

Adult Social Care and Health Select Committee

A meeting of the Adult Social Care and Health Select Committee was held on Tuesday 16 December 2025.

- Present:** Cllr Marc Besford (Chair), Cllr Nathan Gale (Vice-Chair), Cllr Carol Clark, Cllr John Coulson, Cllr Lynn Hall, Cllr Jack Miller, Cllr Vanessa Sewell, Cllr Sylvia Walmsley
- Officers:** Angela Connor, Kimberley Edwards, Rebecca Gray, Graham Lyons (A,H&W); Francesca Magog, Gary Woods (CS)
- Also in attendance:** Cllr Pauline Beall (SBC Cabinet Member for Health and Adult Social Care); Philip Kerr (Carers Federation); Adrian Green (Teeswide Safeguarding Adults Board)
- Apologies:** None

ASCH/54/25 Evacuation Procedure

The evacuation procedure was noted.

ASCH/55/25 Declarations of Interest

There were no interests declared.

ASCH/56/25 Minutes

Consideration was given to the minutes from the Committee meeting held on 18 November 2025. Attention was drawn to the following:

- Minutes: Further to comments made at recent meetings, a request had been made to the SBC Head of Policy, Development & Public Affairs for a more regular and timely flow of information to the Committee in relation to Tees Valley Care and Health Innovation Zone developments. It had since been indicated that updates provided by the three working groups to the Strategic Programme Board may be able to be shared.

AGREED that the minutes of the meeting on 18 November 2025 be approved as a correct record and signed by the Chair.

ASCH/57/25 Teeswide Safeguarding Adults Board (TSAB) - Annual Report 2024-2025

The Committee considered the latest Teeswide Safeguarding Adults Board (TSAB) Annual Report which covered the 2024-2025 period. Presented by the TSAB Independent Chair (who began by reminding Members that the Board covered four Local Authority areas), content was highlighted as follows:

- Key Achievements 2024-2025: A wide range of work had been undertaken and completed during the year, including multi-agency audits on transitions, a review of self-neglect policy and guidance, the publication of three Safeguarding Adult

Reviews (SARs) (including presentations delivered to two GP Engagement Sessions to share learning from these), the launch of re-developed professional curiosity and professional challenge briefings, Board approval of the Adult Exploitation Strategy, and the convening of a multi-agency rough sleeping meeting (after the Government mandated Safeguarding Adults Boards to take responsibility for this issue last year).

- Safeguarding Data 2024-2025: 9,056 concerns had been raised across the TSAB footprint during 2024-2025 (an increase of 7% compared to 2023-2024), with 2,985 Section 42 Enquiries commencing (an increase of 3% from 2023-2024). However, for Stockton-on-Tees, both these measures had decreased by 7% (this was not considered significant at this stage).

On average, 174 concerns were received per week across Tees. Of these, 24% were raised from care homes (up 29% on the previous year), 10% from social care (up 38%), 8% from NHS secondary care, and 7% from both the police and care at home services.

Regarding Section 42 Enquiries, an individual's own home (48%) remained the most common setting for risk across Tees, reflecting trends observed in previously published national data – this was followed by care homes (28%), community (7%), hospital (7%), and 'other' (10%). The leading areas of risk identified were 'Neglect and Acts of Omission' (22%), 'Physical Abuse' (18%), 'Domestic Abuse' (15%), and 'Financial and Material Abuse' (15%). While most categories of abuse saw a decline during this reporting period, instances of 'Domestic Abuse', 'Financial and Material Abuse' and 'Self-Neglect' (often the most catastrophic risk type which could lead to death) increased when compared with the 2023-2024 data. There had been a 22% increase in the number of Section 42 Enquiries relating to people aged under 65.

In terms of the Board's performance indicators, three of the four had been achieved, but PI 2 (*percentage of those who were asked their desired outcome in 2024-2025*) was not. The Board was disappointed that this measure had fallen short (92%) of the target (greater than 95%) and had initiated work to ensure all involved Local Authorities improved upon this important element. It was possible that some data issues existed which did not give a true reflection of the actual numbers being asked their desired outcome.

- Communication and Engagement: The 2024-2025 year had seen 158,849 visits to the TSAB website (an 8.8% increase on 2023-2024), with a further increase in the number of people following the Board's Facebook content. Other activity had included a radio interview and advert, local magazine impressions, the delivery of TSAB newsletters, and 10 events held in line with key campaigns (attracting a combined attendance of 687 professionals).
- Training: 7,582 children and adult services learners had engaged in training during 2024-2025 from across 631 organisations. 23,245 e-learning course registrations were received (with a completion rate of 82%), and 1,427 learners had completed Safeguarding Adults Level 1. Other training involved the delivery of 21 webinar sessions, four of which were trauma-informed (with 116 professionals accessing these).

- Safeguarding Adults Reviews (SARs): In 2024-2025, three SARs were published – JJ, Jack, and Susan (further details of which were included within the Annual Report). During the reporting period, eight SAR notifications were considered, with two progressing to a mandatory SAR, two progressing to a discretionary SAR, and four deemed to require ‘no further action’ (though three of these proceeded as a single-agency review, with learning to be presented back to the SAR sub-group in 2025-2026).
- Our Priorities 2025-2026: 2025-2026 would see the implementation of a new three-year TSAB Strategic Business Plan (included within the papers for this meeting) featuring new priorities, aims and objectives. Three key priorities had been identified – ‘Information, Engagement and Involvement’, ‘Confident, Competent Practice’, and ‘Emerging Challenge and Enabling Solutions’.

The Committee thanked the TSAB Independent Chair for presenting the very detailed report and expressed encouragement around the stated training data. Members then sought clarity over the suggestion of potential data collection issues. Challenges in identifying the most prominent type of abuse for an individual case (often this could involve multiple elements) were noted, as was the continuous pursuit of ensuring better data so the Board and its partners had a more accurate sight of the existing safeguarding arena.

AGREED that the Teeswide Safeguarding Adults Board (TSAB) – Annual Report 2024-2025 be noted.

ASCH/58/25 Stockton-on-Tees Independent Complaints Advocacy - Annual Report

Following an approach to the Carers Federation (which delivered the North East NHS Independent Complaints Advocacy (ICA) service in Stockton-on-Tees) earlier in 2025, a presentation was given to the Committee outlining the current local ICA offer and the themes that were emerging in relation to complaints about health and care provision. Introduced by the Operations Manager from the Carers Federation, content included the following:

- Stockton contract: The NHS ICA service was a statutory requirement commissioned by the Local Authority, and provided free, confidential and independent advocacy support to people wishing to raise a complaint about their NHS-funded treatment or care. The current contract began on 1 October 2024, with the offer available to all residents in the Stockton-on-Tees postcode area, regardless of where NHS-funded care was delivered. The service had been awarded the industry standard Quality Performance mark, and all advocates held the national independent complaints advocacy qualification (City and Guilds).
- Our service: The staff team consisted of an Operations Manager, a Senior Advocate, and the advocates themselves (including a Deaf Advocate (British Sign Language (BSL)-supported)). The administrative base was in Gateshead, and in addition to the freephone helpline, website, email address and text number, there was access to interpreters and a signposting resource to independent medical advice.
- How we can help: The service offered a wide range of assistance – this included signposting, listening and understanding problems, explaining outcomes / options / time-limits, identifying where a complaint should go, help with letter-writing,

facilitating communication (e.g. interpreting), empowering individuals (so they communicated how they want to, not how providers wanted them to), attending meetings, providing information, following-up with the NHS, and liaison with the Parliamentary and Health Service Ombudsman (PHSO). The service also dealt with healthcare-related prison complaints.

In contrast, the service did not advise clients what to do, nor deal with private healthcare or with clinical negligence claims. It also did not investigate cases, nor, importantly, take sides.

- Working in partnership: Anonymous information was provided to Healthwatch, and the service liaised with hospital complaints teams / Practice Managers (which it had good relationships with) to explain what clients wanted from the complaints process. It also represented patient voices at the local NHS Trust 'Experience of Care Committee', signposted clients to other services, and promoted itself through the voluntary sector (e.g. Wellbeing Hub) and GPs.
- The process: Referrals could be made by phone / email / writing (or even WhatsApp video) either directly by the client or via an organisation. A self-help information pack was provided and first contact with an advocate would be within five working days. Once consent was obtained, a complaint letter would be collated, a response received, and a local resolution meeting (face-to-face or virtual) may follow (if necessary, there was also an option to liaise with the PHSO). The service had no waiting lists.
- Who we support: Anybody who had a complaint about NHS treatment or care. It was acknowledged that some people may need more support (e.g. those with mental health problems, who did not speak English, who had suffered a bereavement, carers, those with a learning disability, or deaf clients).
- Complaints standards framework: The PHSO had developed over the last 24 months, and the North East NHS ICA was a member of the national working group and had co-authored advocacy guidance. The framework was about making the NHS complaints system more user-friendly for both the NHS and anyone wishing to raise a concern.
- Year 1 performance: A table illustrating data on enquiries, new cases, closed cases, re-opened cases, active cases, and service hours was provided for each quarter across the first year of the current contract. The total numbers for the year-end were considered healthy for a new contract.
- Usage and access: For new cases across the Borough, 78% identified as female, 17% were from other ethnicities, 58% were below 55 years-old, 20% were over 66 years-old, 63% had a declared disability, and 57% were in the 'unemployed / retired' category. The service was mostly accessed via telephone or email (75%), with the remaining 25% via an external referral from a professional.
- Complaints referrals: In terms of who signposted / referred residents for advocacy support, 42% came from the NHS, 35% from the statutory / voluntary sector (including Healthwatch), 13% from current / previous users (or word-of-mouth), and 10% via the internet / media.

- Themes and locations: The NHS services that the Borough's residents complained against were the North Tees and Hartlepool NHS Foundation Trust (50%), out-of-area provision (the majority being South Tees Hospitals NHS Foundation Trust) (23%), general practices (11 out of 21 active practices) (22%), and the mental health trust (5%).

30 themes were recorded in the first year of the contract, with the top 10 listed within the presentation. The top two (multiple aspects of clinical treatment, and attitude of staff) accounted for 37% of all complaint enquiries.

- Outcomes: Regarding complaint outcomes, cases usually followed the NHS complaints process which involved an explanation, apology, service improvements, and possible redress. 7% were re-opened for further explanation, 5% involved satisfactory local resolution meetings, 28% had satisfactory apologies and explanations in writing provided, and 10% saw the PHSO rulings not upheld as all local work was deemed sufficient. The remaining 50% of cases covered clients who decided not to progress through the whole process as they received verbal assurances / discussions with the health provider or re-considered their position after advocacy support for the best course of action (i.e. legal route).

Thanking the Operations Manager for his informative presentation, the Committee asked whether the 75% figure for those accessing the service via telephone and email could be broken down into a percentage for each as there was ongoing debate around how comfortable / able some residents were in using digital means of engagement with providers. Members heard that families often supported their relatives in using digital platforms to make contact with required services.

AGREED that the Stockton-on-Tees Independent Complaints Advocacy information be noted.

ASCH/59/25 Stockton-on-Tees Borough Council - Local Authority Assessment

Consideration was given to a presentation regarding the outcomes from the recently published Care Quality Commission (CQC) report following the late-2024 inspection of Stockton-on-Tees Borough Council (SBC) adult social care services (a copy of which was also included within the papers for this meeting). Led by the SBC Assistant Director – Adult Social Care, and supported by the SBC Cabinet Member for Health and Adult Social Care, details covered the following:

- Rating and Scoring: In the CQC's report (published October 2025), SBC received a rating of 'Good' overall, with a score of 64 (out of 100) – this reflected nine individual ratings across four themes, each of which were graded either '2' or '3' (out of '4').
- Celebrating our Success: A celebration event with staff working across SBC Adult Social Care was held in Dunedin House following the publication of the CQC report.
- What is next?: The Council was not complacent and aimed to move from 'Good' to even better. There were no surprises within the CQC's report, and the Council was already on its journey of development. The CQC had given validation of where SBC had been and further direction for where to go next.

A summary of the identified ‘strengths’ and ‘areas for development’ for each of the nine categories across the four inspection themes was then outlined. Under ‘Theme 3’ (Safeguarding), and further to the discussions on the previous agenda item (*Teeswide Safeguarding Adults Board (TSAB) – Annual Report 2024-2025*), it was noted that, for SBC, 99% of people’s outcomes from completed Section 42 Enquiries were either partially or fully met.

- What we have done since the visit: In response to the CQC’s inspection, details of what SBC had implemented since were highlighted. This included ongoing work on the ‘front door’ to services, the introduction of performance dashboards and performance clinics, the strategic prioritisation of carers this year, the co-production of an Adult Social Care Strategy with the Making It Real Board (MIRB), signing-up to the Social Work Race Equality Standards and reviewing equality, diversity and inclusion training, and a new process for recording and learning from formal complaints.
- Action Planning: The Council was finalising its detailed Action Plan based on the feedback from the CQC, feedback from the people it supported, learning from complaints and compliments, scrutiny review, and engagement with partners. This detailed plan of development (which aimed to be a ‘business as usual’ document rather than merely a response to the CQC’s findings) would align with the SBC ‘*Powering Our Future*’ programme, transformation and improvement plans, and the SBC Adult Social Care Strategy and Local Account.

Progress would be tracked via the Adult Social Care Business Planning Steering Group, the Adults, Health and Wellbeing Senior Management Team, Corporate Management Team (CMT), Lead Member oversight, and the Adult Social Care and Health Select Committee. Checks and balances on progress would be achieved via the staff ‘Making It Happen Group’, performance reporting (including monthly reporting to the SBC Chief Executive), leadership forums, deep dives, sector-led improvement, and peer challenge.

Responding to the information provided, the Committee drew attention to the CQC’s finding around the need for an increased understanding and support offer for self-funders, and felt this was particularly pertinent in light of the Council’s financial position and the ongoing pressures associated with adult services (which had been discussed by the SBC Executive Scrutiny Committee earlier today (18 December 2025)). The SBC Cabinet Member for Health and Adult Social Care noted the imminently anticipated announcement on the latest Local Government Financial Settlement which should provide clarity on the future Council budget, though it was also highlighted that ‘debt’ was a subjective term and that there were instances of people receiving support where it would not be appropriate to chase an outstanding bill / balance.

Regarding the transitions audit schedule referenced within the TSAB Annual Report 2024-2025 (page 14), the Committee observed that SBC had provided a positive quote in relation to ‘*significant developments in the transitions process*’, and felt this appeared to be incompatible with the CQC’s view that significant improvement was needed to support young people transitioning from children’s to adult services. In response, SBC officers acknowledged that, whilst there had been good progress around transitioning for those individuals with disabilities, work was required on this topic.

A final query was raised around the location of SBC Adult Social Care services and the benefits (particularly financially) of bringing them together. Aside from day service provision and those staff embedded within health provider buildings, it was confirmed that only the SBC Occupational Therapy service was now sited outside Dunedin House, and there were plans in place to bring this over to the Council's new primary accommodation. The item concluded with the Chair asking for thanks to be passed on to all staff within SBC Adult Social Care.

AGREED that the information provided in relation to the outcomes from the recently published Care Quality Commission (CQC) report following the late-2024 inspection of Stockton-on-Tees Borough Council (SBC) adult social care services be noted.

ASCH/60/25 Scrutiny Review of Stockton-on-Tees Adult Carers Support Service

The fourth, and final, evidence-gathering session for the Committee's review of Stockton-on-Tees Adult Carers Support Service reflected on feedback from carers who had used / were using the service, external carer-related scrutiny of Stockton-on-Tees Borough Council (SBC), and other approaches to / good practice in supporting carers.

CONSULTATION WITH AND FEEDBACK FROM CARERS

SBC officers had been asked to provide further detail on the results of recent consultation with carers regarding the local support offer. Led by a SBC Development Officer, and supported by the relevant SBC Service Manager and SBC Service Manager – Direct Services, a presentation was given which included the following:

- Carers Consultation (Spring 2025): SBC received 70 responses to its Carers Consultation Survey 2025. Three key themes were identified (carers requiring information and communication earlier; hospital and healthcare support; carer support groups and peer connection), with a number of actions already taken in light of carer feedback.
- Open communication channels: A range of mechanisms were in place to engage with carers, including social media platforms, fortnightly email bulletins, a quarterly carers newsletter (included within the papers for this meeting), an online feedback form (which was also handed out during groups / events), and requests for carers to volunteer with recruitment. Carers were also involved during the late-2024 CQC assessment of SBC adult social care services.
- LiveWell Hub Activities: Numerous sessions were held at the LiveWell Dementia Hub to support carers and those living with dementia, and there was close working with Stockton Libraries and Stockton Learning and Skills, Age UK, and Young at Heart to facilitate workshops and groups. Each group provided a welcoming space for carers to connect and participate in enriching activities, as well as access the Stockton-on-Tees Adult Carers Support Service and Dementia Service.
- In the community: Carers consistently told SBC what was helpful, what needed improving and what made caring easier. The Council responded by adding new activities, signposting or arranging links with other services, and developing new resources when carers highlighted gaps.

- Staff Carer Peer Support Group: SBC staff who were carers themselves were supported by the Council in several ways. By recognising their vital role in providing unpaid care, staff could benefit from access to advice, guidance and wellbeing resources, balance caring responsibilities by working flexibly, access peer support and networks, and undertake a Carer's Assessment to discuss their role and its impact upon them. SBC had also introduced a Carers Passport for staff (included within the papers for this meeting) which recorded their caring responsibilities and agreed workplace adjustments – this helped ensure consistent support if they moved roles or managers, promoted understanding, and reduced the need to repeat their story.
- Carer involvement in the CQC assessment: Carers were actively involved in the co-production process for the recent CQC inspection. They supported the self-assessment document by sharing their experiences and feedback, gave honest reflections about the support services they received, shared lived experience to demonstrate impact, and highlighted strengths and areas of development. They also attended a session with CQC assessors during the on-site visit to talk about their experiences of co-producing with the Council, with their voices helping to demonstrate how the service valued partnership-working and continued improvement.
- Making It Real Board: SBC actively promoted the Making It Real Board with carers and shared updates about any involvement opportunities in the carers newsletters.
- Co-Production Champions: Monthly update meetings were held with the SBC Co-Production Champions (who also joined the Co-Production Week celebration in June 2025).

The Committee welcomed the information provided and was particularly encouraged by the support offer for SBC staff who were involved in giving unpaid care. With reference to the recently published CQC report on SBC adult social care services, Members asked if there had been any carer-related developments in response to the CQCs findings. SBC officers stated that contact lists had been simplified (depending on a carer's requirements), and links had been reinforced with the health sector (including hospitals, GPs and pharmacies), as well as internal SBC teams, to promote the carers agenda.

Members praised the Carers Passport concept and queried how many staff had taken this up – confirmation would be provided following this meeting.

Noting the Committee's recent visit to the LiveWell Dementia Hub as part of this ongoing review, Members spoke of how highly the carers they met valued informal peer support (e.g. WhatsApp groups), but also the need for better bereavement services. Regarding the latter, it was stated that a carer whose partner had passed away was now running a support group for those who had suffered the loss of a loved one.

Discussion ensued around the concept and composition of the Making It Real Board, with the Committee encouraging the Council to ensure it was as representative of clients and carers across the Borough as it could be. Members heard that, whilst there was never the intention for the Board to have a large membership, it was an evolving entity which could be developed further now it was established. Importantly, several co-production groups (involving a host of other individuals) fed into the Board

which meant a greater number of people with lived experience and expertise were helping shape local services. In related matters, efforts had also been made to ensure an item about the Board was always included in Stockton News.

Finally, the Committee noted the reference within the Teeswide Safeguarding Adults Board (TSAB) Annual Report 2024-2025 (considered earlier in this meeting) to a local Lived Experience Forum, and felt that care was needed to avoid too many groups being initiated with similar purposes (potentially causing confusion). Regarding carers, it was stated that SBC was trying to be smarter with how it communicated with these individuals and did not want to bombard them with information.

EXTERNAL CARER-RELATED SCRUTINY OF SBC

The Care Quality Commission (CQC) had recently published its final report following the late-2024 inspection of SBC adult social care services. For the purposes of this review, commentary relating to 'carer' / 'carers' was highlighted for the Committee's attention, as were any 'carer/s'-related references from the preceding Local Government Association (LGA) peer review that was undertaken and reported on prior to the CQCs visit.

OTHER APPROACHES TO / GOOD PRACTICE IN SUPPORTING CARERS

Examples of carer-related support offers elsewhere across the UK had been identified for the Committee's information, as well as good practice guidance documentation. Regarding the latter, attention was drawn to the CQC update given to the National Scrutiny Officer Network in March 2025 on its two-year programme of baselining to determine how well Local Authorities were meeting their social care duties under part 1 of the Care Act – this included an emerging theme around a need for improvement in supporting unpaid carers, particularly the personalisation of support in differing needs dependent on age and needs of the person being carer for (i.e. adult carer of a young person, children caring for adults).

SCOPE AND PROJECT PLAN

As the evidence-gathering phase for this review was now complete, a summary of all the information received would be collated and presented at the next meeting in January 2026 – draft recommendations would then be formulated. Members were also reminded that feedback in relation to the Committee's visit to the LiveWell Dementia Hub in November 2025 was circulated via email yesterday (15 December 2025).

AGREED that information on feedback from carers who had used / were using the Stockton-on-Tees Adult Carers Support Service, external carer-related scrutiny of Stockton-on-Tees Borough Council (SBC), and other approaches to / good practice in supporting carers, be noted.

ASCH/61/25 Regional Health Scrutiny Update

Consideration was given to the latest Regional Health Scrutiny Update report which summarised the work of regional health scrutiny committees and highlighted some recent health-related developments impacting on the Tees Valley and / or wider North East and North Cumbria footprint. Attention was drawn to the following:

- Tees Valley Joint Health Scrutiny Committee: Redcar & Cleveland Borough Council was hosting the Committee in 2025-2026. The Committee meeting held on 17 July 2025 included update items on NHS dentistry, Child and Adolescent Mental Health Services (CAMHS), Tees respite care / adult learning disabilities, and the Tees Valley Community Diagnostic Centre (which the Committee subsequently visited on 24 October 2025). The meeting on 2 October 2025 considered information on suicide prevention, community mental health transformation, vaping / nitrous oxide, and winter planning.

The most recent meeting took place last week (11 December 2025) and included an update on the clinical services strategy from the University Hospital Tees. It was noted that there were likely to be significant changes around service structure / delivery being proposed in 2026 which would require appropriate consultation and engagement with the public, as well as with scrutiny functions, across the Tees Valley.

Members who represented Stockton-on-Tees Borough Council (SBC) on the Tees Valley Joint Health Scrutiny Committee expressed concerns about attendance levels from other involved Local Authorities, something which had been an issue for some time now. Reference was also made to the recently announced public inquiry into Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV), a development which SBC had called for some years ago but one that did not seem to find support with neighbouring Councils who were also part of this joint Tees Valley scrutiny function.

- Sustainability and Transformation Plan (STP) / Integrated Care System (ICS) Joint Health Scrutiny Committee: No further developments regarding this Joint Committee since the previous update in June 2025. In related matters, regional developments highlighted included the ongoing promotion of the NHS North East and North Cumbria Integrated Care Board (NENC ICB) 'Here to help you' webpage and NHS 'Be wise, immunise' campaign, support for people struggling to stay in work because of health problems, a new People's Hub (provide regular updates and details of events, involvement activities and proposed changes to anyone who signs up), the availability of emergency contraception from community pharmacies, and an update on the requirements for ICBs to reduce running and programme costs. More locally, some recent North Tees and Hartlepool NHS Foundation Trust news items were also noted.

AGREED that the Regional Health Scrutiny Update report be noted.

ASCH/62/25 Chair's Update and Select Committee Work Programme 2025-2026

CHAIR'S UPDATE

The Chair stated that the Committee's final report following its recently completed Reablement Service review was presented to, and subsequently endorsed by, Stockton-on-Tees Borough Council (SBC) Cabinet last week (11 December 2025). A draft Action Plan in relation to the recommendations would now be collated and presented to the Committee for approval in February 2026.

WORK PROGRAMME 2025-2026

Consideration was given to the Committee's current work programme. The next meeting was due to take place on 20 January 2026, and given that the evidence-

gathering phase for the current Stockton-on-Tees Adult Carers Support Service review had now concluded, it was proposed and then agreed to convert this to an informal session where a summary of the evidence received would be considered and draft recommendations formulated.

AGREED that the Chair's Update and Adult Social Care and Health Select Committee Work Programme 2025-2026 be noted.

Chair:

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