

# AGENDA

**Meeting:** Health and Wellbeing Board  
**Place:** Online  
**Date:** Thursday 26 November 2020  
**Time:** 9.30 am

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## Online

Please direct any enquiries on this Agenda to Stuart Figini, of Democratic and Members' Services, County Hall, Bythesea Road, Trowbridge, direct line 01225 718221 or email [stuart.figini@wiltshire.gov.uk](mailto:stuart.figini@wiltshire.gov.uk)

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## **Voting Membership:**

Cllr Philip Whitehead

Co-Chair and Leader of the Council and Cabinet Member for Economic Development, MCI and Communications

Edd Rendell

Co-Chair Wiltshire Locality Chair, BSW CCG

Dr Nick Ware

Wiltshire Locality Healthcare Professional, BSW CCG

Dr Sam Dominey

Wiltshire Locality Healthcare Professional, BSW CCG

Elizabeth Disney

Wiltshire Locality Chief Operating Officer

Angus Macpherson

Police and Crime Commissioner

Dr Catrinel Wright

Wiltshire Locality Healthcare Professional, BSW CCG

Christina Button

NHS England

Cllr Laura Mayes

Cabinet Member for Children, Education and Skills

Cllr Gordon King

Opposition Group Representative

Cllr Simon Jacobs

Cabinet Member for Adult Social Care, Public Health and Public Protection

## **Non-Voting Membership:**

Stephen Ladyman Seth Why	Wiltshire Health & Care Dorset and Wiltshire Fire & Rescue Service - Area Manager Swindon and Wiltshire
Kate Blackburn Cllr Ben Anderson	Director- Public Health Portfolio Holder for Public Health and Public Protection
Nicola Hazle Dr Gareth Bryant Terence Herbert Tony Fox	Clinical Director Wessex Local Medical Committee Chief Executive Non-Executive Director - South West Ambulance Service Trust
Kier Pritchard Kevin Mcnamara	Wiltshire Police Chief Constable Chief Executive or Chairman Great Western Hospital
Cara Charles-Barks	Chief Executive or Chairman Salisbury Hospital
Stacey Hunter	Chief Executive or Chairman Bath RUH

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

For extended details on meeting procedure, submission and scope of questions and other matters, please consult [Part 4 of the council's constitution](#).

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

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

# AGENDA

1 **Chairman's Welcome, Introduction and Announcements**

2 **Apologies for Absence**

3 **Minutes** (*Pages 7 - 14*)

To confirm the minutes of the meeting held on 24 September 2020.

4 **Declarations of Interest**

To declare any personal or prejudicial interests or dispensations granted by the Standards Committee.

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 Thursday 19 November 2020 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 Monday 23 November 2020. 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 **Safeguarding Vulnerable People Partnership** (*Pages 15 - 24*)

To receive the annual report of the SVPP from the Independent Chair, Mark Gurrey.

7 **HMIP Inspection of HMP Erlestoke** (*Pages 25 - 30*)

To receive a report on actions following the recent HMIP inspection from Emma Legg - Director for Access & Reablement, Adult Care Operations.

8 **Local Health Protection Update - Care Home Support and Local Outbreak Management Plan**(Pages 31 - 34)

To receive a report from Helen Jones - Director Joint Commissioning and a presentation from Kate Blackburn – Director of Public Health.

9 **COVID-19 and Impact on NHS and Social Care Services**

To receive a presentation from Emma Legg – Director for Access & Reablement, Adult Care Operations and Clare O' Farrell – Interim Director of Commissioning.

10 **Recovery Risk Register and Demand Modelling Update Across Service Areas**

To receive a presentation from Tamsin Stone – Head of Service Outcomes & QA Children & Adults and Toby Eliot – Corporate Support Manager.

11 **Wellbeing Hub**(Pages 35 - 40)

To receive a presentation from Clair Edgar – Director of Learning Disabilities & Mental Health.

12 **Urgent Items**

13 **Date of Next Meeting**

The next meeting is being held on 28 January 2021 starting at 9.30am.

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### Health and Wellbeing Board

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#### **MINUTES OF THE HEALTH AND WELLBEING BOARD MEETING HELD ON 24 SEPTEMBER 2020 AT VIRTUAL MEETING VIA MICROSOFT TEAMS.**

##### **Present:**

Seth Why, Kate Blackburn, Dr Nick Ware, Dr Sam Dominey, Edd Rendell (Co-Chair), Elizabeth Disney, Alison Ryan, Cllr Philip Whitehead (Co-Chair), Angus Macpherson, Dr Catrinel Wright, Cllr Laura Mayes, Cllr Gordon King, Cllr Ben Anderson, Terence Herbert, Kier Pritchard, Lucy Townsend, Tracey Cox and Cllr Simon Jacobs

##### **Also Present:**

Julie Brown, Stephen Ladyman, Douglas Blair, Emma Legg, Claire Edgar, Michael Allum, Lucy Baker, Madeline Cooper and Erin Woodsford

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#### **24 Chairman's Welcome, Introduction and Announcements**

Councillor Philip Whitehead, Co-Chair of the Board and Leader of Wiltshire Council welcomed everybody to the meeting.

Before the meeting began each Member of the Board, other Councillors and officers who would be contributing to the meeting were given the opportunity to confirm their attendance for those watching the live stream of the meeting.

#### **25 Apologies for Absence**

Apologies for absence were received from Nicola Hazle, Dr Gareth Bryant, Tony Fox and Kevin McNamara.

#### **26 Minutes**

##### **Decision –**

The minutes of the meeting held on 23 July 2020 were confirmed as a correct record, subject to minute 21 being amended to read ‘Dr Ed Rendell - (Co-Chair and Wiltshire Locality Clinical Lead BSW CCG) – declared an interest that his wife was employed by Wiltshire Council as an Educational Psychologist’.

#### **27 Declarations of Interest**

There were no declarations of interest.

28 **Public Participation**

There was no public participation.

29 **Chair / Chief Executive Representation from Wiltshire Health and Care**

a) **Board Membership**

The Chair reported that a request had been received for representation on the Board from Wiltshire Health and Care at Chair/ Managing Director level in common with the other main NHS providers to Wiltshire's population. The two Co-Chairs felt that this request was appropriate and accordingly, Stephen Ladyman, Chair of Wiltshire Health and Care attended the meeting in an observer capacity until the Board membership is changed at the next annual Council meeting in May 2021.

Comments were received from other Board members suggesting that a representative from Virgin Healthcare could also join the Boards membership as an organisation that has the interests of children at their core, similar to Wiltshire Health and Care having the interests of adults at their core.

**Decision**

**The Chair confirmed that the request from Wiltshire Health and Care to attend Board meetings, initially in an observer capacity, would be accepted and that the overall governance structure and membership of the Board could be considered at a future meeting.**

b) **Adult Social Care Reform**

The Chair reported that as the Cavendish review on the future of Adult Social Care nears completion, the board may like to be aware of the principles for social care reform agreed and put forward by a wide range of representative organisations including the LGA, ADASS, NHS Providers and Commissioners.

Further information could be found on the Local Government Association website at this link - <https://local.gov.uk/adult-social-care-seven-principles-reform>

30 **Covid-19 Update and NHS Restart Plans**

The Board received a presentation from Elizabeth Disney – NHS Bath and North East Somerset, Swindon and Wiltshire (CCG) and Emma Legg – Director Access & Reablement, Wiltshire Council about the impact of Covid-19, how the NHS in partnership with Wiltshire Council have responded and future plans.



The [presentation](#) contained detailed information about the following:

- Strategic direction (delivery) and development of the Wiltshire Alliance
- Impact of COVID-19 on the health and care system: service changes and improvements to retain
- An update on BSW response to NHS Phase 3 Planning (recovery and restart)
- Winter Planning up-date
- System challenges

In response to questions about (i) Virtual Frailty Wards; (ii) flu vaccinations for the elderly; and (iii) the health of domiciliary workers and plans in place to cope with sickness levels. Elizabeth Disney and Emma Legg explained that (i) the virtual Frailty Wards were a new concept to encourage better use of collective expertise to manage frail people, so that their needs did not escalate. It was early on in implementing this style of working, which aims to reduce infection risk and footfall into Care Homes. (ii) the impact of Covid-19 on the number of flu cases this year is unknown at this stage, especially with the numbers of elderly people shielding at home for an extended period of time, however, it is anticipated that there will be significant operational pressures on health services, and there may be issues distinguishing between Covid-19 and flu symptoms. (iii) A key element for the health of Domiciliary workers is how demand for services is managed when people leave hospital, if managed well the impact would be reduced and services would be able to cope with these pressures in a more resilient way.

The Chair thanked Elizabeth and Emma for a very interesting presentation which contained a vast amount of very useful information.

**Decision – To note the presentation and comments made.**

### 31 **Impact of Covid-19 on Mental Health Demand**

The Board received a presentation from Kier Pritchard – Wiltshire Police Chief Constable, Tracey Cox/ Claire Edgar, and Lucy Baker about the impact and pressures on the Police during the Covid-19 situation and the effects on mental health.

The Police and Crime Commissioner and Chief Constable introduced the [presentation](#) and made the following comments:

- Covid has had a significant impact on communities and services alike. It has led to new and emerging pressures placing increasing demands on services.

- The report illustrates the impact COVID has had on Mental Health demand as it relates to Wiltshire Police.
- The report outlines the wider impacts and demand across the system experienced during Covid.
- It describes the activity in place across the Crisis Care Concordat, led by the CCG, to understand, model and accurately predict future demand from Mental Health and how it will impact across different services.

Further detail was provided from Lucy Baker and Claire Edgar on Mental Health Services, in particular on the following matters:

- Current position;
- What could be the new demand – national picture over the next 5 years;
- Mental Health – future demand;
- Review of impact on services;
- Mental Health – impact of Covid on subgroups of need; and
- What is the system doing proactively together

There was discussion on the data contained in the presentation graphs and how they relate to the population areas under the influence of the Police and the Local Authority; the need for joined up analysis of trends and impact of Covid-19 on mental health in local areas to be shared at a national level; how plans to support people with suicidal tendencies were in place and being evolved to gain a better understanding of the needs of the community following the recent steep rise in suicides over the Covid-19 lockdown period; the importance of increasing the Board's awareness of all the significant issues being dealt with by partners due to Covid-19 and how the risk register is helping to focus attention on the most pressing areas/issues; capacity issues at the Bluebell Place of Safety during Covid-19 and plans in place to relieve pressures from facilities in other local authority/police areas.

The Chair thanked all presenters for a very enlightening presentation and agreed that a presentation at a future meeting on the risk register for the Recovery Coordination Group could be helpful..

**Decision – To note the presentation and comments made.**

## 32 **Gypsy and Traveller Strategy**

The Board received a report from Dr Michael Allum, Public Health Speciality Registrar, Wiltshire Council presenting the final draft Gypsy, Roma, Traveller and Boater Strategy for Wiltshire.

It was noted that Travellers experienced significant inequalities throughout all stages of life. Gypsy, Roma, Traveller and Boater people experienced the worst health outcomes of any ethnic group and the average life expectancy was 10-12 years less than the general population. Higher rates of miscarriage, a greater

proportion of individuals with long-term health conditions, and higher rates of depression and suicide were just some of the inequalities experienced by these communities. It was most important that all public organisations addressed these health inequalities so that all individuals had the same opportunities to live healthy lives no matter their background.

Dr Allum explained that the new strategy is focussed on reducing the significant inequalities experienced by these communities and will work across the wider socioeconomic determinants of health to address these. In addition, COVID-19 pandemic continues to highlight the significant effect of inequalities on the health and wellbeing of vulnerable communities. The strategy would work within the framework of the Council's Recovery plans.

#### **Decision –**

- i) To acknowledge the Health Needs Assessment**
- ii) To approve the GRT&B Strategy for implementation**

### **33 SEND Inclusion Strategy**

The Board received a report and [presentation](#) from Alison Enever, Head of Special School Transformation and Cate Mullen, Head of SEND and Inclusion, Wiltshire Council seeking the Board's approval of the SEND Inclusion Strategy 2020-2023.

The Head of Special School Transformation and Head of SEND and Inclusion, introduced the report and presentation and commented on the following matters:

- The Partnership Strategy
- Key Principles of the Strategy, including the Vision
- Underpinning commitments
- National issues
- The Wiltshire picture, including challenges and successes
- Areas that children and young people with SEND felt important to include in the Strategy
- Priorities developed through the consultation
- How the Strategy is managed and understanding how it is working

It was noted that the Strategy, approved by Cabinet in March 2020, had been developed with parents/carers, children and young people and the organisations who make up the Wiltshire SEND Local Area Partnership, with a main focus of supporting the development of inclusion for children and young people with SEND.

The Head of Special School Transformation also provided an update on the progress being made at the North Wiltshire School, formally Rowde Special School, following the amalgamation of the three special schools in Trowbridge, Chippenham and Rowde. It was noted that the merger of the three school was

completed successfully on 1<sup>st</sup> September 2020 and this was the beginning of a transformational journey. A build partner had been appointed and a period of co-design was commencing with contributions from parents, carers staff and pupils to provide an exciting and future proof facility.

Cllr Mayes, Cabinet member for Children, Education and Skills, thanked all involved in the preparation of the Strategy and she acknowledges the immense amount of progress and achievements made. Cllr Mayes also thanked all team members involved for their contributions towards the development of the Strategy.

### **Decision – To approve the SEND Inclusion Strategy 2020-2023.**

#### **34 Update from Healthwatch Wiltshire**

The Board received a report and presentation from Julie Brown, Acting Manager of Healthwatch Wiltshire who provided an update of Healthwatch Wiltshire's recent work and its priorities for the coming year.

The Acting Manager, Healthwatch Wiltshire introduced the report and [presentation](#) and commented on the following matters:

- Activities undertaken during the year
- Key projects – evaluating GP improvement access, dementia community services, community cash funds and volunteer led military families project
- Key findings from the projects
- Recent work during the Covid-19 pandemic
- Comments from visitors
- Healthwatch priorities and workplan
- Young healthwatch mystery shopping project

The Chair noted the importance of reconsidering the approach to waiting lists for military families that move around a lot and that there would be further legislation enshrining the military covenant into law likely later this year.

The Board also heard from Erin Woodsford and Madeline Cooper about their role in the Young healthwatch mystery shopping project. It was noted that the young people played a key role in designing the project that investigated online mental health resources for young people. The young people reviewed the websites for On Your Mind and Wiltshire CaHMS which provided useful information although there were some areas for improvement. Healthwatch have linked in with commissioners and local providers of the services and will share the project findings with them.

Dr Catrinel Wright, Wiltshire Locality Healthcare Professional, spoke about a blog she had recently written on how young people can be helped to manage anxiety in the current times. The young people supported the suggestion that the use of blogs would be a helpful resource for young people.

The Chair thanked all involved in the presentation, especially the young people for their valuable contributions.

**Decision – That the presentations and comments be noted.**

35 **Urgent Items**

Angus MacPherson, Police and Crime Commissioner commented on a recent inspection of Erlestoke prison by the HM Inspectorate of Prisons to assess its success in returning to acceptable conditions following the initial peak of the COVID-19 pandemic and the restricted regime during it. He reported that the positive element in the published report was the excellence of the prison library service, however a number of issues were highlighted in the report including, the mental health of prisoners, lack of available accommodation for prisoners leaving prison and a number of prisoners not having received an assessment of their social needs. It was agreed that further discussion on the findings would take place.

**Decision – To note the comments of the Police and Crime Commissioner.**

(Duration of meeting: 16.00 – 18.30)

The Officer who has produced these minutes is Stuart Figini of Democratic Services, direct line 01225 718221, e-mail [stuart.figini@wiltshire.gov.uk](mailto:stuart.figini@wiltshire.gov.uk)

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**Wiltshire Council**

**Health and Wellbeing Board**

**26 November 2019**

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**Subject: Safeguarding Vulnerable People Partnership's Annual Report**

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**Executive Summary**

I. This is the first Annual Report of the SVPP, which was formed in response to the changes set out in Working Together 2018; to replace LSCBs with multi-agency arrangements to safeguard children. The SVPP takes a 'think family, think community' approach and as such also brings together work which sits across the WSAB and CSP. This Annual Report sets out the work of the Partnership that has taken place during 2019-2020, including Rapid Reviews, workforce development and priorities for 2020-21.

**Proposal(s)**

It is recommended that the Board:

- i) Notes this report
- ii) Considers the current relationship between SVPP and H&WB Board

**Reason for Proposal**

To ensure there is sufficient and appropriate join up between SVPP and Health and Well-being Board

**[Presenter name] Mark Gurrey**

**[Title] SVPP and WSAB Independent Chair**

**[Organisation] SVPP**

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Wiltshire  
**Safeguarding  
Vulnerable**  
People Partnership

## **Wiltshire Safeguarding Vulnerable People Partnership Annual Report 2019-20**

### **Contents**

Page 2	Introduction and context
Page 4	Rapid Reviews
Page 4	External Inspections
Page 5	Workforce Development
Page 6	Looking ahead: changes and developments in the structure of SVPP and Priorities for 2020-2021

**Important Note:** *The body of this report was completed before the current coronavirus pandemic. Its impact on both the local community and local services had not been felt when this was written. Safeguarding Partners in Wiltshire have already made some initial changes to the SVPP to ensure it is well placed to respond to the continuing changes in demand and service provision occasioned by the pandemic. They include commitments to:*

- *Continue with the current Independent Chair for the foreseeable future*
- *Recognise the increase in domestic abuse and bring the existing working group directly under the SVPP and for the chair to join the partnership*
- *Recognise the prevalence of criminal exploitation in our County by ensuring the Missing and Criminal Exploitation group reports to both the CSP and SVPP and developing more effective links with its counterpart in Swindon*
- *Review both the WSAB and CSP to explore the ability to develop greater integration in the safeguarding agendas including whole system approaches to case reviews, to workforce development and to user engagement*
- *SVPP will formally assume the role of monitoring and scrutinising partners ability to meet expected surges in demand as the lockdown eases over the coming months*

*There will be further re-ordering of the priorities, commitments and timetable set out in this report as the effects of the pandemic continue to be assessed and addressed. SVPP has responded flexibly to the unprecedented changes of recent months and will continue to do so over the next period. The detail of those changes and responses made will be reported on in more detail in the next Annual Report.*

## Introduction and context

This is the first Annual Report of the Wiltshire Safeguarding Vulnerable People Partnership (SVPP). SVPP was formed in response to the changes set out in Working Together 2018 and in particular the need to step down Local Safeguarding Children Boards and replace them with locally arrived at partnership arrangements designed to safeguard children.

Wiltshire safeguarding partners approached the reforms positively and were one of the 'early adopters' as identified by the Department for Education. The Safeguarding Plan set out by the Wiltshire partners can be found [here](#) – the key features of it are:

- A belief that children, young people and adults live in families and local communities; these can be sources of support and safety or of danger and risk.
- The approach to safeguarding and protecting our community is focused around where people live and with whom – it's an approach which has 'Think Family, Think Community' at its heart.
- The plan covers work which sits across children and adult services and community safety.
- It is designed to work in the spaces 'between' those key partnerships described above and, in so doing, ensure that the safeguarding needs of children, young people and adults are both addressed in context and align one with the other.
- All safeguarding partners will make a shared and equal contribution to the quality and impact agenda in terms of leadership, culture setting, data production and evaluation of practice.
- Practice will be developed using a clear evidence base of demographic and population projections to plan and respond effectively.

- It will ensure that our collective approach to risk and risk management is aligned and explicit and will ensure that front line practitioners are enabled and supported to carry the risks they are presented with.

SVPP began formally meeting in January 2019. It is the view of all members that much of that time has been focused on embedding the new arrangements and understanding the role and contribution that SVPP can make – there is an awareness that we have set up something very different from the previous LSCB and from the arrangements many other areas are making. It is therefore understandable that it will take some time to realise the full benefits of our work.

That said, the year has been a busy one and during the course of it, the SVPP has:

- Invested in a Data Analyst who is making a significant contribution to the development of the local response to young people and criminal exploitation
- Supported the successful bid for Wiltshire to be one of the development sites for contextual safeguarding, working with the University of Bedfordshire
- Invested in a programme delivered through the voluntary sector-led children's centres to enable local families, known to social care, to be part of our quality assurance processes
- Completed and published a thematic review on Physical Abuse to Under 1yrs
- Completed one rapid review
- Published two SCRs: SCR Child K - death of a one-year old child in the context of neglect and previous suspected non-accidental injuries; and SCR Child L - significant non-accidental injuries sustained by a young baby
- Completed and published a thematic review on Physical Abuse to Under 1yrs, which provided a review of collective learning from local cases and led to work to improve early support, working jointly with FACT (Families and Children's Transformation Project)

As part of the new arrangements and to ensure a continued focus on the effectiveness of the safeguarding systems for children a Families and Children's Systems Assurance Group (FCSA) was established and within its first year has:

- Identified a number of priority areas for scrutiny: knife crime; non-accidental injuries in under 1s; health assessments for LAC; mental health support for children and young people; domestic abuse; early support
- Scrutinised the work relating to children missing education and elected home educated children and identified actions for improvement
- Supported the learning from practice reviews
- Maintained oversight of multi-agency safeguarding training and roll out of the NSPCC Graded Care Profile 2 (GCP2) assessment tool
- Continued to oversee the Walkabouts that constitute the Section 11 activity for the partnership with six walkabouts taking place: Adult MASH; a Minor Injury Unit; Stanley Park Sports Ground ; National Probation Service; Splitz Domestic Abuse Service and Virgin Care Single Point of Access
- Established a Data Analyst Group to use data and intelligence to inform the discussion and focus for the partnership

The new arrangements also bring together the work of Wiltshire's Safeguarding Adult Board (WSAB) and the Community Safety Partnership (CSP). Both established and active partnerships in their own right, a summary of their work during 2019-2020 is set out below:

The work of the WSAB has been focussed on quality assurance, voice and influence and prevention:

- Policies and Procedures Group continue to develop and review policies and guidance: including new Self-neglect Guidance, Organisational Abuse Procedures and Staff Guidance Policy
- Completed and published Safeguarding Adult Review Adult E and held a Learning Event on alcohol misuse in response to learning from a previous published SAR
- Joint Service Users and Carers Reference Groups brought together to inform the work of the Board and improve the engagement with service users and carers
- Supported and provided oversight of the newly created Adult MASH and developing role of Virtual Partners
- Annual Peer Assessment quality assurance process highlighted concerns in the system in relation to Liberty Protection Safeguards and discharge to which the WSAB is responding



The CSP has continued to work with partners to coordinate community safety activity at an operational and strategic level and has:

- Established a Swindon and Wiltshire Violent Crime Executive to provide a framework for a whole systems approach to tackling serious crime
- Commenced a Domestic Homicide Review following the murder of a teenager
- Raised awareness of coercive control through training and a Local Learning Review in which coercive control was a significant factor
- Developed a Substance Misuse Strategic Framework and Implementation Plan



## Rapid Reviews

SVPP has completed 4 rapid reviews since the legislation changed in 2018: 3 during 2018-2019 and 1 in 2019-2020. They have all been well-received by the National Child Safeguarding Practice Review Panel and all agencies have shown a significant commitment to ensure they are completed within timescales and that the need to identify the learning is preeminent in all their thinking. SVPP is grateful to the work of the Practice Review Group under the skilled and expert leadership of Dr Fiona Finlay, Designated Doctor for Wiltshire.

These reviews have identified some key areas for consideration and learning for the local safeguarding system as set out below:

- Fathers are often invisible in practice and unassessed
- Effectiveness of early help support and assessments
- Impact of mental health and /or substance misuse of parents and understanding of addiction by practitioners
- Domestic abuse, both current and historic, and its impact on a mother's ability to make safe decisions for her children

This learning has been acted upon and fed back in the sector through:

- Commissioning of a [Thematic Review into Significant Physical Abuse to Under 1s](#) as referenced earlier under Priorities for 2020-21

- Learning Briefings produced and published on each case and disseminated to partners with oversight of how partners have considered the learning
- Review and launch of revised multi-agency guidance on responding to non-accidental injuries in children
- Multi-agency training courses
- Multi-agency workshops focussed on identifying barriers to effective early support and next steps in improving this part of the system
- Project established to develop an improved model of practice in engaging fathers

## External Inspections

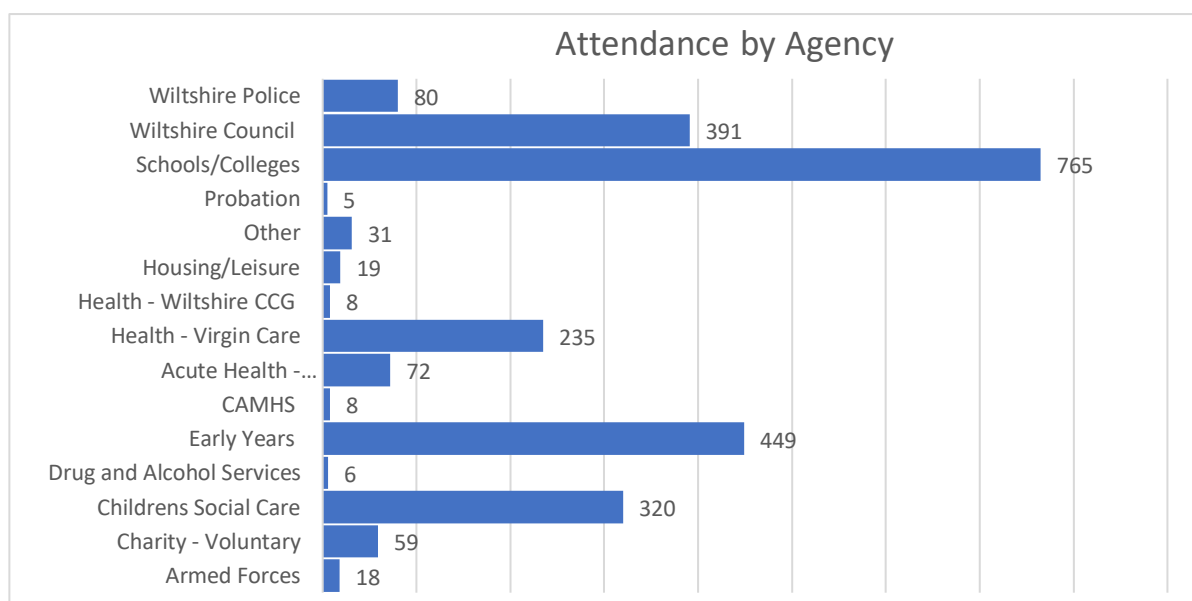
In July 2019 Ofsted published their report of their inspection into Wiltshire’s Children’s Services. Their conclusions were that overall effectiveness was Good and highlighted significant improvements since the last inspection. The inspection concluded that Wiltshire “... offers a consistently good response to families and children in need of help and protection. Senior leaderships have built strong partnerships that strengthen the response that families get when they are in crisis.”

The report also described Wiltshire’s new arrangements for safeguarding children as “forward-thinking” in considering both vulnerable children and adults.

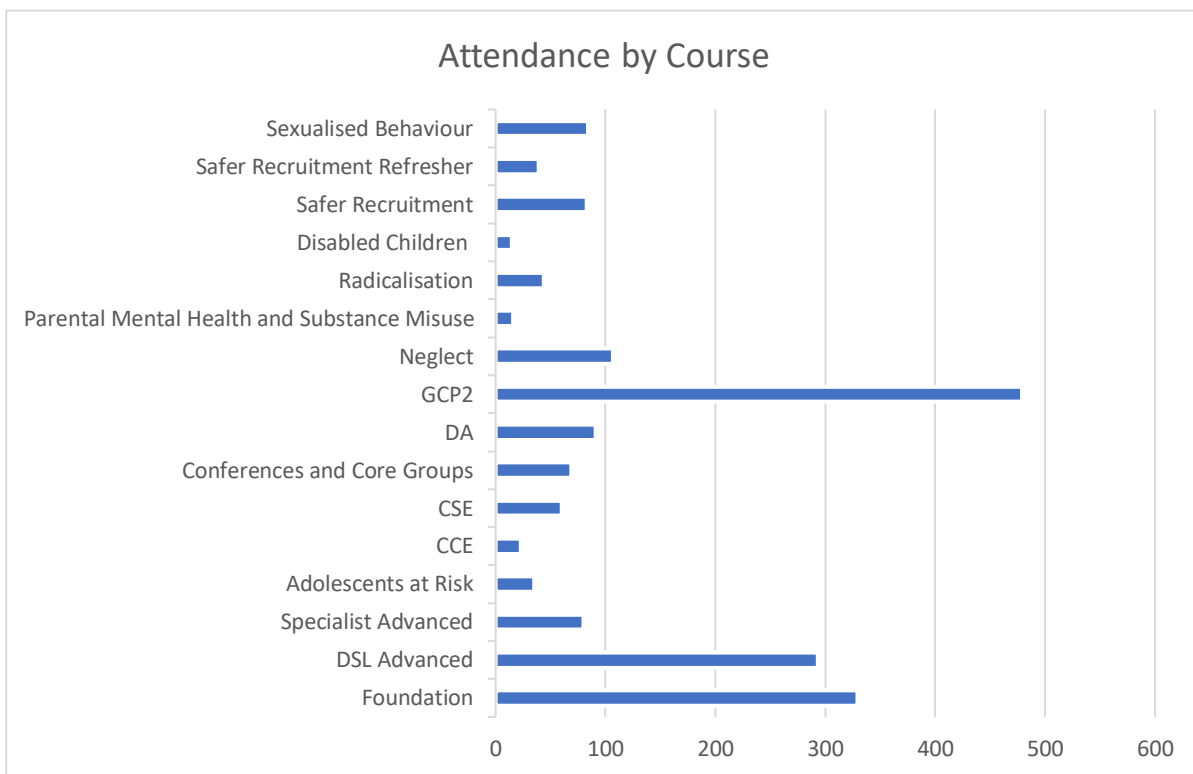
Wiltshire Police received a peer visit from the National County Lines Coordination Centre, which identified a number of strengths identified included safeguarding and good working relationships with partners. It highlighted the value of the Criminal Exploitation Analyst Post in Wiltshire in identifying children at risk with recommendations about how this role can be further developed to provide a collective partner, police response and ensure tasking of proactive resources could be focused towards vulnerability.

## Workforce Development

During 2019-2020, 2466 members of staff from across the workforce access the multi-agency training provided by SVPP. This training continues to be well attended, with attendance increased by 41% on the previous year, and rated highly by delegates.



The Graded Care Profile (GCP2) course was added in spring 2019 in order to support the roll out of this assessment tool for neglect across workforce groups. In addition to the programme of courses the SVPP has also provided support and coordination to the Contextual Safeguarding Briefings that have been taking place.



As in previous years, attendance by schools and early years staff make up the majority of delegates across all courses and particularly on the ‘core’ foundation and advanced training. Overall education and early years make up 51% of all delegates accessing the multi-agency training.

Training also provides income to the partnership generated from attendance and non-attendance charges. The income for 2019-2020 was £68,000, an increase of 15% from the previous year.

### Looking ahead: changes and developments in the structure of SVPP

The Safeguarding Partners met in February 2020 to review their work and to plan for 2020-21. A number of key decisions were made that impact on the governance and structure of SVPP

- SVPP will no longer function with an independent chair. There is a wide agreement that bringing that role into the responsibilities of the Safeguarding Partners will increase ownership and integration with core agency agendas. The Chair will rotate around the Safeguarding Partners and 2020-21 Chair will be Terence Herbert, Chief Executive Officer, People, Wiltshire Council.
- A programme of independent scrutiny will be set for the year. The commitment is to source the best scrutiny available whether from another area, an expert individual or a national body – the criteria will simply be the acknowledgement of expertise in the area(s) to be scrutinised
- The SVPP will remain as a small and senior group as currently constituted
- Relevant agencies will be more specifically engaged through the specific work of the SVPP – whether through one of the four priorities set for the year or through the scrutiny

programme. The value of the newsletter was acknowledged, and this will be maintained throughout the year

- In addition, biannual forums will be held for staff from across all agencies on key areas of safeguarding practice consistent with the SVPP purpose

## Priorities for 2020-21

Safeguarding Partners have committed to the following for the coming year:

“SVPP needs to be unrelentingly focussed on practice and front-line service delivery. We must not allow ourselves to slip to an agenda which is characterised by processing of papers, receiving items for information or simply for noting”

Partners have also committed to a fundamental review of both the Community Safety Partnership (CSP) and the Wiltshire Safeguarding Adults Board (WSAB) and it is likely that the outcomes of those reviews will impact the shape and content for the work of SVPP.

In advance of those reviews, the Partnership has anyway committed to adopt the following as key items in their forward plan for 2020-21:

- Under 1s Thematic Review – action plan illustrates how this might be responded to by the partnership with each action owned by an SVPP member
- Adolescents and Criminal Exploitation, including our approach to ‘transitional safeguarding’: The National Panel Report, [It Was Hard to Escape: Safeguarding children at risk from criminal exploitation](#), has within it a number of key challenges and questions for local partnerships and SVPP will want to ensure it is able to respond to them all
- How we work with families – recent changes in the senior management structure within Wiltshire Council has brought adult and children’s social care under one Executive Director and this offers the opportunity to develop a more whole family approach
- Early support and prevention – both are challenges within the work of all of the constituent parts of SVPP and whilst some of it must necessarily develop separately, there is an opportunity to explore and maximise the benefits of cross-sector initiatives, to be clear about overlaps and areas of added value

## Funding and SVPP Support Structure

There will be some reduced funding for 2020-21 especially from the Council who have historically been the largest contributor. There will be further work on this as the partnerships within SVPP conduct their reviews as referenced above. There is a considerable carry forward of funds which can be used to help invest in the necessary supports to progress the work of SVPP or refunded, as yet to be determined.

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For more information about the SVPP visit [wiltshirescb@wiltshire.org.uk](mailto:wiltshirescb@wiltshire.org.uk).

If you have any questions about this report please contact SVPP Business Support, [SVPP@wiltshire.gov.uk](mailto:SVPP@wiltshire.gov.uk)

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**Wiltshire Council**

**Health and Wellbeing Board**

**26 November 2020**

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**Subject: HMIP inspection of HMP Erlestoke**

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## **Executive Summary**

A recent inspection at HMP Erlestoke in August 2020 identified concerns regarding support for 6 prisoners with care and support needs and the actions of the Local Authority Adult Care service in terms of assessment and provision of support.

This report summarises the role of the Local Authority in terms of assessing and meeting the adult care needs of individuals in prisons and also considers the role of Safeguarding in a custodial setting.

A review was undertaken by adult care to determine any areas of concern. Areas for improvement were identified, both for adult care and the prison, particularly in terms of information sharing and wider communication.

It also details the actions Adult Care and Erlestoke prison have completed to address these concerns and the subsequent plans in progress, agreed in partnership, to improve the working practices across both services.

## **Proposal(s)**

It is recommended that the Board:

- i) Notes the report.
- ii) Agrees the actions outlined in the report to ensure effective processes are in place and individuals are supported effectively when they have eligible adult care needs.

## **Reason for Proposal**

The Local Authority is responsible for completing a Care Act assessment where there is an appearance of need and then ensuring eligible care and support needs are met. This duty extends to individuals in a prison situated within the county. For Wiltshire Council this will be Erlestoke Prison.

It is important that effective and robust processes are agreed and in place so any Care Act assessment required can take place in a timely and safe manner.

**Lucy Townsend**  
**Interim Corporate Director People (DCS/DASS)**  
**Wiltshire Council**

**Subject: HMIP inspection of HMP Erlestoke**

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**Purpose of Report**

1. To provide information to Health and Well Being Board following analysis of the issues raised by HMIP and actions required to mitigate and improve practice.

**Relevance to the Health and Wellbeing Strategy**

2. There are two themes within the Health and Well Being Strategy that are particularly relevant to this piece of work; Prevention and Integration.

The prevention theme focuses on how individuals can support and maintain their own health and well-being. Within adult care, small pieces of adaptive equipment are frequently prescribed to maintain mobility and independence when engaging in activities of daily living. Our analysis demonstrates that overwhelming majority of the referrals from Erlestoke in 2020 related to impaired mobility and the timely provision of equipment was therefore critical to prevent further deterioration. Effective processes to support this are key.

The second theme is Integration. Although this often relates to how health and care services align to provide person-centred care, wider partnerships are key to supporting individuals in terms of their needs. This partnership approach and effective communication will ensure a safe and robust service.

**Background**

3. In accordance with the Care Act, Wiltshire Council is responsible for completing a Care Act assessment where there is an appearance of need and ensuring eligible care and support needs are met for prisoners within Erlestoke Prison.

A Memorandum of Understanding currently exists between Wiltshire Council and Erlestoke Prison. It details the agreed arrangements and processes in place to identify, refer and facilitate an assessment of an individual's needs.

Adult Social Care departments are not responsible for investigating safeguarding incidents in prisons. However, the availability and provision of social care services can be an important part of ensuring that prisoners are protected. If there are concerns in relation to the general availability of

care and support services in a prison, this should be raised with National Offender Management Service.

Local authorities and prison staff must understand what to do where they have a concern about abuse and neglect of an adult in custody. The prison must ensure that it has clear safeguarding policies and procedures that are explained to all visiting staff. Prison and probation staff may approach the local authority for advice and assistance in individual cases although the local authority will not have the legal duty to lead enquiries in any custodial setting.

4. HM Inspectorate of Prisons conducted a scrutiny visit at HMP Erlestoke on 11, 18 and 19 August 2020.

Overall the inspection was very poor, citing concerns regarding leadership; treatment of prisoners; basic cleaning and disrepair of buildings; seemingly compounded by regimes resulting from the Coronavirus pandemic. The report states:

*‘Overall, this was a very troubling visit, and if this had been a full inspection as part of our normal inspection programme, I would have given serious consideration as to whether the Urgent Notification procedure should be invoked.’*

The team also identified concerns regarding individuals who potentially had social care needs.

**Key concern:** *The social care needs of some vulnerable prisoners had not been assessed or met. This had left physically disabled prisoners unable to clean themselves or their cells or collect meals. During our visit, the social care needs of six prisoners who had been referred to the local authority had been neither assessed nor met. Some of these referrals dated back to January 2020. One disabled man had to pay prisoners to clean his cell; he did not have a bedrail to prevent him from falling out of bed or suitable shower or toilet adaptations.*

**Key recommendation:** *All vulnerable prisoners who require social care support should have a timely referral and local authority assessment and their needs should be met promptly.*

## Main Considerations

5. Following notification from HMIP in August of their observations regarding the six prisoners, an urgent review was undertaken. The requests mainly related to difficulties with mobility and completing personal care tasks.

Our analysis shows there were two cases where delays resulted in care and support needs not being met in a timely way. This was as a result of incorrect prioritisation on the OT waiting list and poor and delayed information sharing from the prison. The required assessments have now been completed and equipment provided. There is no evidence that any

significant harm was caused as a result and thus no safeguarding concerns.

The first national lockdown also impacted on the ability of the team to undertake physical assessments, although insufficient consideration was given to the use of virtual methods.

6. Findings from the review of the remaining four cases also identified further learning for the local authority but there was also significant learning for the prison in terms of the description of the difficulties being experienced by prisoners and ensuring equipment is delivered to prisoners.
7. The assessments requested have now been completed with provision of the necessary small pieces of equipment. There does not appear to have been any harm caused by the delay to the individuals involved that would require a safeguarding response.

### **Next Steps**

8. There has been learning identified for Adult Care services and the prison. This has formed the basis of a comprehensive internal action plan that addresses the concerns and meet the requirements of the recommendations in the report. Erlestoke have also identified a number of social care focused actions to address areas of improvement.

Key areas for development include;

- Joint review of the Memorandum of Understanding to ensure it is fit for purpose. Staff from both organisations will need to have appropriate training and understanding of the remit of both partners in terms of meeting need. This will address the learning also identified for Erlestoke and allow a joint approach to a process of continuous improvement for both organisations.
  - A shared process and protocol which is being developed alongside the MOU.
  - The referral process will identify online referrals as the preferred route which will be robust and allow regular electronic audit with findings shared with both organisations.
  - Adult Care staff are now invited to weekly Multi-Disciplinary Team meetings with the prison to ensure early identification of individual who may have adult care needs and allow a timely assessment to take place.
  - All Adult Care staff will receive training as part of their Continuing Professional Development, so they are aware of their responsibilities under the Care Act to support prisons and prisoners.
  - Erlestoke have their own action plan in response to the recent inspection. This addresses the range of issues highlighted in the report and details the support they will offer to individuals with impaired mobility and other social care needs including safeguarding.
9. Local partners must now work strategically to address the learning identified and implement the relevant actions. Progress will be regularly

reviewed and oversight will be provided by the new Safeguarding Adults System Assurance Group (replaces the Adults Safeguarding Board Executive) which reports into the SVPP.

**Lucy Townsend**  
**Interim Corporate Director, People (DCS/DASS)**  
**Wiltshire Council**

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Report Authors:  
Emma Legg, Director of Adult Care Operations, Access and Reablement,  
Wiltshire Council

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**Wiltshire Council**

**Health & Wellbeing Board**

**26 November 2020**

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**Subject: Care Home Support**

**Cabinet Member: Councillor Simon Jacobs**

**For Information**

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**Executive Summary**

This report provides the Board with information about the support to care homes during the COVID pandemic.

**Proposal(s)**

This report is for information only

Terence Herbert  
**Chief Executive Officer**

## Wiltshire Council

### Health & Wellbeing Board

26 November 2020

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**Subject: Care Home Support**

**Cabinet Member: Councillor Simon Jacobs**

**Key Decision: For information only**

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### Purpose of Report

To provide the Committee with information about the support to care homes during the pandemic.

### Background

The Council published a support plan for care homes on 29<sup>th</sup> May 2020. The plan had a number of themes:

- a. Financial Support
- b. Review of care homes
- c. PPE
- d. Dedicated support
- e. Staffing
- f. Health Support
- g. Designated settings

### Report

The Local Authority has provided the following support to Care Homes:

**Financial support**-Wiltshire Council responded at an early stage to the financial pressures faced by the care home sector, with an offer sent to providers on 7 April following a lengthy consultation. The Wiltshire response was developed in consultation with Wiltshire Care Partnership and all local providers. Wiltshire Council did not restrict its financial response to Local Authority funded customers or to care homes with whom we have a contract. To date, the Council has made payments of £2.7 million to care homes and domiciliary providers to ensure their financial resilience in the face of the additional expenditure they have incurred. Providers have also had financial support through the Government's Infection Control Fund with a total of £6.3 million distributed in the first round and a further £5.3 million will be in round two.

**Review of care homes**-Since mid-April, the Council has worked in partnership with the CCG and CQC to review risks to and support needed by all local care homes. A COVID-19 provider team was established with a dedicated helpline and email address and operated 7 days per week (this has recently been reduced to 5 days a week but due to the increased outbreaks in care homes will be moving to 6 days a week). The COVID team collates evidence daily about any risks to care homes from:

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- The national capacity tracker
- Safeguarding alerts
- Self-reporting by care homes
- PHE outbreak and death alerts
- Other sources e.g. ONS, registration of deaths

Officers report risks through a daily risk log to directors and a weekly gold report to the Chief Executive. The Health Protection Board reviews outbreaks in care homes fortnightly and considers whether there should be any restrictions to visiting.

**PPE-**Wiltshire Council, in partnership with the LRF, distributed PPE free to Care Homes when their local supply chain had broken down. The Council's financial offer included payment for all additional PPE that care homes themselves have purchased. Although care homes can now access free PPE via the national portal, the Council will continue to provide emergency stock.

**Dedicated support-**The Council, working in partnership with Wiltshire Care Partnership, the CCG and CQC, has been proactive in implementing a support programme to Care Homes. This has included the dedicated COVID team, regular webinars, thematic webinars to provide advice and support e.g. infection control, use of PPE, weekly newsletters, a Care Home Clinical Advisory Group and a BSW CCG Care Home Oversight Group chaired by the Director of Nursing & Quality. The CCG and Council also worked together to offer all care homes across Wiltshire the Infection Prevention and Control 'Train the Trainer' programme.

**Staffing-**The Council, CCG and Wiltshire Health & Care have a clear process in place for identifying staffing needs in care homes and providing mutual aid. It must be noted that the Council and care home providers have collectively sought to restrict the movement of staff between care homes to reduce the spread of infection and any mutual aid is risk assessed. The majority of care homes have put in place robust contingency plans for staffing which have been shared with the Council. The COVID-19 team works with providers to identify their staffing needs and any mitigating actions that can be taken to reduce the impact. Where appropriate, provider business continuity plans are activated.

**Health support-**In response to the request from NHS England to bring forward aspects of Enhanced Care in Care Homes, the approach in Wiltshire has been to build upon the existing local support and make this as an offer of support to care homes, rather than providing unwanted support that has been centrally defined. The offer includes regular contact and monitoring of risks, virtual weekly check-in meetings with a MDT, virtual 1:1 appointments and physical follow ups and pharmacy and medications support.

**Designated settings-**In the first wave of the pandemic, the Council and CCG commissioned designated settings called Hospital Discharge Support Units in two of our care homes. The HDSUs accepted admissions for COVID positive patients who no longer required care in an acute setting but were not well enough to return home. Due to the imperative that the health and care system reduces any risk of infection to care homes, there is a policy in Wiltshire that there will be no admission to a care home from hospital without a negative swab

within the last 48 hours. Any COVID positive patients who need further bedded care on discharge will be admitted to the community hospitals.

**Conclusion**

It should be noted that the Council's support to care homes is not in isolation and key to its success has been the partnership with Wiltshire Care Partnership, the CCG and CQC. Care Homes themselves have worked tirelessly to provide excellent care for their residents and have worked with the Council to ensure appropriate measures to prevent and control infection are in place. The care home managers and workforce have faced significant challenges, not only in protecting the most vulnerable Wiltshire residents but also in the financial uncertainty that many face as reduced demand has created significant voids in the sector.

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Helen Jones-Director of Commissioning  
Kate Blackburn-Director of Public Health

# WILTSHIRE WELLBEING HUB Summary Report

**November 2020**

Claire Edgar

**Wiltshire Council**

# Background

## **The Wellbeing Hub main objective is:**

To develop and implement a county wide initiative offering support, guidance and signposting to the local population through an enduring, resilient, multi-agency, remotely connected network.

Enabling a community response to assist those in our communities who are at highest risk of serious illness (known as clinical vulnerable (CV) /clinical extremely vulnerable (CVE) or shielding) if they contract COVID-19.

To work with partners, volunteer groups, the voluntary and community sector and food industry colleagues to ensure a responsive system is in place

To provide access to essential goods and facilities for those in need within Wiltshire during the time of the epidemic.

# A Few Facts and Figures

Since its inception in March, the Hub has had around **35,000** contacts with Wiltshire residents:

- We have pro-actively contacted nearly **28,000** residents in Wiltshire
- We have received over **7,000** calls to the WBH Helpline and over **3,400** emails.
- We have worked with voluntary organisations to visit **3,300** people to ensure their welfare and offer information and support
- Delivered over **1,422** food parcels to those most in need during the first lockdown
- We have worked with community groups to help approx. **700** people get access to food/shopping during the first lockdown
- We have worked with community groups to provide nearly **500** people with prescription collections during the first lockdown
- During the initial start up period of Hub activity, **171** people were referred to Adult Social Care Advice and Contact including those who were not contactable by phone/visit

## Where are we now

- The Wellbeing Hub has transitioned from a 7 day (at the height of the first lockdown) to 5 day service through recovery operating an incoming phone line with customer services leading on this
- Since the second lockdown started we have now stepped this back up to operating over 7 days
- All shielding residents identified during the first phase are being contacted to remind them that they can access the Hub during the second lockdown
- We have written to and are contacting them over the phone all new people who have been identified as being CEV or CV by the NHS or the Govt offering our support. This is just over 3,100 people

## Where are we now continued

During the first phase we found that over half of the residents identified did not have additional support needs

The greatest need at this time was related to food delivery/supermarket slots/prescription delivery & shielding enquiries

Community groups continue to work in partnership with the Council and responded positively to the pandemic

The Council has stepped back up its Community Wellbeing Hub weekly multiagency/partner meeting.

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