

AGENDA

Meeting: Health Select Committee

Place: Kennet Room - County Hall, Bythesea Road, Trowbridge, BA14 8JN

Date: Wednesday 18 January 2023

Time: 10.30 am

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Membership:

Cllr Johnny Kidney (Chairman)	Cllr Pip Ridout
Cllr Gordon King (Vice-Chairman)	Cllr Mike Sankey
Cllr Clare Cape	Cllr David Vigar
Cllr Mary Champion	Cllr Tony Pickernell
Cllr Caroline Corbin	Cllr David Bowler
Cllr Dr Monica Devendran	Cllr Pauline Church
Cllr Howard Greenman	

Substitutes:

Cllr Liz Alstrom	Cllr Tom Rounds
Cllr Trevor Carbin	Cllr Ian Thorn
Cllr Mel Jacob	Cllr Kelvin Nash
Cllr Ricky Rogers	

Stakeholders:

Irene Kohler	Healthwatch Wiltshire
Diane Gooch	Wiltshire Service Users Network (WSUN)
Joanne Burrows	South West Advocacy Network (SWAN)
Sue Denmark	Wiltshire Centre for Independent Living (CIL)

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The full constitution can be found at [this link](#).

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AGENDA

PART I

Items to be considered whilst the meeting is open to the public

1 **Apologies**

To receive any apologies or substitutions for the meeting.

2 **Minutes of the Previous Meeting** (*Pages 7 - 16*)

To approve and sign the minutes of the meeting held on 1 November 2022.

3 **Declarations of Interest**

To receive any declarations of disclosable interests or dispensations granted by the Standards Committee.

4 **Chairman's Announcements**

To note any announcements through the Chairman.

5 **Public Participation**

The Council welcomes contributions from members of the public.

Statements

If you would like to make a statement at this meeting on any item on this agenda, please register to do so at least 10 minutes prior to the meeting. Up to 3 speakers are permitted to speak for up to 3 minutes each on any agenda item. Please contact the officer named on the front of the agenda for any further clarification.

Questions

To receive any questions from members of the public or members of the Council received in accordance with the constitution.

Those wishing to ask questions are required to give notice of any such questions in writing to the officer named on the front of this agenda no later than **5pm on Wednesday 11 January 2023** in order to be guaranteed of a written response. In order to receive a verbal response questions must be submitted no later than **5pm on Friday 13 January 2023**. Please contact the officer named on the front of this agenda for further advice. Questions may be asked without notice if the Chairman decides that the matter is urgent.

Details of any questions received will be circulated to Committee members prior to the meeting and made available at the meeting and on the Council's website.

6 **Primary Care Workforce Challenges**

The Bath and North East Somerset, Swindon and Wiltshire Integrated Care Board (BSW ICB) will provide a presentation on the workforce challenges being

experienced in Wiltshire in the primary care sector. This follows a request from the Committee in September (minutes [here](#)), when it received a more general update on primary care provision.

7 Maternity Transformation Update

A presentation will be provided on the transformation of local maternity services. This follows a rapid scrutiny exercise undertaken jointly with Bath and North East Somerset Council and Swindon Borough Council in January 2020, reviewing proposals for the midwifery service redesign. Having endorsed the rapid scrutiny group's report ([here](#)), the Committee resolved to receive further updates on the implementation of the transformation programme.

8 Business Plan and Service Plan Update (Pages 17 - 32)

A report is provided updating on the business planning process for the council, the link to the activity of ageing and living well and whole life pathway and the progress against that activity. The Committee is asked to note the update and use the information contained to help focus future scrutiny activity.

9 Learning Disability Knowledge Cafe and Autism Partnership Update (Pages 33 - 38)

A report is provided on the work of the Learning Disabilities Knowledge café and the Autism Partnership as vital forums for ensuring that learning disabled people and autistic people are involved in shaping services that impact on their lives.

10 Health scrutiny inquiry session into patient flow through hospitals

A report will be provided proposing an approach for a committee inquiry session into the challenges being experienced with patient flow through hospitals used by Wiltshire residents.

11 BSW Integrated Care Strategy Update (Pages 39 - 40)

A presentation will be provided setting out the process for designing and adopting the BSW Integrated Care Strategy.

12 Forward Work Programme (Pages 41 - 44)

The Committee is invited to review its forward work programme in light of the decisions it has made throughout the meeting.

13 Urgent Items

To consider any other items of business that the Chairman agrees to consider as a matter of urgency.

14 Date of Next Meeting

To confirm the date of the next meeting as 10.30am on 28 February 2023.

PART II

Items during whose consideration it is recommended that the public should be excluded because of the likelihood that exempt information would be disclosed

None.

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Health Select Committee

MINUTES OF THE HEALTH SELECT COMMITTEE MEETING HELD ON 1 NOVEMBER 2022 AT KENNET ROOM - COUNTY HALL, BYTHESEA ROAD, TROWBRIDGE, BA14 8JN.

Present:

Cllr Johnny Kidney (Chairman), Cllr Gordon King (Vice-Chairman), Cllr Caroline Corbin, Cllr Dr Monica Devendran, Cllr Howard Greenman, Cllr Pip Ridout, Cllr Mike Sankey, Cllr David Vigar, Cllr Tony Pickernell, Cllr Tom Rounds (Substitute), Cllr David Bowler and Cllr Pauline Church

Also Present:

Cllr Ian Blair-Pilling, Cllr Jane Davies, Cllr Tony Jackson, and Cllr Dr Mark McClelland

66 **Apologies**

Apologies for absence were received from the following:

- Cllr Mary Champion (substituted by Cllr Tom Rounds)
- Cllr Pip Ridout (who attended the hybrid meeting virtually)
- Irene Kohler - Healthwatch Wiltshire
- Diane Gooch – Wiltshire Service Users Network
- Mary Reed – Wiltshire Centre for Independent Living

The chairman took the opportunity to thank Cllr Antonia Piazza for his time sitting on the committee and welcomed his replacement, Cllr Pauline Church.

He reported that the Wiltshire Centre for Independent Living had notified the committee that they wished for their Chief Executive Officer, Mary Reed, to replace Sue Denmark as their stakeholder representative. The chairman thanked Sue for her time with the committee and proposed that they appoint Mary Reed as her replacement.

Resolved

To replace Sue Denmark with Mary Reed as Wiltshire Centre for Independent Living's Stakeholder representative on Health Select Committee.

67 **Minutes of the Previous Meeting**

Resolved

To confirm the minutes of the meeting, held on 22 September 2022, as a true and correct record, subject to alterations noting the apologies of Cllr

Ridout and recording that Cllr Rounds was substituting for her rather than Cllr Sankey.

68 **Declarations of Interest**

There were no declarations of interest.

69 **Chairman's Announcements**

The chairman reported that the vice-chairman, Cllr Ridout and he had received a briefing on the council's plans to work with care providers to meet the demand for good quality home care. He explained that forming a new alliance called Wiltshire Living Well At Home would make the provision of care more geographically focussed, more flexible and provide the opportunity to pilot different concepts. It was noted that the three scrutiny members briefed were supportive of the proposal and would report their findings to Cabinet on 13 December.

The committee were informed that they could expect to receive proposals for their planned inquiry day, undertaking a system wide review of hospital and admissions discharges, at their January meeting.

Cllr Corbin arrived at 10:35am.

70 **Public Participation**

There was no public participation.

71 **Living My Life Alliance Update**

The Director of Procurement and Commissioning provided an update on the progress with the Living My Life Daytime and Evening Opportunities Alliance. She explained that this was a new approach to commissioning and procurement aimed at transforming how disabled young people, adults and older people access daytime and evenings activities. The director was pleased to report that since the Alliance started, on 1 August, 16 providers had been added to an open framework from which they could bid to provide activities. An evaluation would also take place later in the week to discuss options for how the number of providers could be increased.

The director then outlined plans intended to support the Alliance, including continuing to guide grant funded organisations to join the open framework. In addition, work would be carried out with providers to improve their understanding about the eligibility of potential customers. Since 1 August, two further customers had been assessed as having eligible needs and their care was now being purchased by the Alliance. The two new customers joined the 169 eligible customers already registered with the 16 providers, with more expected to follow.

During the discussion the following points were made:

- Members thanked the director for providing the report and praised the work being done to monitor service provision and expand the opportunities for eligible customers.
- The director noted that some smaller providers had faced challenges in accessing the external portal to register as a provider. However, she reassured the committee that the procurement team had produced a guide on how to access the portal and were also reviewing options for alternative portals. In addition, each provider was allocated a support officer to assist them with the registration process.
- In response to a question about why only three of the 31 grant funded luncheon clubs had joined the open framework, the director noted that a number of the clubs would be attending a review panel at the end of the week. She also highlighted that several clubs had sought alternative forms of funding.
- A question was asked about whether discretionary funding would be available to support luncheon clubs that provided services to older and vulnerable people but only had a limited number of, or no, eligible customers assessed under the Care Act. In response, the Cabinet Member for Adult Social Care, SEND, Transition and Inclusion noted that discretionary funding was available through Area Boards via the Older and Vulnerable People's Grant Scheme and reported that five clubs had already received support through that route. She underlined that it was the council's statutory responsibility to support people assessed under the Care Act and encouraged councillors to work with clubs in their areas to get assessments for potentially eligible customers.
- The Interim Head of Service for Whole Life Commissioning clarified that there were not specific criteria that clubs needed to meet in order to bid to join the open framework. However, clubs would be expected to provide costings, safeguarding assurances and outline the services that they could offer. The director added that, once on the framework, clubs could bid to provide services to customers that had been assessed under the Care Act.
- The Chairman of the Overview and Scrutiny Management Committee highlighted that he would welcome further scrutiny of the impact on lunch clubs that did not have eligible customers as well as greater IT assistance for clubs when applying to join the open framework.

Resolved

- 1. To note the update on the progress made towards, and plans of, the Living My Life Daytime and Evening Opportunities Alliance since its commencement on 1 August 2022.**
- 2. To receive a report at a future meeting providing a further update about the implementation of the Alliance.**

72 Winter Pressures Preparedness

The Director for Living and Aging Well gave an overview of the pressures on and risks to the delivery of health services through the Wiltshire Care Alliance. She noted that there was an urgent care improvement plan for Wiltshire, before providing further detail about specific areas of focus such as emergency departments and sourcing home care. She stated that the plan, built

collaboratively by partners across the Alliance, focussed on year-round pressures and delivering services in the community. The plan contained fewer projects than in previous years to concentrate efforts where the biggest impact could be made and to provide greater clarity about their anticipated impact. She then highlighted the eight key plans identified on page seven of the agenda supplement.

The Director of Locality Commissioning at the Bath and North East Somerset, Swindon and Wiltshire (BSW) Integrated Care Board (ICB) updated the committee about key risks to the delivery of plans. She reassured the members that the ICB reviewed the risks on a weekly basis, listing a range of mitigation measures in place, such as developing a resource base to combat the increased cost of locum staff.

The Director of Locality Commissioning at BSW ICB then gave details about three winter schemes being implemented across the whole of the integrated care system. A local control room had been set up in Chippenham to coordinate information and free up ambulance capacity by reducing the number of patients being admitted to hospital, when it was not the most appropriate setting for their treatment. She then went into further detail about areas identified by the Chief Executive of NHS England to build extra capacity, and improve resilience, through the winter, before outlining how these were being applied in Wiltshire. One example was an increased focus on falls, with greater emphasis on prevention and delivering a two-hour emergency response to these incidents.

During the conversation the following points were made:

- Members thanked the directors for the update and welcomed the schemes being put in place over the winter. Noting that many of the schemes were non-recurrent, they sought further clarity about the level of provision that would be in place post winter and for following winters.
- The Director for Living and Aging Well acknowledged that most schemes in the winter plan were non-recurrent but stated that options for extending the programmes would be considered if these initiatives proved to be successful. She explained that there was a large degree of autonomy about how the Better Care Fund could be spent, so reassured the committee that decisions for future years could be taken at a local level. She emphasised that a large proportion of current spending was used to purchase additional care home beds, and it was hoped that other measures, such as investment in funding for different patient pathways, would reduce this proportion over time.
- It was confirmed that virtual wards were due to be rolled out in Wiltshire, following similar initiatives in Bath and North East Somerset (BaNES) and Swindon. A virtual ward was a group of patients being treated at home but having daily conversations with multidisciplinary teams about their needs, which allowed them to be released from hospital earlier.
- Technology enabled care, such as the monitoring of vital statistics, was also a key area of innovation. Wiltshire Council's Transformation Programme had a specific workstream focusing on this issue and would develop a strategy in close collaboration with the ICB.

- The Director for Living and Aging Well noted that a number of care packages were being returned by providers through the Help to Live at Home Alliance. She reassured the committee that the council worked closely with providers around recruitment issues and that an increasing proportion of resources across Wiltshire was allocated to home care.
- Referring to an update received by the committee in July, from the South West Ambulance Service NHS Foundation Trust (SWASFT), which reported that the majority of patients visited to did not need to attend an emergency department, members queried the specific measures intended to address this issue within the winter plan. In response, the Director of Locality Commissioning noted that Medvivo, the out of hours call provider, had recently started taking category three and four ambulance calls. Early evidence had suggested that they had been successful at offering services to patients which meant that it was not necessary for them to be taken to hospital.
- Members spoke about the importance of educating the public about where to go for services and highlighted that the 111 website could be very useful when there were delays on the 'phone lines. It was also confirmed that Medvivo handled the 111 calls within BSW.
- Consideration was being given to the type of service provision in the additional 57 winter beds purchased at South Newton Hospital, as the hospital's current focus was on rehabilitation for adults with neurological conditions.
- The Director for Living and Aging Well was pleased to report the positive work being undertaken by the reablement service and that a single point of access for care co-ordination had been established.

Resolved

- 1. To note the comprehensive update from the Wiltshire Care Alliance, the significant challenges being experienced across the system in Wiltshire, and the preparations to meet the additional challenges faced this winter.**
- 2. To add an item to the forward work programme about the work underway with Medvivo to address pressures in the ambulance service.**

73 Wiltshire Neighbourhood Collaboratives

The Wiltshire Integrated Care Alliance Programme and Delivery Lead explained that neighbourhood collaboratives would be community led network of partners, including area boards, the voluntary sector, emergency services and health and care providers, aiming to shape the delivery of services at a local level. The neighbourhood collaboratives would be a community-based asset within the Integrated Care System (ICS), having the opportunity to share ideas and best practice through a forum called Wiltshire Collaborative. She stressed that neighbourhood collaboratives would have a clear structure but would not replicate the work of existing bodies or be performance managed.

She reported that the aim was to create three neighbourhood collaboratives by April 2023, by which time a clear governance framework would have been developed. A steering group would be set up, with task and finishing groups to oversee the implementation of the plans, with the intention of establishing a

neighbourhood collaborative in each of Wiltshire's 13 Primary Care Networks (PCNs) by 2024.

During the discussion points included:

- Members thanked the delivery lead for her very detailed presentation and welcomed the principle of local decision making.
- Questions were asked about how the implementation and success of the neighbourhood collaboratives would be measured and how they would improve patient care. In response, the delivery lead explained that she thought the neighbourhood collaboratives would help to identify gaps in existing service provision. Local communities would have the ability to interrogate and add to data provided nationally through a body called Optum. Wiltshire wide key performance indicators (KPIs) would be developed, and neighbourhood collaboratives would also be able to establish their own KPIs to measure how services were provided.
- She noted that plans for neighbourhood collaboratives built upon the learning from population health management pilot study conducted in Trowbridge, which had shared data to help identify that around 80 people in the area that were likely to become housebound within the next two years. As a result of the work being undertaken, preventative measures were now being put in place to try to mitigate the risk to those individuals
- The delivery lead reassured the committee that the collaboratives had been designed not to duplicate the work of existing organisations and stated that she would welcome information from members if there were areas in which duplication was taking place.
- Observations were made that many of the partners anticipated to take part in the 13 neighbourhood collaboratives were groups already attending Wiltshire's 18 Area Boards. It was suggested that there would be opportunity to share contacts and discuss how the Older and Vulnerable People Grant Scheme could be targeted most effectively. The delivery lead agreed that it would be productive to work closely with Area Boards and explained that PCNs would speak to local groups to establish stakeholders within each neighbourhood collaborative.
- It was also suggested that there would be scope for engagement with the Warminster Health and Wellbeing Social Care Forum.

Resolved

To note the comprehensive update on the implementation of the Wiltshire Neighbourhood Collaboratives, which have been established to enable partnership working to flourish across services, organisations and community groups within each Primary Care Network area.

74 Mental Health Community Service Framework

The Associate Director of Mental Health Transformation at BSW ICS provided an information briefing about the implementation of the Community Mental Health Framework (CMHF) across BSW as well as the impact of, and plans for, the service. She explained that a national framework had been put in place in

2019 designed to enable people to make positive decisions, make the best use of community service and adopt a preventative model to mental health.

During the briefing points included:

- CMHF focussed on improving services for specific groups of people, including those with eating disorders and complex emotional needs.
- A key aim was to get the input of people who had experienced mental health issues themselves when deciding how services were to be delivered in the community, including by gathering their views through Healthwatch Wiltshire. Close work was also being done with partners in the voluntary sector, Alabare and Rethink Mental Illness, to support patients throughout their treatment.
- Two new mental health practitioners had been employed to work directly with seven PCNs.
- Annual health checks were being introduced for people with severe mental illness, as they had a life expectancy between 10 and 20 years below the general population.
- A single point of access had been developed for Children and Adolescent Mental Health Services and work was going on to improve transition into adult services.
- The programme would be implemented at a BSW level by using the Thrive Strategy, which considered service provision across all aspects of mental health.
- A gap analysis was being undertaken to look at services for adults over the age of 65 with a functional mental illness.
- It was noted that there was a move away from a purely target based culture to one focusing more on the impact services to patients. This approach was reflected in a new outcomes framework, co-developed with the ICS covering Bristol, North Somerset and South Gloucestershire, which would consider both quantitative and qualitative data.
- It was emphasised that the services could be adapted to reflect findings about their impact.
- The CMHF was intended as a five-year transformation programme and, as such, additional transformation funding would cease at the end of 2023/24. However, the associate director was keen to stress that the programme should be seen in the context of longer-term changes to the delivery of mental health services in the community and emphasised that it would help to develop a BSW's system wide mental health strategy.

Resolved

To note the report and the overview of the community mental health framework across BSW, summarising the key features of the plan and the anticipated impact for service users, carers, and stakeholders.

75 **Learning Disabilities Mortality Review**

The Director for the Whole-life Pathway at Wiltshire Council gave a presentation about a recent review conducted into the reasons behind premature deaths amongst autistic people and people with learning disabilities. She explained that

there was a local area co-ordinator reporting into committees across BSW to develop a better understanding of how health inequalities could be reduced for people with learning disabilities or autism.

It was highlighted that Wiltshire Council undertook reviews upon the death of individuals with autism or learning disabilities to learn more about the underlying causes. Although this was not a statutory responsibility it was felt that these reviews could enhance understanding and drive service improvement. On average someone with a learning disability dies 22 years younger than the general population and, although these premature deaths are often related to an underlying condition, some deaths are avoidable. It was reported that the leading cause of avoidable premature death in BSW for this group was choking issues related to aspiration pneumonia. During the pandemic in 2021 the rate of excess deaths for people with learning disabilities was twice as high as in the general population, so work was going on to promote the vaccination programme.

During the discussion points included:

- Members thanked the director for the presentation.
- It was noted that people with learning disabilities often got diagnosed with dementia far earlier than the general population and were more likely to face challenges in maintaining a healthy bodyweight.
- The median age of people going through the review programme was 51-70.
- In response to a question about whether the lessons from the programme could be applied widely, the director reported that a multi-agency training programme was due to take place on 1 December for the voluntary and community sector.
- Amongst the lessons learnt was the need for people with a learning disability or autism to be given a medical passport when they were admitted into a hospital or rehabilitation units. Attempts were also made to ensure that patients were given packages of care that were not more restrictive than necessary.
- It was acknowledged that there were challenges in providing care, such a dental treatment or cancer screening, for patients with challenging behaviour. The approach of NHS England was to avoid going down the route of specialist services in favour of a model of providing reasonable adjustments. However, the director noted that a national debate was taking place to analyse the merits of different approaches.

Resolved

To note the work underway to improve care and reduce health inequalities for people with a learning disability and/or autism and to prevent people with those needs dying prematurely.

76 **Report of the Rapid Scrutiny Exercise: New Health Overview and Scrutiny Principles Document**

The chairman introduced a report from a rapid scrutiny exercise undertaken to review the new health scrutiny principles document published by the

Department for Health and Social Care, and to consider any implications for health scrutiny in Wiltshire. The chairman explained that whilst the new principals did not significantly change health scrutiny's essential role, it did provide the committee with an opportunity to review its approach in the context of the new integrated system. He highlighted that the group had agreed eight recommendations focusing on the monitoring of the implementation of the ICS alongside counterparts in BaNES and Swindon. There would be a stronger emphasis on information sharing with local colleagues, such as Healthwatch Wiltshire, and greater public engagement when undertaking scrutiny into specific topics.

During the discussion, members welcomed the improved connections with bodies scrutinising the NHS in different ways, including their counterparts in BaNES and Swindon. They also endorsed an approach placing a greater emphasis on public engagement, highlighting the issues regarding the PCN in Calne as an example of when this might have provided additional insight.

Resolved

To endorse and implement the following recommendations of the rapid scrutiny exercise, with updates being brought back to the committee when appropriate:

- 1. Health Select Committee (HSC) to receive regular updates on the transition to integration, including its implications in practice such as the funding, commissioning and delivery of services at both place-and system level.**
- 2. HSC to engage in the development of the system-level Integrated Care Strategy, placing particular focus on its objectives and how their delivery will be measured.**
- 3. HSC to receive the next Joint Strategic Needs Assessment (JSNA) being developed by Wiltshire's Health and Wellbeing Board and understand how it informs the design of services at place-level.**
- 4. The chairman and vice-chairman to meet with their counterparts from BaNES Council and Swindon Borough Councils to discuss the programme of integration and opportunities for collaboration.**
- 5. The chairman and vice-chairman to review and update the HSC work programme with Cabinet Members and directors at the meetings scheduled in November, ensuring appropriate balance between proactive scrutiny and retaining capacity for scrutiny of issues of concern to local communities, reporting back to Committee.**
- 6. The chairman and vice-chairman to meet with representatives from the Integrated Care System to discuss the following and report back to HSC:**
 - A) How they can work together to achieve efficient and effective HSC engagement on system-level proposals and performance.**
 - B) HSC's forward work programme, ensuring key integration milestones and system level service proposals are reflected;**
 - C) How the ICB will be proactive, open and transparent in sharing information, involving HSC early in contentious matters and building**

scrutiny into the cycle of planning, commissioning, delivery and evaluation;

D) How the ICB can engage in the HSC's performance data monitoring arrangements, currently being developed;

7. The chairman and vice-chairman to invite regular liaison with Healthwatch Wiltshire to discuss work priorities, share information and reports and ensure people's needs and experiences are reflected in HSC's work.

8. For future HSC task groups and rapid scrutiny exercises to consider direct engagement with residents via local patient participation groups (PPGs) and the Patient Advice and Liaison service (PALs) to ensure their voices are heard.

77 **Forward Work Programme**

The chairman invited suggestions from members about what they would like to see added to their forward work programme and noted that addition of an item regarding South West Ambulance Service Foundation Trust earlier in the meeting. He also reported that discussions would be held with the relevant cabinet members about the forward work plan.

Resolved

To note the forward work programme as amended at the meeting, including the addition of the item agreed regarding pressures on the ambulance service.

78 **Urgent Items**

There were no urgent items.

79 **Date of Next Meeting**

The date of the next meeting was confirmed as 18 January 2023, at 10:30am.

(Duration of meeting: 10.30 am - 12.45 pm)

The Officer who has produced these minutes is Matt Hitch
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Wiltshire Council

Health Select Committee

18 January 2023

Business Plan and Service Plan Update

Purpose of Report

1. To update on the business planning process for the council, the link to the activity of ageing and living well and whole life pathway and the progress against that activity.

Relevance to the Council's Business Plan

2. This report explains the use of the current Business Plan as a structure on which to plan the activity of ageing and living well and whole life pathway services.

Background

3. Following the election of a new Council and a new Cabinet in May 2021 work on an updated business plan for the Council started.
4. With input from the Council's Extended Leadership Team the Cabinet agreed a set of priorities and missions around which the new Business Plan would be constructed.
5. In December 2021 all services went through a process of identifying the main activities they would undertake, the impact they hope to make thought that activity and how both activity and impact connected with the proposed Business Plan missions. A deal of other information relating to that activity was also collected at this time. It included: how the activity would be measured, what the risks where and how the activity was dependent on other parts of the Council or its partners. All this information was then used to create the detail of the Council's draft Business Plan.
6. On 15 February 2022 the Full Council approved the new 10-year Business Plan including:

Four Priorities:

- Empowered People
- Resilient Society
- Thriving Economy
- Sustainable Environment

10 Missions – To make Wiltshire a place where...

- We get the best start in life
- We stay active
- We are safe
- We live well together
- We are involved and decisions are evidence based

- We have the right housing
- We have the right skills to prosper
- We have vibrant, well-connected communities
- We take responsibility for the environment
- We are on the path to carbon neutral

7. Over the summer Service Plans have been reviewed by the leadership team in each directorate to ensure that they remain relevant and to understand progress against the defined activities.

Main Considerations

8. Each of the activities below is drawn from either the Ageing and Living Well Service Plan or the Whole Life Pathway Service Plan. Each activity has a primary link to one of the Business Plan Missions. Each activity may also have a number of secondary links to any of the other nine missions.
9. The distribution of primary links in the two plans is as follows:
The vast majority of activities, have a primary link to either the live well together or ageing well and reablement. There is a much wider distribution showing that the work of the two directorates covers the full spectrum of the Council’s Business Plan.

Planned Activity and Updates

10. Below are outlined each of the planned activities and an update on progress.

Planned Activity	Work with our residents to promote independence to prevent and delay need.
Intended Impact	To support people to remain independent of formal services
Director	Emma Legg Main BP Link; We live Well Together
Updates	<p>iBCF continues to invest in the Prevention and Wellbeing Team which is evidencing savings and positive outcomes for people. A review of its first year has better identified what works well and so the team is refocusing its activity. Part of this will include asking other teams to engage earlier with the team, so they can better support teams work in a preventative way.</p> <p>We are also piloting a new way of approaching reviews of people with small, longer-term packages of support to identify opportunities to support people in a different way and reduce current dependence on formal care and support where possible. As part of this pilot brokerage will be engaging with VCS organisations to use their support to fulfil care and support plans rather than only look to registered care.</p> <p>In addition, we are developing a Prevention Strategy – we will be consulting on this in the New Year.</p>

Planned Activity	Develop the collaborative multi agency approach to good discharge planning and post-discharge support.
Intended Impact	People to leave hospital in a timely and safe way and local systems that deliver health and care services continue to work towards better integration and give people choice and control over how their health and care needs are met.
Director	Emma Legg Main BP Link Stay active
Updates	<p>The Discharge to Assess model commenced on 23 March 2020 and has streamlined discharge pathways in Wiltshire to enable discharge in a timely way. This has facilitated more effective joint working, especially at the interface between hospital and community. We are now clearer on our own and partners responsibilities and building on current collaborative working with countywide Wiltshire health and social care colleagues to meet agreed milestones and goals.</p> <p>We have a successful 7 days a week single point of contact for all hospital discharge referrals being triaged and supported by locality hubs.</p> <p>Collaborated joint working with the acute hospitals, Integrated Care Board and Wiltshire Health & Care through daily coordinated patient flow calls and joint health and social care triage hubs.</p> <p>We are working in collaboration with the voluntary sector, Avon and Wiltshire Mental Health Partnership NHS Trust (<i>AWP</i>) and providers. Commissioning service has been supportive in their role via the Provider Oversight team which is has been fundamental in supporting providers to navigate the pandemic and workforce issues.</p> <p>On the 1st of September 2022, we started a new approach for discharge to assess with test for change beds. Commissioners, Health and Social care practitioners and a specific provider are looking to build on ideas already being tested in South Wiltshire for developing services which give patients access to the appropriate reablement environment and multi-disciplinary expertise to enable a dignified and planned approach to the assessment of their future needs.</p> <p>100% of customers have a personalised care plan and which is reviewed at weekly D2A multi-disciplinary team meeting.</p> <p>We have a well-established Wiltshire Locality Operational Response Group, multi-agency senior leadership that meets twice a week to discuss discharge flow and address issues causing delays in the system.</p>

Planned Activity	Championing a more integrated approach to ensure that the right mix of services are available in the right place at the right time and prioritising prevention.
Intended Impact	Support people to live and age well in their own homes for longer. Enable people to live and age well and provide support for maintaining independent living for as long as possible and able to get the right quality care and support at the right time and right place.
Director	Emma Legg Main BP Link Live well together

<p>Updates</p>	<p>We created a new Prevention and wellbeing team that became operational on the 8th of November 2021 and has been successful in preventing the need for formal support. This service has been a true testament to building strong relationships with people in our community and to enable them to find their own solutions and flourish within their communities.</p> <p>Rapid Response service commenced March 2021 with an integrated Health and Social care approach. The service has provided many of the Key National standards for 2-hour response, 8-8pm, 7 days per week. Data submitted to CSDS demonstrated the achievement of the 2-hour Standard. The NHS Long Term Plan (LTP) (NHSE, 2019) outlined priorities for the next ten years which included a priority for an urgent response service in the community for people with long term conditions or complex health needs, nearing a crisis, to be supported to remain at home. There is a national requirement for counties to provide urgent community response services by 2024. Wiltshire received extra funding to begin working towards the new standards rolled out in April 2021 which provided the resource to initiate a Rapid Response service.</p> <p>It is important to recognise that health services cannot operate in isolation. Rapid intervention to avoid social hospital admissions is not possible without sufficient community support available from health and social care and the wider workforce to ensure that the community remains a safe environment for those with additional needs. Frontline staff, such as clinicians and social workers, have been crucial to delivering integrated care as the key point of contact between individuals, carers, families, services, and systems. Our approach has encouraged integrated working with colleagues from other services, professional groups and organisations, there needs to be a shift away from working in separate 'silos' and towards creating effective inter-professional relationships based on collaboration and teamwork.</p> <p>The challenges facing the local authority which impact on community services are a priority as there is focus on an aging population with increased health needs, a growing need for care closer to home, a focus on timely intervention and prevention for patients, carers and a rise in people with increasing complex levels of health and social care requirements.</p> <p>Ageing Well Board meetings are held monthly and facilitate conversations to further improve an integrated approach to how we deliver services to the people of Wiltshire and Leaders drive accountability and provide the necessary resources and environment to create positive working conditions.</p> <p>Across Living and Ageing well services there is buy-in and collaboration from across services and partner organisations for an integrated approach. Community services are essential to support the movement of care closer to people's homes. The services have enabled integration to strengthen and streamline services to reduce fragmentation supporting people to live as well as possible, centred on the outcomes important to them.</p>
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Planned Activity	Develop a model to support people with mental health conditions to recover and live successfully in their local communities.		
Intended Impact	People with mental health conditions have improved chances to recover and live successfully in their local communities.		
Director	Emma Legg	Main BP Link	Live well together
Updates	<p>March 2021 saw the development of an intensive enablement model and pathway, similar to our existing reablement team focusing on maximising independence for people with complex needs. The principal aim of this service is to build upon an Individuals strengths and resilience. Solutions to problems are determined in collaboration with people, and the importance of minimising dependence on services, and encouraging independence and citizenship. The model provides time-limited care in a person's own home, enabling support for people with mental health needs, learning disability and/or autism who are at risk of hospital admission and/or for people being discharged from acute psychiatric hospital and/or rehab. This service provides person centred input at first sign of crisis to prevent escalation.</p> <p>By providing enablement support for younger people at the right time, we will make a significant preventative impact and enable them to transition more smoothly into adulthood.</p> <p>This service has now been in place for 18 months and is highly regarded by social care and health professionals and by the individuals who use the service. The largest referral source is the Wiltshire Council Mental Health and Learning disability and Autism service.</p> <p>The service is now connected into the community mental health transformation workstream and mobilisation to ensure they are part of the holistic support offer which will be centred around PCN geographical footprints. Over the past eighteen months the service has delivered cashable savings through a reduction in individual care needs, where appropriate alongside costs avoided through avoidance of hospital admissions and prevention of crisis.</p> <p>Reduce unplanned readmissions to mental health services within 30 days of a mental health patient discharge. With intervention there have also been fewer placement breakdowns, fewer instances of notice being served on a placement/package and fewer changes of provider.</p> <p>The Intensive Enablement Service supports the Wiltshire Locality Better Care Plan in its aim to maximise the opportunities for people to remain independently well at home, and, in the event of hospital admission, return home for recuperation and rehabilitation as soon as possible.</p>		

Planned Activity	Embed Transitional Safeguarding across ASC MASH and ASC broadly		
Intended Impact	Providing more effective and fluid support for young people as they enter adulthood not only supports their safety and wellbeing but may also enable later cost avoidance by reducing the need for specialist and statutory services in the longer term		
Director	Emma Legg	Main BP Link	Safe

<p>Updates</p>	<p>A Transitional Safeguarding Coordinator was recruited in late 2021 and the Pilot/proof of concept commenced in January 2022. It is scheduled to run until March 2023.</p> <p>Prior to the pilot commencing, it was identified that there were elements of good practice related to the Transitional Safeguarding movement in Wiltshire. However, system partners collectively agreed that a refreshed multi-agency approach to safeguarding for adolescents up to early adulthood should be explored, recognising that this is an agenda where outcomes could be improved, and new ways of working developed that will lead to improved effectiveness and efficiency in the services we deliver. We are hoping that ultimately there will be better outcomes for some of our most vulnerable young adults. System-wide transformation and engagement has been required to develop and implement this approach. The project has sought to explore the premise that better outcomes and improved ways of working can be achieved through a system-wide programme of culture, practice and system change rather than a structural re-organisation.</p> <p>A multi-agency project group designed the pilot activity and identified how this could be tested and evaluated. The multi-agency approach has enabled partners to develop a better mutual understanding, has created greater trust and a commitment to collaboration. Creative Solutions Boards have been taking place on a regular basis throughout the pilot and are opportunity for partners to collective focus on particular cases. This helps identify blocks and challenges as well as opportunities and solutions to help the young person move forward. The pilot has increased knowledge and understanding of what Transitional Safeguarding is for practitioners and managers across the system as well as the issues facing the cohort it is aimed at.</p> <p>What still needs development is making the concept real in terms of practice with young people. Whilst practitioners understand the concept, few are able to say how their practice has changed in relation to it. Work is also needed to build young people’s trust in the system. The identified cohort often have really good relationships with individual practitioners but are often reliant on these people. We need to develop how these young people can feel confident approaching any agency in the system as required. It has been identified that as a system we need to intervene at an earlier stage and underline our practice with trauma informed approaches. As a system we need to move away from a clinical/diagnosis model and instead appreciate the contextual complexity of the individual’s situation and look at holistic approaches to supporting them. This requires greater flexibility in how we design services and provide input. We also need to find ways to release capacity across the system to allow this.</p> <p>In terms of next steps, a Momentum event will be held in January with young people, practitioners, and system leaders from across the partnership come together to share what has been learnt so far. The event will also explore how the above-mentioned issues can be addressed. The event will be co-facilitated with the University of Sussex Innovate Project and will have input from Research in Practice with the aim of developing a set of recommendations which will be included within the final report for the Project and Proof-of-Concept. A final</p>
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	report is due to be considered by the FACT Operational and Executive Boards during February 2023.
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Planned Activity	Improve support during transition from Children to Adults
Intended Impact	Young adults get the correct support straight away. No drop in support between children and adults services.
Director	Emma Legg Main BP Link Live well together
Updates	<p>The growing up and moving on guide has been co-produced with young people to ensure that young adults moving are doing so safely.</p> <p>There is a monthly transitions meeting which is attended by adult social care, children's social care, SEND, Whole Life Commissioning and the Community Team for People with Learning Disabilities (Health) service.</p> <p>Transitions is a priority in the SEND strategy and there is now effective partnership working between SEND, adult social care and children's social care. Discussions are ongoing with the ICB and health providers to ensure that safe transitions happen for all young adults with ongoing health and social care needs.</p> <p>A transitions service is being developed which will work with people aged 18-25 who have eligible care act needs to support young adults into adulthood.</p>

Planned Activity	Develop a support offer alongside children's services for parents and carers who have MH/LD/ASD
Intended Impact	Children are safer, more families are able to stay together.
Director	Emma Legg Main BP Link Live well together
Updates	<p>The joint policy for working with parents who have learning disabilities/autism is being revised and updated. This will ensure that there is much more joined working between adults and children's services.</p> <p>In regard to Mental Health, work has been undertaken with colleagues in Children's Services to identify what support and input they would find helpful in relation to the area of mental health and specifically for parents and carers who have mental health issues. This included:</p> <ul style="list-style-type: none"> • A point of contact to clarify if a parent or carer of a young person is in receipt of Secondary Mental Health Service under the NHS or is known to Adult Social Care (The MH Social Care Duty workers can do this as we have access to Adult LAS and AWP's RIO database). • A point of contact to offer advice and guidance around a mental health query whether this is related to the young person themselves or a parent/carer. • Involvement in particular cases (joint working) if this seems appropriate.

	<ul style="list-style-type: none"> • Joint working young people from the age of 16 who are presenting with mental health or higher-level emotional issues. • A virtual Drop-in Service where colleagues can discuss cases. • Providing shadowing opportunities for ASYEs and new staff. <p>With the exception of the last two all of the above has been implemented to some degree though how much this support is being accessed needs reviewing. Adult Services will also be happy to offer shadowing experiences but again how regularly this is occurring needs checking. The Drop-ins were happening but then stopped because of staff vacancies as team capacity was an issue. It is hoped we can recommence the Drop-ins in early 2023.</p>
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Planned Activity	Maximise independence for individuals with a learning disability and or complex needs developing an enabling and empowering model		
Intended Impact	Maximise independence for individuals with a learning disability and or complex needs		
Director	Emma Legg	Main BP Link	Stay active
Updates	<p>The Outreach and Enablement service is now well established and provides enabling support to individuals with a learning disability and other complex needs. The principal aim of the service is to build upon an individual's strengths, knowledge and understanding of life skills to enrich their independence within their own lives. Working with the individual, the family learning team and allocated social workers the model provides time limited support in which customers accessing the service are supported to achieve outcomes on their pathway towards independent living.</p> <p>The service has been in place since April 2021 and has been working with a number of individuals to achieve their outcomes.</p> <p>The service works with people and carers/families to identify goals and design creative enablement support plans to achieve them. Over the past year the service has connected with local resources and facilities around Wiltshire and has developed a menu of options for individuals.</p> <p>The service has also formed close links with professionals from social care, health and private providers and contributes to multi agency risk assessments.</p>		

Planned Activity	Support adults with learning disabilities into employment, working with employers to encourage supported opportunities.		
Intended Impact	Support adults with learning disabilities into employment and greater independence.		
Director	Emma Legg	Main BP Link	The right skills
Updates	Three adults with a learning disability are working in the Wiltshire Council registration service as Ushers. Discussions with other services within the council about people with learning disabilities and/or autism being employed are ongoing.		

	<p>A post-16 employment board has been set up to focus on how people are being supported to go into paid work.</p> <p>The Head of Service for LDAS attends the Wiltshire Employment Support Team and Community Connecting Service POG. This will help consolidate the existing interdepartmental working that is already happening within Wiltshire Council in particular Wiltshire Employment Support Team and Community Connecting.</p> <p>Employment is a focus of the SEND strategy and is part of targeted work for increasing the numbers of people with learning disabilities into paid employment.</p> <p>Employment status and opportunities for people to access paid work are a key focus of CAA and discussed in QAM. Work is ongoing to support people who are currently volunteering to move into paid work.</p>
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Planned Activity	Increase choice and personalisation for people with learning disabilities, mental health needs and autism, including promoting the use of personal budgets.		
Intended Impact	Increase choice and personalisation for people with learning disabilities, mental health needs and autism.		
Director	Emma Legg	Main BP Link	Involved in decisions
Updates	<p>A recent uplift has been given to direct payments; it is hoped that this will help attract more personal assistants due to them being paid in parity with other roles.</p> <p>The use of direct payments is explored as the first option where people have been assessed as a requiring a package of care to meet their eligible Care Act needs. There has been a slight increase in the number of people who are receiving a direct payment in LDAS from 154 on 31/03/2022 to 195 on 31/10/2022.</p> <p>Whole Life Commissioning (WLC) are liaising with Independent Service Fund (ISF) providers to increase choice for people. Meetings were held between WLC, ISF providers, adult social care and partnership organisations to promote the use of ISF and develop the personalisation offer for people in Wiltshire.</p>		

Planned Activity	Enhancing domiciliary care provision through development of Wiltshire Support at Home and working in partnerships with providers.		
Intended Impact	<p>People in our community will have the right support at the right time.</p> <p>Reduction of unnecessary hospital admissions.</p> <p>People will have the opportunity to rehabilitate.</p> <p>Providers will have the opportunity to work with the Council to develop common strategies and shared values.</p>		
Director	Emma Legg	Main BP Link	Ageing Well and Reablement

<p>Updates</p>	<p>December 2021 saw the launch of Wiltshire Support at Home, the model reflects that adopted by the current reablement service focusing in Pathway 1 hospital discharges and urgent care rapid response to prevent hospital admission. This service is provided pre care act and works to promote independence and prevent the need for the provision of long-term care, the service is deemed as short term between 4 and 6 weeks.</p> <p>Milestones achieved:</p> <ul style="list-style-type: none"> • Recruitment of Manager and other Service Leads – April 2022 • Recruitment of 20% workforce – April 2022 • Recruitment of 40% workforce – November 2022 • Registration of the service with CQC – November 2022 • Monthly dashboard reporting performance – November 2022 • Use of block providers for contingency – September 2022 <p>Risks:</p> <ol style="list-style-type: none"> 1. Recruitment has been challenging over the last 10 months since launch which reflects the national position. The milestones have been adjusted to reflect this. 2. Retention – there has been some turnover of staff, the reasons of leaving include uncertainty in the T&Cs and the role not being what was anticipated. 3. Block providers – the three providers commissioned have not been able to sustain this contact and one provider has prematurely terminated the contract and a second has reduced the hours provided. 4. Maintaining a service provision for customers after hospital discharge whilst bridging for a long-term care provider. <p>Current and Planning Mitigations:</p> <ol style="list-style-type: none"> 1. Increased resource allocated and activity for recruitment including use of leaflet drop and funded social media boosting. Care Navigator post has been successfully recruited to with a start date at the end of November focus on increasing activity in relation to recruitment of new staff for support roles. 2. Working with current staff to inform and assure them around the role and the concerns about T&Cs. Increased use of leavers form to understand reasons for staff moving on. Improved communications on the role including “Day in the life videos” and updates on the landing page. Improved induction programme. 3. Decision made not to recommission the block provision but to focus on launching WSAH in the South of the county, Team Leader appointed in November to focus on recruitment and build on service in Salisbury. 4. An escalation process has been developed for cases waiting a long-term service. Data is monitored weekly to understand the effects on the flow. <p>Summary: Demand for the service is high and only a small percentage of referrals made are accepted due to the delays in recruitment and retention which have directly affected the planned capacity. All accepted referrals continue to be met within the 3 hour response time. Demands on the</p>
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	service dues to ongoing waits for transfer of care remain substantial. 20% of the customer's supported have a stay exceeding 6 weeks.
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Planned Activity	Support people to regain skills and confidence and make use of technological, innovative solutions		
Intended Impact	People will be empowered to be more independent through the use of assistive technology. Less demand on formal commissioned service		
Director	Emma Legg	Main BP Link	Ageing Well and Reablement
Updates	<p>November 2022 saw sign off of the TEC Strategy business case through the Transformation Operational Board, identifying the plan to utilise external consultants TEC Services Association (TSA) to create a vision statement and strategy for the positioning of enabling technology as an all age approach within social care, as well as supporting stakeholder objectives across health and housing, and collaborating where possible and aligned to wider programme objectives. The funding for this proposal is still waiting to be approved.</p> <p>Milestones achieved:</p> <ul style="list-style-type: none"> • Recruitment of 2 x TEC Advisors (Senior Commission) – April/ August 2022 • Secured external funding for pilot £75k – Extra Care Housing (ECH) Led by the Housing Learning and Improvement Network (Housing LIN¹), the TEC Services Association (TSA) and funded by the Dunhill Medical Trust – July 2022 • Retrofit; Analogue to digital of pilot ECH complete – October 2022 (partnership with Housing 21, Appello, National Care Forum) • External meetings held with numerous local authorities to establish best practice - on going. • Mapping internal processes to develop baseline understanding of TEC and its current impact across directorates – On going • Recruitment of OT (TEC proof of concept pilot) – November 2022 <p>Risks:</p> <ol style="list-style-type: none"> 1. Recruitment has been challenging over the 8 months to secure a TEC Commissioning Manager which may impact on TEC transformation timeline. 2. Cultural change within the staff groups. 3. Project success is limited due to lack of understanding and awareness of TEC enabled care: internally and externally. 4. TEC may not deliver the savings anticipated. 5. TEC is part of the current TCES contract which is due to be reprocured in March 2024. TEC offer will need to be considered as part of this contract. 6. Missed funding opportunities due to inefficiency of collaboration across digital and TEC transformation. <p>Current and Planning Mitigations:</p> <ol style="list-style-type: none"> 1. Job specification review and advert relaunched. Increased promotional activity for recruitment to include TEC networks and regional forums. 		

	<ol style="list-style-type: none"> 2. Secure funding for proof-of-concept pilots collaborating with operational teams across directorates. Engage staff in a survey to establish current level of TEC understanding and promotion to service users. 3. Establish a TEC Advisory Board (Launch December 2022) to include staff across housing, digital transformation, social care and health (internal and external group members). Develop a Resident TEC survey and engagement through Wiltshire Centre Independent Living (WCIL). 4. Mapping to identify current provision, how the end-to-end commissioned service is delivering support, the technology used, how the service interacts with service users, any intelligence around outcomes achieved; understanding current referral pathway to identify where outcomes and expected impact could be built into the referral process and how benefits could be tracked within the social care system. In addition, meet with South West Directors of Adult Social Services Space (SW ADASS) to collaborate on TEC benefit realisation. 5. Develop a TEC position statement, in advance of the TEC strategy to enable improved understanding and confidence in the new service stream. <p>Summary: TEC is in its infancy in developing a new service stream with all efforts identifying our current base level and proof of concept pilots. The response to COVID19 did encourage individuals to embrace various technology care solutions to provide alternative and additional support when face-to-face meetings posed a risk.</p> <p>At a time of immense pressure on councils and health, TEC services can be propelled and not only make a huge difference to people's lives, support service delivery but also deliver costs avoidance, evidenced through neighbouring local authorities. In last year's adult social care reform white paper, funding was allocated to drive great adoption of technology and accelerate the adoption of TEC and using the full potential to support people's lives and aspirations.</p> <p>The ASC transformation programme offers TEC connectivity across workstreams to embed and encourage new ways of working for staff, health services, family, friends and carers and the service user.</p>
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Planned Activity	Increase prevention and tenancy sustainment work, enhance and increase the use of the DFG budget and review the allocations policy		
Intended Impact	Help people get and keep a sustainable home, reduce homelessness, help people stay at home for longer and improve private sector properties through advice and enforcement and become more energy efficient		
Director	Emma Legg		The right housing

Updates

Increase prevention and tenancy sustainment work

This year, to improve our services to customers we carried out a full restructure of the team, creating a housing solution team who provide a single point of contact to meet the needs of our customers. This restructure has created new ways of working which is currently being embedded but the team are also trying to manage a significant increase in demands.

We dealt with a 32% increase in homeless assessments during 21/22 and this figure continues to rise into 22/23. Across the south west they saw an increase of around 15% so we are above the average. To assist with these increasing demands we have recruited an additional three Tenancy Sustainment Officers and two housing solution caseworkers.

A report has been produced and presented to Environment Select Committee on the homeless prevention strategy action plan. Of the 49 actions, we completed 40, 6 had been started and 3 were still outstanding. The report was well received and noted many additional actions that were taken forward during the last couple of years to assist with the prevention of homelessness and response to Covid.

Enhance and increase the use of the DFG budget

We continue to work with adult social care to maximise all opportunities to increase the use of the DFG budget. We have this year completed a full refurbishment of three flats at Kingsbury Square homeless hostel ensuring they are fully adapted and meet the needs of our disabled customers who are homeless. This has been a huge help in assisting with hospital discharge for patients who were not able to return home due to the accommodation not being suitable.

We have also recently purchased a bespoke 3 bed bungalow which will need to be fully adapted to meet the needs of a complex case in which no suitable alternative accommodation is available within existing stock. This will then meet the long term needs of this applicant and help them to live independently within the community for as long as possible.

To assist with the increasing demands for disabled adaptations we have recruited additional housing occupational therapist assistants and a full-time administrator.

Review the allocation policy

A full review of the council adopted allocation policy will take place during 2023. However, we are in the process of taking a paper to cabinet on January 2023 with some minor amendments in advance of this full review to improve our offer to care leavers as their corporate parent and also to improve the offer to tenants who are in large properties who wish to downsize due to the cost of living.

The cabinet paper for January 2023 is currently being drafted and conversations have taken place with CLT. The full review will commence in the new year.

Improve private sector properties through advice and enforcement

The enforcement of housing standards is undertaken by the Private Sector Housing team. We provide both reactive advice and enforcement action as necessary. The aim being to ensure properties are free from hazards which could be a risk to the safety of the occupier or any visitors.

We are continuing to scope ways of proactively identifying damp and mould and other poor housing standards in the private rented sector with the aim of remedying hazards. Whilst we have to date not directly taken a proactive approach to tackle damp and mould, it is clear that improvements to the energy efficiency of a property reduces the likelihood of damp and mould.

We appointed an officer to work on improving Energy standards in the private sector. An initiative has been undertaken in South West Wiltshire to identify private rented properties with a low Energy Performance Certificate (EPC) of F & G which by law should not be let out and also those properties without an EPC.

Deborah Courtney has been leading on this initiative along with the work she undertakes with enforcing poor housing conditions. We have identified 50+ properties to date since November 2021 that did not have EPC's and has negotiated with the landlords for these to be completed and has also educated the landlords in their legal requirement. In addition, a landlord with a large portfolio in the south of England was identified as having 2 flats in the area with inadequate heating and insulation. Following discussions, the landlord agreed to spend £8,000 to improve the properties to make them more habitable for the tenants.

We will continue to respond to complaints about damp and mould in private rented housing and encourage increased reporting. The complaints we receive come from the tenants and third parties such as health visitors, social workers, housing advice services, adult social care, children services and on some occasion's landlords and their agents. We will continue to work with these groups to ensure that poor housing issues are identified and raised as complaints to the service.

We aim to ensure an increase in proactive work and we will investigate and use the benefit information available to us to identify the most vulnerable group, under 14's whose families are dependent on benefits, who live in private rented housing. This will increase our understanding of the prevalence of the hazard amongst this group in Wiltshire and increase the prospect of improving housing conditions earlier where we identify damp and mould issues.

Safeguarding Implications

11. A number of the planned activities have a direct impact on the Council's ability to provide safeguarding services.

Public Health Implications

12. Public Health implications only arise if changes to the planned activity are made.

Procurement Implications

13. Procurement implications only arise if changes to the planned activity are made.

Equalities Impact of the Proposal

14. All planned activity is given due care and attention to issues of equality and impact. An Equality Impact Assessment was completed for the Business Plan as a whole.

Environmental and Climate Change Considerations

15. A number of the planned activities have an impact on the Council's ability to impact environmental and climate change.

Workforce Implications

16. Workforce implications only arise if changes to the planned activity are made.

Risks that may arise if the proposed decision is taken and actions that will be taken to manage these risks

17. If there is a decision to change the planned activity of either directorate the risk implication would be taken into consideration when altering the plan and the risk service-based risk registers updated during the normal quarterly update cycle.

Financial Implications

18. Any change to planned activity would have to be discussed with the Finance Team to ensure it could be met within the current budgetary envelope or planned budget development.

Legal Implications

19. The legal implications of any change to planned activity, particularly any change to the delivery of statutory services, would have to be carefully considered and a decision made only when informed by the correct legal opinion.

20. The Committee is asked to note the update and make use of the information contained to help focus future deep scrutiny activity.

Emma Legg, Director of Ageing and Living Well and Interim Director of Whole Life Pathway

January 2023

Background Papers

[Wiltshire Council's Business Plan 2022-2032](#)

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Wiltshire Council

Health Select

18 January 2023

Learning Disabilities Knowledge Café and Autism Partnership update

Purpose of Report

1. The Learning Disabilities Knowledge café and the Autism Partnership are both vital forums for ensuring that learning disabled people and autistic people are involved in shaping services that impact on their lives. This report provides an update on the key work that is being completed.

Relevance to the Council's Business Plan

2. The Learning Disabilities Knowledge Café and Autism Partnership ensure that the council is improving the social mobility and tackling inequalities for learning disabled and autistic people. This is a guiding theme of the Wiltshire Council business plan.

Learning Disabilities Knowledge Café background

3. The Learning Disabilities Knowledge Café was established in 2019. It replaced the learning disabilities partnership board which had become professionally focussed and was not inclusive of learning-disabled people.
4. Knowledge cafés move away from traditional partnership meetings to allow more free flowing conversation. It is co-facilitated by learning disabled people and ensures that views of all people are captured. Wiltshire Centre for Independent living host the cafés.

Main Considerations

5. During 2020 and 2021 the knowledge café stopped as a result of Covid-19. In 2022 face-to-face meetings started again. There are face-to-face meetings in Devizes and Warminster.
6. The café focused on a series of topics and had some notable successes. The café worked alongside Wiltshire Health and Care, the Integrated Care Board and Wiltshire council to develop a hospital passport. A hospital passport provides information about people's health needs, medication, communication and any reasonable adjustments that need to be made if someone is admitted to hospital. It's co-produced by the individual with learning disabilities and is a vital for ensuring that people are supported properly during their stay in hospital.
7. The knowledge café has worked with local businesses within Wiltshire to improve their accessibility and inclusivity for learning disabled people. This work is essential for empowering learning-disabled people to lead independent, fulfilled lives.

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8. Members of the knowledge café delivered training for personal assistants and bus drivers in Wiltshire. The training was really well received and helped improve the knowledge and understanding of the staff. Training that is delivered by learning disabled people helps improve inclusivity.
9. The knowledge café has identified several priorities for 2023. The knowledge café is continuing to work alongside Health and social care organisations to improve the health of learning-disabled people. Sadly, the life expectancy of learning-disabled people is significantly lower than the general population with 6 out of 10 people dying before the age of 65. For the general population the statistic is 1 out of 10 [Learning from Lives and Deaths - people with a learning disability and autistic people \(LeDeR\) \(kcl.ac.uk\)](#).
10. Improving access to work and employment for learning disabled people is a key priority. Currently on 5.3% of learning-disabled people aged 16 and over in England are in paid employment. This compares to 75.6 % of the general population [Unemployment - Office for National Statistics \(ons.gov.uk\)](#).
11. In addition work is underway on the “living my life” initiative which focuses on what learning-disabled people want in order to be independent. Choice and control is a strong topic of conversation and is something that the café is passionate about.
12. Ensuring that learning disabled people are able to access their communities. Part of this work is highlighting the positive impact that learning disabled people can have in communities.

Autism Partnership Background

13. The Autism Partnership was relaunched on 29th November 2022. This followed a hiatus during which time the partnership was redeveloped. This is to make it more inclusive and representative of the views of autistic people.
14. The aims of the partnership are:
 - Make sure that the views of autistic people in Wiltshire are represented
 - Work with organisations to improve the lives of autistic people
 - Ensure that the goals in the autism strategy are met
 - Work alongside existing forums to improve the lives of autistic people
15. The partnership has two co-chairs one of whom is autistic (Alice McSweeney) and the other chair is Dan Wilkins who is employed by Wiltshire Council as the Head of Learning Disabilities and Autism Service.
16. The partnership is attended by autistic people, carers and partnership organisations. Participants are given the option of attending in person or joining online via Microsoft teams.
17. The partnership has been tasked with co-producing the implementation plan for the autism strategy which was presented to the health and wellbeing board on 7th September 2022.

[Type here]

Autism strategy

18. The Wiltshire Autism strategy aims to improve the lives of autistic people. There are six priorities which mirror the priorities in the national Autism strategy:

- Improve the health of autistic people and reduce health inequalities
- Support children and young people with autism to play, learn and move into adult life
- Support young people and adults to access work
- Support autistic people to live independently in the community wherever possible
- Raise awareness of autism and make Wiltshire an inclusive place to love, learn and work
- Improve support for autistic people in the criminal justice system

19. The strategy was presented to the autism partnership on 29th November 2022. Agreement was made that an implementation plan will be developed in the first three months of 2023. At the meetings two priorities will be discussed. The time frame is:

January 2023

- Support autistic people to live independently in the community wherever possible
- Improve the health of autistic people and reduce health inequalities

February 2023

- Support children and young people with autism to play, learn and move into adult life
- Raise awareness of autism and make Wiltshire an inclusive place to love, learn and work

March 2023

- Support autistic people to live independently in the community wherever possible
- Improve support for autistic people in the criminal justice system

April 2023

- Agree the strategy implementation plan and return to Health Select Committee for sign off in May 2023

Safeguarding Implications

20. There are no safeguarding implications as part of the work that the The Learning Disabilities Knowledge café and the Autism Partnership undertake.

Public Health Implications

21. The Learning Disabilities Knowledge café and the Autism Partnership both work to improve the health of autistic and learning-disabled people. The forums provide feedback to the learning disabilities and autism programme board and contribute to learning events.

Procurement Implications

[Type here]

22. There are not currently any procurement implications as part of the work that is being completed by the Learning Disabilities Knowledge café and the Autism Partnership.

Equalities Impact of the Proposal

23. An Equality Impact assessments (EqIA) is not currently required but one will be completed if needed.

Environmental and Climate Change Considerations

24. There are not currently any environmental or climate change implications as part of the work that is being completed by the Learning Disabilities Knowledge café and the Autism Partnership.

Workforce Implications

25. There are not currently any workforce implications from the work that is being completed by the Learning Disabilities Knowledge café and the Autism Partnership.

Risks that may arise if the proposed decision and related work is not taken

26. There is not a decision required as part of this paper

Risks that may arise if the proposed decision is taken and actions that will be taken to manage these risks

27. There are no decisions required as part of this paper.

Financial Implications

28. There are no financial implications as a result of this paper.

Legal Implications

29. There are no legal implications as part of this paper.

Options Considered

30. There are no options as part of this paper.

Proposals

31. This report provides an update on the Learning disabilities Knowledge Café and the Autism Partnership. These forums are vital in ensuring that learning disabled and autistic people are actively involved in service development.

32. The autism strategy implementation plan is being co-produced and an update will be presented at the May 2023 Health Select Committee.

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Lead Director Emma Legg (Director of Adult Social Services)

Report Author: Dan Wilkins, Head of Learning Disabilities and Autism Service
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6 January 2023

Appendices

None

Background Papers

None

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Wiltshire Council

Health Select Committee

18th January 2022

Integrated Care Strategy - Update

Executive summary

The purpose of this paper is to update the Board, as an Integrated Care Partnership (ICP) stakeholder, on the progress and process of producing the Bath and North East Somerset, Swindon and Wiltshire (BSW) Integrated Care Strategy. This includes information on the emergent themes coming through on the strategy and details on the opportunity to review and comment on the draft version.

Proposal

All Integrated Care Partnerships are developing a 5 Year Integrated Care Strategy as required by the Health and Care Act. The strategy describes how all partnership members are working together to meet the assessed health, care and wellbeing needs of the local population. The Strategy will be updated annually.

The strategy will be completed and agreed by the ICP by the end of March 2023 and this will include a series of engagement activities to work with, and take account of the views of, stakeholders and the local population.

There is also a requirement for all Integrated Care Boards (ICB) to own and develop a five-year system delivery plan (Joint Forward Plan) setting out how we will implement the Integrated Care Strategy. This implementation plan is being developed alongside the Strategy.

There is a requirement to consult with Health and Wellbeing Boards on how well this implementation plan reflects the requirements of the Joint Local Health and Wellbeing Strategies. The completion date for the Implementation Plan has now been extended to 30th June 2023 with a draft being produced at the end of March. This plan will also be updated annually.

The process of producing the submission is being co-ordinated by the Integrated Care Strategy & Implementation Plan Steering Group which has a membership taken from the ICB and wider system partners. The Steering Group is meeting fortnightly. We are currently working through the governance timetable with regards sign-off of the completed strategy and plan ahead of the respective milestones.

The current draft of the Strategy is in the process of being generated and will be circulated for review in the week beginning 16th January.

The committee:

- a) are asked to consider the content of the attached report (presented as slides)

and to advise on how engagement in the ongoing development of the initial Strategy can best be undertaken within Wiltshire.

- b)** Committee members are encouraged to review the draft strategy following its distribution and to provide feedback through the channels provided.

Reason for proposal

The requirement to generate a combined Integrated Care Strategy for BSW is a requirement set out in the Health and Care Act 2022.

Author:

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**Health Select Committee
Forward Work Programme**

Last updated 10 JANUARY 2023

Health Select Committee – Forward Work Programme			Last updated 10 JANUARY 2023		
Meeting Date	Item	Details / Purpose of Report	Corporate Director and / or Director	Responsible Cabinet Member	Report Author / Lead Officer
28 Feb 2023	Draft Joint Local Health and Wellbeing Strategy	To consider the draft Strategy prior to the final version being considered by the Health and Wellbeing Board on 30 March 2023.	Kate Blackburn (Director - Public Health)	Cllr Ian Blair-Pilling	David Bowater
16 Mar 2022	Avon and Wiltshire Mental Health Partnership Trust Transformation Programme	Overview of AWP's Transformation Programme and associated opportunities for Wiltshire.	Lucy Townsend (Corporate Director - People)	Cllr Jane Davies	Dominic Hardisty
8 Jun 2023	Long Covid Support Service	Wiltshire Health and Care to provide an update on their work to provide support to Wiltshire residents experiencing 'long Covid'.	Lucy Townsend (Corporate Director - People)	Cllr Jane Davies	Douglas Blair
4 Jul 2023	Domestic Abuse External Grant and other domestic abuse work	To receive an update on this work following receipt of proposals regarding the Domestic Abuse External Grant in September 2022.	Kate Blackburn (Director - Public Health)	Cllr Ian Blair-Pilling	Hayley Morgan
4 Jul 2023	Substance Misuse Support	To receive an update on Substance Misuse support work following consideration of proposals regarding Spend Allocations for the Substance Misuse Supplementary Grants in September 2022.	Kate Blackburn (Director - Public Health)	Cllr Ian Blair-Pilling	Kelly Fry

Health Select Committee – Forward Work Programme			Last updated 1 FEBRUARY 2023		
Meeting Date	Item	Details / purpose of report	Associate Director	Responsible Cabinet Member	Report Author / Lead Officer
2 Nov 2023	Health Improvement Coaches	To provide an update on the work of the Health Improvement Coaches.	Kate Blackburn (Director - Public Health)	Cllr Ian Blair-Pilling	Rachel Kent

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