

Monday, 21 October 2024

## **ADULTS, WELLBEING & HEALTH SCRUTINY & IMPROVEMENT COMMITTEE**

A meeting of the Adults, Wellbeing & Health Scrutiny & Improvement Committee was held on Monday, 21 October 2024 at the Redcar and Cleveland Civic Centre.

**PRESENT** Councillor M Ovens (Chair)  
Councillors S Kay (Vice-Chair), C Cawley,  
S Crane, C Hannaway, M Head, J Lavan,  
A Oliver, L Rynn and L White.

**OFFICIALS** M Adams, C Leng, Nimmo, P Rice and V Wilson.

**IN ATTENDANCE** Councillor U Earl and L Robson.

### **APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillors M Fairley, J Hart, T Learoyd and P Salvin.

57 **TO CONFIRM THE MINUTES OF THE MEETING HELD ON MONDAY 09 SEPTEMBER 2024**

**RESOLVED** that the minutes of the meeting held on 09 September 2024 be confirmed and signed by the Chair as a correct record and the attendance matrix be noted.

58 **DECLARATIONS OF INTEREST**

The following declarations of interest were raised with Members:

- Councillor Ovens declared they have an interest in the organisation Stepping Stones.
- Councillor Lavan declared they are a Dementia Nurse and their Dementia Service which is delivered at Sleights Village Hall/Community Centre and they are a Trustee for Healthwatch.
- Councillor Oliver declared they are a business owner at Hollie Mollies in Skelton.

It was **RECOMMENDED** the committee note these declarations.

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59 **AUTISM ACTION PLAN - DAISY CHAIN**

The Assistant Director for Commissioning and Social Care Resources reported that in conjunction with the Cabinet Member for Adults and the Daisy Chair Project a consultation was commissioned to ascertain 'How well are we (the Local Authority) supporting autistic and neurodivergent adults and how can we do better?'. The Daisy Chain Project ensured the consultation was far reaching and accessible to as many autistic individuals as possible.

The Director of Services at Daisy Chain highlighted the following areas within the consultation:

- Adults Social commissioned Daisy Chain to undertake an independent joint consultation with Middlesbrough Council.
- Daisy Chain Project was one of the largest and most trusted providers of specialist autism and neurodiversity services and training in the North - East of England.
- Daisy Chain worked with lived experience experts to ensure the consultation materials were accessible and provided a safe and inclusive environment for participants to share their experiences.
- There were eight key findings from the consultation which were combined into four recommendations:
  - Promote acceptance
  - Improve communications
  - Develop tailored support services
  - Provide reasonable adjustments
- The four recommendations were used to shape a joint council action plan with six 'What's next?' actions which would be delivered and monitored within Adult & Communities Directorate.
- All actions had been timetabled for completion by March 2026.

As part of the ensuing discussion the following questions/comments were made:

- Members noted a key action regarding 'Transition' and the Chair of the Transitional Arrangements Task and Finish Group would ensure this report and its recommendations were fed into the groups work.
- Members queried what considerations could be made for autistic individuals with regards to unannounced visitors and lack of awareness of reasonable adjustments for example, locally and socially if loud music is being played. Members were advised that not all autistic individuals struggle with unannounced visitors. The usual practice would be preparatory conversations and the use of picture cards to aid understanding. Reasonable adjustments in local and social settings are an issue, for example, it can be classed as an 'unseen disability', therefore businesses and the

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public may be unable to identify if someone requires reasonable adjustments and how to support them.

- A Member queried which was the biggest factor in the system nationally to overcome, funding or understanding. Members were advised that both were equally important and lacking, there needed to be more understanding with training do this required funding.
- A Member asked if training was available for autistic individuals to support them into work. Members were advised that training for both autistic people to support them into work was essential and training for the workplace was also essential to understand the individuals needs and how to make reasonable adjustments to accommodate them.
- The current diagnosis times were approximately 15 months upwards and that educational settings do not recognise private professional diagnosis. Daisy Chain advocate for mandatory autism awareness training in schools.
- Members were advised that the Directorate have secured one place for respite care at a local care home. Members noted this positive development.
- A Cabinet member suggested all Directorates should be aware of processing delays in autistic individuals.

**RECOMMENDED** the:

1. The information in the report be noted; and
2. The action plan be monitored at Adults, Wellbeing and Health Scrutiny periodically.

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**HEALTHWATCH REDCAR AND CLEVELAND ANNUAL REPORT 2023-2024**

The Project Lead at Healthwatch South Tees reminded Members that South Tees Healthwatch which Redcar Council was in partnership with Middlesbrough Council forms Healthwatch South Tees. Each partnership works with other areas such as Durham and Sunderland. Healthwatch South Tees ensure they represent each locality reaching out to all social, economic and ethnic groups in a variety of ways.

Areas highlighted within the report included:

- Healthwatch liaise with and run GP Roadshows regularly.
- Healthwatch work with ICB health partners and have recently specifically worked with adults who were over 40 years old living with disabilities who were previously a demographic difficult to engage with, for example, they were unable to access local services therefore unable to have their voices heard.
- Menopause support in the workplace, in particular, the lack of understanding of the issues facing female workers, how to support them and how to make reasonable adjustments within the

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workplace.

- Healthwatch next steps are to continue to reach “out to every part of society, especially people in the most deprived areas, so that those in power hear their views and experiences”, with the four main priorities being:
  - Care Homes
  - Women’s Health
  - GP Practices
  - Mental Health

As part of the ensuing discussion the following questions/comments were made:

- A Member asked how have other health professionals and organisations respond to these recommendations in the report. Members were advised that working relationships were positive and Healthwatch work hard to acknowledge good work already taking place within the healthcare system and therefore presenting themselves as a critical friend to further support good practices and identify new ways of working.
- Members queried who the local champions were within Redcar and Cleveland that could be shared with all Councillors for knowledge within their ward work. The local champions are listed on Healthwatch website [Meet out Champions](#) page and Members were invited to sign up due to the work they undertake within their wards.

It was **RECOMMENDED** that the information in the report be noted.

## 61 **GROWING OLDER COORDINATOR**

The Growing Older Coordinator (Coordinator) gave a presentation on the Growing Older Project, which was being delivered in conjunction with Darlington and Redcar and Cleveland Citizens Advice.

Areas highlighted within the update included:

- Towns and cities can register with the Centre for Aging to be recognised as an age or dementia friendly town, such as Middlesbrough Town.
- Research shows that social isolation and loneliness impact mental health significantly. There are hubs and safe places set up for residents such as [Chatty Café Scheme UK](#) and [Compassionate Communities UK Registered Charity](#).
- Project objectives include;
  - To develop new services and identify volunteers
  - Build relationships with stakeholders and link with council health teams
  - Explore and share research findings

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- Pension Credits and Winter Fuel Allowance were big issues for residents.
- The Coordinator aims to produce a newsletter in early January 2025.

Members were informed that Sleights Village Hall/Community Centre and Hollie Mollies host drop-in sessions during the week, free of charge for a warm and friendly space should anyone wish to attend.

It was **RECOMMENDED** that the information in the presentation be noted.

## 62 **ICB UPDATE ON THE COMMUNITY DIAGNOSTIC CENTRE IMPLEMENTATION**

The Director of Delivery (Tees Valley) North East & North Cumbria Integrated Care Board (ICB), and ICB Service Managers gave an update on the Tees Valley Community Diagnostic Centre Redcar Primary Care Hospital.

Areas highlighted within the update included:

- The Sir Mike Richards report published in 2020 concluded that a new diagnostics model was urgently needed, recommending significant reform and investment in critical diagnostic services, with the establishment of CDCs to play a key role in reducing access time and time delays associated with hospital visits and supporting reductions in health inequalities.
- The aims of the Redcar Spoke Site were:
  - Enhancing diagnostic services to meet future diagnostic capacity and demand, support faster earlier diagnosis and contribute to improved population health and tackling health inequalities.
  - Care closer to home, avoiding wherever possible the need to visit an acute site for diagnostic testing.
- The transformation and construction work to be completed by 31 January 2025, with all services going live in February 2025.

As part of the ensuing discussion the following questions/comments were made:

- Members queried the current appointment system noting that many residents experience their appointments being changed, moved and even cancelled due to machine breakdown and asked how this will be addressed. Members were advised that much of the machines were being replaced with new models including a new spinal assessment clinic based at Redcar.
- Members queried if there would be sufficient staffing levels to deliver all of these services. Members were advised that many services, such as radiation had strict laws governing their service

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delivery which must be adhered to, CQC inspections have been passed and recruitment was underway.

The Director informed Members of Lord Darzi's government commissioned report which clarified national challenges and recommended transformational changes to funding and management capacity within the NHS. This report was used as a baseline for the [governments 10 year plan consultation](#) which sets a challenging agenda for ICBs to deliver.

As part of the ensuing discussion the following questions/comments were made:

- Members noted from the report that test times have reduced which is positive, however, what about the interpretation of the results. Members were advised that ICBs were given targets to achieve and within Redcar and Cleveland the ICB is reaching 80% of its target times. The service can outsource the analysis of results however it currently is upskilling staff internally to provide this service and further reduce waiting times.

It was **RECOMMENDED** that the information in the report be noted.

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## **HEALTH AND WELLBEING STRATEGY**

The Director of Public Health presented the Health and Wellbeing Strategy for South Tees. The Health and Wellbeing Board comprised of local partnerships to enable multiagency approaches and solutions to local health issues and services. Partners are committed to working together and to collectively utilise resource. Within the strategy are the following goals:

- Narrow the outcome gap between children growing up in disadvantage and the national average by 2030;
- Improve education, training and work prospects for young people;
- Prioritise and improve mental health and outcomes for young people;
- Reduce the proportion of our families who are living in poverty;
- Create places and systems that promote wellbeing;
- Support people and communities to build better health;
- Build an inclusive model of care for people suffering from multiple disadvantage across all partners;
- Promote independence for older people; and,
- Ensure everyone has the right to a dignified death.

As part of the ensuing discussion the following questions/comments were made:

- Members queried how the ambitious mission could be achieved within funding parameters. Members were advised that the

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purpose and intentions must remain clear, with a focus on reducing caveats and each mission would be led by a mission leader.

It was **RECOMMENDED** that:

1. The information in the report be noted, and
2. A progress report be presented at a future meeting of this Committee.

64 **TRANSITIONAL ARRANGEMENTS FOR CARERS TASK & FINISH (SCOPE)**

The Executive Director for Adults and Communities advised that the first Task and Finish group to review Transitional Arrangements for Parents and Carers had taken place.

The group agreed the scope in principle and the next meeting would receive information from both Adults and Children's Directorates regarding what transitional arrangements currently take place, Carers Together representatives would be invited to present alongside guests to give lived experience feedback and research from other local authorities' transitional arrangements will be sought.

It was envisaged that there would be 3 - 4 meetings to review the current arrangements, analyse best practice and to make recommendations for future services.

The group welcomed more Members to join the Task and Finish group and an invitation to both committees will be circulated in due course.

It was **RECOMMEND** that the information presented be noted.

65 **DEMENTIA PASSPORT**

Members were advised that a Dementia Passport had been devised.

The passport was similar to that of a cancer or maternity passport whereby the information pertaining to the individual is input once and any healthcare professional who supports that individual can access their up to date information and care needs, without the individual having to repeat this information to every health care professional or at every appointment they attend.

As part of the ensuing discussion the following questions/comments were made:

- Members asked whether the booklet could be transferable for other health issues and services. Members were advise that there is an [Autism Spectrum Disorder health passport](#) available on the National Autistic Society website.

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**RECOMMENDED** that the information presented be noted.

66 **WORK PROGRAMME 2024/25**

Members were presented with an update on the work programme topics to be considered over the current municipal year with attention drawn to confirmed Cabinet papers.

It was **RECOMMENDED** that the information presented be noted.

67 **OUTSIDE BODIES UPDATE**

A Member gave an update on the Crustacean Deaths Joint Working Group.

A Member gave an update on TEWV AGM noting additional information would be presented to this Committee.

It was **RECOMMENDED** that the information presented be noted.

68 **ACTION UPDATE**

The action log was presented to Members. The Democratic Services and Scrutiny Officer will work with Lead Officers and the Chair to obtain updates and address any actions for future meetings.

It was **RECOMMENDED** the action log be noted.

69 **ANY ITEMS THE CHAIR CERTIFIES AS URGENT**

The Chair agreed that the following item would be certified as urgent.

**DEFIBRILLATORS ON COUNCIL BUILDINGS**

A Member raised concerns regarding the maintenance of defibrillators on Council buildings, specifically defibrillators that had been obtained by the public through fundraising exercises.

As part of the ensuing discussion the following questions/comments were made:

- A Member asked why the Council did not currently maintain defibrillators attached to the exterior of Council buildings. Members were advised that it has been agreed that external organisations or voluntary groups could request for defibrillators to be attached to a council buildings including electricity supply, if the external organisations or voluntary groups agreed to maintain it. It transpired that the external organisations or voluntary groups did not follow through on their part of the agreement, which would



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include regular checks and tests of the equipment. At present, this was approved on an ad-hoc basis therefore each defibrillator had not been logged on a central database.

- A Member clarified that defibrillators must be formally registered with the appropriate service provider. An access code was assigned to each machine and logged on a national central register whereby anyone can search for the nearest machine; if this was not completed, the defibrillator would not work. Each machine also required a weekly visual inspection and a regular maintenance check. Some of the organisations or volunteer groups who placed the machines had been contacted but had not responded.
- A Member asked if the Council had defibrillators registered and maintained. Members were advised that some public facing Council receptions had a defibrillator inside the building for general use, which the Council are responsible for registration and maintenance.
- A Member suggested all Councillors undertake an audit within their wards to ascertain where defibrillators were.

It was **RECOMMENDED** that:

1. Information presented be noted; and,
2. A report be submitted to a future meeting.