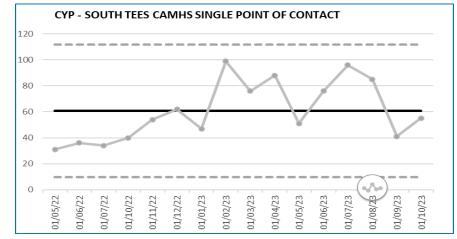
Referrals and Caseload





Access & Waiting time





Benchmarks and Performance data – Access

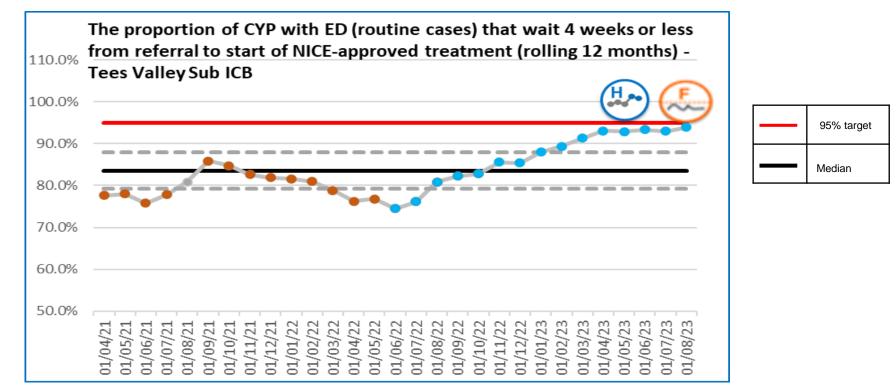
	0-1 month	1-2 months	2-3 months	3-6 months	6-9 months	1-2 years	Summary
CHILD AND YP HARTLEPOOL COMMUNITY	6	2	-	-	-	-	8
CHILD AND YP MBORO COMMUNITY	8	5	5	3	1	-	22
CHILD AND YP R AND C COMMUNITY	20	8	4	4	-	-	36
CHILD AND YP STOCKTON COMMUNITY	15	7	2	3		-	27
CYP - NORTH TEES CAMHS SINGLE POINT OF CONTACT	24	-	-	1	1	-	26
CYP - SOUTH TEES CAMHS SINGLE POINT OF CONTACT	36	-	-	3	-	-	39
TEES CAMHS - NORTH TEES GETTING HELP	26	2	-	1	1	-	30
TEES CAMHS - SOUTH TEES GETTING HELP	17	-	-	-	1	1	19
TEES CYP LD - NORTH TEES GETTING MORE HELP	6	-	-	-	-	-	6
Summary	158	24	11	15	4	1	213

Number of Patients	Average (Mean) Days Waiting	Median Days Waiting	Maximum Days Waiting
253	39	25	356

<u>TO NOTE:</u> Some of the longest waiters explained above are open concurrently to Neurodevelopment assessment pathways and all longest waits have been validated and assessed.

Benchmarks and Performance Data – CAMHS Eating Disorders

<u>National Benchmark:</u> The Access and Waiting Time Standard for Children and Young People with Eating Disorders states that National Institute for Health and Care Excellence (NICE)-concordant treatment should start within a maximum of 4 weeks from first contact with a designated healthcare professional for routine cases and within 1 week for urgent cases



<u>TO NOTE:</u> there are data quality issues with the reporting on urgent waits. The data suggests that we are running at approx. 75% compliance which is not a true measure. We are working internally and with Commissioners to correct this issue. In the interim, it would not be appropriate to present this for scrutiny.

Agenda Item 10

HEALTH & WELLBEING BOARD

A meeting of Health & Wellbeing Board was held on Wednesday 31 May 2023.

- Present:Cllr Robert Cook (Chair), Cllr Lisa Evans (Vice-Chair), Cllr Dan
Fagan, Cllr Mrs Ann McCoy, Cllr Steve Nelson, Cllr David Reynard,
Cllr Stephen Richardson, Cllr Tony Riordan, Cllr Sylvia Walmsley,
Sarah Bowman-Abouna, Martin Gray and Peter Smith.
- Officers: Michael Henderson.

Also in attendance:

Apologies: Fiona Adamson, Jon Carling, David Gallagher, Dominic Gardner, Julie Gillon, Jonathan Slade and Ann Workman.

1 Declarations of interest

There were no declarations of interest.

Minutes

2

4

The minutes of the meeting held on 29 March 2023 were confirmed as a correct record.

3 Health Protection Update

Members considered a report and presentation relating to the Annual Health Protection Report on key issues and indicators for Health Protection over the previous year, 2022.

RESOLVED that the report and discussion be noted

Integrated Mental Health Strategy Group

The Board considered a report that updated members on the progress of the Integrated Mental Health Steering Group for Stockton-on-Tees which was a subgroup of the Health and Wellbeing Board.

RESOLVED that the report be noted.

5 Notes of the meeting of Tees Valley Area Integrated Care Partnership (ICP) held on 31 March 2023

The Board considered the notes from the meeting of the Tees Valley Area Integrated Care Partnership (ICP).

RESOLVED that the meeting note be noted.

6 Members' Updates

The Board considered Members' update.

Forward Plan

The Forward Plan was noted.

HEALTH & WELLBEING BOARD

A meeting of Health & Wellbeing Board was held on Wednesday 28 June 2023.

Present:Cllr Robert Cook (Chair), Cllr Lisa Evans (Vice-Chair), Cllr Kevin
Faulks, Cllr Mrs Ann McCoy, Cllr Steve Nelson, Cllr David Reynard,
Cllr Stephen Richardson, Cllr Sylvia Walmsley, Fiona Adamson,
Sarah Bowman-Abouna, Jon Carling and Martin Gray.

Officers:

Also in attendance:

Apologies: Cllr Dan Fagan, Cllr Tony Riordan, David Gallagher, Dominic Gardner, Peter Smith and Ann Workman.

HWB/8/23 Declarations of interest

There were no declarations of interest.

HWB/9/23 Better Care Fund Planning Requirements 23 - 25

The Board received a report seeking approval for the Stockton-on-Tees BCF planning requirements for 2023-25. The BCF Framework set out the Government's priorities for 2023 – 25 including improving discharge, reducing the pressure on Urgent and Emergency Care and social care, supporting intermediate care, unpaid carers and housing adaptations.

The vision for BCF was to support people to live healthy, independent and dignified lives, through joining up health, social care and housing services seamlessly around the person.

Officers highlighted that monitoring reports had become time consuming for the team and no feedback or comparisons were supplied as a result of the information provided. The Board commented that Stockton-on-Tees should not be subjected to the same level of scrutiny as poorer performing areas and suggested that the Local Government Association should also take the matter up with the Department for Health.

The Board acknowledged the considerable work that had gone into producing the report and the input of GPs. Building on the positive collaborative working, it was the intention to include the voluntary and community sector and housing in future planning work.

RESOLVED

(1) That the Stockton-on-Tees BCF planning requirements for 2023-25 be approved for submission.

(2) That concerns be raised that the requirements for submitting fortnightly, monthly and annual reports have become an onerous task for the Delivery Group.

HWB/10/23 Pharmaceutical Needs Assessment 2022 Update

The Board considered a report advising of the following changes to the PNA:

- Closure of a pharmacy within Sainsbury's at Whitehouse Farm
- Proposed consolidation of two pharmacies in Billingham town centre
- An application for a new pharmacy at Elm Tree Centre, Stockton-on-Tees

Discussion and key points:-

• The Board acknowledged that they could not object to the closure of the Lloyds Pharmacy at Sainsbury's because had the pharmacy not existed at the time the PNA was written, a gap would not have been identified

• Decisions to close pharmacies were national decisions and staff recruitment problems were likely to be a factor

• Concerns about access arising from closures were expressed and could be considered through wider work

RESOLVED

(1) That the closure of the pharmacy within Sainsbury's at Whitehouse Farm be noted, that no supplementary statement be issued and that an updated map of pharmaceutical services be published.

(2) That the publication of a supplementary statement and an updated map of pharmaceutical services in relation to the consolidation of the two pharmacies in Billingham town centre be approved once the consolidation date is known.

(3) That the application for a new pharmacy at Elm Tree be noted.

(4) That the change in regulations allowing a reduction on 100-hour pharmacies core opening hours be noted.

(5) That a further report be submitted to the Board on pharmacy provision.

HWB/11/23 Special Educational Needs and/or disabilities (SEND) Strategy - Progress and next steps for 2023/24

The Children and Families Act 2014 introduced significant changes to the systems and approaches for children and young people aged 0-25 with special educational needs and/or disabilities.

The Board received a report outlining plans for the 2023/24 SEND strategy and the establishment of the Local Inclusion Partnership.

The Board paid tribute to the work of the SEND team in developing an innovative digital approach to create quality Education Health and Care Plans. The Council had scooped a national award in recognition of the work carried out at the Municipal Journal's national awards.

RESOLVED that the proposed action plan and priorities for 2023/24 be endorsed and a further report be submitted to the Board in September 2023.

HWB/12/23 Members' Updates

Problems with accessing GPs and dentistry had been highlighted at recent meetings including the North East and North Cumbria Integrated Care Partnership and the North East Joint Scrutiny Network. It was noted that the Government had announced a recovery plan and work was being carried out with practices to implement plans.

The Board noted that this would have been Ann Workman's final Board meeting prior to her retirement and recorded a vote of thanks and well wishes for her retirement.

HWB/13/23 Forward Plan

The Board noted the Forward Plan.

It was agreed that the August meeting be cancelled and the business re-scheduled to July or September.

The Board requested a future item on Vaping and also an update on Nitrous Oxide abuse as part of a wider drugs update.

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HEALTH & WELLBEING BOARD

A meeting of Health & Wellbeing Board was held on Wednesday 26 July 2023.

- Present: Cllr Robert Cook (Chair), Cllr Lisa Evans (Vice-Chair), Cllr Kevin Faulks, Cllr Mrs Ann McCoy, Cllr Steve Nelson, Cllr David Reynard, Cllr Stephen Richardson, Cllr Sylvia Walmsley, Jon Carling, David Gallagher, Dominic Gardner, Martin Gray, Carolyn Nice and Peter Smith.
- **Officers:** Tanja Braun, Grace Wali, Jane Edmends, Paul Wilson, Ant Phillips, Abbey Forster and Judy Trainer.
- Also in Cllr Pauline Beall and Alisha Rutter (Fresh and Balance)

attendance:

Apologies: Cllr Dan Fagan and Cllr Tony Riordan, Fiona Adamson, Sarah Bowman-Abouna, Alex Sinclair, Ann Workman.

HWB/14/23 Declarations of interest

There were no declarations of interest.

HWB/15/23 Minutes of the meetings held on 31 May 2023 and 28 June 2023 (for approval)

RESOLVED that the minutes be confirmed as a correct record and signed by the Chair.

HWB/16/23 Notes of the Meeting of the Tees Valley Integrated Care Partnership 2 June 2023 (for information)

RESOLVED that the minutes be noted.

HWB/17/23 Vaping Update - Presentation from FRESH

Ailsa Rutter, Director of Fresh and Balance, gave a presentation covering:

- The harmful effects of smoking and second-hand smoke
- Current smoking and vaping prevalence in England
- Costs to Stockton
- The Fresh comprehensive tobacco control programme since 2005
- Smokers options to quit
- Vaping to quit smoking research
- Impact of vaping on health
- Government commissioned evidence updates
- Vaping prevalence and challenges
- Regulations on vapes and gaps in regulation
- Disposable vapes
- Evidenced based tools and resources

Key issues highlighted and discussed:

• In the short and medium term, vaping posed a small fraction of the risks of smoking but vaping was not risk free, particularly for people who had never smoked

• There was significantly lower exposure to harmful substances from vaping compared to smoking. However, there was similar or higher exposure to harmful substances compared with not using any nicotine products

• There was no significant increase of toxicant biomarkers after short term secondhand exposure to vaping among people who did not smoke or vape

• The addition of flavours to vapes was important to encourage smokers onto vapes, however, marketing of flavoured vapes to children was concerning

• Opinion was split on banning single use vapes. It had been suggested that more investigation was needed into the unintended consequences of banning single use vapes

• Research indicated a 50% growth in experimentation in vaping in 11 - 17-year-olds but only a small increase in current vaping from 6.9% to 7.6%

• It was hugely challenging to reduce smoking prevalence in mental health settings

• Concerns were expressed about marketing of vapes to children, the long term impacts of vaping on health and the gaps that existed in current regulation

RESOLVED that the presentation be noted.

HWB/18/23 Evaluation of Warm Spaces in Stockton-on-Tees 2022/23 and Next Steps

The Board received a report providing an update on the evaluation conducted in June 2023 on the Warm Spaces in Stockton-on-Tees scheme. The initiative had been launched in October 2022 and had grown to a current membership of around 60 venues, with feedback evidencing that many of them had become quickly established as key assets within their communities.

The report set out the key feedback from the consultation exercise carried out with participating venues and the plans for the scheme's development, widening the scope of its offer into a second phase throughout the autumn and winter into 2024.

The Board commended officers on the initiative and supported the proposed action plan and priorities.

RESOLVED

1. That the report's key findings from the feedback report be noted.

2. That the proposed action plan and associated priorities for 'Phase II' of the scheme, with a 2023-2024 timeline, be endorsed.

3. That Stockton-on-Tees Borough Council's Public Health contribution of £30,000 per annum for this year (2023/24) and next year (2024/25) be noted, to support the bespoke development of Community Spaces in Stockton-on-Tees, building on what was achieved in the first phase of the Warm Spaces scheme and working towards long-term sustainability.

4. That a further report be received to provide an update on progress in late 2023.

HWB/19/23 Healthy Streets Update

The Board received a presentation on the Healthy Streets pilot including:

- Pilot areas
- Traffic Surveys
- Community Engagement
- Next Steps

O Resident's survey running to 31 July

o Aspen Garden's resident focus group - August

o A series of creative engagement events over the summer holidays facilitated by university researchers

o A design team to be appointed to work on design stage from September – November 2023

RESOLVED that the update be noted.

HWB/20/23 Health Protection Collaborative -Terms of Reference

The Board received a report providing revisions to the Health Protection Collaborative terms of reference following discussion by the Collaborative in July 2023.

Discussion at the Collaborative had reflected that there was a strong commitment to the group as a local systems overview and collaboration forum to share information and offer mutual support and challenge. However, a stronger commitment from some partners to attend more regularly would be welcomed and it had been suggested that themed meetings around particular issues would be helpful and would encourage attendance by key partners for these discussions. It was also agreed the Collaborative would meet every two months in future, rather than monthly.

RESOLVED that the proposed amendments to the Health Protection Collaborative terms of reference be approved.

HWB/21/23 Joint Forward Plan

The Board received a presentation on the NHS Draft Joint Forward Plan – July 2023 which was a requirement of Integrated Care Boards and partner NHS Trusts. The presentation covered:

- National Guidance
- North East and Cumbria Plan
- NHS Plan aligned to Partnerships
- Service, Enabler and Place Action Plans
- How the Plans fit together
- Timetable and Engaging Stakeholders

RESOLVED that the presentation be noted.

HWB/22/23 Members Updates

There were no Member Updates.

HWB/23/23 Health and Wellbeing Board - Forward Plan

The Board agreed that the Healthwatch Annual Report would be presented to the October meeting.

RESOLVED that the forward plan be noted.

Agenda Item 11

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

Date (4.00pm	Торіс	Attendance
unless stated)		, attendance
20 June	Scrutiny Training	Scrutiny Team
(1.00pm)		
(informal)	Overview Departs CDC Adulta Upolth and	
18 July	Overview Report: SBC Adults, Health and Wellbeing	Cllr Ann McCoy / Cllr Steve Nelson / Carolyn Nice / Emma Champley /
		Sarah Bowman-Abouna
	CQC / PAMMS Quarterly Update: Q4 2022-2023	Darren Boyd
	Regional / Tees Valley Health Scrutiny Update	
	Minutes of the Health and Wellbeing Board	
	(February & March 2023)	
19 September	Healthwatch Stockton-on-Tees: Annual Report	Peter Smith
	2022-2023	
	CQC / PAMMS Quarterly Update: Q1 2023-2024	
	Monitoring: Progress Update – Care Homes for Older People	Rob Papworth
	Review of Access to GPs and Primary Medical Care	
	Background Briefing	Sarah Bowman-Abouna /
24.0.4.4.4.4	(Draft) Scope & Project Plan	Emma Joyeux
24 October	Well-Led Programme Update	Julie Nisbet / Ben Brown / Sarah Stokes
		Sarah Stokes
	Monitoring: Progress Update – Day Opportunities	Rob Papworth
	for Adults	
	PAMMS Annual Report (Care Homes): 2022-2023	Darren Boyd
	Review of Access to GPs and Primary Medical Care	
	North East and North Cumbria Integrated	Emma Joyeux
	Care Board	
	Regional / Tees Valley Health Scrutiny Update	
	Minutes of the Health and Wellbeing Board	
	(May, June & July 2023)	
21 November	CQC / PAMMS Quarterly Update: Q2 2023-2024	
	 Review of Access to GPs and Primary Medical Care TBC 	ТВС
	• TBC	ТВС

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

Date (4.00pm unless stated)	Торіс	Attendance
	North Tees and Hartlepool NHS Foundation Trust (NTHFT): Maternity Services Update	Lindsey Robertson / Elaine Gouk / Stephanie Worn
19 December	CQC State of Care Annual Report 2022-2023	Katherine Acheson / Michelle Richardson-Christie
	Review of Access to GPs and Primary Medical Care • TBC	ТВС
23 January 2024	Teeswide Safeguarding Adults Board (TSAB): Annual Report 2022-2023	Darren Best / Carolyn Nice
	Review of Access to GPs and Primary Medical CareTBC	ТВС
20 February	CQC / PAMMS Quarterly Update: Q3 2023-2024	
19 March	North Tees and Hartlepool NHS Foundation Trust (NTHFT): Quality Account (TBC)	ТВС

2023-2024 Scrutiny Reviews

- Access to GPs and Primary Medical Care
- Adult Safeguarding

Monitoring Items

- 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)