

Health Select Committee

MINUTES OF THE HEALTH SELECT COMMITTEE MEETING HELD ON 27 FEBRUARY 2024 AT KENNET ROOM - COUNTY HALL, BYTHESEA ROAD, TROWBRIDGE, BA14 8JN.

Present:

Cllr Johnny Kidney (Chairman), Cllr Gordon King (Vice-Chairman), Cllr Trevor Carbin (substitute), Cllr Mary Champion, Cllr Kelvin Nash (substitute), Cllr Tony Pickernell, Cllr Horace Prickett, Cllr Tom Rounds, Cllr Mike Sankey, Cllr David Vigar, Diane Gooch (Wiltshire Service Users Network), Irene Kohler (Healthwatch Wiltshire) and Carol Shirley (Vice Chair- Wiltshire Centre for Independent Living)

Also Present:

Cllr Richard Clewer

13 Apologies

Apologies for absence were received from Councillors Ian Blair-Pilling, David Bowler, Clare Cape, Jane Davies, Howard Greenman and Dr Monica Devendran, Pip Ridout and from Caroline Finch (Chair - Wiltshire Centre for Independent Living).

Cllr Trevor Carbin was substituting for Cllr David Bowler and Cllr Kelvin Nash was substituting for Cllr Howard Greenman.

14 Minutes of the Previous Meeting

Resolved:

To confirm and sign the minutes of the meeting held on 17 January 2024 as a true and correct record.

15 Declarations of Interest

There were no declarations of interest.

16 Chairman's Announcements

The Chairman referred to the announcement circulated with the agenda as detailed below and highlighted that in November 2023 the Committee received a presentation about the Smoke Free Generation programme and the Committee contributed to the public consultation on how that should be delivered. Whilst there wasn't enough new information for it to be an agenda item at this meeting, the Public Health Team wanted the Committee to know that work is progressing as detailed below:

Smokefree Generation – Local Authority Grant

As presented at the November 2023 Committee, the government is seeking to achieve the first smokefree generation, by bringing forward legislation detailing a multifaceted approach to reducing smoking rates across the county, including making it an offence to sell tobacco products to anyone born on or after 1 January 2009.

To support existing smokers to quit, the government is more than doubling the budget for local stop smoking services, investing £70 million a year for 5 years, from 2024/25 through to 2028/29. Local allocations will be reviewed annually and be based on the average smoking prevalence over a 3-year period to ensure the allocations are based on the most robust and recent data.

A report is going to Cabinet on 16 April 2024 to outline the grant income and expenditure requirements. The report seeks to agree that expenditure will be in line with the grant conditions and that delegated responsibility for decisions relating to the distribution of this grant are delegated to the Corporate Director of People, in consultation with the Cabinet Member for Cabinet Member for Public Health, Leisure, Libraries, Facilities Management, and Operational Assets and Director of Public Health.

If you would like any further information, please contact Gemma Brinn, Public Health Consultant, gemma.brinn@wiltshire.gov.uk

The Chairman also reminded Committee members to ask any questions following the presentations at the meeting as that was the best way find out more detail about the projects/initiatives.

17 **Public Participation**

No questions or statements were received in advance of the meeting.

18 **Reducing Hospital Admissions - NHS@Home Wiltshire and Urgent Community Response**

The Chairman remarked that it was part of an ongoing focus of the Health Select Committee to review the impact of preventative measures in health and social care in Wiltshire and that this was one of the key outcomes of the Committee's Inquiry into Urgent Care in July 2023. Neighbourhood Collaboratives were considered by the Committee in January 2024, and they would today receive a presentation on urgent care support delivered at home and in the community.

Lisa Haywood (Chief Operating Officer - Wiltshire Health and Care) gave a brief introduction to the services to set the scene and the Chairman then introduced Sam Olden (Consultant Physiotherapist) and Gemma Pugh (Head of NHS@Home) from Wiltshire Health and Care to present the item and Emma Townsend (Head of Living and Ageing Well Service, Wiltshire Council).

Summarising the more detailed presentation included in the agenda pack, the following was highlighted:

Urgent Care Response (UCR)

- The types of staff that enable delivery of the UCR and their skills that provide urgent support for a variety of health emergencies such as catheter care, diabetes, palliative care, or end of life care as well as a rapid response for non-injury falls and support for informal carer breakdown, which if not resolved will result in a 'social' admission to hospital. 70% of patients are seen within 2 hours of referral and treatment can usually be provided in their own home;
- The capacity of the service was unpredictable due to varying interventions that may be required. The service works to prevent hospital admissions and enables patients/carers and those that are cared for to stay at home in most circumstances which is what is usually the preferred option to stay at safe and independent at home;
- There was an ever increasing pressure in services and with the UCR service they were able to assess and treat referrals swiftly with 94% of those being completed within 2 contacts. Only 1.6% of patients were admitted to hospital after being seen by the UCR service.
- There had been over 8000 referrals over the last year which related to 3500 individual repeated referrals which would have otherwise resulted in a hospital admission for a stay or long term intervention.

The Committee asked questions about how the UCR and Virtual Wards services complemented each other and how they were differently resourced, if some patients felt overwhelmed when a number of services were involved in their care, if the planned two hour response time was adequately resourced and the possible challenges around this, and if it was planned to extend the current hours of operation beyond 8am to 8pm. There were also questions on the general awareness of the service and how carers might seek support if they become ill themselves and have concerns about those that they care for at home.

It was further highlighted that the work with a cared for person was for up to 4 weeks in their own home, if possible, with a temporary visiting carer or a live in carer being provided as necessary. Some may need a temporary care home place, but the team would stay in touch with the carer that had been admitted to hospital so that they were able to focus on their own recovery and be involved with the planning of what would happen at end of the 4 weeks period. There were Social Workers and Clinicians working in hospitals to co-ordinate the safe transfer home of patients or into a care home setting.

There were further questions about the available support following the 4 week period, how the service collaborates with the Police and the multi-agency

safeguarding hub, particularly in relation to find the most appropriate response when there are issues with mental capacity and the best interventions.

NHS@Home (virtual wards)

- This was a new service giving patients who are unwell the choice to receive their acute care at home. This was in relation to a short term episode of being unwell which was aimed to prevent a hospital admission with planned care with the patient being seen every day to treat their acute condition;
- Evidence from virtual wards showed that when care is received at home rather than in hospital patients are less likely to acquire an infection and have a decline in their mobility and strength; and
- The service was particularly geared up for those patients that are frail usually in their later years of life and have respiratory or heart conditions and they can choose to receive their treatments at home where they feel much more comfortable.

The Committee asked questions about how the service works with partners in neighbouring areas, if the service provided end of life care at home, how the NHS@Home and UCR teams integrate, if there was data available on the impact of fewer hospital admissions and those that that service were unable to support, if the service were involved with the Caring Steps Together Programme and independent advocacy for those patients that may need support or not have capacity and for the plans to extend the service to 24 hours a day in the future.

The Committee welcomed the excellent case studies which they felt provided excellent context to the services.

Resolved: That the Select Committee

- 1. Thanks Wiltshire Health and Care for providing the overview of NHS@Home and the Urgent Community Response Service.**
- 2. Recommends promotion of the Urgent Community Response Service to increase awareness of the provision in Wiltshire, particularly with carers.**
- 3. Requests updates, to include performance data, on the services and will explore with colleagues the frequency and format for updates.**

19 **Wiltshire Community Area Joint Strategic Needs Assessment 2024**

The Chairman introduced Rachel Kent (Public Health Consultant) and Sarah Hartley (Public Health Scientist) who were in attendance to present the Wiltshire Community Area Joint Strategic Needs Assessment (CAJSNA) tool.

Summarising the more detailed presentation included in the agenda pack, the following was highlighted:

- That the CAJSNA brings together information from a range of sources to provide useful insight and actionable intelligence around Wiltshire's 18 community areas, providing information on local demographics, needs and strengths. Its aim was to support local decision making at community area level. The last document was published in 2020; and
- The 2022 Wiltshire Health and Wellbeing Joint Strategic Needs Assessment identified 3 key strategic priorities for Wiltshire and these priorities informed the production of the CAJSNA infographic packs. Directorates and external partners were involved in the selection of indicators and in the provision of data and insight.

Sarah Hartley then gave a brief demonstration of the CAJSNA [see link here to the website](#) to the Committee which brings together over 140 indicators spanning 10 different topics to provide a comparison of those topics across the 18 community areas in Wiltshire.

The Strategic Engagement and Partnership Managers were leading on sharing a residents survey which was currently open to encourage Wiltshire residents to look at the information in the CAJSNA and then complete a short survey to share what they think the priorities should be for the future [see link to survey here](#). This would run until 5 May 2024.

The Chairman thanked Sarah for her presentation/demonstration and encouraged all members to share the survey with their residents.

The Committee asked questions about the team's engagement with the military and service personnel in the area, the work with Health Watch Wiltshire, the objectives of the resident's survey, accessibility of the survey and how the findings would inform the work of the Council going forward.

Resolved:

That the Select Committee notes the content of the Community Joint Strategic Needs Assessment and encourages Members and Area Boards to promote and use the resource.

20 **Substance Use Grants**

The Chairman welcomed Kelly Fry (Principal - Building Resilience) and Lizzie Shea (Projects Officer - Substance Misuse) from the Public Health team who were in attendance to give an overview of how Substance Use Grants were being allocated to support people in Wiltshire. The Chairman highlighted that the Committee last received an update in late 2022 and would welcome the opportunity to find out how the different initiatives were progressing.

Summarising the more detailed presentation included in the agenda pack, the following was highlighted:

Supplementary Substance Misuse Treatment and Recovery Grant

- There were three key areas – ‘capacity’ with the numbers of adults in structured treatment – the revised 3 year ambitions as for this to be 1861 adults, ‘continuity of care’ which is the % of prison leavers needing support with the ambition to have 60% accessing community treatment within 3 weeks of release and ‘residential rehabilitation’ – these numbers were increasing and this was based on local demand to be covered by the funding available;
- The 2024-25 grant allocation was £633,699 (up from £358,692 in 2023/24) and this would be used to grow the workforce, additional drug costs, staff and peer mentoring training and development, regional coordination of the Inpatient Detoxification grant and stock for needle dispensing. The grant would allow the Council to continue the great intervention work;
- The Priority areas for 2024-25 include increasing the recovery support offer and reducing drug and alcohol related deaths through the monitoring and review implementation of the new recovery support element of the Connect service, the monitoring and review of the Wiltshire HOPE project, the recruitment of 2 FTE post lived experience posts and increased clinical interventions; and
- The next steps were to await sign off of the supplementary plans for year 3, recruitment to commence new posts and consider succession planning beyond April 2025 when the current 3 year grant funding would end.

The Committee asked questions about what would happen after April 2025 if the grant was not renewed, the anticipated growing levels of need for the service, the risk of synthetic opioids coming into the country, if there was support for drivers that are pulled over and found to be positive for drugs, what early preventative work there was in place to prevent the move from soft to hard drugs and heavy drinking to alcoholism, the reasons for the higher grant allocation for 2024-25 and what the grant had enabled the service to do differently/more innovatively.

Rough Sleeping Drug and Alcohol Treatment Grant (RSDATG)

- The total number of unique individuals engaged with the RSDATG service as at April 2023 identified as in the at risk cohort was 167 of which 25 were rough sleeping. During quarter 3 2023-24 the number engaged was 119 of which 15 were rough sleeping. The number of treatment exits from the service for quarter 2 was 26 with 7 of those rough sleeping. This cohort was challenging to work with;

- Two case studies highlighted positive outcomes;
- The indicative 2024-25 grant allocation was £568,770 (£841,363 was previously allocated over 2 years – 2022-24) and this would be utilised to grow the workforce, inpatient detox/rehabilitation, volunteer posts, staff training and venue hire; and
- The next steps were to await sign off of the 2024-25 budget plan, monitor grant activity and consider succession planning beyond April 2025 when the current 3 year grant funding would end.

The Committee asked questions about what work there was to engage those who don't appear to want to engage in support, if those who are known to be 'sofa surfing' were included in the figures identified as at 'at risk', if overall numbers of engagement were lower due to Wiltshire's rural profile, if the team felt that the cooperation from the Police in relation to rough sleepers was as good as it could be, and if the number of rough sleepers with a connection to the military was known.

Inpatient Detoxification Grant (IPD)

- This grant had been in place since 2022 and is due to end in March 2025. The 2023-24 and 2024-25 grant allocation was £40,632 and at the end of quarter 3 23-24 46% of the allocation had been used with the good working relationships that had been established with the Unit in Fareham. Going ahead into 2024-25 they would continue to work with the Connect Service to utilise the IPD bed spaces.

Individual Placement Support Grant (IPS)

This grant of £157,805 would begin from April 2024 for two years and the aims were to support people into paid, mainstream jobs, short term training, volunteering and work placements.

The Chairman asked a question about the support for the boating and traveller communities, and it was highlighted that the Public Health Team had carried out a survey with the boater community, the results of which could be shared at a future Committee meeting.

Resolved: That the Select Committee

- 1. Notes the overview of the work undertaken which has been funded by the Substance Use Grants.**
- 2. Requests an opportunity to view the action and/or succession plan before the end of the grant period in early 2025.**

3. Requests information on the Wiltshire Hope project, to be circulated by email.

21 **Domestic Abuse Safe Accommodation Grant**

The Chairman welcomed Hayley Morgan (Consultant - Vulnerable Communities) and Daisy Manley (Projects Officer - Domestic Abuse) from the Public Health team who were in attendance to give an update on the Department for Levelling Up, Housing and Communities (DLUHC's) Domestic Abuse Safe Accommodation Grant and how the grant supports victims of domestic abuse in the county. It was noted that this was the final year of the current four year funding programme.

Summarising the more detailed presentation included in the agenda pack, it was highlighted that:

- The Domestic Abuse Act 2021 introduced statutory duties and increased accountability with local authorities being responsible for the delivery of domestic abuse support to victims and families in safe accommodation. There was a strict criteria of how the grant could be spent and the Team had looked at creative and innovative ways to utilise the funding which was only received on a year by year basis – this meant that it was hard to be able to plan and to commission that funding money in a short period of time and the increase in funding over the four year period had not reflected the demand;
- Wiltshire's core domestic abuse support service FearFree, was made up of 5 themes. During 2022-23 there were 2788 victim referrals and 8669 reports of domestic abuse;
- Funding was allocated to multiple providers during year 1 and 2 of the grant including the Connect Service, Julian House, Wiltshire Council's Housing and Social Care Teams and the Wiltshire Bobby Van all to help address the local areas of need;
- The funding results from November 2021 to October 2023 showed that there had been a positive impact for victims of domestic abuse in Wiltshire including therapeutic support, victims' homes being target hardened (security measures installed) and Community Connectors supporting victims to rebuild their lives after abuse. There grant was also used to deliver staff training and enable Engagement Worker projects;
- In September 2023 the year 3 and 4 proposals were approved by Cabinet and following that procurement processes were carried out with the majority of contracts beginning on 1 November 2023. The first year 3 multi agency monitoring meeting took place in February 2024;
- The year 3 and 4 funding allocations would see the continuation of the 2 previous years provisions together with workforce training on domestic

abuse in Gypsy, Roma and Traveller (GRT) communities, specialist support within safe accommodation for victims with complex needs, move on funding to support victims to maintain separation from perpetrators and an additional Children's Worker to support children who have witnessed domestic abuse;

- Successes included evidence of positive outcomes and impact, stronger relationships with providers and robust monitoring processes;
- There were some recruitment challenges due to the limited employment pool, employees moving within services and the nature of the temporary posts due to the short term funding. There was a high demand for services and challenges with delays in obtaining safe accommodation premises; and
- The next steps included the monitoring of outcomes through quarterly meetings, monitoring underspend and repurposing where required, there would be continuing conversations with existing providers about client impact when the funding ends and how this would be managed and assessment of local need/gaps in provision in anticipation for potential continuation of funding.

The Chairman thanked Officers for their presentation and the Committee asked questions about if the support received included those children that were fostered/adopted, what work there was ethnic minority groups and support for military families.

Resolved: That the Select Committee

- 1. Notes the overview of the work funded to date by the Domestic Abuse Safe Accommodation Grant.**
- 2. Requests an update in 2025 on the work funded by the grant, to include post grant plans to support victims of domestic abuse.**

22 **Forward Work Programme**

The Committee noted that the Forward Work Programme (FWP) would be updated to reflect any changes made throughout the meeting and the following that was highlighted by the Chairman:

- The Chairman and Vice-Chairman would be meeting with the relevant Cabinet members and Directors in April 2024 to further develop the select committees forward work plan.
- There would hopefully be two rapid scrutiny meetings taking place before the next Committee meeting in June - Emotional Wellbeing and Mental Health Strategy. The date was still to be confirmed but would potentially be 26 April 2024. Committee members would also be notified for

expressions of interest before the scrutiny of the implementation plan of the Integrated Care Strategy was scheduled for a meeting.

- A Committee member had raised a concern about a local issue (relating to access to pharmacies) and this would be followed up.
- There would be an item on community conversations going to the meeting of Cabinet in March – this is not for decision so it didn't need to come to this Committee, however an item on community conversations would be added to the Forward Work Plan as it aligns with neighbourhood collaboratives and the committee's interest in involvement.

Resolved

That the Committee approve the Forward Work Plan.

23 **Urgent Items**

There were no urgent items.

24 **Date of Next Meeting**

The date of the next meeting was confirmed as 12 June 2024.

(Duration of meeting: 10.30 am - 1.20 pm)

The Officer who has produced these minutes is Lisa Pullin of Democratic Services, direct line 01225 713015, e-mail committee@wiltshire.gov.uk

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