



North Tyneside Council

Caring Sub- committee

Tuesday, 16 January 2024

Wednesday, 24 January 2024 0.02 Chamber - Quadrant, The Silverlink North, Cobalt Business Park, North Tyneside, NE27 0BY **commencing at 6.00 pm.**

Agenda Item	Page
1. Apologies for Absence	
To receive any apologies for absence.	
2. Appointment of Substitute Members	
To be notified of the appointment of Substitute Members.	
3. Declarations of Interest or Dispensations	
You are invited to declare any registerable and/or non registerable interests in matters appearing on the agenda, and the nature of that interest.	
You are also invited to disclose any dispensation in relation to any registerable and/or non-registerable interests that have been granted to you in respect of any matters appearing on the agenda.	
Please complete the Declarations of Interests card available at the meeting and return it to the Democratic Services Officer before leaving the meeting.	

If you need us to do anything differently (reasonable adjustments) to help you access our services, including providing this information in another language or format, please contact democraticsupport@northtyneside.gov.uk

Agenda Item	Page
<p>4. Minutes</p> <p>To Confirm the minutes of the meeting held on 28 November 2023.</p>	<p>5 – 12</p>
<p>5. Overview of North Tyneside Safehaven and Northumberland and North Tyneside Universal Crisis Service</p> <p>To receive an update on:</p> <ul style="list-style-type: none"> • the plan and progress of providing the North Tyneside ICB area with a crisis alternative in the form of a third-sector led Safehaven offer; and • Northumberland and North Tyneside Universal Crisis service, providing support to those presenting in a mental health crisis. 	<p>13 – 18</p>
<p>6. Adult Social Care Dashboard</p>	<p>19 – 20</p>
<p>7. Work Programme 2023–24</p> <p>To receive a verbal update on the work programme and to consider items for the next meeting.</p>	

Circulation overleaf ...

Members of the Caring Sub-committee

Councillor Jane Shaw (Chair)

Councillor Liam Bones

Councillor Michelle Fox

Councillor Andy Holdsworth

Councillor Louise Marshall

Councillor Martin Murphy

Councillor Gary Bell (Deputy Chair)

Councillor Julie Cruddas

Councillor Tracy Hallway

Councillor Joe Kirwin

Councillor Pam McIntyre

Councillor Tricia Neira

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Caring Sub-committee

Tuesday, 28 November 2023

Present: Councillor J Shaw (Chair)
Councillors G Bell, L Bones, J Cruddas, M Fox,
A Holdsworth, P McIntyre, M Murphy and T Neira

In attendance:
Councillors

C18/23 Appointment of Substitute Members

There were no substitute members.

C19/23 Declarations of Interest or Dispensations

Councillor Jane Shaw declared a registerable personal interest as a Governor of CNTW Trust.

Councillor G Bell declared a personal interest in item 5 as his wife is a personal assistant.

Councillor L Bones declared a personal interest in item 7 as a family member receives home care.

C20/23 Minutes

It was noted that page 6 of the minutes would be corrected to say Claire Easton.

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

C21/23 Direct Payments

The Sub-committee considered the report which set out the Council's updated policy in relation to Direct Payments. It was noted that the policy was aimed at helping people to commission their own care and to provide support in relation to managing the role as an employer, including contractual and financial aspects.

The Council is looking to improve access to Direct Payments and increase uptake through a range of measures, including promoting information about Direct Payments and making information and guidance easier to access. They are also looking at ways of supporting personal assistants through the Care Academy.

Members asked about the resources available within the finance and audit team to support those taking up Direct Payments. It was noted that capacity had been increased within the financial assessment team and this included audit to ensure that money is being used for the right reason and to meet eligible needs.

Councillors highlighted that they experienced a disparity between some families who are using Direct Payments and others who don't know about it. It was suggested that more needs to be done to make people aware that they could opt for Direct Payments. This was particularly highlighted in relation to young people with learning support needs when they transition to adult services.

It was noted that the Council are looking to raise awareness around the option of Direct Payments and this includes training for staff.

Some members highlighted that the Direct Payment option can be a daunting prospect for many people who may be put off by the need to become an employer and complexities around this. Members asked if there had been any feedback on this, and what support is available to encourage people to take up this option.

It was noted that this was a national issue and is an acknowledged problem. The Council is looking at what could be done differently to encourage take up.

A councillor raised an issue about safeguarding for both the person in receipt of Direct Payments as an employer and also for those employed as personal assistants. It was noted that safeguarding is part of the process. But Direct Payments is also useful for some people who may want to do something more flexible eg gym membership or to fund a different day centre. In these

circumstances Direct Payments can give people more flexibility and choice and can promote independence.

It was also noted that the Direct Payments team as well as external organisations can provide advice and support to Personal assistants. In addition, Disability North contracted by the Council to provide training and support, including to Personal Assistants.

Members asked what proportion of service users currently use Direct Payments. Officers said they would be able to provide current information on this, but it was around 20-25% of users.

It was noted that Direct Payments does not cost the Council more to administer as the personal budget is based on the financial assessment and the same financial team supports all customers so there isn't an additional cost.

It was noted that the current pressures in social care in relation to employment of carers also impacted on the availability of personal assistants, and these issues impacted across the whole care sector. It was noted that the Care Academy was part of the support in place to incentivise people to move into care.

The Sub-Committee thanked officers for the informative report.

C22/23 Stopping the Start: A Smoke Free Generation

The Sub-committee considered the report which provided a briefing on the national plan 'Stopping the start: our new plan to create a smokefree generation'

and the supporting consultation 'Creating a smokefree generation and tackling youth vaping'.

The Sub-committee noted the four key strands of the strategy:

- Changes to the age of sale which will make it illegal to sell tobacco to anyone born after January 2009, effectively raising the age of sale each year;
- Support for smokers to quit by increasing funding for stop smoking services and increased spending on anti-smoking campaigns;
- Support for enforcement with additional funding for agencies such as Trading Standards, border Force and HRMC and new powers for local authorities to issue on the spot fines to enforce the age of sale legislation;
- Protecting children from vaping by taking action to tackle the rising rates in youth vaping. This could include restricting vape flavours, regulating vape packaging and product presentation, regulating point of sale displays, exploring further restrictions for non-nicotine vapes and other nicotine consumer products such as nicotine pouches, and action on affordability of vapes.

It was noted that the current consultation is open until 6 December and the report recommends that the Sub-committee submit a response to the consultation using the endorsed responses from Fresh North East that are attached to the report.

Members asked whether there was anything else the Council could be doing in the meantime to reduce youth vaping, such as public health interventions being built into the Local Plan.

Officers advised that the Council had been working with schools and with Fresh North-East and providing guidance to schools on vaping control. Public health officers had spent time with PHSE teachers to discuss how to promote messages about the harms of vaping and promoting a consistent approach.

More widely, the Council is also addressing concerns around recycling and the

environmental impact of disposable vapes and also using the enforcement role of Trading Standards in relation to retail sales and criminal gangs. The Local Plan would not really be a route for enforcement action. However, any increased funds for Trading Standards would be welcome.

There was some discussion about the sale of vapes and how this had proliferated across a wide range of retailers. It was noted that some of the proposals in the consultation aimed to address this.

It was noted that the proposed changes set out in the plan were aimed at protecting young people, but there is likely to be significant resistance from the well-resourced tobacco industry. The Director of Public Health highlighted that this is a substance that is detrimental to health and is addictive and protections for young people need to be in place. It was noted that a similar approach to raising the age of sale had recently been dropped by the New Zealand Government and it was acknowledged that there are likely to be difficulties in passing the legislation into law.

It was agreed:

- that a response to the consultation should be submitted on behalf of the Caring Sub-committee using the suggested responses set out in the report.
- That Councillors may also wish to submit their own response to the consultation as an individual.

C23/23 Adult Social Care Dashboard

The Sub-committee was presented with a dashboard setting out the current position in relation to Homecare in North Tyneside.

It was noted that the position in relation to the brokerage list had seen a dramatic improvement in recent weeks, with only 13 clients currently on the brokerage list waiting a package of care.

The Sub-committee also noted the current position in relation to care home

inspections and that there were now only five care homes within the requiring improvement category.

Members asked for the dashboard to be either circulated in colour in future or for the information to be displayed on the screen during the discussion and it was agreed that this would be taken forward.

C24/23 Work Programme 2023-24

The Sub-committee considered the work programme going forward into future meetings.

It was noted that the following items were planned:

- 24 January 2024:

To receive a report on Multiple and Complex Needs including Adult Mental Health Care.

It was suggested that the ICB and CNTW would be invited to attend for this meeting to provide a fuller picture.

The Sub-committee identified the following areas to be covered:

- Community mental health transformation – primary and secondary health care
- Safe Haven and the crisis café (ICB)
- Residential Rehab – Oswin Road
- Section 117 – deprivation of liberty safeguards
- Co-occurring mental health and drug and alcohol issues
- The role of Adult Social Care and the role of partners

- 28 March 2024:

To receive a report on Suicide Prevention.

It was suggested that the organisations if U Care Share and Bereaved by Suicide be invited to this meeting.

Councillor Shaw also circulated a questionnaire that she had drawn up as a useful tool for members when reading papers and for in preparing for the discussion of reports.

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Meeting: Caring Sub-Committee

Date: 24 January 2024

Title: Overview of North Tyneside Safehaven and Northumberland and North Tyneside Universal Crisis service

Author: Jonanthan Flanagan, Programme Manager, Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust (CNTW)

Service: Adult Social Care

Wards affected: All wards

1. Purpose of Report

- 1.1 Provide the Sub-Committee with an update on agreed plan and progress of providing the North Tyneside ICB area with a crisis alternative in the form of a third-sector led Safehaven offer.
- 1.2 Provide the committee with an update on Northumberland and North Tyneside Universal Crisis service, providing support to those presenting in a mental health crisis.
- 1.3 To respond to any further questions the Sub-Committee may have in relation to North Tyneside Safehaven.
- 1.4 To respond to any further questions the Sub-Committee may have in relation to Northumberland and North Tyneside Universal Crisis service.

2. Recommendations

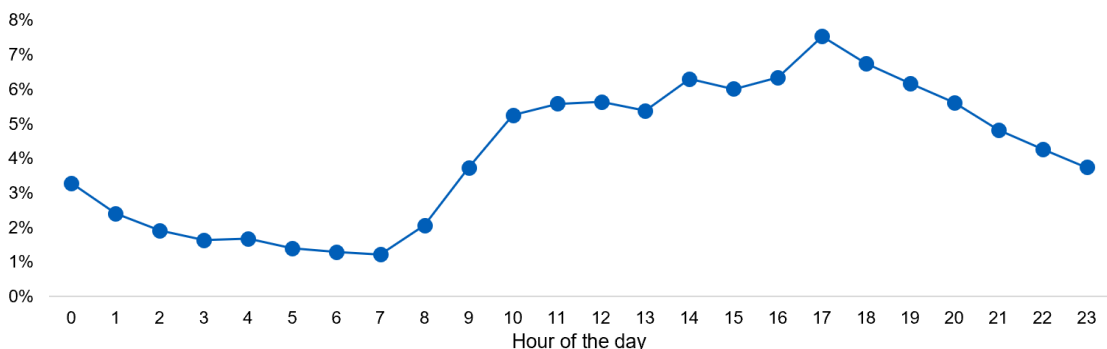
Members of the Sub-Committee members will be asked to note the contents of the report and seek responses to any further questions in relation to North Tyneside Safehaven and Northumberland and North Tyneside Universal Crisis service.

3. Information

3.1 Background information

- 3.1.1 The Office for National Statistics (2022) reported that the population of North Tyneside was approximately 209,000 people following the last Census in 2021. In 2019, 14.4% of the population was income-deprived and of the 316 local authority areas in England, North Tyneside was ranked as the 85th most income-deprived. Additionally, 36 of the 131 neighbourhoods in North Tyneside were among the 20% most income-deprived in England.
- 3.1.2 The association between rates of mental illness and poverty, unemployment and social isolation is well established. Evidence also suggests an association between increased alcohol consumption, poor diet and mental illness.
- 3.1.3 The Mental Health and Wellbeing Joint Strategic Needs Assessment dataset reported in 2017 that the estimated prevalence of common mental disorders for people aged 16 and over in North Tyneside was 17.3% (20,082 people). This was lower than the English average of 19.9% and was close to the English median value of 17.75%.
- 3.1.4 Additionally, from 2016/17 to 2021/22, the number of North Tyneside residents in contact with secondary mental health, learning disabilities and autism services rose from 8,600 to 12,600 people. In 2022, there were 6,574 contacts by North Tyneside residents with CNTW’s Northumberland and North

Proportion of referrals to North Crisis Teams by hour of the day in 2022 (Age 18+), NHS NORTH TYNESIDE CCG, (All)



Tyneside Crisis Team, at a rate of around 547 contacts per month. Local demand for support from the Crisis Team varied by time of day, increasing from around 1pm, peaking at 5pm and slowly reducing throughout the night.

3.1.5 The need for alternative models of mental health service provision was identified within North Tyneside CCG's 'Commissioning Intentions 2019/20' strategy which outlined a local need for non-clinical support services for people experiencing mental health crisis who did not meet the clinical threshold for support. A 'Together in a Crisis' service was commissioned to deliver a community mental health support service to bridge this gap. This service is open access, allowing North Tyneside residents to self-refer in addition to accepting referrals from professionals.

3.2 North Tyneside Safehaven

In 2022, CNTW and NENC ICB applied for NHS England capital funding to support the development of physical safe haven space to support with mental health crisis. Revenue costs were funded through the ICB and funding was identified for the refurbishment of a Safe Haven venue and a steering group was developed to support service model design. Service modelling has included engagement with service users and the wider Community Mental Health Transformation working groups to identify the essential scope and features of the proposed service.

The project group, formed in late 2022 and inclusive of representatives of service users and carers, took onboard a co-produced view to provide a safehaven service with the following principles:

- To provide safe, high quality and flexible support to people experiencing mental health crisis.
- To provide a 'whole person' approach to the delivery of mental health crisis services which accounts for both the immediate distress experienced by the person as well as any contributory factors.
- To develop a positive patient experience and improve mental health outcomes for those accessing the service.
- Increase the proportion of people who are assisted with a non-clinical urgent mental health need.
- To reduce demand on statutory urgent care resources, including repeat access, by building resilience and asset-based capacity of people worked with to self-manage their difficulties.
- Promote 'mental health self-management skills' and wider approaches to recovery
- Improve the proportion of people who have a plan to improve their mental health and emotional resilience.
- Contribute to reducing the stigma and discrimination associated with mental ill health.
- Support families and carers to care for their own needs as well as those of the person in mental health crisis.

- Improving service user knowledge of services and resources available to them locally.
- Support the service user to make use of peer-support and other community resources.
- Support the service user to access relevant statutory and third sector services.
- To ensure that staff within the service are appropriately trained and experienced to appropriately support people to address the social determinants of mental health crisis including financial, employment, relationship and other social stressors.
- To ensure that staff within the service are trained and experienced to appropriately support people with substance misuse.
- Continually develop and refine the service to meet user's needs.
- To deliver the services in close collaboration with CNTW and other key statutory partners to ensure a safe and seamless experience for service users
- When needed support to access assessment for urgent mental health support.

A dedicated expert by experience network within the North Tyneside transformation programme were also engaged with by Healthwatch and Launchpad to create an insights report on views, wants and needs of the local community for a safehaven crisis alternative offer which was heavily considered in the creation of the above principles.

With the recommendations from the above in place, a project group worked to plan, fund and launch the safehaven service. From the insights report outcomes it was highlighted that Wallsend would be a preferential location for the service so an options appraisal of potential venues was carried out based on Janlocation, space available, safety, and accessibility. The outcome of the appraisal was the choice of the Wallsend Memorial Hall as the host venue for the service, with good space available needing minimal estates work to create the layout needed. It is also in close proximity to local GP services and public transport routes.

The Safe Haven will operate 7 days per week between 2pm and 10pm. These operating hours allow for the delivery of the Safe Haven during the hours where support is most required by local residents, accounting for the hours of most demand for the local Crisis Team.

The North Tyneside Safe Haven will have two key support access routes:

1. The service will offer 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.
2. The service will offer a telephone support option for people experiencing a mental health crisis who cannot or choose not to access the service in-person.

People who access the service will be offered 1:1 mental health support either in person or by telephone depending on the person's preferred method from suitably trained non-clinical staff working in Mental Health Support Worker and Peer Support Worker roles. 1:1 intervention will focus on the delivery of interventions designed to contain and reduce the person's distress as well as the risks associated with the mental health crisis. Please find the pathway of access included in the appendices.

The service, from go-live date, will be managed and staffed by Everyturn for an agreed interim of 12 months upon which time tenders will be invited from the wider 3rd Sector. It has also been agreed to review ongoing the use of the space for co-working with additional VCSE providers to enhance the offer and to create more options for support to the local population.

3.3 Overview of Northumberland and North Tyneside Universal Crisis Team

Northumberland and North Tyneside Universal Crisis Team (UCT) is an ageless service, providing support to those presenting in a mental health crisis. There are three defined pathways within UCT; Young Persons Pathway, Older Persons Pathway and Working Age Adult Pathway.

The Young Persons Pathway offers treatment to individuals up to the age of 18 years. Within the Young Persons Pathway, there is an Enhanced Follow up Pathway, this enables any service user up to the age of 25, who has presented at A&E following an episode of self-harm, to be assessed by the Young Persons Pathway, within 72 hours.

The Older Persons Pathway offers support and treatment to those aged 65 years and over. The Working Age Adult (WAA) Pathway provides care and treatment to those individuals predominantly aged 65 years and under, however there is flexibility within this, should a person's needs be more suited to the WAA Pathway.

The Working Age Adult Pathway consists of experienced clinical practitioners including, consultant psychiatrists, junior doctors, non-medical prescribers, specialist nurses, clinical nurse specialists, a clinical psychologist, peer support workers, clinical support assistants, call handlers, a carer lead, and a specialist pharmacist.

The UCT operates 24 hours a day, 7 days a week, with no restrictions on referrers, for example, a self-referral, referral from a friend, carer, relative, professional. A referral can be made by contacting the 24/7 telephone number, there is also a text message service for those who are hearing impaired or have communication difficulties.

The team offers a telephone triage function, assessment, home based treatment, and carer support to those experiencing a mental health crisis. The team will work with service users and their carers to formulate the most appropriate plan, this may

include an onward referral to another service within CNTW or to our partners within the local community.

The main focus of the service is to treat individuals in their home, where it is deemed safe to do so. The UCT aims to deliver the least restrictive intervention. As reported in a national survey by Lamb et al., (2018), home based treatment is recognised as a safe and effective way to treat service users in their own home. It is described as a supportive intervention whereby service users recover quicker in their own surroundings, with psychological intervention and support from their carers and family.

Home based treatment will involve co-producing a care plan of a service user's needs, involving the service user and their family/carer. The plan will be continuously reviewed and amended when needed. The service user will have access to the full multi-disciplinary team (MDT) as outlined earlier, and their progress/treatment plan will be discussed within a daily MDT meeting.

Within the team, there are experienced peer support workers who work alongside service users and their carer's, sharing lived experiences and focusing on developing Wellness Recovery Action Plans (WRAP).

If it is felt home based treatment is not to most appropriate plan, the team are able to offer informal admission to a psychiatric hospital. The need for this will be reviewed at every contact and risk assessed. Prior to discharge from the team, the discharge plan will be discussed with the service user and carer/family, this will also be communicated with the service user's GP.

4 Background Information

- 4.1 Information on safehaven is available on everyturn latest news release [New Mental Health Crisis Safe Havens to Open Across North East After £1m Investment | Everyturn](#)
- 4.2 Information on universal crisis team is available on CNTW resources <https://www.cntw.nhs.uk/resource-library/universal-crisis-team-northumberland-north-tyneside/>

5 Appendices

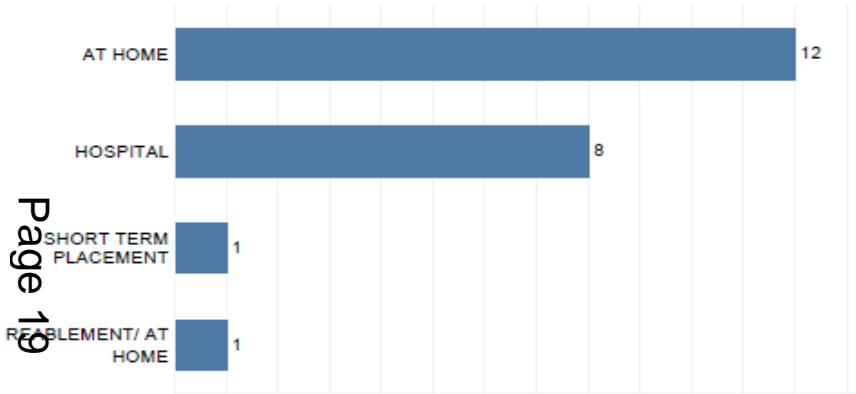
Appendix 1: North Tyneside Safe Haven – Service User Pathway

Homecare in North Tyneside

Brokerage list (awaiting package of care)

	Aug 2023	Sept 23	Oct 23	Nov 23	Dec 23
Package of Care	92 clients 929 hours	65 clients 708 hours	62 clients 589 hours	20 clients 217.75 hours	22 clients 206 hours
Clients on brokerage list	£14,914 cost	£11,383 cost	£9,307 cost	£3441 cost	£3,275 cost

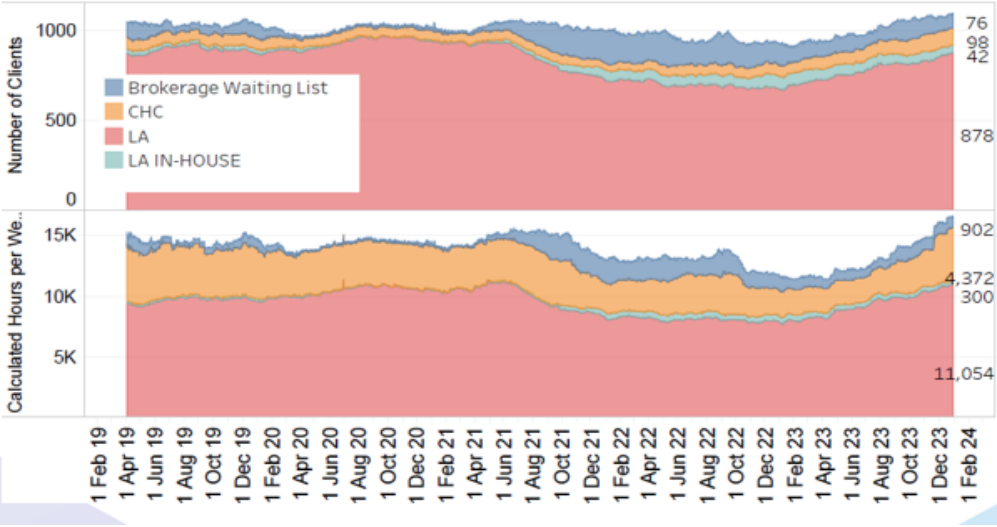
Current Location of New Clients awaiting Homecare Package



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Homecare

There were 920 clients receiving 11,354 hours of **home care** per week during December 2023. This has increased steadily over the last year



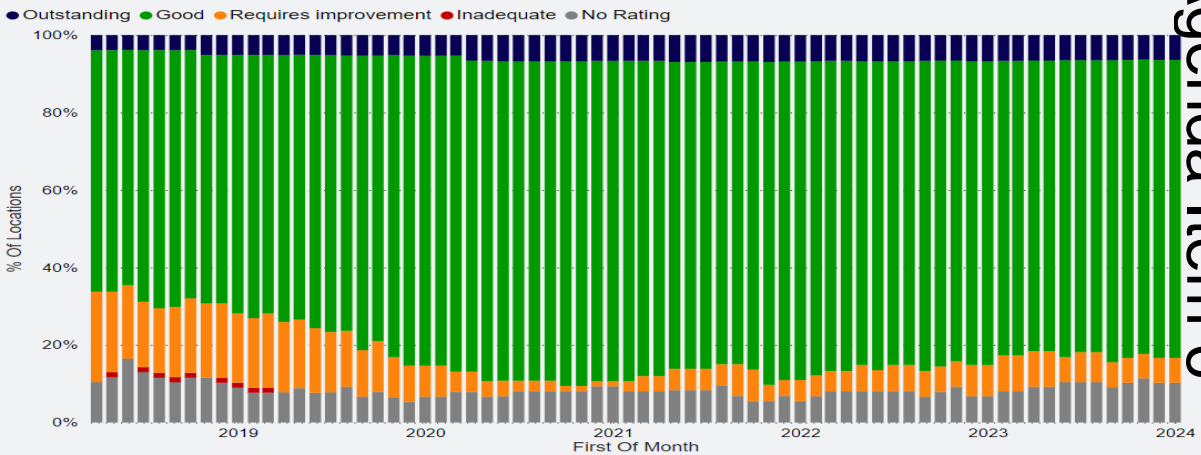
CQC Registered providers

Performance Commentary

Five CQC registered locations are currently rated as requiring improvement – a reduction from six when compared with July.

- The Ferns Care Home (Roseberry Care Centres) – 48 beds
- Primrose Lodge Care Home (Roseberry care Centres) – 48 beds
- Safe Hands Home Care Limited – **0 beds**
- The Old Vicarage Care Home (SVP Health care Limited) – 36 beds
- Eastside Gardens (Lifestyle Care): 90 beds

No locations are inadequate
Five locations are outstanding



Agenda Item 6

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