ADULT SOCIAL CARE AND HEALTH SCRUTINY PANEL

A meeting of the Adult Social Care and Health Scrutiny Panel was held on Monday 20 October 2025.

PRESENT: Councillors J Kabuye (Chair), D Branson, D Coupe (Vice-Chair), D Jackson, T Mohan, S Platt and Z Uddin

OFFICERS: A Conti, Cowley, A Glossop, R Johansson, C Jones, D McAleavey and C Orr

APOLOGIES FOR ABSENCE: Councillor J Banks

25/23 **WELCOME AND FIRE EVACUATION PROCEDURE**

The Chair welcomed all attendees to the meeting and explained the fire evacuation procedures.

25/24 **DECLARATIONS OF INTEREST**

Name of Member	Type of Interest	Item / Nature of Business
Cllr David Coupe	Non-Pecuniary	Councillor-Governor, South Tees NHS Trust

25/25 **MINUTES- ADULT SOCIAL CARE AND HEALTH SCRUTINY - 8 SEPTEMBER 2025**

The minutes of the Adult Social Care and Health Scrutiny Panel meeting held on 8 September 2025 were submitted and approved as a correct record.

SUSPENSION OF COUNCIL PROCEDURE RULES - ORDER OF BUSINESS.

In accordance with Council Procedure Rules 4.8.1 (d) and 4.8.25 (iii) the Chair proposed a motion to change the order of business at the meeting. The motion proposed that Agenda Item 7 “Healthy Placemaking – Terms of Reference” be heard next.

AGREED that the order of business for the remainder of the meeting be items 7, 5, 6, 8, 9 and 10.

25/26 **HEALTHY PLACEMAKING - TERMS OF REFERENCE**

The Democratic Services Officers presented some potential Terms of Reference for the scrutiny review topic ‘Healthy Placemaking with a Focus on Childhood Obesity’. The Chair invited Members to discuss the proposals and to consider any revisions or additions.

Agreed that the Terms of Reference for the scrutiny review of Healthy Placemaking with a Focus on Childhood Obesity, were approved as follows

1. **Establish an understanding of childhood obesity in Middlesbrough, including current prevalence rates, trends over time, variation by ward or demographic group and links to deprivation, ethnicity, and other social determinants.**
2. **Identify the key aspects of healthy placemaking and assess current and planned activity within Middlesbrough, such as public health, planning, transport and environment matters.**
3. **Examine how partnership working contributes to the current reduction of childhood obesity and identify how this could be further developed by considering areas of best practice.**
4. **Explore how healthy placemaking can be embedded more effectively into local council policies and strategies.**

25/27 **HEALTHY PLACEMAKING - PLANNING**

The Strategic Policy Manager (Planning) and the Creating Active & Healthy Places Lead (Public Health South Tees) delivered a presentation on Healthy Placemaking through Planning.

The presentation provided an overview of the planning system, including national legislation, the National Planning Policy Framework (NPPF), and associated practice and design guidance. Members also received information on the Local Plan and the development control process, and how these shaped the built environment. The officers highlighted several relevant paragraphs from the NPPF (including paragraphs 96c, 97, 103 and 109 e & f), which emphasised the role of planning in promoting healthy, safe and accessible communities.

A definition of a 'healthy place' was shared, along with an explanation of how this aligned with the Council Plan priority of creating a healthy place; improving life chances for residents through tackling health inequalities, promoting inclusivity and reducing poverty. The Joint Health and Wellbeing Strategy and Joint Strategic Needs Assessment were also referenced, with particular focus on the two missions most relevant to spatial planning; 'creating places and systems that promote wellbeing' and 'supporting people and communities to build better health.'

Members were informed that Middlesbrough's Local Plan (published March 2025) integrated health considerations throughout. The Creating Active and Healthy Places Lead highlighted that only around 30% of planning authorities across the country routinely used a Health Impact Assessment (HIA) as part of the planning process, and it was therefore positive that Middlesbrough was among those adopting this approach. The HIA was explained as a tool used to identify the potential health and wellbeing impacts of new plans or major developments, helping to ensure that design, location and access considerations supported healthier living for local communities. Examples were provided, such as encouraging new housing developments to include usable open spaces, promote food growing and be situated within accessible distance of supermarkets (800m) to support healthier food choices.

The Panel heard that the HIA process also informed decisions on applications relating to hot food takeaways. A heat map was presented which showed existing takeaway locations, 400m zones around schools and local Year 6 obesity prevalence by ward, highlighting the contrast between those in the North and South of the town. It was explained that the Healthy Weight Declaration and local policy supported the restriction of new takeaways.

Finally, Members were given an overview of how specialist roles including hybrid public health-planning posts, added value by embedding health considerations throughout the planning process and supporting healthy placemaking principles in decision-making.

A Member queried how fast-food takeaways were managed within the planning system, noting the wide range of food outlets and classifications. Members were informed that the definition of a fast-food outlet originates from Public Health guidance, while national bodies, including the Office for Health Improvement and Disparities (OHID) and the Ministry of Housing, Communities and Local Government (MHCLG) were continuing to develop a clearer, standard definition. The Strategic Policy Manager advised that a robust policy had been developed with thresholds in place so that new takeaway applications in specific areas would generally be recommended for refusal, while existing outlets would remain. It was explained that even an interim policy had deterred some applicants.

A Member asked how progress was measured. Officers explained that the impact of healthy placemaking was assessed through benchmarking against national good practice, monitoring how well health was embedded in the Local Plan and by tracking relevant indicators, including decisions on hot food takeaways.

Another Member queried the key challenges faced by officers. In response, officers highlighted the importance of maintaining political and organisational commitment to healthy placemaking, as well as building skills and awareness across the Council to ensure policies were consistently applied and ambitions delivered.

Members noted the information provided and the Chair thanked the officers for their attendance.

NOTED.

25/28 **HEALTHY PLACEMAKING - TRANSPORT & INFRASTRUCTURE**

The Head of Transport & Infrastructure and the Principal Transport Planning Officer delivered a presentation on Healthy Placemaking through Transport and Infrastructure.

The presentation included;

- Data on modes of travel and levels of uptake.
- Travel to school, including walking rates.
- An overview of the Highway Infrastructure Delivery Plan and Integrated Transport Strategy.
- The City Region Sustainable Transport Settlement and Levelling Up Fund.
- Road safety and road safety initiatives in schools.

During the presentation, it was noted that, Middlesbrough experienced high levels of childhood obesity and physical inactivity, despite having low car ownership (with 33.1% of households having no car or van) and short averages distances between home and school (1.6 miles for primary schools and 3.5 miles for secondary schools). A Member expressed interest in the vehicle ownership figures and requested further data, broken down by ward and demographic characteristics.

It was reported that 46% of children walk to school, with lower figures recorded over recent years. Members expressed concern and surprise at the declining rate and queried the reasons behind it. Officers stated that they believed the main barriers to walking were perception-based, with parents believing journeys were “too far” or unsafe, despite Middlesbrough being a compact town with low topography, with the average walk to school of 30 minutes and an average cycle time of 10 minutes. It was suggested that parental choice was the greatest influencing factor, and that schools were the most effective community leaders to support a cultural shift in attitudes.

A Member also raised concerns about the reduction in local bus services, noting that this limited travel choices for some families. Officers acknowledged the concern but explained that bus provision was outside of the Council’s control, as services were operated by private companies driven by commercial viability.

The Principal Transport Planning Officer then presented road safety data, which showed a downward trend in overall casualties, with a slight increase in child KSI (Killed or Seriously Injured) figures in recent years and an anomaly in data trends during the pandemic period. The Officer emphasised that, overall road safety levels in Middlesbrough were good, with relatively low accident rates.

Officers explained that a range of education and infrastructure initiatives were delivered in schools to promote safer, more active travel. This included 74 places for Balanceability, 1,057 Bikeability places for Year 3 and 1,259 for Year 5/6 pupils, as well as school assemblies, Dr Bike/Fix-It sessions, guided rides and secure cycle parking. It was noted that a behavioural shift (modal change) was required to reduce school gate congestion and increase active travel. Officers highlighted that parental confidence and clear communication would be key in addressing perceptions that walking is unsafe or that distances were too great.

The Principal Transport Planning Officer then outlined a number of wider initiatives aimed at encouraging sustainable and active travel and reducing reliance on private cars, supported through funding from the Tees Valley Combined Authority and the City Region Sustainable Transport Settlement. Current schemes out for consultation included the Green Lane cycleway and the Newport Road bus corridor and cycle improvements, which aimed to create the infrastructure needed to support healthier travel choices.

The Chair thanked the Officers for their presentation and responses to questions and noted that the additional information requested would be circulated in due course.

NOTED.

25/29 **OVERVIEW AND SCRUTINY BOARD UPDATE**

The Chair provided an update on items discussed at the Overview and Scrutiny Board meeting held on 17 September 2025, which included:

- An update from the Executive Member for Education.
- Progress on the Forward Plan Actions.
- Agreement to the Terms of Reference for the 'Poverty' Scrutiny topic.

NOTED.

25/30 **DATE AND TIME OF NEXT MEETING - 1 DECEMBER 2025, 4.00PM**

The next meeting of the Adult Social Care and Health Scrutiny Panel had been scheduled for 1 December 2025 at 4.00 p.m. in the Mandela Room, Town Hall.

NOTED.

25/31 **ANY OTHER URGENT ITEMS WHICH IN THE OPINION OF THE CHAIR, MAY BE CONSIDERED.**

None.