Caring Sub-committee

Wednesday, 24 January 2024

Present: Councillor J Shaw (Chair)

Councillors G Bell, L Bones, J Cruddas, T Hallway, A Holdsworth, J Kirwin, L Marshall, P McIntyre,

T Neira and J O'Shea

In attendance:

Councillors Janet Hunter

Apologies: Councillors M Fox and M Murphy

C25/23 Appointment of Substitute Members

The following Substitute Members were noted:

Councillor J O'Shea for Councillor M Murphy.

C26/23 Declarations of Interest or Dispensations

The following declarations of interest were noted:

Councillor Jane Shaw – declared a registerable personal interest in Item 5 as a Governor of CNTW Trust.

Councillor G Bell – declared a personal interest in Item 5 as he is in receipt of funding from the NHS.

C27/23 Minutes

Resolved: That the minutes of the meeting held on 28 November 2023 be agreed as a correct record.

C28/23 Overview of North Tyneside Safehaven and Northumberland and North Tyneside Universal Crisis Service

The Sub-committee considered the report which provided an update on plans to provide the North Tyneside ICB area with a crisis alternative in the form of a third-sector led Safehaven offer. The report also provided an update on Northumberland and North Tyneside Universal Crisis service, providing support to those presenting in a mental health crisis.

The sub-committee was advised that progress is being made towards opening a Safehaven space in Wallsend. The necessary capital works are being funded via NHS England, with revenue funding provided by the ICB. A third sector provider, Everyturn, is contracted to run the service for an interim period of 12 months. There are also plans for a Safehaven service to be located in Newcastle and Northumberland.

The Safehaven service will aim to provide safe, high quality and flexible support to people experiencing mental health crisis. The service will provide a non-clinical urgent mental health service to people in mental health crisis as well as support for families and carers.

It was noted that Healthwatch had been involved in creating an insights report on views, wants and needs of the local community for a safehaven crisis alternative offer. The outcome of the insights report was taken on board in identifying Wallsend as a preferred location, and the operation of the service 7 days per week between the hours of 2pm and 10pm.

It was noted that the North Tyneside Safehaven will have two key support access routes:

- A physical mental health safe haven space for people in North Tyneside who are experiencing a mental health crisis to access face to face support in a safe and non-clinical environment;
- A telephone support option for people experiencing a mental health crisis who cannot or choose not to access the service in-person.

The Sub-committee was also provided with information about the Northumberland and North Tyneside Universal Crisis Team (UCT) which provides an ageless service to those presenting in a mental health crisis. The support has three defined pathways: young persons pathway, older persons pathway and working age adult pathway.

It was noted that the UCT operates 24 hours a day, 7 days a week, with no restrictions on referrers. A referral can be made by contacting the 24/7 telephone number or text message service.

The team offer a telephone triage function, assessment, home based treatment, and carer support to those experiencing a mental health crisis. The main focus of the service is to treat individuals in their home, where it is deemed safe to do so.

Members asked for clarification on the difference between urgent clinical mental health need and urgent non-clinical need. It was noted that there are criteria to be met for accessing urgent clinic mental health services. Urgent non-clinical need will cover issues that may impact on mental health but which may not meet the clinical criteria.

Members welcomed the decision to base the Safehaven service in Wallsend as it was felt there are a lack of services in the area. It was also suggested that there is a need for the service to continue on a long-term basis as there is a need across the borough for this service.

Members asked about the challenges for the crisis support team of defining what is clinical mental health need, and asked to be provided with any data on the number of people who try to access the service but who don't meet the clinical criteria for support. It was noted that there alternative provision is available to those who don't meet the clinical criteria via 'Together in a Crisis' which the crisis team can refer to. Once the Safehaven provision is in place this will also offer an additional alternative option.

Members raised some concerns about how the service will be monitored to ensure that it is meeting need and that it does not exacerbate existing problems with anti-social behaviour in Wallsend. Members also highlighted the need to ensure the safety of workers who will be relatively low paid non-clinical staff and working unsocial hours. These issues were acknowledged and would be taken on

board as part of the risk assessment.

It was noted that the Safehaven service will be monitored and evaluated during the first year by the Steering Group in order to evaluate the service. There is also a need to ensure the service is not overwhelmed and is able to cope with demand. It is hoped that there could be more Safehaven services opened across other parts of the borough.

There was some discussion about the issues linked to drug and alcohol problems and the need to address dual problems when they are interlinked. It was noted that this is an issue that is being addressed and that there is now a dual diagnosis worker within mental health teams.

Members raised concerns about mental health support for young people and the problem of waiting lists for clinical support for young people which are phenomenal, and how young people are supported while they are on a waiting list for help. It was noted that in North Tyneside, mental health services for young people are not provided by CNTW, but by Northumbria Trust. While it was acknowledged that waiting lists are an issue, young people would be prioritised if they are at risk. There is also support available in schools and primary care services via family partners.

There was some discussion about the plans to advertise or signpost the Safehaven service once it is available. It was noted that a communications plan is being drawn up, whilst recognising the need to manage demand so that the service is not overstretched and also to ensure the right people are accessing the service.

Members also raised an issue about IT systems and the problems of working across Trust boundaries due to incompatible IT systems. It was noted that IT systems are an issue in other areas too and that work is underway to improve this.

It was stressed that the aim of the Safehaven service is to provide additionality to existing services. It has been recognised that services are under pressure and NHS England has provided additional funding as part of the transformation programme to address demand.

The Chair thanked officers for the informative report and presentation.

It was agreed that:

- 1. The report be noted;
- 2. Officers be asked to provide the following additional follow up information which was requested during the discussion:
 - Information from Healthwatch on the findings of the Insight Report used to shape the development of the Safehaven service.
 - More information about how the Safehaven will link with citizens advice and also the police.
 - Data on the number of people currently attempting to access crisis support but who don't meet the criteria for urgent clinical mental health support.

C29/23 Adult Social Care Dashboard

The Sub-committee considered the adult social care dashboard.

It was noted that the number of people waiting for packages had reduced dramatically and there had been an increase in the number of bids from providers for packages. There will be a need to manage supply going forward to ensure that capacity issues do not arise if providers are not able to win packages.

Members asked if this was also the case for the North West of the Borough which had traditionally experienced more difficulties in receiving bids for packages and it was agreed that this information would be provided following the meeting.

The Sub-committee agreed to note the information contained in the dashboard.

C30/23 Work Programme 2023-24

It was noted that the following items were due to be considered at the next meeting of the sub-committee on 28 March 2024:

- Northumbria NHS Foundation Trust Quality Account
- Suicide Prevention