

Supporting people to live healthier lives

Score: 2

2 - Evidence shows some shortfalls

What people expect

I can get information and advice about my health, care and support and how I can be as well as possible – physically, mentally and emotionally.

I am supported to plan ahead for important changes in my life that I can anticipate.

The local authority commitment

We support people to manage their health and wellbeing so they can maximise their independence, choice and control, live healthier lives and where possible, reduce future needs for care and support.

Key findings for this quality statement

Arrangements to prevent, delay or reduce needs for care and support

North Tyneside worked with people, partners and the local community to make available a range of services, facilities, resources and other measures to promote independence, and to prevent, delay or reduce the need for care and support for unpaid carers, people receiving adult social care support, and other people across the borough. The Adult Social Care Strategy (2024-2026) worked alongside the Corporate Strategy, Our North Tyneside Plan (2021-2025) to expand on the priorities for the borough including the provision of prevention and early intervention processes to support people to lead healthier lives and to reduce the need for long-term care.

Senior leaders worked with partners through the Health and Wellbeing Board to promote integrated working between health and social care and other partners. The Health and Wellbeing Board produced the JSNA, in collaboration with Public Health, outlining the health and care needs of people living in North Tyneside and any health inequalities across the Borough.

Data provided by the local authority 2021 census showed North Tyneside was becoming more diverse. Although it still had lower ethnic diversity compared to regional and national averages, the proportion of residents identifying as Asian, Black, mixed heritage, or from other ethnic backgrounds had risen from 4.9% in 2011 to 7.5% in 2021, mainly amongst younger age groups. North Tyneside was the second least deprived local authority in the Northeast, but there was a significant variation in deprivation levels across its neighbourhoods. Some areas, especially the coastal towns such as Whitley Bay with its popular lighthouse, were quite affluent, while others, particularly in North Shields and Wallsend, faced high poverty rates.

The local authority recognised many older people in deprived areas were facing significant hardships, with around 35% living in poverty compared to just 3.9% in more affluent neighbourhoods. Loneliness was also an issue, particularly for older adults and those with disabilities or low incomes, making social connections even more difficult. About 10% of the borough's population lacked internet access, with older and disabled individuals being the most affected by this digital exclusion. Other examples of inequalities in North Tyneside included smoking, weight management, levels of physical activity, drug and alcohol misuse, suicide, self-harm, and homelessness.

The local authority's Prevention Strategy (2024-26) outlined their vision and commitment to prevent, reduce and delay people's needs. Prevention was embedded as a principle across all partner and council strategies and a core feature of all Adult Social Care activities. Staff and leaders told us the Gateway duty team worked intensively with people who did not have ongoing social care involvement, with a preventative approach. Preventative teams including Care and Connect, Welfare Assistance, and Select and Direct were embedded within the Gateway service, and there were strong links with the Community Rehabilitation team.

Data provided by the local authority showed preventative services were having a positive impact on well-being outcomes for people. The preventative response provided by contact centres (excluding Welfare Assistance) dealt with 59% of all contacts. Gateway also worked with 10.3.% of contacts requiring an immediate crisis response to a situation before moving on for long term support.

In May 2023, the Connecting Communities Strategy for Community Hubs, and Libraries (2023-2028) was agreed by Cabinet to establish 6 community hubs across North Tyneside. The hubs provided a consistent support and advice offer, tailored to local need and as well as the physical multi-agency hub buildings, the service worked with the wider community to provide a cohesive network of support and services. To tackle digital exclusion and health inequalities in minority ethnic communities the local authority was focused on Community Hubs being easily reachable by public transport, especially in areas the most deprived areas and those with diverse populations. The local authority hosted popular marketplace and networking events twice a year and were trying out new technology support through their Support Through Technology strategy, which included giving out Wi-Fi dongles to help people get online.

Partners told us the local authority had implemented several preventative initiatives showing positive impacts on people's wellbeing. Staff and leaders continued to raise awareness and combat violence against women and girls by promoting the work of Domestic Abuse Champions within adult social care. They provided mandatory domestic abuse training to local authority frontline teams, led by senior social workers from the Safeguarding Adults team. In terms of housing, the local authority had earned top accreditation from the Domestic Abuse Housing Alliance.

The local authority reported an increasing number of people of working age who needed significant support due to histories of trauma and substance use. This had led to a heavy reliance on emergency services. The local authority's Gateway Access Plus service collaborated with the North Tyneside Recovery Partnership on a detox and rehab pathway, including the provision of public health-funded specialised substance misuse social worker within the mental health service. The Health and Wellbeing Board introduced Working Well Hubs as part of the regeneration of North Tyneside to ensure the needs of people dealing with addictions and homelessness were prioritised.

Senior leaders told us they planned to further embed services targeting people with dual-diagnosis and people with multiple complex needs. Gateway Access Plus was an ICB funded, joint working project established in 2023 to support people with multiple and complex needs which resulted in barriers to accessing physical health care and housing. The local authority wished to expand the service with pooled funding to enable a wider reach and improve links with housing and drug and alcohol services.

Provision and impact of intermediate care and reablement services

The local authority worked with health partners to deliver intermediate care and reablement services which enabled people to return to their optimal independence, reduce hospital discharge waiting times, and lessened the likelihood of hospital readmissions. Place-based relationships benefited from long-term joint working and representation on partnership boards. Senior leaders told us they took pride in their approach to prevention. As a result of their approach, they saw fewer older adults needing long-term support to stay at home and a low number of working-age individuals in residential care.

Better Care Funding (BCF) was overseen by the Health, Care and Wellbeing Board, with funding primarily used to keep people at home. Staff and leaders told us the Care Point team, supported by funding from the BCF, supported hospital discharges via pathways including intermediate care, extra care step-down beds, and a home first approach using the reablement and enhanced reablement services. Senior leaders told us they stopped block-commissioning residential care beds, instead diverting resource into expanding their 'Home First' approach, enhancing capacity in reablement services, supported by occupational therapy input where needed.

In December 2024, the local authority launched an Enhanced Reablement service to complement the existing reablement offer, support complex hospital discharges, and reduce hospital re-admissions. Both services aimed to reduce or delay the need for long-term care and support. Data from the Adult Social Care Outcomes Framework (ASCOF 2024) showed 89.87% of people who had received short term support no longer required support. This was a positive variation to the average for England of 79.39%. A customer survey in 2023-2024 carried out by the local authority to assess the impact of reablement services found 81% of people rating the service as excellent and 18% as good.

Senior leaders told us about specialist support offered by the Mental Health Reablement team and the Learning Disability Enablement team who supported people living with multiple complex needs to live more independent lives through intensive, time-limited support to gain or regain independent living skills, preventing and reducing long-term needs for formal support.

Partners told us a recent review of 'step-down' services had led to a move away from traditional residential support to a more community-based extra care model, showing more meaningful outcomes for people using services and enabling people to return home sooner, and for longer. This resulted in 16 step-down beds in 2 extra-care schemes being commissioned. They supported people who were not yet ready to return home, but for whom residential care would not be necessary.

The Community Rehabilitation Team was established in August 2023 to provide functional assessments and timely reviews of new care and support plans, optimising them to avoid deskilling people and to promote independence, whilst increasing care packages where evidence shows it was required. Senior leaders told us by the end of the financial year 2023-2024 the team had completed 125 reviews, resulting in a net average decrease of 2 hours per week per service user, returning these hours into the homecare market.

The local authority shared data with us demonstrating how they measured the impact of their preventative approach. For example, Care Call, the local authority's initial falls responder, attended 3,500 incidents of people who had fallen each year, with only 3% of those going on to attend A&E. Care Call maintained the Carer Emergency Plan register, informing the local authority response to support the cared-for person, in a carer emergency. Data provided by the local authority showed the number of older people who were admitted to long-term residential care in North Tyneside was low compared to other local authority areas in the North-east and compared to the average in England. Approximately 1,400 people were supported through Reablement services each year, and the number of older people supported at home with homecare or extra care had increased 7% in 2023-2024 compared to 2022-2023. National data provided by ASCOF showed 1.60% of people over 65 years old received reablement or rehabilitation services after discharge from hospital. This was a negative variation to the England average of 3.00%.

Access to equipment and home adaptations

As part of their home first and prevention priorities North Tyneside ensured people could access equipment and minor home adaptations to maintain their independence and continue living in their own homes. The local authority's 'Select and Direct' service offered quick access to frequently needed equipment and minor adaptations, helping to eliminate unnecessary delays for occupational therapy assessments. Most of these assessments were conducted over the phone, with the team carrying out face-to-face assessments where this benefitted the person needing the equipment. In the first quarter of 2024-2025, Select and Direct completed over 300 assessments, with 94% finished within 7 days.

Staff and leaders told us they had seen a significant increase in demand and complexity for occupational therapy input, with a 17.5% rise in referrals from 2023 to 2024. This increase had led to some people waiting longer for assessments related to equipment and adaptations. In response to this, the local authority had introduced their cross-service prioritisation tool to ensure individuals at high risk were prioritised and used their workload allocation framework to ensure the best use of resources.

Senior leaders commissioned a review of the occupational therapy service in 2024 with a subsequent consultation taking place. There has been a redesign of the assessment pathway which will include clear criteria for internal and specialist teams. Within the new model the local authority introduced a new post of Principal Occupational Therapist and an additional Team Manager. This new structure was due to start in 2025 to provide a robust oversight of waiting lists and ensure strategic input into ongoing service design, improvement, and integration. There were also additional Occupational Therapy hours put into the model to support the provision of a Community Rehabilitation Service with occupational therapy advice and oversight to enable swift provision of equipment.

Referrals into the Occupational Therapy team were triaged and priority rated to support allocation decisions, with referrals suitable for quick provision of loan equipment going to Select and Direct, lower-complexity referrals allocated to Occupational Assessment officers, and more complex assessments requiring a qualified Occupational Therapist. Senior staff members oversaw all referrals. Data provided by the local authority showed in February 2025 there were 244 people waiting for equipment assessments. The average waiting time was 71 days, with a maximum of 168 days. This showed delays were increasing, with the number of people on the waiting list up by 96 people since September 2024.

The Loan Equipment Service operated a 7-day service providing an average of 2,100 pieces of standard equipment each month in 2023-2024. Data provided by the local authority showed in February 2025 there were 312 people who had been assessed for equipment and were awaiting delivery. Of these, 228 (73%) had in-stock equipment allocated to them, with a scheduled date for delivery.

Staff and leaders told us they maintained a target of 5 days for the provision of standard non-emergency (independent living) equipment. Across 2023-2024 95.3% of equipment was delivered within this timeframe. In January 2025 there was an average waiting time of 5 days from ordering to the delivery of equipment, with a maximum waiting time of 24 days. This was due to delivery delays from the manufacturer.

People and partners told us the provision of equipment in North Tyneside worked well and people received equipment in a timely manner to ensure the remained independent at home for longer. Senior leaders told us feedback from customer surveys regularly showed high satisfaction scores and leaders were confident the changes made to the occupational therapy structure would improve assessment waiting times.

Care Call was the local authority's telecare and assistive technology service, supporting around 3,500 customers. The service played an important role in assisting the North-east Ambulance Service as the first responder for falls, helping to prevent long waits for help and reducing the need for hospital admissions. As part of their Home First approach, the local authority offered Care Call free of charge for up to 6 weeks in conjunction with reablement support. As part of the enablement offer the local authority also provided Independent Living Skills assessments, including the provision of assistive technologies to promote independence at home and in the community.

Provision of accessible information and advice

The local authority's My Care North Tyneside website, and the Living Well North Tyneside service, jointly commissioned by the ICB and local authority, ensured people could easily access information and advice on their rights under the Care Act and ways to meet their care and support needs. This included unpaid carers and people who funded or arranged their own care and support. The Living Well North Tyneside and My Care websites provided information about local activities, advice, and support services.

Staff and leaders told us they had recently carried out a full redesign of available information about key topics, co-designed with members of the Inspire Adult Social Care Improvement Forum, to improve clarity and accessibility. This included improved accessibility of websites, with a 35.7% increase in people accessing the site and a 14.9% growth in the number of local community events listed there. The changes were in response to national data provided by ASCS in 2023 which highlighted difficulties in people accessing information and advice.

In the most recent ASCS (2024) the local authority saw an 8% improvement in the proportion of people who reported being able to find information easily. Despite this, the 2024 figures showed only 59.33% of people using adult social care services, and 51.52% of unpaid carers found it easy to access information and advice. This tended towards a negative variation to the England averages of 67.12% for people accessing services, and 59.06% for carers.

Senior leaders told us the local authority's prevention strategy included addressing digital exclusion. The Gateway Contact Centre dealt with over 2,000 (50%) contacts a year without progressing to frontline teams. North Tyneside also funded telephone and face to face advice from the voluntary and community sector.

Partners told us the local authority website was easy to access and understand and there were good links to information and advice about adult social care and healthy living. The site also incorporated the Living Well directory which made finding voluntary and community services easy. The local authority would supply information in different languages if asked.

People told us the local authority provided information booklets relating to maintaining independence, staying well, prevention and delay services. These information sheets covered a range of topics relating to adult social care and were available to people through request, at Community Hubs, and via social workers.

Direct payments

Data provided by the local authority showed there was not always good uptake of direct payments. 20% fewer people received a direct payment in North Tyneside in 2022-2023 than in 2021-2022. In March 2023, 345 people were receiving a direct payment, however, by March 2024 this figure had dropped to 295 people. There were low numbers of unpaid carers being supported via a direct payment in 2022-2023 with 4.2% of carers in North Tyneside receiving direct payments compared to the England average at the time of 76.8%.

People and unpaid carers told us of prolonged delays in direct payments being implemented and inconsistent advice being given by frontline teams. People had significant difficulties recruiting and retaining PAs as well as accessing training and support around managing their employment. National data provided by ASCOF (2024) showed only 13.13% of people using adult social care services received direct payments. This was a significant negative variation on the England average of 25.48%.

Feedback from staff and leaders included processes to set up a direct payment were difficult and open to error. There was limited understanding of the direct payment process within frontline teams and the administration of direct payments was difficult for people and their families. Staff echoed the difficulties identified around PA capacity with training, recruitment and retention difficulties impacting on the time it took to put support in place.

Senior leaders told us they carried out a review of the direct payments process in 2024. The local authority explored why there had been a decrease in people receiving a direct payment. The main reason cited by people receiving support and unpaid carers for not accessing direct payments was difficulties in recruiting PAs with the standard hourly rate below the offer available in neighbouring local authorities.

Staff and leaders told us the assessment and review process for frontline teams included direct payments discussions and provision of information and advice leaflets. The internal process for implementing a direct payment had recently changed, with a move to automatic referrals rather than reliance on paper-based approaches.

Partners told us urgent needs, for example hospital discharges, were dealt with quickly and people and unpaid carers had access to support with administrative issues such as payroll. Direct payments could also be used to purchase equipment, services, and one-off spot-purchases to support people's independence. The local authority had a dedicated direct payment support team along with local payroll providers to assist with recruitment and administration. They had introduced initiatives to address this, including a review of PA pay rates, additional training and support for PAs, staff, and people using direct payments, and streamlining administration and start-up processes.

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