Wiltshire Council Where everybody matters

AGENDA

 Meeting: South West Wiltshire Area Board
 Place: Chalke Valley Sports Centre, Knighton Road, Broadchalke, Salisbury, Wiltshire, SP5 5HX
 Date: Wednesday 31 May 2017
 Time: 6.30 pm

Including the Parishes of Alvediston, Ansty, Barford St. Martin, Berwick St John, Berwick St Leonard, Bishopstone, Bowerchalke, Broad Chalke, Burcombe Without, Chicklade, Chilmark, Compton Chamberlayne, Dinton, Donhead St Andrew, Donhead St Mary, East Knoyle, Ebbesbourne Wake, Fonthill Bishop, Fonthill Gifford, Fovant, Hindon, Kilmington, Mere, Netherhampton, Quidhampton, Sedgehill and Semley, South Newton, Stourton with Gasper, Stratford Toney, Sutton Mandeville, Swallowcliffe, Teffont, Tisbury, Tollard Royal, West Knoyle, West Tisbury, Wilton and Zeals.

The Area Board welcomes and invites contributions from members of the public. The chairman will try to ensure that everyone who wishes to speak will have the opportunity to do so.

If you have any requirements that would make your attendance at the meeting easier, please contact your Democratic Services Officer.

Refreshments and networking opportunity from 6:30pm .

Please direct any enquiries on this Agenda to Lisa Moore (Democratic Services Officer), direct line 01722 434560 or email <u>lisa.moore@wiltshire.gov.uk</u>

All the papers connected with this meeting are available on the Council's website at <u>www.wiltshire.gov.uk</u>

Press enquiries to Communications on direct lines (01225) 713114 / 713115.

Wiltshire Councillors

Cllr Jose Green, Fovant and Chalke Valley (Chairman) Cllr Pauline Church, Wilton and Lower Wylye Valley (Vice Chairman) Cllr George Jeans, Mere Cllr Tony Deane, Tisbury Cllr Bridget Wayman, Nadder and East Knoyle

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County Hall, Trowbridge Bourne Hill, Salisbury Monkton Park, Chippenham

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Public Participation

Please see the agenda list on following pages for details of deadlines for submission of questions and statements for this meeting.

For extended details on meeting procedure, submission and scope of questions and other matters, please consult <u>Part 4 of the council's constitution</u>.

The full constitution can be found at this link.

For assistance on these and other matters please contact the officer named above for details

		Items to be considered	Time
1	Welcome	e and Introductions	6.30pm
2	Apologies for Absence		
3	Introduct	tion to Area Board	6.35pm
		uction to Area Boards by the Community Engagement to explore the role and function of your local Area Board.	
	Officer: Ste	eve Harris, Community Engagement Manager	
4	Declarati	ions of Interest	7.00pm
		e any declarations of disclosable interests or dispensations by the Standards Committee.	
5	Minutes	(Pages 3 - 34)	
	two meeti	n as a correct record and sign the minutes of the previous ings held on Wednesday 8 March 2017, and on Tuesday 16 7, as attached to the agenda.	
	To note a	ny matters arising from the minutes of the last meeting.	
6	Chairma	n's Announcements	7.05pm
7	Appointr (Pages 3	nents to Outside Bodies and Working Groups 5 - 58)	7.10pm
	The Boar and to:	d is asked to consider the report attached to the agenda,	
	a.	Appoint Councillor representatives to Outside Bodies as set out at Appendix A;	
	b.	Agree to reconstitute and appoint to the Working Group(s) as set out in Appendix B; and	
	C.	Note the Terms of Reference for the Working Group(s), as set out in Appendix C.	
	d.	Re-confirm the appointment of 2 Older Peoples Champions for the Area Board (as appointed in October 2016 for 1 year), in accordance with Appendix D.	

Par	tner and Community Updates (Pag	ges 59 - 72)		7.15pm
	receive any verbal updates from Part oups present, including:	ners and Commu	unity	
	Police – Neighbourhood TeamsFire & Rescue			
То	note any written updates or online lin	ks attached to th	e agenda:	
	 Fire Wilton Town Team minutes Healthwatch Wiltshire Clinical Commissioning Group (C Consultations: <u>http://www.wiltshire</u> 	e.gov.uk/consulta		
unle	te: Speakers are reminded that they e ess they have previously discussed a In the Community Engagement Manag	lternative arrang	,	
Cyt	per Crime			7.25pm
Crir	receive a presentation from Sergean me Prevention Division of Wiltshire P ative.			
Loc	cal Youth Network (LYN) (Pages 73	- 76)		7.45pm
reco	receive an update from the Group an ommendations for funding youth projecting, as detailed in the report attache	ects arising from	their last	
Ар	plication	Grant Amount	1	
Ap	plicant: Seeds4Success			
<u>Se</u>	eds4Success - NCS enhanced	£3050.00		
<u>Se</u> opr Ap Res Pro	•	£3050.00 £2866.00		
Se opp App Res Pro So Tot	eds4Success - NCS enhanced portunities project plicant: Dorset & Wiltshire Fire and scue Service pject Title:			

11	Community Area (Pages 77 - 86)	Transpo	rt Group (CATG) Update	7.55pm	
	•	ea Transp	ider the recommendations for funding of port Group meeting held on 19 April ched papers.		
12	Nadder Centre (F	Pages 87 ·	- 90)	8.00pm	
	To receive an upd	ate from t	he Nadder Centre Board.		
13	Health & Wellbei	ng Group	(H&WBG) (Pages 91 - 94)	8.05pm	
	the H&WB Group,	held on 1 port the V	ote the minutes of the last meeting of 3 May 2017. The Group recommended Vilton Big Lunch initiative, subject to full ed.		
	Note: This funding item 14 – Commu		on will be considered by the Board under Funding.		
	The Board will als Calling initiative.	o hear ab	out the Big Pledge 2017 - London		
14	Area Board Fund	ling (Page	es 95 - 102)	8.10pm	
	Councillor Initiativ	<u>e – Area E</u>	Board Project Funding		
	project proposal to Speed Indicator D	o allocate vevice Sch	Board will consider an Area Board up to £8,000 towards a Community eme. Full details of the proposal will be Board meeting on 31.5.17.		
	Community Communications Project The Board will consider the following project:				
	Organisation	Amount request ed	Project details		
	Bowerchalke Parish Council	£635	Full details are <u>available here</u> . The applicant proposes to install a broadband connection and associated infrastructure to support digital inclusion sessions. Costs will cover setup costs and 12 months running costs.		

Community Area Grants

The Board members will consider 3 applications for funding from the Community Area Grants Scheme for 2017/18:

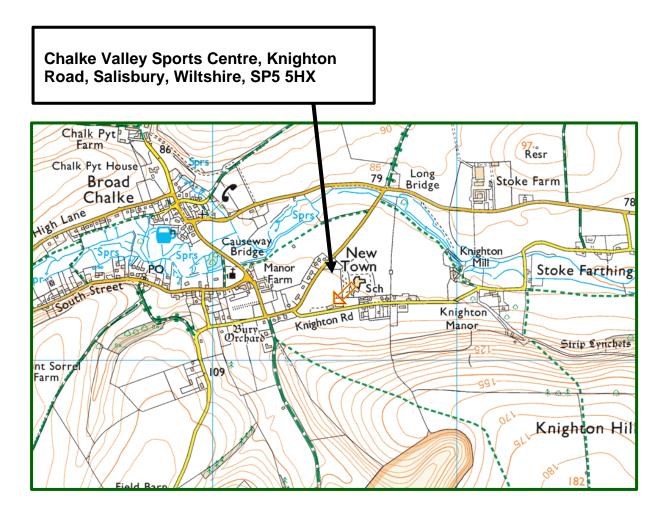
Applicant	Amount requested
Applicant: Wilton Town Council	
Project Title: Wilton Town Trail and map	
boards	£3800.00
View full application	
Applicant: Bowerchalke Village Hall	
Project Title: Bowerchalke Village Hall	
Renovations	£5000.00
View full application	
Applicant: Wilton Community Land Trust	
Project Title: Wilton Week and The Great Big	
Lunch	£2500.00
View full application	

15 **Close**

The next meeting of the Board is on Wednesday 26 July, 6.30pm at The Nadder Centre, Tisbury, SP3 6HJ.

8.30pm

Agenda Item 1



Wiltshife Council Where everybody matters

MINUTES

SOUTH WEST WILTSHIRE AREA BOARD
Nadder Centre, Weaveland Road, Tisbury, SP3 6HJ
8 March 2017
6.30 pm
9.12 pm

Please direct any enquiries on these minutes to:

Lisa Moore (Democratic Services Officer),Tel: 01722 434560 or (e-mail) lisa.moore@wiltshire.gov.uk

Papers available on the Council's website at www.wiltshire.gov.uk

In Attendance:

Wiltshire Councillors

Cllr Tony Deane (Chairman), Cllr Peter Edge, Cllr Jose Green, Cllr George Jeans and Cllr Bridget Wayman (Vice Chairman)

Wiltshire Council Officers

Stephen Harris, Community Engagement Manager Lisa Moore, Democratic Services Officer Robin Townsend, Associate Director

Town and Parish Councillors

Berwick St. John Parish Council – R Carter, G Marks & T Bell Dinton Parish Council – C Smith Hindon Parish Council – D Robertson Sedgehill and Semley Parish Council – B Ford Tisbury Parish Council – J Amos & F Corp Wilton Town Council - P Matthews

Partners

Wiltshire Police – Joe Power Dorset & Wiltshire Fire and Rescue Service – Jason Moncrief

Total in attendance: 30

<u>Agenda</u> Item No.	Summary of Issues Discussed and Decision
1	Welcome and Introductions
	The Chairman, Councillor Tony Deane welcomed everyone to the meeting of the South West Wiltshire Area Board.
2	Apologies for Absence
	Apologies for absence were received from:
	 Swallowcliffe PC Ebbesbourne Wake PC Chilmark PC
3	Declarations of Interest
	There were none.
4	Minutes
	The minutes of the previous meeting held on Wednesday 1 February 2017 were agreed as a correct record and signed by the Chairman.
5	Chairman's Announcements
	The Chairman gave the following announcements:
	Litter picking events There had been 14 picks arranged to take place last week throughout the area, with several others still yet to take place. Feedback received from half of those events had shown that 77 volunteers had taken part and collected 113 bags of rubbish.
	In previous years the Board had financed the litter picks for these days, buy funding the kit. It would now be down to the parishes to set aside funding to cover future kit to carry out litter picks.
	Purdah The pre-election period would begin on the 15 March. Although Purdah did not restrict day to day operation of the council, as a matter of good practice all agenda items and decisions, including grant applications, would be assessed before publication to assess whether they may be controversial.
	Cyber Crime Sergeant Harvey would be in attendance in May, to present information on

	Cyber-crime.
	<u>Tisbury Community Safety Partnership</u> The last meeting would be held on Tuesday 16 March. At these meetings, they look at local priorities for policing in the community area. It was proposed that this Group would then become the South West Wiltshire Community Safety Partnership
	Question: Wilton TC, Phil Matthews – This year there were 19 pages to the application for parish councillors. Anyone wanting to stand must take the papers to 5 Rivers or could nominate one person to take it in on their behalf. <u>Answer</u> : TD - There will only be elections in the parishes if there were more people standing than were places for on the parish council.
6	Shaftesbury & District Task Force
	Lester Dibben Secretary of the Shaftesbury & District Task Force (S&DTF) and members of the Save our Beds (SoB) Campaign were in attendance to give information on the campaign.
	The 'Shaftesbury Town Council Westminster Memorial Hospital (WMH) Working Group' was set-up to bring together various independent groups working to oppose the CCG plans to close the beds at the WMH, such as SoB & S&DTF. The Working Group had met weekly to allocate tasks, act as a forum for ideas, receive progress reports from the independent groups and to disseminate the information to the local councillors and representatives present.
	There had been a meeting with Dorset County Council earlier that day, when the group had challenged them for not carrying out the consultation properly. It was hoped that they would now agree to give more time for people to complete the consultation.
	However since that meeting the Group had received a letter stating that the consultation would not be extended and did end at midnight on February 28.
	Julian Prichard; the founder/manager of SoB explained that the Group was set up to make sure the consultation and questionnaires were sent out properly. The model they had involved a representative from each street in Shaftesbury. If an extension was granted, then the volunteers were ready to move in to south wilts to promote the consultation. Dick Ripper had collected together a 3,000 to 4,000 signature petition.
	A second consultation on Mental health services in Dorset was running from 1 st Feb to the 31 st March.
	Although we are in Wiltshire and not Dorset, some of our parishes were covered

	by this hospital.
	Dr Helen Tucker; a consultant employed by S&DTF who was the Vice President of the Community Hospitals Association; had written a report. She felt that it was a good thing that the Opinion Research Services (ORS) which had carried out the consultation would be analysing the questionnaires, as the ORS were accepting consultation questionnaires until the end of the week to allow for delays in the postal system. The consultation questionnaires, for those with learning difficulties, carried no end date but would no longer be accepted. Limited information had been recently accepted from Shaftesbury Town Council but there was no guarantee that future information would be accepted.
	Cllr Green had also attended a meeting and noted that she felt that people were being short changed with the length of the consultation and that many Wiltshire residents around the boundary had no idea about it. Along with the proposal to remove the beds, the minor injuries and clinics would also be going. She urged everyone to go back to their parish councils to respond.
	Cllr Wayman had been liaising with the Cabinet member for Health for information on Shaftesbury hospital. Some information had been provided by Wiltshire CCG, which stated that there had been 613 attendances to the hospital for the minor injury unit from Wiltshire residents, but that these were from a total of 7 spells which amounted to 230 bed days. It had seemed to take a long time to get this information. Cllr Wayman also contacted the local MP who also seemed not to be that helpful.
	 <u>Question</u>: Have you contacted the Tisbury link scheme for their figures of the number of people using their service to access the hospital? <u>Answer</u>: No, thank you for this. Link to the website: <u>http://saveourbeds.co.uk/</u>
7	Dementia Friends
	Steve Harris, Community Engagement Manager explained that at the last meeting the Board agreed to become a Dementia Friendly Community as part of the Dementia Action Alliance. As part of this we thought it might be nice to have a dementia friends training session for those in attendance tonight.
	Steve then carried out an interactive session where he explained about the Dementia Friends movement and how people could help to create a dementia friend's community.
	Five key points were:

	 Not everyone who develops dementia is old Dementia was not a natural part of ageing Dementia was a disease of the brain Dementia was a progressive condition It was possible to live well with dementia. For more information on Dementia Friends please go to: <u>https://www.dementiafriends.org.uk/</u>
8	Highways Major Maintenance Programme for 2017/18
	The Board considered the proposed schedule of works for 2017/18 as detailed in the papers attached to the agenda.
	Discussion took place around other possible roads which did not feature on the list. The Chairman noted that the programme was not yet written in stone, the ClIrs would be working with the Highways Officers to highlight other works around the community area which it was felt needed to be addressed.
	 <u>Questions</u>: What was meant by terminal plates at Bulbridge road, Wilton on page 133 of the agenda? <u>Answer</u>: The Board agreed to find out and feedback.
	• A lot of the programme was focused on the C12, but was the white lining programme the Board was running going to be done after the surface dressing had taken place? <u>Answer</u> : We would coordinate were possible.
	 Could Calais Hill at Semley be looked at? <u>Answer</u>: The Board would take this back.
	<u>Decision</u> The South West Wiltshire Area Board approved the schedule of works for 2017/18, as detailed din the Highways report attached to the agenda.
9	Partner and Community Updates
	The Board noted the written updates attached to the agenda and circulated at the meeting.
	Police In addition to the written report circulated at the meeting, Joe Power, a Wiltshire Police staff volunteer, working at the Crime Prevention branch, was in attendance to speak about various Rural Policing initiatives going forward.
	Due to the overwhelmingly rural nature of Wiltshire, the Rural Policing Support Unit (RPSU) had been created. This would be enhanced in the short term with a further ten nationally accredited Wildlife Crime Officers, bringing the full

complement available to Wiltshire Police to 15. The intention is that these officers would remain embedded with their CPTs, continuing to work under current command arrangements. In addition, 20 Special Constables had received additional training and would continue to deliver operational effects, also in direct support of CPTs, with targeted priorities identified by RPSU.

Joe also highlighted the recent (7 March 17) adjournment debate on rural crime in the House of Commons, initiated by John Glen, MP for Salisbury. RPSU had worked closely with John Glen's office to assist him in preparing for the debate, and there had been widespread media coverage of this event.

Joe discussed several recent operations; notably Op ASTON, a very large multi-agency operation across Salisbury Plain, and Op DROGO, which saw 63 Special Constables working in direct support of CPTs in South Wiltshire. This was the single largest Special Constabulary operation in the history of Wiltshire Police, and it effectively doubled the capacity of the police.

Joe highlighted the first-class work being conducted by Community Coordinators, and advertised Community Messaging as an excellent way of staying informed about policing activity generally. He also discussed the perennial issue of 101 'wait times' but noted that work is ongoing in a number of areas and that early signs are very encouraging, and asked for a degree of patience as the police progress this issue.

Joe then discussed the Rural Crime Partnership and stated that he would expand on this at the Tisbury Community Safety Partnership meeting on 14 March 2017. The key headlines were that this initiative was still in its first year; it met quarterly and active participation was welcomed from across rural communities in Wiltshire. Andi Witcombe from the National Farmers' Union would also be attending the Tisbury CSP - she was a core member of the Rural Crime Partnership.

Joe highlighted the social media presence of the RPSU; notably @wiltsruralcrime on Twitter and the dedicated Facebook page @Wiltshire Rural Crime Team. The previously existing Horse Watch and Farm Watch Twitter pages have been absorbed into the current @wiltsruralcrime on Twitter. Joe concluded by drawing attention to the Chief Constable's open letter which identified Wiltshire Police as a 'force to be reckoned with' and that all the signs were immensely positive in terms of the Police's ability deal proactively with rural crime going forward.

<u>Fire</u>

In addition to the written update circulated at the meeting, Jason Moncrief was in attendance to give an update.

Incidents and highlights

There was still a good amount of co-responding calls for Tisbury and Mere. • There had been 5 RTC incidents in the district on the A303 in last two months. • The retained availability for was struggling during the day time in some areas, particularly in Tisbury. People were urged that if they knew of anyone available in the day that might be interested in this. Currently there were 2 applicants for Tisbury, one for Mere and a number for Wilton all going through at present. A campaign was being run at the moment for people to turn up at set stations on a set night, to have a go at some of the tests and to speak to officers about what it was like to work as a retained Fire Fighter. Questions What was a special service? It was something that isn't a fire. • Did you still carry out the electrical safety checks? - Answer: We carry out the Safe & Well visits, people can go online and apply for a visit. Cllr Deane noted that the safe and well visits were really important, particularly for vulnerable people. If you know of people then identify them and pass them on to the fire service. Jason added that it was not just individuals who could have these checks and information, Officers could also deliver the safety messages to groups. • Support from digital champions could be accessed to enable elderly people to access information online. Steve read out a H&WB update which had been sent earlier that day: Val was organising a Sunday lunch in April as a trial run for the elderly and lonely, as it had been expressed how Sundays could be a lonely time. If it was successful we may try it out in other areas of the South West. There was an active team also working on hosting Sunday teas for 6-8 people at a time in remote areas specifically for the socially isolated and lonely. Work continued in searching and adding to 'Village Activities' and mindful of the urgency for dementia actions and activities in light of dementia action. Anne Marie had attended the Dementia Action Forum and we both attended South Wiltshire forum on 'Alive Active Care' this was an opportunity to meet with others who were working in the field of activity provision, to share ideas and find support in meeting the day to day challenges of keeping those which were cared for, engaged and active. There was also workshops looking at simple sensory activities which gave some ideas to take away. We both attended and had a stand at the opening of the Tisbury Campus, this was a great opportunity to Network and share experiences.

	<u>Wilton Update</u> The Wilton Town Team minutes attached to the agenda had detailed the Town Trail. Cllr Edge also updated on the Wilton Parkway station, he had gone on the Trans Wilts destination train from Swindon to Salisbury, which had taken approximately 45 mins. The train had stopped at the potential Wilton Parkway location. The LEP had indicated verbal support for the Wilton Parkway. It was hoped that in 3 to 4 years the station would happen.
10	Local Youth Network (LYN)
	The Board noted the update from the LYN as detailed in the agenda.
	Cllr Wayman updated that the Education Officer from the Fire Service had visited to speak to the young people about the Salamander course. The LYN was in support of running a course in the area and recommended that funds were ringfenced from next years budget to pay for that.
	The Salamander was a course for a group of young people which was made up of a number of models, both active and practical which aimed to improve confidence and teach new skills.
	As the funding was from the 2017/18 budget the LYN would need to bring a recommendation back in the new financial year, to ratify the funding to the project.
	<u>Decision</u> The South West Wiltshire Area Board supported the LYN recommendation to ringfence £3,400 of the 2017/18 budget to pay for a Salamander course in the area, with the condition that this came back for ratification in the new financial year.
	 Questions and comments: Phil Matthews noted that the rubbish outside the building in Wilton should have been collected as they had requested for it to be moved, this would be check up on.
	Cllr Wayman and Steve, had held the one year review meeting with seeds4success, which now triggered the release of the next tranche of funding to them.
11	Community Area Transport Group (CATG) Update
	The Board noted the minutes of the last meeting and recommendations as detailed in the report.
	The Chairman also noted that there was a process for funding 20mph speed

-	
	limits through CATG, however a paper had been produced which asked whether the 20mph limits were effective. CATG would need to read the paper and decide whether we pursue any further 20mph schemes.
	The Area Board had previously decided to fund white lining. The contractors would carry out the work when funds were available. In parishes where works were less than £500, they had been approached to ask whether they wished to bolt on any additional works and pay for it themselves. The options for that would be looked in to.
	Cllr Jose Green asked if the white lining for Stourton could be checked as it appeared not to equate on the price quoted for the amount of work required, compared to other areas and work.
	Decision The South West Wiltshire Area Board approved the recommendation for funding from the CATG as detailed in the report.
	 Question: Was there a speed limit directly outside the Nadder Centre as it was unclear due to the signs in the estate.? <u>Answer</u>: It was private land so the speed limit was up to Wiltshire Council. Steve Harris agreed to look at why the signs had not been removed.
12	Nadder Community Campus
	The Chairman update the Board on the proposal to apply for change of use, to enable commercial leasing of a space in the building. This was due to the large costs involved with running the building, so the Council had considered options to raise the income.
	A meeting had been held at Nadder Centre to discuss the proposals. Since that time communication between the Council and the community had improved.
	The Board heard from Viv who ran exercise classes at the centre. She had relocated her business to the centre because she had been led to believe that it
	would be develop into a health and wellbeing centre. If the centre decided to expand the nursery, then this would not fit with the original plan.
	expand the nursery, then this would not fit with the original plan.

	At the public consultation meeting held at the centre last week, it was made clear that the community felt that Wiltshire Council had not made the best of a situation by lack of communication with the public. There were a number of people who would have liked to hire some of the rooms here but did not know who to go to, so there was a potential loss for this building. If there has been a loss its due to lack of communication and consultation with Tisbury and the surrounding villages.
	The Chairman noted that the opening ceremony here took place had been a good event, and asked for people to give the them time to tackle the teething problems. The footfall needed to be increased to keep encouraging the café.
	The will of Wiltshire council was to make this place a success and minimise the cost. To build on the success of the centre and make it the heart of the community.
	He gave an update on the progress of the History Society's situation regarding their relocation into the centre. The process had been delayed by the consultation and meeting the previous week. Once they were aware of which spaces were still available they would take another look at this and other developments on the horizon.
	A Charity day had been planned for 3 June, this would be a black-tie dinner and dance for 145 people at £35 a head. Funding would be raised by holding an auction of promises. Baroness Scott had offered tea for 4 and a conducted tour around the house of Lords.
	Steve Harris explained that the Nadder Centre Board (NCB) was a sub group of the Area Board, the NCB could make recommendations to the Board, who could then make recommendations to the Cabinet.
13	Area Board Funding
	The Board considered 3 applications for funding from the Community Area Grant Scheme for 2016/17. Two as detailed in the pack and one circulated at the meeting.
	Applicants present were invited to speak in support of their projects. Following discussion, the Board voted on each application in turn.
	The Board noted that as this was the last meeting in the financial year there was not enough in the grant budget remaining to cover all the funding requested at this meeting. Should the Board wish to support all of the requests then funding would have been pulled back in from other unspent funds ringfenced for Area Board projects.
	Decision

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	Tisbury Brocante & Fair was awarded £400 towards the purchase of display boards, with the following condition:
	 Boards to be available to use by all parishes in SWW and to be stored at the Nadder Centre.
	<u>Decision</u> The application from Wilton Town Council was deferred until the next meeting. <u>Reason</u> Waiting for a breakdown of the financial information provided, as the Total project cost of £17,300 was not broken down or explained.
	Cllr Edge noted his disappointment that this had not been made aware to him prior to the meeting.
	<u>Decision</u> Donhead St Mary Village Hall Committee was awarded £4,986.52 towards a disabled access and essential replacement kitchen.
14	Close
	The next meeting of the South west Wiltshire Area Board will be held on Wednesday 24 May 2017, 6.30pm at Broadchalke Sports Centre, Knighton Road, Salisbury, Wiltshire, SP5 5HX.
	Wilton Town Cllr Phil Matthews thanked the Board for its support over last 4 years.
	The Chairman thanked everyone for coming and closed the meeting.

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Report

Commissioned by Shaftesbury and District Task Force on behalf of the Westminster Memorial Cottage Hospital Working Group in consultation with MPs, Councillors, Town and Parish Councils and a wide range of organisations and individuals.

Response to Dorset CCG Consultation on Community Hospitals and Community Services with particular attention to Westminster Memorial Hospital, Shaftesbury

"People have a right and duty to participate individually and collectively in the planning and implementation of their health care." Alma Ata WHO 1978

Dr Helen Tucker Director, HTA Ltd Vice President of the Community Hospitals Association February 2017

 $\begin{array}{c} {}_{\rm HTA/CHA/DCCG/SMH/Feb2017} \quad {\rm helen.tuckerdickson@gmail.com} \\ {} Page 13 \end{array}$

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1. Introduction

The community campaign group for Shaftesbury and surrounding areas has commissioned Dr Helen Tucker to prepare a report, representing their views on the proposals in Dorset Clinical Commissioning Group's (CCG) consultation document.

In order to fulfil this commission, I visited Shaftesbury and met with members of the group, visited the pop-up shop that is the base for the campaign, visited the hospital, and had telephone interviews with members of the group. For clarification, I also had a telephone call with Dorset CCG Engagement team, and with Dorset Healthcare Foundation Trust. I would like to thank everyone who kindly shared their information, thoughts and opinions.

The 4 key documents in the public domain that I have analysed are: the Dorset CCG Consultation Paper *"Improving Dorset's Healthcare,"* the Questionnaire, the video "Integrated Community Services Proposals" on the CCG website and the Clinical Services Review Pre-Consultation Business Case (PCBC).

The local community in Shaftesbury and surrounded areas have taken on a responsibility to ensure that as many people as possible have an opportunity to respond to the CCG proposals. They have come together in an outstanding example of co-operation and action, and are highly organised. The campaign group has taken steps to make sure that they are as informed as possible, and understand the context for the changes proposed, and the potential impact on people living locally.

The group has asked me to provide a commentary to the proposals, and are submitting this as part of their official response to the consultation. I would like to thank them for trusting me with this task. I have experienced first hand how strongly local people feel about their local hospital, and how highly they value all of the services provided. This is to the credit of the local NHS.

2. Summary

Dorset CCG has invited the public to respond to their proposals for change in a consultation. This report considers the proposals in terms of their content, and also the process of consultation. The focus of this analysis is the community hospitals and services.

Dorset CCG currently has 13 community hospitals with 346 community beds. With the proposals, it is intended that 6 community hospitals will retain their inpatient beds within the hospital, 4 community hospitals will become hubs without beds and 3 community hospitals will close or change. New community hubs will be located in 2 acute General Hospitals, one of which will have community beds. The CCG proposes to increase the number of community beds overall from 346 to 415 (an additional 69 beds).

Within this proposal, Westminster Memorial Hospital, Shaftesbury would become a community hospital/hub without beds, and may relocate to a different building.

Proposal for North Dorset - Westminster Memorial Hospital, Shaftesbury

A local dynamic community hub without beds providing services such as outpatient, ambulatory care, diagnostics and co-location of community teams in Shaftesbury and Gillingham, with access to care home beds to provide step up care and palliative care beds with enhanced in-reach support in this area.

Discussions have begun with Wiltshire regards potential for collaboration in commissioning future provision for the population around the Wiltshire/Dorset borders which will strengthen the need for a higher specification non bedded community hub in Shaftesbury.

The future site for the local hub in Shaftesbury will be considered, in recognition that Shaftesbury hospital has significant limitations and would not be suitable as a future community hub. Extract from Dorset CCG consultation

The consultation paper raises many questions. I have chosen to draw attention to10 key questions from the consultation document, 6 of which concern the content of the proposal, and 4 concern the process of consultation.

Commentary on Proposals - Questions for Clarification

Q1. Where will the community beds of the future be located?

Q2. How is the Case for Change being made?

Q3.What are the Differences in the Proposed Locations for Community Beds in the future?

Q4. Has the CCG Considered the Research on Rural Hospitals and Closures?

Q5. How are the Financial Savings going to be made?

Q6. What is the Future for Westminster Memorial Hospital, Shaftesbury?

Commentary on Process - Questions for Clarification

Q1. Has the Engagement and Consultation reached all concerned with Westminster Memorial Hospital?Q2. Has there been sufficient consultation time for all concerned with Westminster Memorial Hospital?Q3. Is the Proposal Clear and Unambiguous

Q4. Is the Questionnaire Appropriate?

In summary I have read the Dorset CCG material in the public domain and I share many local people's reaction that there are questions still to be answered. The above 10 questions represent just some of these.

In conclusion therefore:

- There is not enough information to make an informed decision on this important and far-reaching proposal for the future of local health and care. There are still many questions yet to be answered.
- There is scope to improve on the clarity of the proposal, and rectify inconsistencies.
- There is a case to be made to extend the consultation period, to remedy the lack of consultation with those living in a Wiltshire postcode. This may also enable a period of clarification.

3. Commentary on the Proposals - Questions for Clarification

The documents from Dorset CCG have been analysed, and the following 6 questions raised.

Q1. Where will the community beds of the future be located?

Dorset CCG is to be congratulated for their proposals to extend the number of community intermediate care beds in Dorset. This is a strong recognition of the value of community inpatient care, and the role that these beds play in offering an alternative to an admission to an acute hospital bed, and also in offering an inpatient stay to those transferring from an acute hospital but not yet ready to go home.

Westminster Memorial Hospital (WMH) already provides 15 community beds, which cater mainly for older people with complex care needs and multiple conditions. Services include rehabilitation, palliative and end of life care.

The proposal sets out that 69 beds will be provided, in addition to the 347 community beds currently provided.

"The results indicated that over the next five years we will need 69 beds in addition to the 347 that we already have in the community." Dorset CCG consultation document page 26. This gives a total of 416 community beds in the future.

The document goes on to say *"we could also use short term beds in care homes"*, which implies that the 416 beds are excluding care home beds. It is not clear where the 416 beds will be located, given that beds will close in many community hospital locations.

Proposed Community Beds	Beds
Community Beds in 7 community hospital hubs	145
Beds in community hospitals that will become hospital/hubs without beds	201
Additional beds – location not specified	69
Total	415

Table 1: Interpretation of Dorset CCG Proposals for Community Beds Source: Consultation Document

Proposal Community Hospital Beds	With Beds
Wimborne Hospital	16
Bridport Hospital	44
Blandford Hospital	24
Sherborne Hospital	34
Swanage Hospital	15
Weymouth Hospital	12
Additional location: Poole/Bournemouth Acute Hospital	TBC

Total Identified Community Beds	145

Table 2: Proposal to retain community beds. Source: Consultation Document

Proposal for Community Hospitals to become Hubs without beds or to close	Without Beds
Westminster Memorial Hospital, Shaftesbury	16
Christchurch Hospital	16
Portland Hospital	16
Wareham Hospital	16
Additional Location: Dorset County Hospital	
St Leonards Hospital (to close)	22
Westhaven Hospital (further consultation)	34
Alderney Hospital (further consultation)	81
Total proposed bed closures	201

Table 2: Proposal to close community beds. Source: Consultation Document

The CCG proposals affect 15 locations: the 13 community hospital sites, and the proposal to site new community facilities in 2 acute hospitals. The proposals target an additional 10,000 avoidable admissions to acute hospitals per year in the future. It would be helpful to know how many avoidable acute admissions were estimated last year, and how this number will be increased with the changes.

Local people have been asking why would the CCG propose closing functioning and busy community hospital beds in community hospitals, when the strategy for the CCG is for an increase in community beds overall.

The source of the data for this would be expected to be The Pre-Consultation Business Case (Business Case). This document directs the reader to appendices which contain supporting information. These appendices are not in the public domain, and yet the Business Case relies on these throughout. It may be argued that in order to fully understand the Business Case, it is important to access the supporting data. Therefore there is incomplete information available to the public.

Q2. How is the Case for Change being made?

In order to make the case for change, it is essential to set out the current service (activity, impact, outcomes etc.) so that any proposed change can be properly assessed against that base line. It is then possible to illustrate the benefit of making changes, and gain support accordingly.

Local people have concerns that the current service is not fully appreciated and understood, and there is not a clear enough assessment of the strategic contribution that community hospitals with beds make within the overall health system. For instance, there is no evidence of the proposals being informed by

clinical audit of community inpatients, which would give a full appreciation of the acuity and complexity of patients. There is concern from the public that the new model of increased home-care support may not be appropriate or safe for patients currently supported in community hospitals.

Learning from the Independent Reconfiguration Panel

The Independent Reconfiguration Panel (IRP), in their published advice to Devon CCG said that it is prudent to be clear about the negative impact of the change to a cohort of patients, and to indicate what steps the CCG is taking to mitigate against these changes. *"It is necessary to be up-front about the realities and tradeoffs of service change. A key lesson is to be clear and specific about which patients will likely continue to need inpatient care and how their needs will be met in the future. Particularly in a rural setting, travel and access will always be a significant concern even if only for a relatively small number of people. Recognising such concerns, and where possible mitigating for them, will help to calm local anxieties and build confidence."* Lord Ribeiro CBE Chairman, Independent Reconfiguration Panel

The Independent Reconfiguration Panel, a national body which carries out reviews of consultations which are referred for the Secretary of State for Health, advises that attention is given to the impact of the changes and how they may be mitigated. One of the main concerns is that access to services by patients and families will be reduced, and if there is a need for patients and their visitors to travel for a community bed (such as to Sherborne or Blandford) public transport will not be adequate. There is insufficient attention given to the practicalities of the impact of the changes, particularly for the cohort of patients using the inpatient facility.

There are claims made in some of the material available for the public that is not consistent throughout in making the case for change. For instance, there is a strong message in the video is that community hospitals are under-utilised by 40% - 50%. This point is not made in the consultation paper or in the Business Case so it is not possible to cross reference this. It would be helpful to have a breakdown of this, and understand the source. It is difficult to apply this finding to Westminster Memorial Hospital for instance as there is a high level of utilisation. Arguably, closing beds and closing the hospital at night will increase any under-utilisation rather than improve the use of the buildings.

This example of inconsistency has been identified by those in the Shaftesbury campaign group, and reinforced the view that the public have not been given access to all of the information that they need to make an informed view. There are still questions that local people are asking.

Another inconsistency concerns the consultation paper itself, and the proposals for Swanage Hospital. In the questionnaire it is clear that the proposal is for Swanage hospital to keep its community beds, and local people can indicate their support accordingly. In the consultation paper however on one of the maps on page 23 (not in the text) it says *"Either hospital or care home beds due to the small scale of beds to the population."* There is a significant difference in these options, and if there individual's tick that they agree with the proposals for Purbeck, does this mean that they could be voting for the possibility of the removal of beds at Swanage, and the replacement of these beds at a care home? This is unclear and misleading. This is another indication of a lack of information and some

inconsistency in information reducing confidence in the consultation process overall.

In describing the vision for community hospitals and services, it may be helpful to consider innovative practice, rapid pilots and vanguards. Nationally, community hospitals are part of the new model of "Primary Care Home" such as South Bristol Community Hospital, part of a Primary Acute and Community Models (PACS) such as Millom Community Hospital, and Multi-Specialty Community Providers (MCPs) such as Petersfield Hospital in "Better Local Care", Hampshire. Fully functioning community hospitals can play a key role on delivering the NHS strategy, and being an integral part of the local health system.

With regard to innovation and best practice locally, community hospitals in Dorset have had national recognition such as being accredited for the Gold Standard Framework for high quality palliative and end of life care. Bridport, Wimborne and Blandford Community Hospitals have all won national Community Hospitals Association Innovation and Best Practice Awards.

There is an appreciation from the public of the need to recognise and build on good practice. There is some anxiety about the feasibility of the new models, and suggestions of a gradual change, with pilots being tested and full evaluations of new services being carried out before existing services are dismantled.

It would be helpful therefore to recognise the current service and its value, demonstrate an appreciation of the role that community hospitals play in each locality, consider their potential with local people, and build on successes. From this point, it would then be possible to make a case for further change. It must be stressed that there is not an opposition to change and improvement, but it is not clear that the case has been made, and no assurance that the future provision will be for the benefit of patients, particularly in rural areas.

Q3. What are the Differences in the Proposed Locations for Community Beds in the future?

The CCG proposes to locate community beds in either a community hospital, care home, or an acute hospital. The CCG also proposes that some community hospitals convert to being community hubs without beds. Each model is distinct and it will be helpful for the CCG to explain this more fully.

The CCG has recorded in its presentation material for North Dorset that the proposed arrangements for community beds to be moved to care homes "*may just look a little different.*" This is describing the change from NHS community beds that are integral within an NHS community hospital, to inpatient care in an independent care home. It may be argued that this statement minimises the impact of the different arrangements, and does not fully recognise or explain the very different models of care being proposed. I have attempted to give an

interpretation of the models, which I hope will reflect the models adequately, but further detail from the CCG would be welcome.

• Community hospital with beds

Classic community hospitals are small, local accessible hospitals serving a defined population, often in a rural setting. They are often viewed as an extension of primary care and are part of the NHS. They provide integrated inpatient and outpatient services and provide a base for a range of services, facilities and practitioners. Inpatients may be admitted by their GPs from home, or transferred after a stay under a Consultant at a General Hospital. Reasons for admission include rehabilitation, palliative and end of life care. Research has shown that community hospitals have a clear role in integrating care (Winpenny et al 2016; Tucker 2013) and that inpatient beds in a community hospital provide a cost effective and quality alternative to acute hospitals (Green 2005, Lappegard 2014, Swanson 2016).

• General Hospital with a community ward

NHS District General Hospitals are large acute hospitals providing specialist emergency and elective services. It is understood that community beds may be provided in one of the General Hospitals, and this is likely to be a ward primarily for patients requiring post-acute care such as rehabilitation.

• Care Home with beds

A care home offers a place to live for those needed accommodation with care. Care homes are not part of the NHS, but run in the independent sector. A care home could offer short-term stay rooms for people needing care and support such as rehabilitation. It is understood that the regulatory authority, CQC, would want any care home provider to demonstrate that the presence of people staying for a short period of time was not to the detriment of people living in the home. The regulators may require that any intermediate care unit was distinct, and acknowledged as a different model of care and staffed accordingly. It is understood that the model proposed would be that NHS staff such as nurses or therapists, would visit the home and provide an enhanced nursing and therapy service to those in the NHS-funded community beds in the independent care home.

• Community Hubs without Beds

Community hospitals were established with inpatient beds, and arguably this is what makes them a "hospital." There is an increasing interest in converting some community hospitals to become community hubs without beds. It is understood that the hubs will increase their level of outpatient clinics, range of tests and treatments, and also accommodate associated services such as social care and services provided by voluntary agencies. Other ideas put forward by Dorset CCG include a café. An increase in the range and level of health and social care services are welcome, although there is a question of why this is at the expense of the beds. It is understood that at the Westminster Hospital there is

already a wide range of services and facilities, including a well-developed community teams. Essentially, the community hospital would no longer be open 24/7, but would shut at night and possibly at weekends. The public are concerned that other services provided at the community hospital might be removed or be restricted because of the lack of staff at night, such as minor injuries in the evenings or out of hours services.

Q4. Has the CCG Considered the Research on Community Hospitals and Closures?

Researchers have studied the impact of the closure of rural community beds in Canada, and concluded that for local communities this equates to a "critical incident." The researchers have evidence that the impact of the closure of community beds can be viewed as the same as closing the hospital, and that local people view this as the same. They have lost their "hospital.'

"Individual and community perceptions of the impact of the conversion/closure of a rural hospital are often unheard and more often unheeded. Some researchers suggest hospital conversion/closure is a devastating event in the life of rural communities, yielding long-lasting medical, economic and psychological consequences." Petruka et al 2003

Clearly the strength of the reaction from the public throughout Dorset would illustrate that local people take this change very seriously. It is a credit to the local NHS that local people value their local hospitals so highly, and view them as an essential part of their community.

It is understood that there is a lack of support and/or understanding for the CCG proposals. In common with some other health areas, there is a polarisation of views.

In very broad terms, it looks as though the CCG strongly support more home care and self care and want to re-locate community beds into the private sector or general hospitals. Although the model proposes extending community-based services, it also intends to make significant savings.

In contrast, it looks as though there is a lack of public trust in the proposals, and although there is support for care at home, there is concern that valued community hospitals and services will be dismantled to pay for this. There are worries that people receiving home care are "invisible," and that the recognised difficulty in recruiting and retaining staff to work in peoples homes will mean that this model is not feasible to extend further.

Whilst this is a simplification of the respective positions, it is clear that there is a lack of common ground, and scope to improve the understanding of the proposals and their impact, and how this will be managed in a way that is to the benefit of patients and wider community.

It would be helpful to demonstrate that research evidence has informed the proposals, not only for the new model of care and an increase in care at home, but also for community hospitals and services. References and current research may be found on the CHARM website – Community Hospitals Association Research and Media http://www.communityhospitalsresearch.org.uk

Q5. How are the Savings going to be made?

Dorset CCG are clear that changes are required in order to optimise NHS resources in order to meet increasing need. It is understood that the CCG believes that the current service arrangement, if unchanged, would lead to a significant financial deficit.

It would be helpful to have clarification on the finances, both revenue and capital.

• Revenue

Dorset CCG records that it save £16m from changes in community services (STP). The CCG predicts an £8m saving from changes in outpatient clinics, although it is not clear how these savings will be generated from the planned additional 100,000 clinic attendances. There will also be an additional 69 community beds in the system. It is not clear how the costs of an NHS community hospital bed compares with an independent care home bed with NHS staff support for instance. It is unclear how the savings would be made.

• Capital

Dorset CCG states that land and buildings that are no longer required for NHS purposes (such as St Leonards community hospital and eventually Westminster Memorial Hospital) will be sold. There is a commitment that the capital raised from the sale would be reinvested locally. Can this commitment be made? Is it the case that capital receipts were required to go back into the national NHS budget, and not necessarily redeployed locally. There is a suggestion that the new service model will require capital investment.

Q6. What is the Future for Westminster Memorial Hospital, Shaftesbury?

Local people want to know what the options are for the future of the hospital and services. The hospital offers a valued service to people living locally, and this includes residents in Dorset, Wiltshire and Somerset. It is suggested that there could be an increase in services such as offering blood transfusions, chemotherapy and IV antibiotics on a day care basis (ambulatory care) which has been shown to be highly valued in community hospitals nationally. Other examples of developments may include an increase in telehealth, meaning that

more services can be provided remotely with connections to specialist advice and support. Proposals from the CCG also include a café, although it is understood that the public reaction has been to support more NHS services in the hospital rather than leisure or refreshment facilities.

It is hoped that options on the location of the community beds take into account how integral they are to other services within the hospital, and how the colocation of associated services works well.

Following the consultation, it is hoped that options for the future of the beds and hospital will be continued to be discussed in an open and informed way, and that all parties are open to options and possibilities.

4. Commentary on the Process- Questions for Clarification

The documents from Dorset CCG have been analysed, and the following 4 questions raised on the process.

Q1. Has the Engagement and Consultation reached all concerned with Westminster Memorial Hospital?

There is a concern that all those concerned with the Westminster Memorial Hospital have not been fully consulted. This includes patients, families and carers living within the geographical catchment area of the hospital, including parts of Wiltshire and Somerset.

A letter published by the MP Simon Hoare Blackmore Vale Magazine on 17th February sets out this case fully, and makes many excellent points about the shortfalls in the process.

The response from the CCG makes the case that there were only 198 inpatients with Wiltshire postcodes last year, and therefore the engagement and consultation was "proportional." It would be interesting to know how many patients were admitted with Dorset postcodes for last year and whether the same approach would have been taken. However, it is not just the last years inpatients that should have a say on the future of the service. It is past, current and potential patients, those attending for clinics, inpatient stays, tests or other service as well as the wider community. Therefore the case being made for "proportionality" needs to be challenged. It can therefore be argued that not all stakeholders have been actively consulted.

Q2. Has there been sufficient consultation time for all concerned with Westminster Memorial Hospital?

The Dorset CCG website has an addition posted on the 16th February, identifying the right of those living outside Dorset to have their say, It is understood that the consultation was not formally notified to the public in Wiltshire in December or January when the consultation started. Therefore, it is being argued that the affected public who are living locally but have postcodes of Wiltshire, have not had the same access or time to be consulted.

For instance, on the website, there are no consultation events scheduled for people living in Wiltshire. It is understood that, within this 3-month consultation, 2 events were recently scheduled within one week of the closing date of the consultation period.

It may be argued that there is a case for extending the consultation period to enable all those affected to have full consideration of the proposals. It is understood that a letter to this effect is being submitted from respective Councils to the CCG. It would be helpful to have a comment on the process from the Local Authority Wellbeing and Scrutiny Committees, who have a duty to have oversight of the consultation process.

Q3. Is the Proposal Clear and Unambiguous

In considering the papers, the case has been made already in this report that the proposals lack clarity and consistency.

This view is supported by contributors to the Healthwatch Dorset website. It is understood a number of attenders of the public meetings have not had their questions answered to their satisfaction.

Views on Dorset CCG Consultation

The document's too long and people will only be able to scan through it and miss some parts altogether. The way the proposals are presented makes it difficult for the public to grasp what their real impact would be. Some parts of the document are biased towards promoting one particular option over another. There's too much use of NHS jargon with limited real information the public can understand. Source: Healthwatch Dorset

There is a case to be made for an extension to the consultation process, and for further clarity to be given on the nature and impact of the planned changes.

Q4. Is the Questionnaire Appropriate?

There are some difficulties in completing the questionnaire. For instance, does the recording of support for question 1 mean that this gives a mandate to the CCG for their proposals overall? There is not "free text comment box" for this question. This is the only question where there is no opportunity to clarification or further information.

There are no options for each locality, just one favoured option. Therefore there is no choice within this questionnaire. There is no option for status quo. The IRP advises that if the status quo is not an offered choice, there must be a clear rationale for this.

A further example is the Purbeck model, where support for the model may be support for care home beds rather than community hospital beds for Swanage – a significant difference for local people that may not be clear from the questionnaire.

I have witnessed a lack of confidence and trust in the process and in the way that the questionnaire is constructed. It is helpful that the questionnaire is being

analysed independently and that further telephone interviews are being made to enhance the response.

5. Conclusions

Dorset CCG is proposing a reconfiguration of health and care services, in order to develop their new model of care. The direction reflects the NHS Five Year Forward View, and is in keeping with the national context and policy.

There are concerns that the vision for the new way of delivering services is not yet shared by the wider community in Dorset.

One of the hurdles to genuine engagement may be the perceived lack of appreciation and knowledge that the decision-makers have of the local community services their value and impact. There is scope to have further planning on a local with those affected by the change, recognising the "placebased" initiative, the need to plan on a locality basis, and the known benefits of working with those using the service in a models known as co-design, coproduction and co-delivery. There are tremendous energies, skills and talents of local people within a locality such as centred in Shaftesbury, which could be transformed through joint working into a positive energy for the future.

However, a case is made for the consultation having shortfalls in terms of the content of the proposals and the process of consulting.

This report concludes that:

- There is not enough information to make an informed decision on this important and far-reaching proposal for the future of local health and care. There are still many questions yet to be answered.
- There is scope to improve on the clarity of the proposal, and rectify inconsistencies.
- There is a case to be made to extend the consultation period, to remedy the lack of consultation with those living in a Wiltshire postcode. This may also enable a period of clarification.

References

Dorset CCG Consultation Paper *"Improving Dorset's Healthcare" 2016* Dorset CCG Questionnaire 2016 Dorset CCG video "Integrated Community Services Proposals" (website) Dorset CCG Clinical Services Review Pre-Consultation Business Case (PCBC) 2016

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Wiltshire Council Where everybody matters

MINUTES

UTH WEST WILTSHIRE AREA BOARD
est Wilts Room - County Hall, Trowbridge BA14 8JN
May 2017
30 pm
35 pm

Please direct any enquiries on these minutes to:

Lisa Moore (Democratic Services Officer),Tel: 01722 434560 or (e-mail) lisa.moore@wiltshire.gov.uk

Papers available on the Council's website at www.wiltshire.gov.uk

In Attendance:

Wiltshire Councillors

Cllr Pauline Church, Cllr Tony Deane, Cllr Jose Green, Cllr George Jeans and Cllr Bridget Wayman

Wiltshire Council Officers

Lisa Moore, Democratic Services Officer

<u>Agenda</u> Item No.	Summary of Issues Discussed and Decision
1	<u>Apologies</u>
	There were none.
2	Election of the Chairman
	The Democratic Services Officer called for nominations for Chairman for 2017/18.
	Cllr Jeans nominated Cllr Green. This was seconded by Cllr Wayman.
	<u>Decision</u> That Councillor Jose Green be elected as Chairman of the South West Wiltshire Area Board for 2017/18.
3	Election of the Vice-Chairman
	The Chairman; Cllr Jose Green called for nominations for Vice-Chairman for 2017/18.
	Cllr Green nominated Cllr Church. This was seconded by Cllr Wayman.
	<u>Decision</u> That Cllr Pauline Church be elected as Vice-Chairman of the South West Wiltshire Area Board for 2017/18.
4	Close
	The meeting was closed.

Wiltstiffee Council Where everybody matters

South West Wiltshire Area Board 31 May 2017

Appointments to Outside Bodies and Constitution of and Appointments to Working Groups 2017/18

1. <u>Purpose of the Report</u>

1.1. To appoint representatives to Outside Bodies, and to reconstitute and appoint to Working Groups for the year 2017/18.

2. <u>Background</u>

- 2.1. The Area Board is invited to appoint Councillor representatives to the Outside Bodies listed at **Appendix A**. These appointments will continue for the duration of Councillors' terms of office, unless the Board determines otherwise.
- 2.2. The Area Board is also invited to reconstitute the Working Groups set out in **Appendix B**, with the Terms of Reference set out at **Appendix C**, and to make appointments to these groups. These appointments are for 2017/18.
- 2.3. Similarly, the Area Board is invited to appoint a named Champion to work with the Area Board and Health and Wellbeing Group for 2017/18, the role description is attached at **Appendix D.**

3. <u>Main Considerations</u>

- 3.1. In 2010 all Area Boards appointed Community Area Transport Groups (CATGs), which operated as informal working groups making recommendations to the Area Board for approval. Terms of Reference are set out in Appendix C. It should be noted that the establishment of the CATGs, along with the delegation of the relevant budget of Area Boards, was a delegation of authority from the Cabinet Member for Highways, and so the Terms of Reference for these cannot be amended.
- 3.2. In 2014 all Area Boards appointed Local Youth Network (LYN) Management Groups to coordinate wider LYNs, sub-groups of the Area Boards, to facilitate positive activities for young people in the community area. Terms of Reference are set out in Appendix C and may be reviewed by the Leader on an annual basis.
- 3.3. Some Area Boards have also established working groups to consider and facilitate the development of Health and Wellbeing Centre/Campus proposals. Where these have Terms of Reference it is for the Area Board to determine and amend where required.

- 3.4. From 2015, Area Boards have been able to establish a local Health and Wellbeing Group to consider health and wellbeing priorities in their local area. These groups are sub-groups of the Area Board and their Terms of Reference can be found in Appendix C.
- 3.5. A key role within the Health and Wellbeing Group is that of the local 'Champion' who works with the Area Board to address priorities for older people and carers. The role description is attached at Appendix D and the Area Board is asked to appoint to this position.
- 3.6. Some Area Boards have established other working groups to consider and address local issues. Where these have Terms of Reference, this is for the Area Board to determine and amend where required.

4. Financial and Resource Implications

4.1. None.

5. Legal Implications

5.1. Some appointments carry responsibilities and duties, for example, those which involve becoming a trustee. Councillors are advised to seek advice on individual appointments if required. <u>Protocol 3</u> of the Council's Constitution sets out Guidance to Members on Outside Bodies.

6. <u>Safeguarding Implications</u>

6.1 Processes are in place to ensure Disclosure and Barring Service (DBS) checks are undertaken as appropriate.

7. Environmental Impact of the Proposals

7.1 None.

8. Equality and Diversity Implications

8.1 None.

9. <u>Delegation</u>

9.1 Under Wiltshire Council's constitution appointments to Outside Bodies will be made by the Leader of the Council, Cabinet, Area Boards or a meeting of group leaders, as appropriate. By convention, appointments to Outside Bodies which operate within the boundary of a community area are made by the relevant Area Board.

9.2 The appointment of Councillors and other representatives to working groups operating under the Area Board is a matter for the Area Board to determine.

10. <u>Recommendation</u>

- 10.1 The Area Board is requested to:
 - a. Appoint Councillor representatives to Outside Bodies as set out at Appendix A;
 - b. Agree to reconstitute and appoint to the Working Group(s) as set out in Appendix B; and
 - c. Note the Terms of Reference for the Working Group(s), as set out in Appendix C.
 - d. Confirm the continuation of the Older People's Champions for the Area Board (who were appointed in October 2016 for the period of one year) in accordance with Appendix D.

Elizabeth Beale

Senior Democratic Services Officer 01225 718214 elizabeth.beale@wiltshire.gov.uk

Appendices:

- Appendix A list of appointments to Outside Bodies
- Appendix B list of appointments to Working Group(s)
- Appendix C Terms of Reference for Working Group(s)
- Appendix D Champion role description

Unpublished background documents relied upon in the preparation of this report

None.

Outside Body Title (A to Z)	Appointed By	Why Rep Needed	Organisation aims	Meeting schedule	Voting rights	Reps needed	Representative (s)
Spurgeons Management Body	Area Board - South West Wilts	-	Support for families with children from pregnancy to 5 years old	-	-	-	Cllr Pauline Church

WILTSHIRE COUNCIL OUTSIDE BODIES

11:31 [Date]

Appointments to Working Groups South West Wiltshire Area Board

Community Area Transport Group:

Cllr Tony Deane

Nadder Centre Board

Cllr Tony Deane & Cllr Bridget Wayman

LYN Management Group

Cllr Bridget Wayman & Cllr Pauline Church

Health and Wellbeing Group

Cllr Jose Green

Community Safety Partnership

Cllr George Jeans



Community Area Health and Wellbeing Group Terms of Reference

1. Purpose

Definition of a Health and Wellbeing Group (HWG)

The Health and Wellbeing Group is a sub group of the Community Area Board. It represents a wide range of community stakeholders who work in partnership to facilitate well-being across the community area. People and organisations living and working in the community play a direct role in setting the agenda for this group.

HWGs will identify local needs, priorities and outcomes and make recommendations to the Area Board on how funding for activities should be deployed.

2. Membership

The Health and Wellbeing Groups may include representatives of:

- Members of the Community Area Board,
- Older Peoples Champion,
- Carers Champion,
- People from the community,
- Town and Parish Councils,
- Health and social care commissioners,
- Community and voluntary organisations and groups,
- Community transport providers,
- Police,
- Fire and rescue services,
- GP Practices,
- Other organisations, agencies and individuals that have a genuine interest in promoting the welfare and interests of older people.

All representatives must be subject to appropriate safeguarding requirements.

The participation and involvement of people

People living in the community must play a central role in all aspects of the Health and Wellbeing Groups including the design, development, delivery and review of the local activities.

Health and Wellbeing Groups are encouraged to use a variety of methods to ensure people participate and are involved in decision-making processes. Existing groups may provide a useful forum for involving people, although the decision to retain these groups is for local determination.

Health and Wellbeing Groups must ensure that consultation with people is representative and takes into account the views and needs of under-represented groups (those with protected characteristics) to ensure compliance with the local authorities Public Sector Equality Duty.

Roles of all members of the Health and Wellbeing Groups

All members will be required to:

- Take an active part in the development of the Health and Wellbeing Group and its aims.
- Ensure that their organisation is represented by a person of appropriate experience/competency (or his/her appointed deputy) who has full authority within the relevant organisation to speak on behalf of the organisation and contribute fully to all discussions.
- Take responsibility for sharing information with the Health and Wellbeing Group relevant to their organisation/ stakeholders/sector.
- Contribute any information that may have a bearing on activities for older people and ensure that this is shared with the Health and Wellbeing Group.
- Champion the voice and influence of people in decision making.
- Be open and honest and work collaboratively.
- Work to promote equality and non-discriminatory practices in all aspects of the Health and Wellbeing Groups activities.
- Respect all members of the Health and Wellbeing Group and invited representatives.
- Work to improve outcomes for people and ensure high quality safeguarding practice.

3. Structure

The Health and Wellbeing Groups should come together on a quarterly basis, operating in a way which encourages active engagement, dialogue, debate and improved partnership working between key stakeholders.

A smaller management group will take responsibility for coordinating and planning the Health and Wellbeing Groups activities. The Chair of the group will be decided locally and could be any member of the Group. The group will include a member of the Community Area Board, who will work with the Chair to present recommendations and provide updates on progress at Area Board meetings.

The management group will generally comprise of:

- The Chairperson
- Older Persons Champion/ Carers Champion
- Community Engagement Manager
- Commissioning representative (Community Commissioner)

The appointment of Councillors (excluding officers) to Health and Wellbeing Groups will normally be agreed at a full meeting of the Area Board. Membership may be varied, with the agreement of the Area Board Chairperson, subject to approval at the next full Area Board meeting.

Where required, the Chairperson and Community Engagement Manager may appoint additional people to the management group if it is felt there involvement would be important for the function of the group.

Alternative people can represent people at the management group, however, it is preferred that the same representative attends if possible to ensure consistency of membership.

4. Responsibilities of the Health and Wellbeing Groups

Key responsibilities for the Health and Wellbeing Groups include:

- Awarding grants that support the priorities identified in the local Joint Strategic Needs Assessment (JSNA).
- Ensuring that any grants and activities take into account any applicable safeguarding implications.

Where everybody matters

- Making recommendations to the Community Area Board on how priorities for funding should be determined (to include evaluating opportunities for applying for grants)
- Monitoring and reporting on the quality and effectiveness of local activities and grants.
- Based on the JSNAs, local intelligence and Area Board priorities coordinating joint working to deliver these objectives.
- Addressing any conflicts of interest that may arise as part of the local decision making process.

Recommendations to the Community Area Board will usually be reached by consensus but if necessary these can be agreed by a vote.

The management group may invite representatives from local organisations/agencies to its meetings etc to provide expertise or to share local knowledge on activities, projects and programmes in the area.

5. Funding

Area Boards will have an annual revenue budget allocated to them. The Health and Wellbeing group will advise the Area Board on how these funds should be allocated. Health and Wellbeing Groups will be able to bid, apply for funding from other sources and would also be expected to feedback to commissioners on priorities for the Countywide contracts.

6. Media Relations

Members of the Health and Wellbeing Groups may not issue media statements on behalf of the Community Area Board. Any media statements about the work of the Health and Wellbeing Groups should be agreed with between the Health and Wellbeing Groups and Chairperson of the Community Area Board.

7. Review

These terms of reference are subject to change and should be reviewed by the Cabinet Member for Adult Care and Health on an annual basis.

COMMUNITY AREA TRANSPORT GROUP (CATG)

TERMS OF REFERENCE

Membership of the CATG

The CATG will normally be made up of not more than 10 members from the following groups:

- Members of the Area Board
- Town and Parish Council representatives
- Community representatives

Representatives should act as a conduit between their organisations and the CATG by putting forward the views of the body they represent and providing feedback to its members regarding the work of the CATG. The group members will also need to be mindful of the needs of the community area as a whole when making their recommendations, as not all councils and groups can be represented on the CATG.

Recommendations to the Area Board will usually be reached by consensus but if necessary these can be agreed by a show of hands by those representatives present at the meeting.

The group will normally be chaired by a Wiltshire Councillor. Membership of the CATG will cease when a member ceases to hold the stated office as when first appointed.

The CATG may invite representatives from local organisations to its meetings to give technical advice or to share pertinent local knowledge on projects in the area.

Appointment of CATG Members

Appointment of members to the CATG will normally be agreed at a full meeting of the Area Board. Membership may be varied, with the agreement of the Area Board Chairman, subject to approval at the next full Area Board meeting.

Where required for flexibility, the Area Board may appoint an unnamed representative of an organisation to the CATG (e.g. Town/Parish Council or Community Area Partnership) to ensure that the organisation is always represented at meetings. However it is preferred that the same representative attends if possible to ensure consistency of membership.

Media Relations

Members of the CATG must not issue press statements on behalf of the Area Board.

Any press statements about the work of the CATG should be agreed between the Chairman of the CATG and the Chairman of the Area Board.

<u>Meetings</u>

It is recommended that the CATG meet at least four times a year. Meetings are intended to be limited to the Membership set out above, and is open to other members of the Area Board who wish to attend. It can be open to public if the Area Board wishes. It should be noted that CATG is an advisory body, it does not exercise delegated decision making powers.

Officer Support

Meetings will be attended by relevant officers from Wiltshire Council including a senior transport planner, a senior traffic engineer and a local highway maintenance engineer as necessary. Additional support will be provided outside of the meeting by the Corporate Office Business Support unit, as per Area Boards.

Terms of Reference

The CATG has no formal decision making authority on operational matters or budget expenditure but acts as an informal discussion forum making recommendations to the Area Board. Recommendations must be agreed at a full CATG meeting before being brought to the next Area Board for approval.

The CATG's terms of reference are set out at Appendix A:

Terms of Reference

1. Small scale transport schemes – discretionary funding

To make recommendations to the Area Board to determine priorities and levels of expenditure required for small scale transport schemes in the community area. A discretionary highways budget has been allocated to the board by the Cabinet Member for Highways and Transport. The funding allocation is for capital funding and can only be used to provide new and improved highway infrastructure. It is suitable for schemes that improve safety, increase accessibility and sustainability by promoting walking, cycling and public transport and improve traffic management. It cannot be used to fund revenue functions such as maintenance schemes or the provision of passenger transport services. Schemes considered by the CATG should have first been raised through the community issues system and endorsed by the relevant town or parish council.

In choosing their local transport schemes Area Boards will need to be mindful of the priorities of the Local Transport Plan and the likely availability of future funding for implementation.

(Cabinet Member Decision HT-021-10)

2. Small scale transport schemes – substantive funding

To submit bids for funding from the centrally held substantive funds. A scheme qualifies as substantive if the estimated cost is in excess of the total discretionary amount available.

(Cabinet Member Decision HT-026-11)

3. C & UC roads speed limit review

To make recommendations to the Area Board as to the priority routes for review on C Class and unclassified roads in accordance with the guidance issued by the Cabinet Member for Highways.

(Cabinet Member Decision HT-027-11)

4. Waiting restrictions

To make recommendations to the Area Board regarding waiting restrictions in areas where the Town or Parish Councils do not wish to undertake this function.

(Cabinet Member Decision HT-031-11)

5. 20mph speed restrictions – review and implementation

To make recommendations to the Area Board as to the priority routes/areas for review and implementation of 20mph speed restrictions in accordance with the guidance issued by the Cabinet Member for Highways.

(Cabinet Member Decision HSB-007-13)

6. Other decisions

To make recommendations to the Area Board regarding any other local highways issues when requested.

Positive Activities for Young People Local Youth Network (LYN) Terms of Reference

September 2014

1. Purpose

Definition of a Local Youth Network

A Local Youth Network (LYN) is a sub group of the Community Area Board. It represents a wide range of community stakeholders who work in partnership to facilitate a range of positive activities across the community area. Young people play a central role in all aspects of the LYN.

Local Youth Networks will identify local needs, priorities and outcomes and make recommendations to the Area Board on how funding for positive activities for young people should be deployed.

The obligations of the Community Area Board are set out in the 'Leaders Guidance for Community Area Boards on Positive Activities for Young People'.

2. Membership

The LYN may include representatives of:

- Members of the Community Area Board
- Young people (see below)
- Schools
- Town and Parish Councils
- Community and voluntary organisations and groups
- Police
- Health organisations
- Other organisations, agencies and individuals that have a genuine interest in promoting the welfare and interests of young people

All representatives must be subject to appropriate safeguarding requirements.

The participation and involvement of young people

Young people must play a central role in all aspects of the LYN including the design, development, delivery and review of the local positive activities offer.

LYNs are encouraged to use a variety of methods to ensure young people participate and are involved in decision-making processes. Existing Youth Advisory Groups (YAGs) may provide a useful forum for involving young people, although the decision to retain these groups is for local determination.

LYNs must ensure that consultation with young people is representative and takes into account the views and needs of underrepresented groups (those with protected characteristics) to ensure compliance with the local authorities Public Sector Equality Duty.

Roles of all members of the LYN

All members will be required to:

- Take an active part in the development of the LYN and its aims.
- Ensure that their organisation is represented by a person of appropriate experience/competency (or his/her appointed deputy) who has full authority within the relevant organisation to speak on behalf of the organisation and contribute fully to all discussions.
- Take responsibility for sharing information with the LYN relevant to their organisation/ stakeholders/sector.
- Contribute any information that may have a bearing on positive activities and ensure that this is shared with the LYN.
- Champion the voice and influence of young people in decision making.
- Be open and honest and work collaboratively.
- Work to promote equality and non-discriminatory practices in all aspects of the LYNs activities.
- Respect all members of the LYN and invited representatives.
- Work to improve outcomes for young people and ensure high quality safeguarding practice.

3. Structure and operation

The wider LYN may come together at events, workshops, youth fairs, meetings and consultations, operating in a way which encourages active engagement, dialogue, debate and improved partnership working between key stakeholders.

A smaller management group will take responsibility for coordinating and planning the LYNs activities. The Chair of the group will be decided locally (and could be a young person). The group will include a member of the Community Area Board, who will work with the Chair to present recommendations and provide updates on progress at Area Board meetings.

The management group will generally comprise of no more than ten members including:

- The chairperson and such other Area Board representatives as wish to attend
- Young people (at least 2)
- A local school representative
- Voluntary/community sector representative
- Any other key stakeholders identified locally

The management group will be supported by:

- The Community Youth Officer
- The Community Area Manager / Community Engagement Officer
- Such other officers as may be appropriate

The appointment of members (excluding officers) to the management group will normally be agreed at a full meeting of the Area Board. Membership may be varied, with the agreement of the Area Board Chairperson, subject to approval at the next full Area Board meeting.

Where required for flexibility, the Area Board may appoint an unnamed representative of an organisation to the management group (e.g. Town/Parish Council or Community Area Partnership) to ensure that the organisation is always represented at meetings. However, it is preferred that the same representative attends if possible to ensure consistency of membership.

If nominal membership of the management group exceeds ten members, attendance at meetings should be sought by those most appropriate to the agenda.

Key responsibilities for the management group include:

- Facilitating and coordinating the process to design, develop, deliver and review positive activities for young people in the local area;
- Maintaining regular and effective communication between all members of the LYN;
- Developing a written overview of the needs, outcomes, priorities and objectives for positive activities in the local area;
- Making recommendations to the Community Area Board on how positive activities funding should be deployed (to include evaluating grant requests and identifying suitable suppliers of positive activities);
- Overseeing the work plan of the Community Youth Officer;
- Monitoring and reporting on the quality and effectiveness of local youth activities;
- Addressing any conflicts of interest that may arise as part of the local decision making process.

Recommendations to the Community Area Board will usually be reached by consensus but if necessary these can be agreed by a vote.

The management group may invite representatives from local organisations/agencies to its meetings etc to provide expertise or to share local knowledge on activities, projects and programmes in the area.

The frequency, location and format of LYN activities should be determined locally, however it is recommended that the management group meets at least six times per year.

4. Media Relations

Members of the LYN may not issue media statements on behalf of the Community Area Board. Any media statements about the work of the LYN should be agreed with between the LYN and Chairperson of the Community Area Board.

5. Review

These terms of reference are subject to change and may be reviewed by the Leader on an annual basis.

Volunteer Role Description

Older People & Carers Champion

Purpose of the role

The Council wishes to encourage Area Boards to identify champions in each of the county's community areas who will have a key role in representing the views of older people and carers at both a local and county wide level.

Furthermore volunteers will be asked to:

- Talk to and seek the views of older people and/or carers in their local communities on matters related to services provided by the Council or NHS and represent these views at area boards.
- Work with area boards and local voluntary groups to encourage joint working and share experience to help new local groups set up.
- Advocate for older people and/or carers and be a focal point for identifying what service improvements or developments are required.
- Link with and report to the Community Engagement Manager.
- Talk to older people or carers to obtain their views about services. They will
 represent these views at Area Board meetings or other meetings as
 requested and discuss with the Council and CCG Commissioners the
 priorities for older people or carers and work with them on service
 improvements and developments.
- Provide a focus for the exchange of views and information between older people and/or carers and the Council's adult care and housing services.
- Work with the Area Boards on service improvements and developments to meet the needs of people in community areas.
- Attend area boards to report back on older people and carers issues.
- Attend meetings with other champions and the Council.
- Participate in induction training and ongoing personal development where appropriate. This will include mandatory elements essential for carrying out the role, such as safeguarding which must be completed prior to any volunteering taking place

- Use appropriate claim forms when claiming mileage or expenses
- Comply with Health and Safety Regulations.
- Register as a Wiltshire Council volunteer
- Registration with Fleet Services if the role includes driving on behalf of Wiltshire Council

Wiltshire Council is committed to safeguarding and promoting the welfare of children, young people and vulnerable adults and all volunteers volunteering with these groups are asked to share a commitment to this. You will be expected to report any concerns relating to the safeguarding of children and/or young people and/or vulnerable adults in accordance with agreed procedures. If your own conduct in relation to the safeguarding of children or young people gives cause for concern, the Council's agreed Child Protection or Adult Safeguarding procedures will be followed.

Volunteer Skills and Qualities Checklist

Older Peoples Champion:

- An ability to make a minimum commitment, as specified per role description.
- An understanding of the issues facing older people in today's society, especially loneliness and social exclusion
- An ability to comply with all relevant policy guidelines.
- An ability to maintain boundaries concerning the role and relationship with members of the community
- An ability to listen and communicate with people.
- An ability to recognise own limits of knowledge and responsibility and to be willing to seek advice and support from the Community Engagement manager or other relevant staff.
- A willingness to participate in induction training and team meetings wherever necessary.
- A commitment to non-judgemental practices.
- A willingness to undertake an enhanced disclosure check with the disclosure and barring service (DBS). The organisation will arrange to cover the cost of this.

Wiltshire Council is committed to safeguarding and promoting the welfare of children, young people and vulnerable adults and all volunteers volunteering with these groups are expected to share a commitment to this. You will be expected to report any concerns relating to the safeguarding of children and/or young people and/or vulnerable adults in accordance with agreed procedures. If your own conduct in relation to the safeguarding of children or young people gives cause for concern, the Council's agreed Child Protection or Adult Safeguarding procedures will be followed.

Agenda Item 8



SWW Area Board Report, 31st May 2017

Ben Ansell, the CFO of Dorset & Wiltshire Fire and Rescue Service offered the following at the beginning of April 2017:

1st April 2017 marked the first anniversary of the new Dorset & Wiltshire Fire and Rescue Service.

It is sometimes easy to forget just how far we've come in such a relatively short space of time.

Some of these times have been difficult, but I know we've continued to deliver high levels of service to the public and everybody, across all areas of the organisation has played an important part in making this happen.

I am extremely proud of our 'one team' approach, it is the only way we can continue to effectively support our communities, as well working closely with our partners. Being a bigger Service has enabled us to be a stronger partner to other agencies, including the police, our local authorities and health.

A number of schemes are being developed to work with our colleagues in the ambulance service, allowing us to better position ourselves to meet the needs of our communities. Making financial savings was one of the key drivers for combination, and our savings have been significant, while still being able to invest in the things we need to support our work such as new appliances, prevention activities, new fire helmets, improved ICT and essential improvements to our estate.

Another key part of becoming a combined Service was consolidating our governance arrangements, and a huge amount of work has taken place to deliver this.

I know that there is still much to do to bring together our ways of working and embedding a new combined culture for the Service is not something that will happen overnight.

Indeed, we are now developing our new Community Safety Plan 2017-2021, which will set our direction and aspiration for service delivery across the Bournemouth, Poole, Swindon, Wiltshire and Dorset Areas.

<u>Response</u>

Incidents

March 2017

Category	Wilton	Tisbury	Mere
False Alarm	8	3	2
Fire	3	1	1
Co-responding	N/A	0	0
Special Service	3	0	1
Total	14	4	4

Incidents for Wilton include RTC on the A36/A303 interchange. Noted due to the Area Boards past interest in A303 related incidents

April 2017





Category	Wilton	Tisbury	Mere
False Alarm	9	2	4
Fire	3	1	2
Co-responding	N/A	0	0
Special Service	1	3	1
Total	14	6	7

The board have taken particular interest in Co-responding, especially since the changes could have a significant impact on local availability. Because of this Co-responding incidents have been included on their own.

The figures include a number of RTC's, included . These have been spread around the district but there were none of note on the A303 in the last month and one in March.

Availability of RDS appliances %

March 2017	Appliance	Day (06:00 - 18:00)	Night (18:00 - 06:00)	Total
% Available	KT32P1 Wilton	84.74	76.35	80.54
% Available	KT33P1 Tisbury	38.17	97.24	67.71
% Available	KT34P1 Mere	84.21	97.38	90.79

April 2017	Appliance	Day (06:00 - 18:00)	Night (18:00 - 06:00)	Total
% Available	KT32P1 Wilton	73.61	71.94	72.78
% Available	KT33P1 Tisbury	47.50	95.87	71.74
% Available	KT34P1 Mere	72.78	95.97	84.38

On-Call Recruitment

The "Difficult Hours" for On-Call cover tends to be 0700 to 1800hrs weekdays, and weekends from 1800hrs Friday until 1800 hours Sunday.

The recruits from the recent advertising campaign are working their way through the system and will eventually start to have an impact on the availability.

Tisbury currently has five applicants going through the process. Mere has four applicant going through the process.





In addition there is a combined effort with North Dorset (Gillingham, Shaftesbury, Blandford, Sturminster Newton) to recruit more people. This includes articles in the local press about the activities undertaken and benefits from serving the community. This will be supplemented with each station getting out in their community to promote the recruitment, an 'open evening' and a 'have a go session' to try the tests. Two recruits for Wilton are undergoing training at time of writing.

Recent Notable Incidents

Whilst we have attended a number of incidents in the area over the past two months they have all been fairly minor with no specific incidents of note.

Community Engagement Work

Natasha Vilijoen is the Safe and Well Advisor that covers this area, as well as Warminster.. Please contact her, <u>natasha.viljoen@dwfire.org.uk</u> to arrange for her to talk to your group or an individual visit.

A Safe and Well visit is available and is **FREE** and normally last about one hour covering topics such as:

- Using electricity safely
- Cooking safely
- Making an escape plan
- What to do if there is a fire
- Keeping children safe
- Good practice night time routine and other points relevant to you
- Identifying and discussing any further support you may need if necessary

If you own/occupy a thatch property, are living alone, have a young family, are over 65 or a smoker please get in contact with us. We want to help make you safer in your own home. If you or someone you know has mobility or sight and hearing impairments please suggest a Safe and Well visit.

Visit <u>http://www.dwfire.org.uk/news/new-name-new-contact-details-same-service/</u> to book one.

Darren Nixon District Commander Warminster, Mere & Tisbury Email: <u>darren.nixon@dwfire.org.uk</u> Tel: 01722 691238 Mobile: 07860 345294



Minutes of the Wilton Town Team meeting held on Thursday 18th May 2017 at 7.00pm in the Council Chamber

Present:

Cllr Phil Matthews (Town Council) PM Rev'd Mark Wood (Rector, Parish Church) MW Jonathan Greening (Minister Baptist Church) JG Sue Van Leest (Our Wilton) SvL Zoe Cupit (Wilton Town Coordinator, minute taker) ZC

Apologies

Peter Edge (Chairman) Gary Nunn (Community Events)
Andy Kinsey (Wilton & District Business Chamber)
Steve Harris (Area Board Community Engagement Manager)
Mark Pountain (Wilton Community Land Trust)
Jan Nock (Head Teacher Wilton and Barford School)
Claire Ellard (Wilton Shopping Village)

- 1. **Chairman's Welcome and apologies –** Phil Matthews welcomed all to the meeting. Apologies received were noted as above
- 2. Approval of the minutes of the previous meeting held in February Approved

3. Matters arising

The Flag Pole is now up and the flag hung on St. Georges Day

4. Updates

i. Town Trail – ZC is preparing the text and collecting photographs for the Trail Boards. They will be sent to Cityscape by Friday 26th May. It is estimated it will take a further 6-8 weeks for the signs to be completed and installed.

ii.Gateway Signs – Sponsors paid, signs have been ordered.

iii Wilton Parkway - Progressing slowly but still on track for 2020. **PM** attended the TransWilts AGM. The next stakeholders meeting is 23rd June.

iv. Town Coordinator – **ZC** Focus is very much on Wilton Week 12th – 17th June. Interest in the Pop Up shops has been incredible. 12 individuals traders will be taking part in 3 units, showing that demand is there for retail space in Wilton. Wiltshire Scrapstore will be trading out of the T P Chimney Unit on North Street and are already taking steps to find a permanent shop. The Great Big Lunch 18th June 11-4pm. Live Music has been booked, Scouts are providing the BBQ. Other activities include Cocktail bar, and children's activity tables. The Rugby Club and Driving Range will be running games in the park area. Many Community groups are attending and running stalls. The Poster & Flyer are almost ready and will be distributed throughout the Wilton and surrounding areas.

v. Our Wilton – **SvL** Groundbreaking Event on 26th May with build of veterans accommodation starting in early June.

vi. Future of the Town Team – As many of the teams aims and objectives have been fulfilled the Town Team will take a break and return Thursday 21st September. When work will start again on preparing for the Christmas Celebrations.

5. Brief Updates from member bodies

a. **MW** (Rector, Parish Church) - Hosted the scouts for St Georges day. The day was successful and might be annual April fixture.

Much of the electrical work has been completed but lots more to go. Hoping to change lighting to LED as more energy efficient.

11th June fundraisers for Julias House will be cycling through the town. The church will be supporting Julia's House as their charity.

2nd July sees the arrival of the new curate, Caroline Titley. Caroline, amongst other things is keen to get involved with Community land Trust. **MW** to forward her details to **ZC**. The Flower Festival will run from Thursday 13th to Sunday 16th. The Festival is part of a celebration of the Bemerton Flower Group, who mark their 40th anniversary.

The County Carol service will take place in the afternoon of Wednesday 6th December The visit in March by the Hermitage Ensemble from St Petersburg was very successful.

b. JG (Minister Baptist Church) –. Change in leadership, new secretary is Paul Stacey.

c. SH (Area Board Community Engagement Manager) sent the following report – Area Board update:- Next Area Board meeting on 31 May 2017, 6.30pm at Broad Chalke Sports Centre. Main item will be a presentation from Sergeant Paul Harvey from the Crime Prevention Division of Wiltshire Police, on their Cyber Crime Initiative.

First meeting of new South West Wiltshire Community Safety Partnership will take place on Monday 19 June 2017, 2pm at the Nadder Centre in Tisbury. Opportunity for parishes and members of the public to liaise with local police/fire service officers and discuss local issues. First conference for newly formed Dementia Action Alliance takes place on Monday 26 June 2017, 6pm at the Nadder Centre in Tisbury. Idea is to share what is happening to raise dementia awareness and provide support across the area.

Following the recent local elections the Area Board is now represented by the following members:

Wiltshire Councillors Cllr Tony Dean, Tisbury. Cllr Pauline Church, Wilton and Lower Wylye Valley Cllr Jose Green, Fovant and Chalke Valley Cllr George Jeans, Mere Cllr Bridget Wayman, Nadder and East Knoyle

d. **ZC** (Wilton Community Land Trust) The focus of the CLT is first and foremost the Enterprise Hub.

MP will be standing down as Chair. The CLT AGM is Thursday 6th July 7pm at the Community Centre. The CLT will be inviting people to stand for the Board.

6. Any Other Business

7. Date of next meeting

Thursday 21st September 2017 <u>7.00pm</u> in the Town Council Chamber.

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healthwatch Wiltshire

Area Board Update May 2017



Healthwatch Wiltshire is a local independent organisation which exists to speak up for people on health and care. If you have used a service recently then we would like to hear from you. We use what people tell us when we meet with the commissioners and providers of services to make sure that they take account of your views and experiences.



Marking a milestone

An online directory with an extensive list of health and social care services in Wiltshire has almost doubled in size since its launch two years ago.

The 'Your Care Your Support Wiltshire' website was launched in 2015 and now has 764 entries on the service directory. Services range from hearing aid repair clinics, foodbanks, meal providers, to long term condition support groups.

To make services easy to find, they are grouped around themes such as multiple sclerosis, diabetes, stroke, or palliative care. A hashtag has also been created - #makesomeonewelcome - for groups and clubs identified as going the extra mile in welcoming new people.

During the last two months, 150 directory entries have been added including links to videos about 'Men's Sheds' and 'The Learning Curve'.

Claire Cooper, Information Research and Web Content Officer, said: "Thank you to the volunteers, groups, Community Engagement Managers, Older People and Carers Champions and stakeholders who help keep Your Care Your Support Wiltshire up to date."

Marking our impact

Do you want to know the impact of our work in Wiltshire?

Healthwatch Wiltshire engages with people throughout the county to find out their experiences of using health and social care service. We use this information to feedback to the boards and groups who provide and buy these services.

We have produced a range of 'You Said, We Did' reports to illustrate the work carried out over the last year and what happened as a result of the feedback which people gave to us.

The reports, which cover a range of topics such as complaints, dementia and carers, are available at healthwatchwiltshire.co.uk

Your

ial Care

Contact us:

Tel 01225 434218 info@healthwatchwiltshire.co.uk

healthwatchwiltshire.co.uk



May 2017

Overview

NHS Wiltshire Clinical Commissioning Group (CCG) is responsible for commissioning a broad range of healthcare for the population of Wiltshire. We are led by experience local GPs drawn from across the county, who provide clear clinical leadership to the big decisions affecting the future of healthcare provision in Wiltshire, carefully tailored to meet the differing needs of people locally.

Our vision is to ensure the provision of a health service which is high quality, effective, clinically-led and local. We are committed to delivering healthcare that meets the needs of Wiltshire people, to consult and engage with our population to enable them to be involved in decisions made about health services and to deliver those services to people in their own homes or as close to home as possible.

The right healthcare, for you, with you, near you

Primary Care Co-Commissioning

At the beginning of April 2017 Wiltshire CCG has taken on full delegated responsibilities for managing local general practices (GP surgeries). This was previously managed by NHS England.

It is widely recognised across the NHS that involving CCGs more in the commissioning of general practice provides an opportunity for offering better, more joined-up care for patients and local populations.

Functions the CCG has taken on include:

- The commissioning and monitoring of General Practices contracts
- Commissioning of local services for the Wiltshire population
- Approval of practice mergers
- Making decisions on local discretionary payments for GP practices
- Making decisions on establishment of new GP practices
- Provision of communications and patient engagement advices to GP practices

More information can be found on the CCGs website – <u>www.wiltshireccg.nhs.uk</u>



Prescription Ordering Direct (POD)

NHS Wiltshire CCG launched a NHS Prescription Ordering Direct (POD) service on Monday 8 May 2017.

This new service will provide an easy way for people to order their repeat prescription by making a simple phone call from the comfort of their own home – without the need to go into a GP practice or pharmacy.



The POD will be staffed by dedicated,

experienced and fully trained repeat prescription coordinators and pharmacists from NHS Wiltshire CCG.

When you call the POD telephone line you will talk to a trained coordinator dedicated to taking repeat prescription requests and answering any repeat prescription queries.

They will be able to help you to order only the items that you need, ask you how you are getting on with your medication and alert you if a medicine review is needed.

The POD has been introduced to help reduce the amount of medicine wasted across Wiltshire, as unused prescription medicines cost the NHS in Wiltshire over £2.7million every year. By managing repeat prescriptions orders more efficiently, we can reduce waste and save valuable NHS funds.

The service will also reduce time and workload pressures for GP practices, allowing staff to focus on providing better care to patients.

Don't worry if you already use a repeat prescription service from a pharmacy, you will be able to phone the POD service to order your medicines instead and the POD will arrange for you prescription to be sent electronically to your usual pharmacy and dispensed as normal.

The POD service will be available for patients registered with Lovemead Surgery, Trowbridge from 8 May. Giffords Surgery, Melksham and Castle Surgery, Ludgershall will be joining the scheme in June 2017 and we will keep you updated when more surgeries join.

Have you consented to have additional information in your Summary Care Record

Summary Care Records is an electronic record of important patient information, created from GP medical records. We are asking patient to improve their patient experience by consenting to have additional information available on their summary care record (SCR).

What is additional information?

Essential details about your healthcare can be very difficult to remember, particularly when you are unwell. Having additional information in your SCR means that when you need healthcare, you will be helped to recall this vital information, this includes:

- Your long term health conditions such as asthma, diabetes, heart problems or rare medical conditions
- Your relevant medical history clinical procedures that you have had, why you need a particular medicine, the care you are currently receiving and clinical advice to support your future care
- Your personal preferences you may have particular communication needs, or may have made legal decisions about your care that you would like to be known
- Immunisations details of previous vaccinations such as tetanus and routine childhood jabs

NHS

GPs use your Summary Care Record to share medical information with other healthcare staff treating you



We need your permission to add more information to help support your care. Ask reception for a consent form. Care professionals in Wiltshire use your Summary Care Record when they are treating you and this currently provides important information about the medicines you are taking, allergies you suffer from and any previous bad reactions to medicines you have experienced.

By consenting to have additional information included in your SCR, means more information will be available to health and care staff when they are treating you and can enhance the care your receive.

Ask reception for a consent form next time you visit your GP surgery.

Wiltshire Council

Where everybody matters

Report to	South West Wiltshire
Date of Meeting	31/05/2017
Title of Report	Community Youth Grants

1. Purpose of the report:

To ask Councillors to consider the following applications seeking funding from the South West Wiltshire Area Board.

Application	Grant Amount
Applicant: Seeds4Success Project Title: <u>Seeds4Success - NCS</u> enhanced opportunities project	£3050.00
Applicant: Dorset & Wiltshire Fire and Rescue Service Project Title: <u>South West Wiltshire</u> <u>Salamander</u>	£2866.00
Total grant amount requested at this meeting	£5916.00
Total amount allocated so far	£0

2. Main Considerations

Councillors will need to be satisfied that grants awarded in the 2017/18 year are made to projects that can realistically proceed within a year of the award being made.

Area Boards have authority to approve Area Grants under powers delegated to them by the Cabinet member for Communities, Campuses, Area Boards, Leisure, Libraries and Flooding.

Community Youth Grants will contribute to the continuance and/or improvement of cultural, social and community activity and wellbeing in the community area, the extent and specifics of which will be dependent upon the individual project.

Community Youth Grants give all local community and voluntary groups, Town and Parish Councils an equal opportunity to receive funding towards community based projects and schemes.

3. The applications

	Amount
Applicant: Seeds4Success	Requested
Project Title: Seeds4Success - NCS	from Area
enhanced opportunities project	Board:
	£3050.00

This application meets grant criteria 2017/18.

Project Summary: To provide added value for participants of the Summer National Citizen Service NCS programme through the provision of presummer engagement team building activities and formal training and accreditation opportunities throughout the summer to enable those young people with less confidence and ability to participate fully in the programme and graduate from the scheme with a range of skills and qualifications increasing their chances of successfully transitioning to further education or employment

Please tell us WHO will benefit and HOW they will benefit from your project and benefit your local community: A team of 15 young people spend up to 60 hours together over the next 2-3 weeks planning and delivering a social action project which is of benefit to the wider community. This could include volunteering to benefit the environment running activities for younger children or older people fundraising for local good causes or any other project the group decide is worth doing. The team will work in partnership with other local community groups and organisations to identify local needs and deliver their social action project. We seek to attract young people who would not be picked up through the school assembly programme those who have additional needs perhaps who are Not in Education Employment or Training or who are home schooled or young people with Special Educational Needs or Disabilities SEND or those with caring responsibilities. For these young people the qualifications and certificates they achieve as a result of taking part in NCS are often the most valuable part of the programme. For some young people these are the only formal qualifications they can include on their CV and the team building and co-operation skills they gain as part of the programme are significant in enabling them to move on to other things after the summer.

Applicant: Dorset & Wiltshire Fire and	Amount	
Rescue Service	Requested	
	from Area	
Project Title: South West Wiltshire	Board:	
Salamander	£2866.00	

This application meets grant criteria 2017/18.

Project Summary: Salamander is a tailored personal development programme designed to promote empowerment in a positive environment

whilst also encouraging team work and the supporting of others. The programme aims to develop self-confidence improve communication skills encourage participants to adopt a new set of values and address the consequences of anti-social behaviour and fire setting.

Please tell us WHO will benefit and HOW they will benefit from your project and benefit your local community: The project will help meet local need by working directly with local partners and organisations to target vulnerable young people who will benefit most from attending this personal development programme. This could be young people at risk of offending or anti social behaviour those in danger of becoming NEET or those who need their confidence and self esteem building. Up to 14 young people will take part in the course and the young people will get the opportunity to participate in activities such as Pumps Hose and Ladder drills learn Search and rescue techniques use equipment to extract dummy casualties from an Road Traffic Collision scenario and take part in a water rescue scenario amongst other team building challenges. Young people completing the programme will gain an AQA Award.

Report Author:

Stephen Harris, Community Engagement Manager, Wiltshire Council

Wiltshire Council

Where everybody matters

SOUTH WEST WILTSHIRE COMMUNITY AREA TRANSPORT GROUP 19 APRIL 2017

	Item	Update	Actions and recommendations	Who
1.	Attendees and apologies			
	Present:	Wiltshire Cllrs Bridget Wayman (Chair), Jose Green, Peter Edge. Frank Freeman, Richard Mitchell, Stephen Banas, Phil Matthews, Catherine Purves, Sandra Harry, Clare Churchill, Tim Martin, Dr Margaret Thompson, Dr James Thompson David Button (Area Highways Engineer) Stephen Harris, (Community Engagement Officer) Julie Wharton (Principal Engineer)		
	Apologies:	Mike Ash, Sheila Shepperd, Spencer Drinkwater.		
2.	Notes of last meeting			
		The minutes of the previous meeting held were agreed at the South Western Wiltshire Area Board meeting on Wednesday 8 March 2017. Link can be found on the Wiltshire Council website <u>here</u>		
3.	Financial Position		1	1
		The finance sheet was presented. There is currently £19674 unallocated.		

Agenda Item 11

4.	Substantive Bid			
a)	New Road, Zeals (Mere) 30mph speed limit & traffic management measures.	CATG agreed to set aside £10k for substantive bid & PC funding £5000. The detailed design of the scheme is now complete and the PC has held another open day to discuss with the local community. This was generally received well and therefore the legal order will to amend the speed limit will be advertised. Construction is provisionally scheduled for Oct-Dec 2017.		JW
5.	Top 5 Priority Schemes			
a)	Issue <u>4078 & 4504</u> Hindon The Dene/High Street Additional signing	The order for the replacement directional signs on the B3089 has been placed with the contractor. The results of the Metrocount that took place on The Dene have been received and are currently being analysed.		JW
b)	Issue <u>4363</u> C283 South Newton. Weight limit and traffic calming	 The CATG has put forward the C283 as one of its roads to be assessed for HGV usage therefore it would be appropriate to await the outcome of this investigation. I have sent the PC details of a scheme for an additional "Slow" road marking to enhance the entrance to the built up part of the C283 and should this go ahead I would be able to refresh the existing white lines as well. The cost of this scheme is approximately £1000 as it will need signals. Unfortunately surfacing works are needed to facilitate laying the new markings. This would increase the estimated cost to £4000. The PC would like to proceed but can only afford to contribute £500. 	The SWW CATG agreed to fund the scheme if the PC funds £500 in 2017/18 & £500 in 2018/19.	PC

c)	Issue No: <u>4644</u>	The advice provided to Ansty PC is as follows.		
	Ansty Various Various traffic management measures	Signing of Tisbury South via Ansty. I have looked at the signage to Tisbury South that directs traffic though Ansty. Essentially the problem arose due to the need to sign Tisbury South from the A30 for those vehicles that cannot pass under the Railway bridge. This used to be a lorry symbol but this was removed during the A30 route study and the warning signs for the railway bridge improved. I have entered into discussions with Tisbury Parish Council and colleagues about the need to sign Tisbury South at all and therefore remove all reference to it however it appears that the need arises as a result of the Station Works / Parmiter site which was home to the major employment site in the village. Whether or not this need continues will depend on what happens to this site – I understand that there is still a possibility that this could remain as an employment site and therefore the need for the signage is still current. Therefore given the need for direct signage there needs to be a chosen route. Looking at the route options that are available then I am afraid that I concur with the advice previously provided and that Ansty is the preferred route. It is the shortest most direct route to and from the A30, and in Wiltshire Councils opinion the easiest for large vehicles to navigate.	The PC expressed concern that light vehicular traffic has not been considered therefore it was agreed that they would make a formal representation to JW and that JW would investigate further.	PC/JW
		Ansty Coombe Lane "Unsuitable for HGV's" signs are generally only erected where it is the layout of the junction gives the impression that the lane is bigger than it is and therefore not evident that oversize vehicles are likely to get stuck, however I am aware of one occasions when a HGV did attempt and therefore if this is a regular occurrence then a single sign erected on the left hand side of the junction would be sufficient and would cost £250.	It is still a significant problem; so far two large lorries have been stuck this year. The CATG agreed to fund the £250 cost of the sign if the PC agreed to fund £100.	JW

		 Measures to prevent vehicles damaging properties at the southern end of the village. Installing trief kerbs to protect 63 High Street would need a road closure and would cost in the region of £10,000. If a kerb was installed to protect the thatched cottage it would need to be protected by bollards or would just be overrun as two vehicles try to pass as they do now, especially if a trief kerb in installed on the opposite side of the road. This would cost a similar amount, £10,000 depending on the type of bollards required. 	The PC do not feel that they can afford to contribute more than a few hundred pounds to any scheme therefore it was agreed that JW would look at cheaper options.	JW
d)	Issue <u>4716</u> A30 between High St junction and Pembroke Fm. Dropped kerbs	 A scheme to provide dropped kerbs has been prepared and sent to the Parish Council for comment and is due to be discussed at their meeting on 4 April 2017. The 3 locations in front of the car park can be completed for £1200 as they are straight forward. The kerbs in front of the pub cannot be dropped without widening the footway as it is not currently wide enough for a disabled buggy. The estimated cost for doing that is an additional £4500. The CATG currently has £3000 set aside for this scheme. 	The PC would like to proceed with the scheme to install 3 kerbs in front of the car park initially. The CATG agreed to fund the £1200 and the PC committed 25%. Sufficient funding has already been agreed by the AB.	JW
e)	Issue <u>4790</u> Causeway Road, Broad Chalke. New footpath.	The PC has funded the entire cost of the topographical survey and the survey has been ordered now that the codes for the new financial year have been released. It will take 6-8 weeks to be returned.		JW

5.	Other Priority schemes			
a)	Hindon Traffic Management Measures	The cost of trialling a build out using temporary traffic management have been sent to the Parish Council. A 14 day trial will cost £3256 and can be funded from the monies already allocated to Hindon PC previously.	JW to agree timing of the trial with PC.	JW
b)	Issue No: <u>4629</u> West Street, Barford St. Martin Bollard to protect thatched roof.	The location of the bollard has been agreed with the PC and therefore work will progress when the CATG makes this one of its top 5 priorities.	The CATG agreed that this would be the next top 5 priority.	JW
c)	Issue <u>4682</u> Barkers Hill, Semley New width restriction signs.	 The group agreed to fund two 'Not suitable for HGV' signs at approx. £500. Donhead St Andrew PC/S&S PC have agreed 25% contributions therefore work will progress when the group make it one of their top 5 priorities. S&S PC discussed at meeting 09/01/17 and has confirmed that warning signs are already in existence and therefore would not necessarily support the above request. They have requested that it is looked at again. I have suggested a formal width restriction that will cost approximately £2000 as it needs a Traffic Regulation Order. DStA PC appreciated that the scheme would cost considerably more due to the necessity for the associated advertising and legal work, but would want to limit any payment from Donhead St Andrew PC to the original £250 offered. S&SPC are also unable to contribute more than £250. 	The group agreed that JW would ask for a metrocount to establish the number of HGV's using this lane.	JW
d)	Issue <u>4714</u> Steep Hollow, Dinton One way system	Work will progress when the group make it one of their top 5 priorities.		CATG
e)	Issue <u>4723</u> B3089, Chilmark New signage to limit HGV's in	Chilmark PC due to discuss at their meeting 11/01/17 and have re- confirmed their support for signage. They comment that the problem is not just vehicles trying to get to EHD but non EHD HGV's have recently got stuck in Becketts Lane and The Cross. They would like a weight restriction		CATG

	the village.	that applies to all HGV's introduced.		
		The group discussed the matter and AD & BW would continue to pursue the matter of EHD. The group agreed that the request for blue and white signs advising of unsuitability for HGV traffic would be considered.		
		Work will progress when the group make it one of their top 5 priorities.		
f)	Issue <u>4787</u> Church Lane, jcn Bridleway Tollard Royal Horse warning signs	The AB confirmed funding the £750 scheme as the PC had agreed to contribute 50%, therefore work will progress when the CATG makes this a top five priority.		CATG
g)	Issue <u>4659</u> Wishford Road, Wilton Request for additional speed limit signs and horse warning signs.	 Wilton Town Council agreed that speeding was not an issue but given there was still a couple of drivers that were abusing the speed limit, they requested two horse riding warning signs either end of the road. The group questioned the effectiveness of signs given that the vehicles are likely to be local drivers who know the roads. The Town Council to go back and discuss the funding. The TC has agreed to fund the two signs at a cost of £500 if the riding stable wants to fund £250. 		тс
h)	Issue <u>4689</u> Horwood Farm, A30 Shaftesbury Road, Ansty Request for farm warning signs.	management. PC requested additional time to discuss the matter. PC has yet to discuss whether or not they support the request. If PC supported the issue then the CATG felt that the landowner should be asked to fund the signs.	The PC and the Farmer have since confirmed that they do not wish to fund the signs and therefore the group agreed that this matter can be closed.	CATG
i)	Issue <u>4902</u>	Work will progress when the group make this one of their top 5 priorities.		CATG
	Mill Lane, Bishopstone			

	Single track warning signs.			
j)	Issue <u>4949</u> Road between B3089 & A303 Fonthill Bishop Request for SLOW markings or a pinch point.	 SLOW markings would cost approximately £100 each if included with other lining in the area, or on its own would incur a standing charge of £1000. A white line pinch point painted on the carriageway would cost approximately £500 if included with other lining in the area, or on its own would incur a standing charge of £1000. New lining schemes cannot be added to the program of renewals unless a design is pre-approved by the Traffic Engineering team. CATG did not wish to replace an existing priority with this scheme. 		CATG
k)	Issue 5109A30 - Barford St Martin between the junction of the B3089 and Tinkerbell garage.Request for pedestrian warning signs.	Some years bollards were inserted and red tarmac laid down outside Hill cottage. The red tarmac has completely worn away and the white line can hardly be seen. Simon Sims our parish steward has remarked that he is surprised there are no warning signs advising traffic that pedestrians could be in the road. He also ensures that when he sweeps or weeds the path he has another steward to protect him from traffic. DB informed the meeting that the area was installed to protect the property rather than provide a safe passage for pedestrians. Area Highways Office to investigate the matter and PC to bring photos back when road has been cleaned and details of numbers of pedestrians using the area as a footway.	DB informed the meeting that a program of sweeping priority road 1 is currently taking place and that this will be included. The PC was not in attendance.	TW/DB/ PC
6.	New Requests / Issues]	

a)	Issue <u>5116</u> Request for 20mph speed limit in Swallowcliffe.	Swallowcliffe PC has expressed concerns about speeding through the village. They have had some metrocounts carried out which have established two sites that are suitable for Community Speedwatch. However they would like to request a 20mph speed limit review.	It was agreed that the CATG would write to all parishes and invite them to put forward sites for 20mph highlighting the funding decision agreed at the last CATG. Two would then be selected at the next CATG/AB meeting.	JW
7.	Other items			
a)		The group discussed HGV's & sat-navs, it was suggested that both Parish Council's & Wiltshire Councillors should lobby their MP to get lorry sat navs made a legal requirement for all HGV's. Enquires were made as to how Wiltshire Council was making representation to the DfT, it was requested that a follow up was made with Transport Planning. Advice received after the meeting confirms that in the past Wiltshire Council has lobbied the DfT for action and SD confirmed that this will continue. SD also stated that the Department for Transport is investing £3 million to create a national digital road map, developed by Ordnance Survey, which will enable better integration and sharing of data on roads between local authorities and service providers See more at: https://www.gov.uk/government/news/3-million-mapping-project-to- transform-road-improvements-and-maintenance A note giving advice on how to contact sat nav companies is attached.		

Date of Next Meeting: 13	September 2017 14:00-16:00 Nadder Centre, Weaveland Road, Salisbur	

South Western Wiltshire Community Area Transport Group

Highways Officer – Julie Wharton

1. Environmental & Community Implications

1.1. Environmental and community implications were considered by the CATG during their deliberations. The funding of projects will contribute to the continuance and/or improvement of environmental, social and community wellbeing in the community area, the extent and specifics of which will be dependent upon the individual project.

2. Financial Implications

- 2.1. All decisions must fall within the Highways funding allocated to South Western Area Board.
- 2.2. If funding is allocated in line with CATG recommendations outlined in this report, and all relevant 3rd party contributions are confirmed, Southern Wiltshire Area Board will have a remaining Highways funding balance of **TBC**

3. Legal Implications

3.1. There are no specific legal implications related to this report.

4. HR Implications

4.1. There are no specific HR implications related to this report.

5. Equality and Inclusion Implications

5.1 The schemes recommended to the Area Board will improve road safety for all users of the highway.

6. Safeguarding implications

6.1 There are no specific safeguarding implications related to this report.

Wiltstiffe Council Where everybody matters

Nadder Centre Board Record

Area	South West Wiltshire Nadder Centre Board						
Date	3/5/17	Time	es 6-7	.30pm	Venue	Nadder Centre, Tisbury	
Present	Cllr Tony Deane (Chair), Clare Barham, David Wood, David Lacey, Felicity Corp, Liz Coyle-Camp, Peter Smart, Steve Harris						
Apologies	Cllr Bridget Wayman, Richard Beattie, Craig Angel, Sally Naish						
Agenda Ite	ms / Decis	sions and	l key inforr	nation			
1	Apologie	<u>es</u>					
	Given a	bove.					
2	Notes/a	ctions fro	m previou	s meeting			
	Update	on action	S				
3	Nadder	Centre u	odates				
		stats give 17 are es		/17, with 2	2015/16 com	parison (figures for w/b 24	
		Total Issues/Ren					
		2015/16	2016/17	%			
	Sep	884	1004	13.6%			
	Oct	851	1532	80.0%			
	Nov						
		753	1408	87.0%			
	Dec	753 636	1408 1199	87.0% 88.5%			
	Dec Jan						
		636	1199	88.5%			
	Jan	636 845	1199 1198	88.5% 41.8%			
	Jan Feb	636 845 767	1199 1198 1112	88.5% 41.8% 45.0%			

Active Users		
2015/16	2016/17	%
475	572	20.4%
469	620	32.2%
448	669	49.3%
438	693	58.2%
453	701	54.7%
461	706	53.1%
456	743	62.9%
465	749	61.1%
Reç	jistered Me	mbers
2015/16	2016/17	%
892	949) 6
886	1004	13

Registered Members			
2015/16	2016/17	%	
892	949	6.4%	
886	1004	13.3%	
885	1038	17.3%	
884	1056	19.5%	
871	1071	23.0%	
871	1085	24.6%	
863	1116	29.3%	
865	1123	29.8%	

FC advised she is still working on the 'Nadder Corner' concept.

Steve advised that the Police now have full use of building. As previously announced, there will be a new front of house client manager. They will have responsibility for management of space across the centre.

Group felt it would be useful to have representation in any interview process, a link with the new client manager/team, a meeting with the manager/Communications re. any new marketing plan and sight of any new job description(s) before recruitment takes place. Steve advised that Wiltshire Council would follow its recruitment policy in terms of any new appointments.

Peter proposed that future remit of client manager should be in line with the vision of the building, as well as understanding the need to raise income.

	Peter gave report from customer liaison meeting. Impossible to divorce leisure issues from room allocations. Issues raised about new rooms for changed activities. Steve advised question about future use of commercial space has been passed up. Link established with Wiltshire College – Steve to meet with them to discuss
	potential opportunities.
4	Business plan
	Tony advised that local Councillors felt there was a need to draft a business plan, with gaps in knowledge highlighted.
	David W asked about budget. Peter stated it was better to focus on vision and future sustainability.
5	Draft terms of reference
	Richard had sent revised copy to Tony for consideration. Query raised by Bridget re. chair. Peter suggested that chair should be a Councillor and a local representative. Group agreed amendment that Chair should be a Wiltshire Councillor representative from the Tisbury Community Area.
	ACTION - Steve to circulate revised draft.
6	Public arts projects
	Steve meeting with Johnny Messum w/c 8/5/17 to discuss proposal.
	Community art hanging space quote received - £200 for every 2 metres (four pictures on hanging rails). Group happy to proceed on this basis maximising the use of space within budget (£3,000 allocated by Area Board).
	ACTION – Steve to progress.
7	The Enterprise Centre update
	Polaris wines have progressed from 1 desk to 3 desk office. Interest received in taking 1 desk space.
	Currently have three offices taken, with two people hot desking and one taking a virtual office. Around 50% occupancy.
	Liz believed that potential users were not aware of the EC's wide choice of affordable and flexible office space / hot desking rental options available to meet different needs and budgets. She suggested that this needs to actively promoted via social media, by the Centre and in local newsletters (e.g. Focus).
8	Café update
	Peter raised concern re. future sustainability. Steve advised need for commercial users. Steve updated that child's triathlon is planned for 4 June 2017, joint event between Marcus (café) and the Nadder Centre.

9	Tisbury History Society update
	Query raised from Wiltshire Council re. break clause, Tisbury History Society are considering amendment to Heads of Terms. Still in discussions but agreed in principle.
10	Army Cadets update
	Steve advised that renewed discussions taking place re. future lease agreement.
11	Community event day on 3 June 2017
	David Lacey gave updates.
	Afternoon event has changed to rounders competition with teams provided by the five charities. Discussions taking place with Tisbury PC re. insurance for event.
	Charity ball sales have been slow but Fonthill Cricket Club have taken 2 tables. Liz suggested contacting Pythouse tennis club. Members encouraged to advertise locally, tickets available from Ed at Post Office, Jason at football ground or from the Nadder Centre. David looking to get a good number of tickets booked by 15 May.
12	AOB
	Liz, Wendy Spencer-Smith looking to hire rooms for fitness activities for children. Classes are currently limited.
	ACTION - Liz to provide update and contact details to Steve.
Recom	mendations to Area Board
1	Propose that Area Board/Nadder Centre Board is given representation in any interview process, a link with the new client manager/team, a meeting with the manager/Communications re. any new marketing plan and sight of any new job description(s) before recruitment takes place.
2	Agree the revised terms of reference for the group.

Local Health and Wellbeing Group Record

Area	South West Wiltshire Health and Wellbeing Group				
Date	15/3/2017 Times 1 - 2.30pm Venue Nadder Centre, Tisbury				
Present	Cllr Jose Green (Chair, Wiltshire Councillor), Sue Wight (Age UK), Mark Rippon (Wiltshire Council, Public Protection Officer), Tim Mason (Alzheimer's Society), Stacey Plumb (Healthwatch Wiltshire), Dr Laurence Carter (Tisbury Surgery), Zoe Cupit (Wilton Town Co-ordinator), Val O'Keefe (Health and Wellbeing Champion), Ann-Marie Dean (Health and Wellbeing Champion), Danielle Brignall (Wiltshire Council, Health Trainer), Steve Harris (Wiltshire Council, Community Engagement Manager)				
Apologies	Zoe Young (Wiltshire Council, Resident Engagement Officer)				
Agenda Ite	ms				
1	Welcome and Introductions/Apologies				
2	Approved terms of reference				
3	New paperwork for H&WB group				
4	Public Health offer to H&WB groups				
5	Update on investigations into hospital admissions attributable to alcohol usage				
6	Health and Wellbeing Champions update				
7	Local activities directory				
8	Dementia Action Alliance update and planning				
9	Local H&WB / Older People priorities				
10	AOB				
Decisions//	Actions				
1	Recommendations from last meeting were agreed by Area Board.				
2	Tim suggested a member from the DAA to be invited to attend in future. ACTION – SH to request local volunteer attends future Health and Wellbeing meeting at first wider meeting of DAA.				
3	New paperwork shared and explained. Centralised process so paperwork is standard across Health and Wellbeing groups.				
4	Shared for information. Sue pointed out this link with public health was already happening with alcohol usage issue. Can also work other way i.e. linking in with public health for locally identified issues.				
5	Mark was introduced to provide an update. Formed local steering group. Further research using Audit C scratch cards; 1 in 3 drinking too much in Wiltshire, 1 in 2 in Wilton community area. 2.5-3k people in Wilton community area potentially at risk. How to reach low level drinkers? Marketing campaign. There were 3 'frequent flyers' (reoccurring patients) within the Wilton data who are not likely to affect data in future due to change in circumstances. Sue pointed out link with social isolation.				

	Stigma of people accessing substance misuse service. Danielle advised people drinking too much can be referred to Health Trainers in first instance. Can self-refer or GP referral. Mark suggested further actions:
	 New outreach worker for Turning Point, will liaise with GPs in Wilton to look at initiatives to meet with people at risk. Roadshows, roving vehicle. Tim suggested would be better to work
	 Z) Roadshows, roving vehicle. This suggested would be better to work through voluntary sector. Zoe suggested linking with clubs – Thursday club, bowls (has over 100
	members). Wilton week coming up 12-17 June 2017. Danielle advised good video on youtube re. addiction
	(https://www.youtube.com/watch?v=K4R1a8za7aY).
	Val suggested focus should be on mental wellbeing – positive messaging, alcohol is just one factor.
	Zoe suggested linking in with new outside gym equipment, could have facts with positive messages displayed. Could request local sponsorship. Danielle suggested liaising with school.
	ACTION – Mark to take suggestions away and provide update in due
6	course. Local activities lists have been completed.
	Val updated re. Sunday lunch project. Churches involved and people outside of Wilton. Will be done at community centre.
	Ann-Marie advised a request has been placed in Mere Matters this month to
	host teas. If people are lonely and would like to go to tea they can also
	request. Looking for 6-8 people to go round a host's house. Community drivers will volunteer and also stay at the tea. Idea is to build networks and
	make sustainable into future. Want to start in Mere and spread out.
	Champions attended forum last week to learn ideas about how to run activities.
7	Val and Ann-Marie advised that some areas have nothing whilst others have lots going on.
	Areas where nothing happens often do not have a local location, leaves people in their homes. This is where something like the afternoon tea
	initiative could make a difference. ACTION – SH to compile lists and send to Healthwatch for Your Care
	Your Support, share with parishes, local publications, key local
0	practitioners (health, WC staff, external organisations) and wider public.
8	Tim suggested would be good to link in with Scouts. DAA will bring people together to share good practice.
	Tim advised Broad Chalke keen to make Chalke Valley dementia friendly
	community. Caroline Wilson has volunteered to be Dementia Friends Champion co-
	ordinator across our DAA.
	Dementia Friends Champion training day in May.
	Salisbury Hospital has dementia steering group, keen to develop relationships with DAAs they serve. Looking for volunteers to go into dementia wards for
	motivation exercises. Also might be able to offer DAAs training etc.
	ACTION – SH to update DAA plan and circulate.
	Tim happy to go out and talk to parishes. Encourage dementia friends sessions with clubs on activities list so that they
	are accessible to all.
	Tim shared idea of having dementia users come in to trial facilities to check they are friendly.
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	Steve updated re. progress in Broad Chalke and Safe Places presentation at Wilton & District Business Chamber breakfast event (Zoe has agreed to be local link), DAA meeting to be held after local council elections. Tim emphasised need for action after awareness.
9	Steve and Jose gave a reminder of local priorities identified. Zoe explained her role as town co-ordinator and gave details of Wilton Big Lunch, will be at Wilton Shopping Village on 18 June 2017. Will provide an opportunity for local groups to promote themselves. Week before will be 'Wilton week', pop-up week to promote town. Transport provided for access. Group supported potential funding application to go to Area Board in May 2017.
10	ACTION – SH to set date for next meeting.
Recomme	ndations to Area Board
1	The H&WB group recommends to the South West Wiltshire Area Board that the Wilton Big Lunch initiative should be financially supported in principle, subject to full project details being provided.

Where everybody matters

WiltsAgeec

Report to	South West Wiltshire Area Board
Date of Meeting	31/05/2017
Title of Report	Project funding report

Community Communications Project Funding:

South West Wiltshire Area Board ring-fenced **£5,000** on 23/3/16 to enable greater access to the internet for local communities through the improvement of local community communications (see item 13). At the time of writing this report there is **£4,181** remaining for this scheme

Applications received for consideration at this meeting are detailed below:

	Amount requested	Project details
Bowerchalke Parish Council	£635	Full details are <u>available here</u> . The applicant proposes to install a broadband connection and associated infrastructure to support digital inclusion sessions. Costs will cover setup costs and 12 months running costs.

No unpublished documents have been relied upon in the preparation of this report

Report Author:

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Supporting information for Wilton Town Council's application for Area Board finding of £3800.00, May 2017

An example of the proposed map/information boards with attached fingerpost signage and leaflet dispenser to be bought as part of the Wilton Town trail project.

It is intended to locate one board at the Wilton Shopping Village, one in the Market Square and hopefully, one at South St car park.

Examples of the associated leaflet will be available to view at the meeting.



Cost: £3800 per map/information board

Wiltshire Council

Where everybody matters

Report to	South West Wiltshire Area Board
Date of Meeting	31/05/2017
Title of Report	Community Area Grant funding

Purpose of the report:

To consider the applications for funding listed below

Applicant	Amount requested
Applicant: Wilton Town Council	
Project Title: Wilton Town Trail and map boards	00000 00
View full application	£3800.00
Applicant: Bowerchalke Village Hall	
Project Title: Bowerchalke Village Hall Renovations	
View full application	£5000.00
Applicant: Wilton Community Land Trust	
Project Title: Wilton Week and The Great Big Lunch	00500.00
View full application	£2500.00

1. Background

Area Boards have authority to approve Area Grants under powers delegated to them. Under the Scheme of Delegation Area Boards must adhere to the <u>Area Board</u> <u>Grants Guidance</u>

The funding criteria and application forms are available on the council's website.

2. Main Considerations

2.1. Councillors will need to be satisfied that funding awarded in the 2017/2018 year is made to projects that can realistically proceed within a year of it being awarded.

2.2. Councillors must ensure that the distribution of funding is in accordance with the Scheme of Delegation to Area Boards.

2.3. Councillors will need to be satisfied that the applications meet the Community Area Board grants criteria.

3. Environmental & Community Implications

Grant Funding will contribute to the continuance and/or improvement of cultural, social and community activity and wellbeing in the community area, the extent of which will be dependent upon the individual project.

4. Financial Implications

Financial provision had been made to cover this expenditure.

5. Legal Implications

There are no specific legal implications related to this report.

6. Human Resources Implications

There are no specific human resources implications related to this report.

7. Equality and Inclusion Implications

Community Area Boards must fully consider the equality impacts of their decisions in order to meet the Council's Public Sector Equality Duty.

Community Area Grants will give local community and voluntary groups, Town and Parish Council's equal opportunity to receive funding towards community based projects and schemes, where they meet the funding criteria.

8. Safeguarding Implications

The Area Board has ensured that the necessary policies and procedures are in place to safeguard children, young people and vulnerable adults.

9. Applications for consideration

Application ID	Applicant		Requested
<u>2282</u>	Wilton Town Council	Wilton Town Trail and map boards	£3800.00

Project Description:

Provision of mapboards and leaflets etc in connection with the implementation of the Wilton Town Trail a joint Town Council Business Chamber project

Input from Community Engagement Manager:

This application was deferred by South West Wiltshire Area Board on 8.3.17.

The applicant reports that national and international visitors to the town will be given clear directions to the facilities and attractions on offer including the new Town Trail Heritage trail. This will encourage them to stay in the town and use the shops/cafes/restaurants that are available so boosting local trade and the local economy.

South West Wiltshire Area Board previously provided Wilton & District Business Chamber with £14,000 for a two-year project delivery plan, which included £3,000 being ring-fenced for this project. This is a capital project and the applicant has committed to paying 50% of the project cost (including taking into account the £3,000 already provided by the Area Board through WDBC), meeting the community area grant criteria.

Proposal

That the Area Board determines the application.

Application ID	Applicant	Project Proposal	Requested
<u>2298</u>	0	Bowerchalke Village Hall Renovations	£5000.00

Project Description:

An extremely active Village Hall used regularly by all ages for numerous varied activities from christenings to funerals to care and support for the elderly educational talks birthday parties band practice film nights and restaurant nights pop-up pub nights charity events and more. The last building work was conducted in 1998. The hall has a flat roof at the rear with internal drains which leak internally and flood as well as causing damp. The project will negate the internal drains then re-coat the roof with a rubber solution to address flow direction and pooling. Larger replacement guttering will be added to cope with increased outflow. Other parts of the renovation relate to plumbing electrics damp repair and decoration.

Input from Community Engagement Manager:

The applicant reports that many local people will benefit from these works, in particular those who attend a day care centre and those that belong to the Friendship Clubs. Previous sessions have been cancelled due to flooding and the disabled larger toilet facilities are in need of repair and damp treatment.

This is a capital project and the applicant has committed to paying 50% of the project cost, including a £5,000 contribution from the Parish Council, meeting the community area grant criteria.

Proposal

That the Area Board determines the application.

Application ID	Applicant	Project Proposal	Requested
2.342		Wilton Week and The Great Big Lunch	£2500.00

Project Description:

Following a week of cramming Wilton full of Pop-up shops and local business promotions The Great Big Lunch will bring together the whole community for a day of sharing food conversation and information about their community with music and activities for all ages. A vast range of local groups have been invited to set up a stall at the event to publicise or to raise funds for their organisations. They include the W.I Thursday Lunch Club Wilton and Barford School Scouts Guides Cubs Bowls Club Rugby Club Golf Club and Youth Club. The aim is to encourage participation with positive activities across Wilton and its surrounding areas. The Big Lunch originated from The Eden Project and this year will also serve to celebrate the memory of Jo Cox as part of The Great Get Together. This event will mark the beginning of a focussed programme of activity in the area to reduce loneliness and encourage an integrated and motivated community.

Input from Community Engagement Manager:

The applicant reports that the event on the 18th June will provide a platform for all community groups to showcase what they have to offer; key to this is the relationship with Val O'Keefe, Health and Wellbeing Champion, to build the links with the older community and the rest of Wilton.

This is a revenue project and the applicant is making a ± 500 contribution towards the total project ($\pm 3,000$), which has been awarded by Wilton Town Council. The Area Board will, therefore, need to allocate funding from its Health and Wellbeing budget towards this project if they want to support it. The Health and Wellbeing Group gave their support in principle to this project at its meeting on 15.3.17.

Proposal

That the Area Board determines the application.

No unpublished documents have been relied upon in the preparation of this report

Report Author:

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