

ADULT SOCIAL CARE AND SERVICES SCRUTINY PANEL

A meeting of the Adult Social Care and Services Scrutiny Panel was held on Tuesday 19 December 2023.

PRESENT: Councillors J Walker (Chair), D Jackson (Vice-Chair), S Tranter and G Wilson

PRESENT BY INVITATION: Councillors

OFFICERS: S Blood and E Scollay

APOLOGIES FOR ABSENCE: Councillors TA Grainge and M Nugent

23/30 **DECLARATIONS OF INTEREST**

There were no declarations of interest received at this point in the meeting.

23/31 **MINUTES- ADULT SOCIAL CARE AND SERVICES SCRUTINY PANEL - 21 NOVEMBER 2023**

The minutes of the Adult Social Care and Services Scrutiny Panel meeting held on 21 November 2023 were submitted and approved as a correct record.

23/32 **INTEGRATION OF HEALTH AND SOCIAL CARE- VERBAL UPDATE**

The Director of Adult Social Care and Health Integration provided a verbal update to the Panel. He advised that there was currently a round of Integrated case partnership with the NHS and this would have an impact on Director posts.

AGREED

That the update be noted.

23/33 **TEESWIDE SAFEGUARDING ADULTS BOARD (TSAB)- ANNUAL REPORT**

The Director of Adult Social Care and Health Integration was in attendance to present the Teeswide Safeguarding Adults Board Annual report, on behalf of Darren Best, Independent Chair.

The Panel were advised that the Teeswide Safeguarding Adults Board (TSAB) was a statutory body responsible for protecting adults' rights to live independent lives, free from abuse and neglect. The Board works collaboratively with partners to set the strategic direction for adult safeguarding in Tees and seeks assurance from partners that they have appropriate and robust safeguarding arrangements in place.

There are 6 statutory partners:

- Cleveland Police
- Hartlepool Borough Council
- Middlesbrough Council
- NHS North East and North Cumbria Integrated Care Board
- Redcar & Cleveland Borough Council
- Stockton-on-Tees Borough Council

And 23 non-statutory partners:

- A Way out
- Beyond housing
- Care Quality commission
- Catalyst Stockton-on-Tees (Voluntary Development Agency)
- Cleveland Fire Brigade
- Probation Service
- Department for Work and Pensions
- Hartlepool & Stockton-on-Tees Safeguarding Children Partnership
- Hartlepower
- Healthwatch Hartlepool
- Healthwatch South Tees
- Healthwatch Stockton-on-Tees
- HMP Holme House Prison
- Middlesbrough Voluntary Development Agency
- North East Ambulance Service
- North Tees & Hartlepool NHS Foundation Trust
- Office of the Police and Crime Commissioner for Cleveland
- Redcar & Cleveland Voluntary Development Agency
- South Tees Hospitals NHS Foundation Trust
- South Tees Safeguarding Children Partnership
- Tees Esk & Wear Valleys NHS Foundation Trust
- Teesside University
- Thirteen Housing

The Panel were made aware that the Board has continued to engage with key strategic partnerships across Tees including the Local Safeguarding Children Partnerships, Health & Wellbeing Boards, Community Safety Partnerships, Tees Strategic Exploitation Group (formerly known as Vulnerable Exploited Missing and Trafficked), Serious and Organised Crime Group and the Cleveland Anti-Slavery Network as well as regional and national Safeguarding Adults Boards.

The Board has a number of Sub-Groups, who lead on key pieces of work in order to achieve the aims and objectives set out in the Board's Strategic Business Plan 2022/23. The purpose of the Sub-Groups are summarised below.

Safeguarding Adult Review (SAR)

Leads on the development and implementation of the Teeswide SAR Policy and Procedures to ensure that learning from any reviews undertaken locally and nationally is disseminated appropriately. The Sub-Group also considers notifications for SARs and makes recommendations to the Independent Chair.

Communication & Engagement (CE)

Leads the development, implementation and evaluation of a multi-agency strategy aimed at increasing awareness of safeguarding adults and promoting the involvement of adults at risk, carers and advocates in the Teeswide safeguarding adults' processes.

Learning Training & Development (LTD)

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Leads the development, implementation and evaluation of a multi-agency learning, training and development strategy.

Operational Leads (OL)

To provide a forum to enable safeguarding adults' operational leads from TSAB partner agencies to share good practice, problem-solve and access peer support. The Sub-Group also provides qualitative data to inform the development of person-centred policies, procedures, and strategies.

Performance, Audit & Quality (PAQ)

Leads the development and implementation of a performance framework and provides an audit and quality assurance function on behalf of the TSAB.

Task & Finish Groups

During 2022/23 there were a number of Task & Finish Groups to look at specific work streams:

- Creating safer vultures
- National safeguarding adults
- Organisational Abuse
- Welfare Visit request for vulnerable People
- Team around the individual (TATI) Review
- Joint Learning Event
- SAR Procedure Review
- Power BI
- Responding to and Addressing Concerns (RASC) Providers Action Plan template.

The report was extremely detailed and comprehensive, however the spoke about the key activities within safeguarding and Section 42 enquiries.

An explanation of the terms were explained:

Safeguarding concern- a report made to a lead agency for the safeguarding process to raise concerns of adult abuse/ neglect.

Section 42 (S42) enquiry- The Care Act 2014 (section 42) requires that each Local Authority must make enquiries, or cause others to do so, if it believes an adult is experiencing, or is at risk of , abuse and or/ neglect.

In terms of statistics, in 2019/20, there were 5,023 concerns and 2,815 S42 enquiries, compared to in 2022/23, 7,011 concerns and 3,041 S42 enquiries. It is believed there is a better understanding and awareness of abuse, which has led to more reporting. There was also a change in nature of abuse during covid with more institutional concerns, which led to a different approach in safeguarding.

In terms of the types of abuse, the Tees data remains consistent with National Trends reported in 2022/23, with a similar increase recorded in both concerns and Section 42 Enquiries. The top 4 areas of abuse for Section 42 Enquiries in Tees were Neglect and lack of Omission (28%), Physical (20%), Self- Neglect (12%) and Financial and Material abuse (12%).

In terms of the awareness campaigns referred to within with the annual report, the panel were advised that the Board engage with partners in a wide range of awareness raising activities, with an aim to engage professionals, members of the public and hard to reach groups and digitally excluded individuals. Campaigns provide prime opportunities for the Board to ensure they raise awareness of the important safeguarding messages. Key example of campaigns has been a bus stop poster campaign.

One of the main aims of the Board is to ensure that safeguarding is everyone's responsibility.

The Director was thanked for his presentation on behalf of the Board.

AGREED

That the report be noted.

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PREVENTION PROGRAMME.- PUBLIC HEALTH

The Chair welcomed Dr Michelle Stamp, Consultant in Public Health, Public Health South Tees to the meeting to provide the Panel with a Public Health perspective regarding Prevention.

Dr Stamp firstly provided some setting the scene statistics for the Panel, these being:

- Life expectancy in Middlesbrough for both men and women is lower than England average. Life expectancy for a man in Middlesbrough is 75.4 (79.4 England) and 79.8 for a woman (83.1 England).
- The health of people in Middlesbrough is generally worse than England average.
- Middlesbrough has been identified as the most deprived local authority nationally at neighbourhood level.
- In terms of healthy life expectancy, in South Tees it is lower than the England average which means Middlesbrough residents in some wards not only have a shorter life than the national average but also a life with increased years in ill health. There is 20.6 year 'window of need' for males and a 23 year 'window of need' for females.
- In terms of causes of death, the number and proportion of all deaths for 3 year period between 2019-2021 showed that cancer is the highest with a quarter of the deaths, followed by dementia and heart disease. Males have a greater proportions of heart disease and cancer and females have a higher proportion of dementia.
- The statistics also showed that looking at deaths under the age of 75 years (premature deaths), cancer is even higher at 32 % followed by heart disease and respiratory diseases. Males show higher proportions for heart disease and accidents and accidental poisoning, whilst females are higher for cancer and respiratory diseases.
- With 17,000 people between 55 and 64 years and 23,000 over 65 years, the older population in Middlesbrough is growing and becoming more diverse.
- Middlesbrough has a lower-than-average disability free life expectancy of 56 years old when compared to the national average of 62 years old.
- By 2030, one in five people in England will be aged over 65
- In Middlesbrough we are higher than the National average for dementia diagnosis rates with 73.3% compared to 63% and the Northeast Average of 69.6%.
- 1067 people over 65 received a dementia diagnosis in 2023
- In England, 40% of adults (aged 16+) report having at least one long term health condition
- 34 per cent of people aged 65–74 are obese, and only 8 per cent of women over 75 take the recommended levels of physical activity
- Uptake of influenza and pneumococcal vaccinations is below the levels set by international targets and national guidance
- Loneliness is associated with an average 26% increased likelihood of mortality in adults, and social isolation with an average 29% increased risk.

Dr Stamp advised that in terms of loneliness and Isolation , studies have shown that it can affect individuals physical and mental health due to the lack of positive connections and interactions with the wider community.

Some of the effects of loneliness and isolation are as follows:

- Increased risk of blood pressure
- Increased risk of developing Coronary Heart Disease and stroke
- Loneliness and low social interaction are predictive of suicide in older age
- Loneliness is a risk factor for depression in later life.

Not only does loneliness and isolation link to the above effectives but can also lead to further demands on services, including, for example, further visits to the GP; presenting themselves at accident and emergency; having other emergency admission to hospital; use more medication and having a higher incidence of falling.

Public Health Approach

Prevention as previously discussed with the Panel is a high priority to assist with people staying in their homes for longer. In terms of the public health approach, the panel learnt that there needs to be radical approaches to integration, joint working and place-based solutions as Middlesbrough local population ages. Public health are committed to addressing the issues that affect older people, such as housing, health and transport.

Public health are also committed to tackling loneliness and isolation and ill health/ health inequalities by making these a priority for South Tees.

To achieve this, the Panel were advised that there requires a much more integrated way of working to ensure that the right mix of services are available at the right place at the right time. There was full commitment to age friendly practices to ensure there are more opportunities for older people, with Age Friendly and Dementia friendly communities being Strategic priorities for Middlesbrough Council. Dr Stamp , further added that the Joint Strategic Needs Assessment (JSNA), was currently being developed with key partners to organisations to develop a greater understanding of community need, agree key local action and encourage a system wide approach to tackling local challenges. The level of older people living independently in South Tees is significantly worse than in England. The missions of the 'Age Well' aim within the JSNA are as follows:

1. We will promote independence for older people
2. We will ensure everyone has the right to a dignified death.

Joint working

In terms of joint working and developing link, the Panel were made aware that in July 2022 , Middlesbrough Council joined the World Health Organisation (WHO) global network of Age-friendly communities, Towns and cities.

A profile page for Middlesbrough has been published on the Age friendly World website, which will increase viability of the work undertaken and to enable change , as well as allowing Middlesbrough to connect with Towns and cities worldwide to facilitate and exchange information.

The Age Friendly Communities framework includes eight domains , which ask communities to better adapt their structures to make services better for communities.

The eight domains are as follows:

1. Community support and health services
2. Transport
3. Outdoor spaces and buildings
4. Housing
5. Social participation
6. Respect and social inclusion
7. Civic participation and employment
8. Communication and information.

The programme supports local communities to take control and become more involved in shaping their local environment to better suit their lifestyle. It also asks policy makers to prioritise resources in order to design services to keep people well for longer.

The key principles of the Age friendly principles are as follows:

- Age-friendly communities promote a better person–environment fit by modifying the physical and social environment to support older adults' health, well-being, and the ability to age in a place of choice,
- Age-friendly environments are designed for diversity, inclusion and cohesion across all ages and capacities,
- The purpose of age-friendly efforts is to allow community residents to live full and meaningful lives across the life course, even in the face of not only age-related physical and cognitive changes but also psychological and social changes,
- Age-friendly communities aim to create places where older adults are involved, valued, and supported.
- Age Friendly focus attention not only on the challenges but also on the benefits of an

aging society for individuals, families, and communities.

The Panel heard that Middlesbrough have created a top 10 needs which was developed from the Age friendly survey.

The Summary of the top 10 needs are as follows:

- a lack of **resting places** in public spaces and a lack of **clean and accessible toilets**
- concerns around the poor **maintenance of streets and roads** where they live
- perceived absence of **training and employment opportunities** for people aged 50 and over
- lack of reliable publicised **information** about activities,
- and for this information to be available or **delivered** to people who have **difficulty or are unable to leave their home**
- need for more **activities** to be **affordable and accessible** to all residents

An Age Friendly Steering Group is leading the development of an action plan that underpins the 8 age friendly domains and takes into account the top 10 priorities identified in the baseline assessment of what older people have said are important aspects of community life. Age Friendly indicators will be agreed to help is to measure progress and evaluate our Age-friendly initiatives.

The Panel were made aware of one of the initiatives already in place to tackle social isolation and that supports Middlesbrough Age friendly town. 'Please have a seat campaign' has been introduced in participating venues for older people or those with mobility issues to sit down if they wish when out and about. Other local super market chains, such as Morrisons have also introduced this, which further heightens messages that adaptations need to be made to suit the communities need.

In terms of focus on communities, in 2021 and 2022, Public Health and Middlesbrough Council launched a small grants scheme (for grants up to £2,000). The aim of the grant was to support activities aimed at ensuring Middlesbrough residents had access to activities that would support their health and wellbeing and improve connectivity.

Outcomes from projects were based on:

1. Helping the person maintain their independence in and around their home
2. Improve the quality of life for the person with dementia
3. Allow the person to express their feelings through art, music, singing and dance
4. Provide social activities and outings
5. Provide structure and reduce isolation

Examples of grants received have been as follows:

- Groundwork NE- Men's shed inclusive for people living with dementia. Activities included arts and crafts, garden material / garden games.
- Recovery connections- building resilience, bringing people together to reflect and share stories and memories.

Initiatives

As the Panel were aware, the prevention agenda was a vast project. Dr Stamp lastly provided them with some example of initiatives carried out within Public health.

1. Dementia Care home

Public Health are leading a Dementia Friendly Care Home Project in collaboration with the Managing Undernutrition in South Tees (MUST Team), Adult Social Care Home Commissioners and wider partners.

The self-assessment tool in the guide is designed to help Care Homes improve their dementia offer through providing good quality accessible activities, examine and improve the physical environment to better meet the needs of their residents, improve leadership and management and identify any workforce development and training needs. It is designed to help care homes to identify, support, enable and empower residents to live well with dementia by undertaking actions to achieve positive

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outcomes, which can contribute to CQC regulations and registrations. Activities will be aimed at Preventing Falls and Hospital Admissions as well as improving physical and mental wellbeing in residents.

Furthermore, the MUST Team go into care homes and regularly audit residents to check for dehydration and malnutrition alongside a raft of other issues including safeguarding whilst offering training to care home staff.

2. Heating on prescription pilot- COPD

This pilot is a Northern Alliance bid of £558K targeting 15 deep end practices across Middlesbrough. The target cohort is patients with COPD, which is estimated at 1,322 patients from GP registers or identified by STFT and proactively contacted and offered support. Mortality rates for those with respiratory diseases is higher in disadvantaged groups and areas of social deprivation. Research shows that there is a higher prevalence of COPD in Tees Valley and emergency admissions for COPD are higher in South Tees than the national average.

The aim of the pilot will be for individuals to be contacted by Middlesbrough Environment City and offered an assessment of their heating infrastructure, access to required equipment, vouchers to contribute to heating during the winter months and referral to the local authority warm home scheme for broader assessment / housing standards scheme.

Some examples of the expected outcomes of the scheme are as follows:

- Reduced COPA exacerbation's
- Reduced pressure on the NHS services (GP appointments / hospital admissions)
- Warmer home during winter
- Increase in home priority service register.

Councillors felt this was an excellent initiative and felt an all member awareness briefing would be beneficial, and this would be interesting to see how this evolves.

3. NHS Health Check

This is a mandated function report quarterly to the Secretary of State, designed to spot early signs of stroke, kidney disease, heart disease,, type 2 diabetes or dementia in 40- 74 year olds. The NHS health checks / assessments provide key lines for referrals.

4. Specialist Physical Activity SPA Team.

The Specialist Physical activity Team is made up of eight dedicated staff members who deliver 12-week Exercise Referral Programme offering a range of physical activity sessions to facilitate long term behavioural changes that will have a positive impact on both physical and mental health, to maximise quality of life and promote independence and self-management.

There is a 3 stage referral process:

- **ACTIVE** – anyone identified as 'At risk' of health issues and would benefit from increased physical activity as a preventative measure.
- **FUNCTIONAL** – Exercise on Referral & Post-surgery to reduce the impact of underlying health issues.
- **MAINTENANCE** – Long term condition management i.e. Neuro sessions and Stroke Rehab

The sessions delivered by the SPA team are as follows:

- Aquarobics

- Neuro sessions
- Chair-based exercises
- Stroke rehab sessions
- Tai Chi for rehab
- Gym sessions
- Wellbeing sessions
- Waiting well
- ACT lung health sessions
- ACT Young people team sessions

5. Effective prevention programme

Lastly the Panel heard about some of the effective public health prevention initiatives, these including, for example:

- **Recovery solutions-** alcohol reduction harm minimal support.
- **Health Protection-** working with the UK Health Security Agency (**UKHSA**)- care home outbreaks, covid, flu and scrutiny role over delivery of vaccines.

The Panel thanked Dr Stamp for her comprehensive presentation and made comment on the excellent initiatives in place for prevention.

The Panel would now consider all of the setting the scene evidence and produce some draft terms of reference for the next meeting of the Panel.

AGREED- That the information be noted and introductory evidence be taken into consideration to draft the terms of reference for the review.

23/35

CHAIR'S OVERVIEW AND SCRUTINY BOARD UPDATE

The Chair advised that the next meeting of the Overview and Scrutiny Board would take place on Wednesday 20 December 2023. The Chair would therefore update the Panel accordingly.

AGREED

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ANY OTHER URGENT ITEMS WHICH IN THE OPINION OF THE CHAIR, MAY BE CONSIDERED.

Attendance at meetings

It was noted that some Committee Members were not present at the meeting and the Chair reminded all to submit apologies in advance of meetings where possible.