

## ADULT SOCIAL CARE AND HEALTH SELECT COMMITTEE

A meeting of Adult Social Care and Health Select Committee was held on Tuesday 23 July 2024.

**Present:** Cllr Marc Besford (Chair), Cllr Nathan Gale (Vice-Chair), Cllr Stefan Barnes, Cllr Carol Clark, Cllr John Coulson, Cllr Ray Godwin, Cllr Lynn Hall, Cllr Susan Scott and Cllr Vanessa Sewell.

**Officers:** Sarah Bowman-Abouna, Emma Champley (A,H&W); Kerry Anderson, Gary Woods (CS).

**Also in attendance:** Emma Joyeux (North East and North Cumbria Integrated Care Board)

**Apologies:** None.

### ASCH/18/24 Evacuation Procedure

The evacuation procedure was noted.

### ASCH/19/24 Declarations of Interest

There were no interests declared.

### ASCH/20/24 Minutes

Consideration was given to the minutes from the Committee meeting held on 18 June 2024. Updates were provided on the following items that were on the agenda:

- Care and Health Innovation Zone: Information requested by the Committee regarding the timescale for cleaning up the Marshalling Yards had been received from Stockton-on-Tees Borough Council (SBC) officers and was circulated to Members earlier this month (10 July 2024).
- Chair's Update and Select Committee Work Programme 2024-2025: Tees Valley Joint Health Scrutiny Committee (TVJHSC) attendance statistics, referenced under the 'Chair's Update' element, had been circulated to Members on 10 July 2024 for information.

In related matters, it was noted that Hartlepool Borough Council (who were supporting the TVJHSC during 2024-2025) had moved TVJHSC meetings from Fridays to Wednesdays, despite there currently being no Chair in place. Some of the proposed TVJHSC dates would clash with existing SBC meeting commitments – this was concerning given SBC representatives were comfortably the best attendees at TVJHSC meetings in comparison to Members from other Local Authorities.

AGREED that the minutes of the meeting on 18 June 2024 be approved as a correct record and signed by the Chair.

## ASCH/21/24 Action Plan for Agreed Recommendations - Review of Access to GPs and Primary Medical Care

Consideration was given to a draft Action Plan setting out how the agreed recommendations from the recently concluded review of Access to GPs and Primary Medical Care would be implemented, including success measures and target dates for completion. Presented by the North East and North Cumbria Integrated Care Board (NENC ICB) Strategic Head of Primary Care (Tees Valley), Members were informed of the hope that a new GP contract would be agreed by March 2025, hence the stated due date of several of the proposed elements throughout the Action Plan. In addition, specific attention was drawn to the following:

- Recommendation 2 (All relevant health bodies continue efforts to increase public / patient understanding about accessing the most appropriate services (including in the context of the Pharmacy First initiative), using all available communication mechanisms (both print and digital) and links through local community networks (e.g. community partnerships), to ensure key messages are reinforced): The proposed action for Healthwatch Stockton-on-Tees to adopt and promote the resource developed by Healthwatch South Tees had already been addressed following the recent circulation of a Healthwatch Stockton-on-Tees version of the 'Top Tips for Accessing your GP Practice' – this would be shared with the Committee following this meeting.
- Recommendation 3 (Councillors and local MPs be supported in helping with these communication messages as leaders in their communities (as well as their role in raising concerns expressed by the community) and encourage positive feedback as well as concerns (to help share and spread learning and best practice): With reference to Councillors / MPs supporting the messaging around wasted appointments from 'Did Not Attends' (DNAs), Members stated that they would welcome a future briefing on DNA figures.
- Recommendation 10 (Relevant health stakeholders be proactive in encouraging involvement of patients in practice Patient Participation Groups (PPGs), aim to ensure these are representative of a practice's patient list demographic, and consider fostering links between the Borough's PPGs to assist in identifying / addressing any access issues): Members suggested that, in order to ascertain progress on this and other recommendations, it may be beneficial for the Committee to engage directly with Chairs of PPGs at some point in the future.

Noting that virtually all actions were the responsibility of external organisations, Members highlighted the need for the Committee to ensure that any actions attributed to SBC were appropriately addressed.

The Committee thanked officers for the prompt collation of a very comprehensive draft Action Plan and approved the content as presented. The first update on progress of the agreed actions would be required in approximately 12 months.

AGREED that the Action Plan in relation to the recently completed Scrutiny Review of Access to GPs and Primary Medical Care be approved.

## ASCH/22/24 PAMMS Annual Report (Care Homes) - 2023-2024

The Committee was presented with the PAMMS Annual Report (Care Homes) for 2023-2024. Led by the SBC Service Manager – Quality Assurance & Brokerage (who began by acknowledging the efforts of the SBC Quality Assurance and Compliance (QuAC) Manager in producing the report), key content was relayed as follows:

- The Provider Assessment and Market Management Solutions (PAMMS) is an online assessment tool developed in collaboration with Association of Directors of Adult Social Services (ADASS) East and regional Local Authorities. It was designed to assist users in assessing the quality of care delivered by providers. The assessment was a requirement of the Framework Agreement (the 'Contract') with providers, and they were contractually obliged to engage with the process.
- Priorities for 2023-2024 were focused on homes on the 'Older Persons Care Home Ranked List' that had received an overall rating of 'Requires Improvement' and Learning Disabilities (LD) homes that had not received a PAMMS assessment in 2022-2023. Assessments were planned around priority of support / level of risk, taking into account factors including date and rating of last CQC / PAMMS assessment, outcomes from the most recent CQC / PAMMS assessment report, other intelligence and data that increased the risk of service quality deterioration, and the number of PAMMS assessments that could be completed within current team resources.
- A summary table of assessments for contracted care homes (covering nursing, residential, LD, and mental health) undertaken by the SBC Quality Assurance and Compliance (QuAC) Team throughout 2023-2024 showed that, of the 28 inspections carried out, two services were rated 'Excellent' overall (both LD settings), 16 services had received a 'Good' overall PAMMS rating, and 10 services had been graded 'Requires Improvement' overall. 17 services were not assessed during 2023-2024.

Overall ratings following assessments published during both 2021-2022 and 2022-2023 were also included for comparison. 2023-2024 had seen a general drop in ratings when set against the outcomes of inspections from the previous two years, most likely as a result of the impact of a strengthened approach towards medicines management (working closer with the North of England Commissioning Support (NECS) Unit to implement more robust medication audits).

- In response to past Committee discussions around challenges within different categories of care home provision, graphs were included illustrating ratings levels for 2021-2024 across services with a nursing, residential, LD, and mental health focus.
- Key themes from assessments that scored an 'Excellent' or 'Good' rating were again listed. In addition to those elements identified in last year's Annual Report (i.e. comprehensive, clear and concise care plans with personalised detail; well-managed medication; robust processes around safe staff recruitment; the promotion of choice and independence to residents by staff; offering residents a choice of meals; evidence of a varied activity programme, tailored to the needs of the individual as well as groups), the completion of monthly audits by the registered manager on all aspects of the service that were robust, consistent and used to critically review the offer (supported by well-managed Action Plans to

improve any shortfalls in provision) was also noted, as were the benefits of an effective key worker system (with service-users being aware of who their key worker was and how the system operated).

- Key themes arising from those assessments that scored 'Requires Improvement' were highlighted, many of which were also recorded in last year's Annual Report (i.e. shortfalls in the completion of staff recruitment records (including gaps in previous employment and DBS checks); inconsistencies in relation to the quality and content of care plans; issues regarding the management of medication; an absence of infection, prevention and control (ICP) procedures; tired décor of some homes; lack of contractual compliance around staff induction, supervision and training). Further identified themes included a lack of / inconsistent management audits and checks, and little evidence of a range of regular, organised meetings where service-users, relatives and staff could provide feedback (or, if they did, that this was listened to, or acted upon appropriately, with people not kept informed of the outcome).
- The report concluded with a reminder of the next steps following a PAMMS inspection, with an Action Plan developed (and subsequently monitored regularly by the responsible QuAC Officer) highlighting those areas that needed an improvement in quality / compliance to ensure they were being delivered to a 'Good' standard. Assessment outcomes were shared with the Care Quality Commission (CQC) and North East and North Cumbria Integrated Care Board (NENC ICB) to help inform their own intelligence-gathering, whilst key themes were relayed to SBC Transformation Managers and SBC Public Health (to aid the design of projects and further interventions to support all care homes improve quality of care, a number of examples of which were documented in relation to the former), whilst ratings were provided to social workers who could share with families searching for a care home so they could access up-to-date information about the Council's view of quality.

Reflecting upon the development of this Annual Report over the last three years, the Committee welcomed the continued inclusion of overall outcomes from previous assessments in addition to the latest rating – this enabled the identification of trends / potential issues within the different categories of care.

The Committee contrasted the significant confidence that the PAMMS programme gave Members in comparison to the decreasing CQC output and commended the SBC QuAC Team for its efforts during the last year. The recent 'Excellent' rating for two of the LD care homes was very encouraging, as was the current status of the Borough's two mental health-focused care homes (particularly given the greater complexity being seen in patients requiring mental health support), though it was felt that inspections of these latter providers should be prioritised given neither were assessed during 2023-2024. Members also highlighted the need for the Council to push medication training / courses as medicines management issues remained prevalent.

Continuing with the theme of those services which were not inspected in the last year, Members asked why The Maple had not been visited given it had been rated 'Requires Improvement' following assessments in both 2022-2023 and 2021-2022 – the Committee was informed that this service had changed provider recently and SBC officers had conducted an inspection last week (the report would be circulated in the near future). Members also requested clarity on the lack of an assessment of Park

House Rest Home in the last three years, and heard that this service had previously chosen not to be on the old framework but were on the new one (and will therefore receive an inspection).

Bringing this item to a close, the SBC Service Manager – Quality Assurance & Brokerage drew attention to the need for the Council to conduct a bed sufficiency assessment next year on all older people’s residential care contracted providers – this meant that PAMMS assessments must be completed on all these providers which would bring challenges for the SBC QuAC Team given existing resource levels. The Committee looked forward to learning of the outcomes of these assessments once completed, particularly to understand ongoing and future costs to the Council and the ability to bring those individuals placed out-of-area back to the Borough.

AGREED that the PAMMS Annual Report (Care Homes) – 2023-2024 be noted.

### **ASCH/23/24 CQC / PAMMS Inspection Results - Quarterly Summary (Q1 2024-2025)**

Consideration was given to the latest quarterly summary regarding Care Quality Commission (CQC) inspections for services operating within the Borough (Appendix 1). Only one inspection report was published during this period (April to June 2024 (inclusive)) – a focused inspection of Elm Tree Medical Centre which saw it maintain its overall rating of ‘Good’.

The Committee reflected on personal experience of visiting Elm Tree and commended the provider for its positive CQC report. It was felt that this family practice, located within a socially deprived area, was a role model for others to follow, and that despite known challenges regarding planning (an issue the Committee had recognised during its recent review of Access to GPs and Primary Medical Care), as well as a limited revenue stream, it was performing very well in terms of enabling access.

Focus turned to the section on Provider Assessment and Market Management Solutions (PAMMS) inspections (Appendix 2), of which there were five reports published during this period (April to June 2024 (inclusive)):

- One service, Real Life Options – Darlington Road, had achieved an overall rating of ‘Excellent’ following its first inspection.
- One service, Ayresome Court, had maintained its overall rating of ‘Good’ (achieving ‘Excellent’ in the ‘suitability of staffing’ domain).
- Of the remaining three reports, Dale Care – Stockton Home Care and Lorne House were downgraded to ‘Requires Improvement’ from a previous overall rating of ‘Good’, whilst Willow View Care Home were still deemed ‘Requires Improvement’ (graded ‘Poor’ in the ‘quality of management’ domain) following a similar overall rating from their previous inspection which was published in December 2022.

With reference to the assessment summary of the Dale Care – Stockton Home Care report, the Committee expressed concern over travel time between calls not being included in the rota and the identified shortfalls in supervision / appraisals. Members felt that these two factors were basic managerial issues, yet the ‘quality of management’ domain for this service had been graded ‘Good’.

Attention moved onto the outcomes from the latest inspection of Willow View Care Home, a service which had been closely monitored by the Council for some time and that now had a new manager (with a good reputation) in post. In response to a Committee query, it was confirmed that the home was still under embargo, with 38 individuals currently residing there (the capacity was 77). Whilst Members were pleased to hear of the already positive impact of the new manager, it was noted that assurances around this provider had been previously received from the SBC Director of Adults, Health and Wellbeing, yet numerous concerns remained.

Reflecting on this and other recently considered CQC / PAMMS update reports, the Committee commented on the contrasting range of quarterly results that were being evidenced through the Council's PAMMS inspection programme (valuable output which was in stark contrast to the dwindling published material from the CQC). Members felt it was clear to see the reasons why some services were achieving positive ratings, and that the PAMMS process showed other settings who were experiencing challenges what they should be aiming for. Indeed, a number of providers had demonstrated the possibility of greatly improved performance – something which gave hope to all.

AGREED that the Care Quality Commission (CQC) Inspection Results – Quarterly Summary (Q1 2024-2025) report be noted.

## **ASCH/24/24 Chair's Update and Select Committee Work Programme 2024-2025**

### Chair's Update

The Chair stated that further clarity would be sought on the planned 2024-2025 meeting dates for the Tees Valley Joint Health Scrutiny Committee – any updates would be shared with the Council's representatives once received.

### Work Programme 2024-2025

Consideration was given to the Committee's current work programme. The next meeting was due to take place on 17 September 2024, with anticipated items to include the Healthwatch Stockton-on-Tees Annual Report 2023-2024, a report on SBC Community Spaces, and a draft scope and plan for the Committee's next in-depth review of Reablement Services.

AGREED that the Chair's Update and Adult Social Care and Health Select Committee Work Programme 2024-2025 be noted.