AGENDA

Meeting: **Health Select Committee**

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

Date: **Wednesday 20 November 2024**

Time: **10.30 am**

Please direct any enquiries on this Agenda to Lisa Pullin/Ben Fielding, of Democratic Services, County Hall, Bythesea Road, Trowbridge, direct line or email

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

This Agenda and all the documents referred to within it are available on the Council's website at www.wiltshire.gov.uk

Membership:

Cllr Johnny Kidney (Chairman)	Cllr Howard Greenman
Cllr Gordon King (Vice-Chairman)	Cllr Tony Pickernell
Cllr David Bowler	Cllr Horace Prickett
Cllr Clare Cape	Cllr Pip Ridout
Cllr Mary Champion	Cllr Tom Rounds
Cllr Dr Monica Devendran	Cllr David Vigar
Cllr Nick Dye	

Substitutes:

Cllr Liz Alstrom	Cllr Jack Oatley
Cllr Trevor Carbin	Cllr Ian Thorn
Cllr Mel Jacob	Cllr Bridget Wayman
Cllr Kelvin Nash	

Non-elected, non-voting members

Irene Kohler	Older Person's Champion representative
Diane Gooch	Wiltshire Service Users Network (WSUN)
Caroline Finch	Wiltshire Centre for Independent Living (CIL)

Recording and Broadcasting Information

Wiltshire Council may record this meeting for live and/or subsequent broadcast. At the start of the meeting, the Chairman will confirm if all or part of the meeting is being recorded. The images and sound recordings may also be used for training purposes within the Council.

By submitting a statement or question for a meeting you are consenting that you may be recorded presenting this and that in any case your name will be made available on the public record. The meeting may also be recorded by the press or members of the public.

Any person or organisation choosing to film, record or broadcast any meeting of the Council, its Cabinet or committees is responsible for any claims or other liability resulting from them so doing and by choosing to film, record or broadcast proceedings they accept that they are required to indemnify the Council, its members and officers in relation to any such claims or liabilities.

Details of the Council's Guidance on the Recording and Webcasting of Meetings is available on request. Our privacy policy can be found here.

Parking

To find car parks by area follow this link. The three Wiltshire Council Hubs where most meetings will be held are as follows:

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

County Hall and Monkton Park have some limited visitor parking. For meetings at County Hall there will be two-hour parking. If you may be attending a meeting for more than 2 hours, please provide your registration details to the Democratic Services Officer, who will arrange for your stay to be extended. For Monkton Park, please contact reception upon arrival.

Public Participation

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

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

The full constitution can be found at this link.

Our privacy policy is found here.

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

AGENDA

PART I

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

1 **Apologies and Substitutions**

To receive any apologies or substitutions for the meeting.

2 **Minutes of the Previous Meeting** *(Pages 5 - 28)*

To approve and sign the minutes of the meeting held on 10 September 2024.

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, including:

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 13 November 2024** in order to be guaranteed a written response**.** In order to receive a verbal response questions must be submitted no later than 5pm on **Friday 15 November 2024**. 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 **Urgent Care in Rural Communities** *(Pages 29 - 38)*

The Committee will receive an update on urgent care in Wiltshire's rural communities, which includes the availability of services and response times.

7   Wiltshire Council Adult Social Care Performance

The Committee will receive an update on the Councils Adult Social Care key performance indicators which is *to follow*.

8   Update on the Service User Engagement Contracts *(Pages 39 - 44)*

The report seeks to update the Committee with details of the Service User Engagement contracts commissioned by Adults Commissioning and Wiltshire ICB, detailing projects conducted through 2024.

9   Cabinet Member Update

To receive a brief verbal update from attending Cabinet Members (or Portfolio Holders on their behalf) highlighting any news, successes or milestones in their respective areas since the last meeting of the committee, not covered elsewhere on the agenda.

10   Forward Work Programme *(Pages 45 - 60)*

To review and approve the Committee's forward work programme in light of the decisions it has made throughout the meeting.

11   Urgent Items

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

12   Date of Next and Future Meetings

To confirm the date of the next meeting as Wednesday 22 January 2025 at 10.30am.

Future meetings are as follows:

12 March 2025
5 June 2025
9 July 2025
9 September 2025
12 November 2025.

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.

Wiltshire Council

Health Select Committee

MINUTES OF THE HEALTH SELECT COMMITTEE MEETING HELD ON 10 SEPTEMBER 2024 AT KENNET ROOM - COUNTY HALL, BYTHESEA ROAD, TROWBRIDGE, BA14 8JN.

Present:
Cllr Johnny Kidney (Chairman), Cllr Gordon King (Vice-Chairman), Cllr David Bowler, Cllr Mary Champion, Cllr Dr Monica Devendran, Cllr Nick Dye, Cllr Howard Greenman, Cllr Tony Pickernell, Cllr Horace Prickett, Cllr Pip Ridout, Cllr Tom Rounds, Cllr David Vigar, Diane Gooch (Wiltshire Service Users Network) and Irene Kohler (Older Persons Champion representative)

Also Present:
Cllr Jane Davies (Cabinet Member for Adult Social Care, SEND and Inclusion), Marie Gondlach (Senior Scrutiny Officer) and Lisa Pullin (Democratic Services Officer)

53   Apologies, Substitutions and Membership Changes

Apologies were received from Cllr Clare Cape, Caroline Finch and Carol Shirley (Wiltshire Centre for Independent Living), Cllr Laura Mayes, Cllr Ian Blair-Pilling and Kate Blackburn (Director – Public Health)

There were no substitutions.

Cllr Bridget Wayman had been added as a substitute member for the Committee as appointed by Full Council on 23 July 2024.

54   Minutes of the Previous Meeting

Resolved:

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

55   Declarations of Interest

There were no interests declared.

56   Chairman's Announcements

The Chairman made the following announcements:

- Organisational changes within the Integrated Care Board (ICB) mean that the Committee will no longer work directly with Fiona Slevin-Brown. On behalf of the Committee the opportunity was taken to thank Fiona for

her open engagement with the committee and to wish her all the best for the future.

- The Committee extends a warm welcome to Caroline Holmes who is the interim Place Director for BSW ICB.

- Legacy report – a reminder for all Members to bear in mind between now and May 2025 that consideration would be given to produce a legacy report for the next Health Select Committee.

- Linked to the legacy report mentioned above, the Chair and Vice Chair would focus a little more than usual on the forward work programme for future meetings to ensure that it is as useful as possible for the next council, as well as supporting this Committee to focus the work for the year ahead.

- There had been no meeting of Cabinet since the last Health Select Committee - some items of interest are on the Cabinet's forward work programme included:

17 September 2024
ICB Community Health Service Procurement

8 October 2024
Telecare Service Recommissioning
Future Commissioning of Care Homes – For which the Chair and Vice Chair would be attending a briefing on 24 September 2024.

57   **Public Participation**

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

58   **Update on Technology Enabled Care**

The Chairman welcomed Helen Mullinger (Commissioning Manager) who was in attendance to give an update on Technology Enabled Care (TEC), which is the use of technology to support and enhance health and social care outcomes. It was noted that the committee had received a presentation in September 2023 and asked for a report in 2024 on how the priorities of the strategy are being delivered to meet the needs of Wiltshire residents.

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

- The TEC may include pendants and wearable devices linked to a monitoring centre, sensors fixed in the home to monitor movement and changes and health monitoring at home;

- There had been a huge growth in technology and devices could now be used to enhance people's independence including apps on phones and tablets, smart home systems and environmental controls, devices connected to the internet and standalone devices;

- The Council's vision was to use technology to enable people to fulfil their potential, be actively involved and included in their communities, make informed decisions, have control over their lives and be valued and included within society. There would be more engagement with carers and there were currently a host of pilot initiatives running;

- There were four core objectives which included the target that by 2028 60% of packages funded by the Council would be enabled by technology;

- There had been much progress to date including a recommission of the telecare which would commence from 1 April 2025. With the new TEC pilots they were able to look at users changes in movement in home, change to home temperatures and they were looking to build a service to expand the use of the technology that is on offer to help support and make a difference to our residents;

- The Council had joined Swindon Borough Council in a TEC project with Swindon leading the project to secure a TEC partner and they would be working with practitioners and care providers to review 42 individuals in Wiltshire with overnight or 24/7 support needs;

- There was a strong appetite to innovate and to embed a wider range of solutions into the care and support provision, especially for adults with learning disabilities and/or dementia with a shift to a proactive TEC offer to prevent incidents and crisis's escalating;

- There were a number of priority outcomes including improving the quality of care, promoting independence, reducing admissions to hospital and care homes and achieving greater efficiency. However this was not a way to make cost savings – there were huge benefits to residents wellbeing and sense of independence, with the Council hopefully being able to provide less intrusive packages of care to them; and

- In delivering the priorities the Council would raise awareness and information sharing, develop clear pathways for TEC, grow the TEC offer, use a test and learn approach whilst utilising pilot opportunities and provide support to stakeholders.

The Committee asked the following questions which included but were not limited to:

- It was stated that the target is to have 60% of care provided enabled by technology – what is the current population this relates to and is this a challenging target? It was noted that the 60% related to those receiving

social care funded care. There were currently 7000 residents in the demographic, and they were supporting 60% of those. 2000 residents were already in receipt of some form of TEC and as part of the implementation plan, they were currently going out to tender for a TEC partner to help them maximise what is available for the community. It was felt to be a challenging target and there may well be a cost involved and they may have to secure additional funding to support this. There was a lot of focus on what they would concentrate on and this was part of the implementation plan.

- What about those residents who don't have contact with adult social care services or do not have access to devices such as smart phones or tablets etc? It was noted that the service would continue to support all those residents who have eligible needs for the Council's care services and of course there were a number that funded their own care. They would of course provide advice and information for residents and carers where they could for those who did not have eligible needs.

- Of the 7000 eligible residents there is still a large number not currently supported by TEC what is happening with those? It was noted that the plan was to hopefully better the 60% target in the strategy but that it would have to be done in stages to ensure that there is funding to support it. This would not replace face to face care and the aim was to improve quality of life not to reduce the cost of care.

- What was the budget for this activity? £630,000 per annum? had been allocated from the Better Care Fund and it was hoped that the service identify savings to enable them to continue to develop the service and roll out the TEC to more residents and buy the necessary equipment required. In the same way as any other service based on assessment of need, if an individual has eligible needs and if this need is to have a smart phone with a relevant app on it then they may to purchase this or for another person this could be a sensor on a door mat depending on their eligible need. The service would meet the relevant need.

- What are the plans to integrate the technology with partners and those who are intimidated by technology? It was noted that integrating systems was challenging as it related to commercial companies with their own platform so it was a challenge to insist on a single interface, however as commissioners they service would want to make it as easy as possible for its users and would work with colleagues in software to see what could be achieved.

- What training/information was in place to ensure staff are aware of all TEC options so that they can most effectively complete the Care Act Assessments – would it be/was it already easy for staff to see a "catalogue" of TEC options? It was noted that not all staff themselves are comfortable with new technology and there would have to be a culture change to embrace this, but encouragement would be given for staff and

colleagues to be aware of and to consider alternatives and there would be TEC champions within the operational teams to help support this.

- When would the priority outcomes be available as measurable data to be reviewed? It was noted that there was a Commissioning Monitoring Group with colleagues from health and there was monitoring from the Better Care Fund to look at the impact as it progressed. Once they had gone through the tendering exercise they would expect to see further improvements and would be happy to share the data with the Committee at that time.

- Had the 18-month joint project with Swindon for technology for independence already started? It was noted that his project had already started.

The Chairman asked if the details of the scheduled engagement events for the Swindon project could be shared with the Committee.

Resolved:

That the Health Select Committee:

1. **Be informed of the engagement events for the Swindon project.**

2a. **Delegates to the Chair and Vice Chair to receive a briefing in 6 months in relation to the data for the outcomes listed as priorities (on page 38 of the agenda) to indicate progress/direction of travel.**

2b. **Receive a full update on the delivery of priorities in 12 months.** *This may be amended depending on the outcome of the 6 month briefing at 2a. above.*

3a. **Delegates to the Chair and Vice Chair to receive a briefing in 6 months on the implementation plan for TEC Care (including an update on the number supported with TEC care with regards to the 60% target of funding packages).**

3b. **Receive a full update on the implementation plan for TEC Care in 12 months.** *This may be amended depending on the outcome of the 6 month briefing at 3a. above.*

4. **Delegates to the Chair and Vice Chair to receive a briefing on the delivery of the Technology for independence project with Swindon, 12-months into the 18-months project. This update should include performance measures and feedback from customers.**

5. **Receives a short report once the pilot for Technology for independence is completed (18 months) presenting evaluation of the pilot, outcomes, feedback from customers, and the proposed way forward. Further information may be requested for this update report**

based on the briefing to Chair and Vice Chair requested 12-months into the pilot.

59 **Wiltshire Council and Wiltshire Integrated Care Board (ICB) Dementia Strategy Update 2023-2028**

The Chairman welcomed Jo Body (Senior Commissioner), Alison Elliott (Director – Commissioning) and David Leveridge (NHS) who were in attendance to give an on update on the Dementia Strategy 2023-28, following consideration by the committee in June 2023. The report also included an overview of the dementia advisors and community services contracts and an update on the dementia diagnosis rates in Wiltshire.

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

- That dementia was a national challenge with approximately 950,000 people living with dementia in the UK costing £25 billion per year. Supporting a person to live at home for as long as possible was less expensive than a care home admission and better for a person's quality of life but this was only possible due to the huge caring contribution made by unpaid carers and specialist support offered by providers;

- The Wiltshire Dementia Strategy for 2023-28 was an all age, joint strategy supporting people with dementia and their carers – there was a One Council approach with dementia being everybody's business, not just social care;

- The priority outcomes included preventing well, diagnosing well, supporting well, living well and dying well;

- There were 55 actions identified in the Strategy and after consideration of the themes, 8 priority actions were identified;

- Two community based contracts were being delivered by Alzheimer's Support – Dementia Advisors and Dementia Community Services. Whilst the Council hold contractual responsibility for these, they were funded jointly with the Integrated Care Board and the contracts commenced on 1 April 2024;

- The Dementia Advisors Service provides signposting, information and support for eligible people with/have a suspected diagnosis and their carers who live in Wiltshire. There were 5 key elements – information, identify needs, support plan, reviews and carers support;

- Dementia Community Services deliver 800+ session/groups with over 8500 attendees. The key aims are supporting an active lifestyle, reduce isolation and to provide practical and emotional support; and

- The present waiting time for a GP referral to a Avon and Wiltshire Mental Health Partnership (AWP) memory nurse is 6 weeks, with a further 3 months wait for consultation and diagnosis. The Memory Service works closely with Alzheimer's Support to ensure a speedy referral to Dementia Advisors.

The Committee asked the following questions which included but were not limited to:

- I think highly of the service that Alzheimer's Support provides but feel that there is just not enough of it – what are the Dementia Advisors going to do to address the wishes and needs of their users? It was noted that there were follow on reviews with all those users that are referred to them. The Dementia Advisors give support and signpost them to additional support and services and they can access to find help in specific areas. There was data available to give details of how many users receive the help and support they need.

- Aware that there no support sessions for those dealing with the early stages of dementia to go to but there are groups and activities for those who are more advanced with dementia. It was noted that there comes a point when a person's dementia is too advanced for them to be able to sustain their attendance at support/activity group when they have to move to a care home or get sectioned. Officers agreed to consider the issue of a lack of early support and would look at this through their priorities.   It was also noted that there was advanced dementia support from the AWP if the user was eligible for social care needs and this would also consider the use of technology enabled care to so that they could stay at home for as long as possible. It was further noted that there was new work ongoing to reduce the risks of dementia in first place and it was hoped that they would see cognitive change work being carried out earlier to support healthy aging approach.

- Regarding the support sessions/activities it is noted that you are aiming for 1000 per year which would mean around 20 activities – aware that there are only 4 activities listed in the Salisbury area – are they others, how will you increase the number and access those find it difficult to engage. It was noted that the Council were working with Alzheimer's Support to find out what they offer as the data for their activities is shared with the Council. It was acknowledged that it was a stretch target to deliver what was set out in the contract but they would also work with other partners who may be delivering already in areas that Alzheimer's Support cannot reach, by all working together they would aim to reach the target.

- The diagnosis process for someone who is showing signs of dementia can take some considerable time with waiting weeks to get a GP appointment

and then waiting for an assessment. There is medication available to those in the early stages of dementia to slow it down to improve the quality of life for some time. Whilst that information is available it is difficult to find out how to access it which is challenging. It was noted that the dementia diagnosis process can be lengthy and the aim was to bring down wait times for patients to move through the process in shortest time possible and effectively using the right tests. Public engagement was important as some were leaving it too late to seek help. It was hoped that more would come forward at an earlier stage so the treatments can start working. It was highlighted that within the priority actions information and awareness for the general public was highlighted.

- It is important for the Committee to be aware of developments within the strategy what is being brought forward to progress it – we need to know about the organisations and infrastructure in place. It was noted that this was a valid point and that the service would be putting smart targets on the 8 priority actions to be delivered by 31 March 2025 which could then be shared with the Committee.

- The dementia roadmap is brilliant but am concerned that not everyone who receives a diagnosis gets good support following this. Some are not aware of the types of dementia and are not all directed to the Dementia Advisors (who do great work). How was the service working with GPs to ensure that everyone receives the same support following a diagnosis? It was noted that the Officer had looked through the contract mobilisation where they get details of the dementia referrals by area and GP surgery and her ICB colleague also has data on referral rates for all GP surgery's and they would marrying this data up with what they receive from Alzheimer's Support and overlaying it so they would have a much better picture going forward and go on to build up much strong relationships with GPS where they need to and share best practice.

- In Bradford on Avon there is a huge range of activities and support for those with dementia and training for businesses etc. Do Alzheimer's Support reach out proactively to town councils, parish councils and voluntary groups to create similar synergies in other Wiltshire areas? It was noted that Bradford on Avon and Calne are best practice exemplary towns who do an amazing job regarding dementia support. Officers look to utilise and learn from their best practice and how this could be spread across the county but of course they are limited with who is willing to take this on. It was highlighted that a Community Champion can help bring in voluntary sector support and that Officers were working with Area Boards to increase the number of Carers Champions to assist with meeting the needs of people living with dementia and their carers and encourage engagement with others.

- The Council had a Dementia Friendly campaign a number of years ago – perhaps consideration could be given to resurrecting the campaign from May 2025 with the new Council in place working with Area Boards to bring in dementia services to communities where they may be forgotten in areas. It was noted that there were examples of good practice and from the AWP and the Council perspective they were working hard to meet needs but agreed that they had not maximised Councillor support and the use of Area Boards was a helpful point in raising awareness across the county.

- When the Committee received a Dementia Strategy progress update in June 2023 they asked if the strategy foresaw the utilisation of screening programmes and the possibility of using disease-modifying treatments. Was there an update on this? It was noted that there were a number of new treatments available but that they were not yet approved for NHS use there could be private use. There was no changes to the screening as yet.

The Chairman thanked Officers for the update and particularly the dementia diagnosis rates. He asked if in future reports, the numbers of those diagnosed, as well as the numbers anticipated, could be shown against percentage of that tranche of the population (over 65 years old) to support contextualisation.

Resolved:

That the Health Select Committee

1. **Receives an update report around March 2025 to include:**

   a. **Demonstrating the implementation of the Dementia Strategy 2023-2028 (highlighting any key changes if required), including the eight key priorities listed in paragraph 40 of the report;**
   b. **A year's overview of delivery of the KPIs set for the Dementia Advisor Contract;**
   c. **A year's overview of delivery of the KPIs set for the Dementia Community Services contract.**

2. **Receives a link to the Roadmap and Support Village, to be shared with their constituents.**

3. **Invites officers to carry on engaging with Area Boards, including considering the possibility of running the Wiltshire Dementia Friendly campaign again in the next council. This may also be an opportunity to further promote information with regards to waiting time process for diagnosis and information to encourage people to come forward at the earliest stage possible, in line with priority 1.**

Appendix 1 to Minutes - Update on Wiltshire Dementia Strategy 2023-2028

60 **Update on the Implementation Plan of the Integrated Care Strategy**

The Chairman welcomed Leanne Field (Head of Delivery NHS BSW (ICB) who was in attendance to give an update on the Implementation Plan of the Integrated Care Strategy.

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

- The original plan was developed and signed off in 2023 and a high level refresh had now been undertaken covering the two years 2024/25 and 2025/26. The full implementation plan was available in their website and would be circulated the committee following the meeting;

- The plan had been developed with regard to the Integrated Care Strategy, the ICB Operating Plan and other system partnership key plans, particularly the Joint Local Health and Wellbeing Strategies and they were working with the 11 Delivery Group Leads (Programme Boards);

- The 2023-24 successes across BaNES, Swindon and Wiltshire included the development of an Integrated Neighbourhood Team in Swindon, a youth worker pilot, unborn children and those under 1 years old system improvements and over 7000 staff completing the Oliver McGowan training on learning disability and autism;

- Specific successes during 2023-24 for Wiltshire included improvements in obesity levels and in services for children and young people;

- The Integrated Care Plan objectives for 2024-25 were a focus on prevention and early intervention, fairer health and wellbeing outcomes, provision of excellent health and care services and financial recovery and sustainability;

- Some of the Wiltshire priorities for 2024-25 would include areas such as healthcare inequalities, neighbourhood collaboratives and system flow; and

- The ICB were awaiting the findings from the Lord Darzi Rapid Review of the state of the NHS, which was expected to impact on the NHSE refresh of the 10 year plan which is due to take place in Spring 2025. The ICB would consider the Darzi Review and 10 year plan update in its 2025-26 iteration of the Implementation Plan, ensuring priorities are aligned.

The Committee asked the following questions which included but were not limited to:

- It was felt to be important that performance and delivery by health care providers and the Council should be integrated where possible – was there anything in plan to show the Care Boards now being integrated had benefited people and could you reassure us that they are working better than they were before. It was noted that there was a specific section in the implementation plan for Wiltshire which had been co-written by health and Council colleagues and the priorities had been developed through alliance and the wider partners with flow through.

- On page 55 of the agenda pack shows the Wiltshire priorities for 2024-25, how would these be measured and was there a set of metrics behind those to determine quality and performance. It was noted that there were national metrics which officers would look into, and it was believed that they were also monitored through the alliance.

- There were concerns lack of pharmacies in the Amesbury area raised. It was noted that this would be addressed outside of the meeting.

Resolved:

That the Health Select Committee

1. **Receives a performance report in a year's time showing delivery of the Wiltshire Priorities (page 55 of the agenda) for 2024-25 in relation to:**
   o **Healthcare inequalities**
   o **Neighbourhood collaboratives**
   o **System flow**

2. **Delegates to the Chair and Vice Chair to have sight of the report when it is being drafted to ensure that it provides performance information that the committee can meaningfully review.**

61 **Update on Care Quality Commission (CQC) Inspection of Adult Social Care**

The Chairman introduced an update on the upcoming CQC inspection of Adult Social Care scheduled for 24 to 26 September 2024 and it was noted that the Chairman and Vice Chairman had both been invited to attend a meeting with the CQC Inspectors during that time.

The Chairman invited Emma Legg (Director – Adult Social Care) to talk to the presentation that was shared as part of the agenda supplement pack and the following was highlighted:

- An overview of the inspection timeline which would include inspectors being on site for 2.5 days and selecting up to 10 of the 50 identified cases

to ask for their customer journey feedback and those involved with their care;

- Staff were working hard to finalise the timetable for the inspectors to speak with front line staff and partner organisations including the Chair and Vice Chair of this committee;

- The inspection feedback meeting was planned for 2 October and the findings report would be drafted to share with the service. The final version when prepared would be shared with the committee; and

- The Senior leadership presentation to the CQC had been their opportunity to explain how the service was organised, the strengths, outcomes and ongoing development areas for each adult social care operational and commissioning service and with a number of spotlight focus areas also being highlighted.

The Committee asked the following questions which included but were not limited to:

- Whether the service was ready and prepared for the inspection and if everyone understand their object and place in the team. It was noted that all of the teams involved had worked really hard to get to this position and they were proud of the passion and commitment shown and that they felt that they were in a much stronger position than they were in 12 to 24 months ago. A lot of time had been spent reflecting on performance and they had been given the opportunities to share their stories and say what they feel works work and what challenges they face.

- If this was an overall inspection of Adult Social Care or if it would focus on any particular aspect? It was noted that the overall assessment framework covered many areas which had an enormous scope. The inspectors would focus on intelligence data which would lead them to look at specific areas.

- How were the 50 cases shared with CQC selected to be listed for possible further inspection? It was noted that these were random but covered a range of diagnoses and conditions to ensure that there were some broad categories to cover all of the current population.

Resolved:

That the Health Select Committee

1. **Receives a brief report presenting the outcomes of the CQC inspection at the next available committee meeting and how this compares with the position presented on slide 4 of the agenda**

supplement (which are the strengths and areas for further development).

2. **Reviews its forward work programme, if required, based on the outcomes of the CQC inspection.**

62 **Appointment Process for Stakeholders and Non Voting Members**

The Chairman reported that the report was circulated in the agenda supplement and presented options available to the Health Select Committee with regards to the appointment of non-elected non-voting co-opted members which he welcomed to show the value recognised in the co-opted members' contribution to overview and scrutiny.

There were no questions from the Committee.

Resolved:

That the Health Select Committee:

1. **Amends its agenda to reflect the position of co-opted members as "non-elected non-voting members" to offer clarity on the role and align with other committees of the council.**

2. **Confirms that the following appointments of co-opted members remain until the in-depth review is concluded:**
   - **Caroline Finch (Wiltshire Centre for Independent Living)**
   - **Diane Gooch (Wiltshire Service Users Network)**
   - **Irene Kohler as a representative of Older Person's Champions (previously as a representative of Healthwatch Wiltshire)**

3. **Delegates to the Chair and Vice Chair to request an in-depth review of the process for the appointment of co-opted members for all overview and scrutiny committees at the next available meeting of the Overview and Scrutiny Management Committee.**

4. **Delegates to the Senior Scrutiny Officer to contact Healthwatch Wiltshire to invite them to nominate a representative.**

63 **Forward Work Programme**

The Committee's noted the Forward Work Programme (FWP) would be updated to reflect any changes made during the meeting.

A Committee member suggested that there could be a future report from the Adult Social Care service which gave an overview of the major contracts that they tender out, acknowledging that these would be approved by Cabinet but

that the Committee should be given the opportunity to be aware of them and scrutinise as relevant.

Resolved:

That the Health Select Committee:

Approve the Forward Work Programme with the additions agreed at the meeting.

64 **Urgent Items**

There were no urgent items.

65 **Date of Next Meeting**

The date of the next meeting was confirmed as Wednesday 20 November 2024 at 10.30am.

(Duration of meeting: 10.30 am - 12.40 pm)

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

Press enquiries to Communications, direct line 01225 713114 or email communications@wiltshire.gov.uk

Dementia Update
Health Select
10th September 2024

Wiltshire Council

Dementia Strategy – a **national** challenge

- Approximately 950,000 people live with dementia in the UK. 1 in 11 people aged 65+ have dementia. Dementia costs £25 billion per year in the UK

- In 2022, dementia was the leading cause of death in the UK. Many dementias do not yet have a treatment to prevent, cure or slow progression

- Supporting a person to live at home for as long possible is less expensive than a care home admission, and better for the person's quality of life

- However, this is only possible due to the huge caring contribution made by unpaid carers and specialist support offered by our providers

Wiltshire Council

Wiltshire dementia strategy – 2023-2028

- All-age, joint strategy – supporting people with dementia and carers
- Aligned to national guidance (e.g. NICE), policy and strategy (National Dementia Strategy), as well as local strategies
- Informed by extensive co-production and engagement during 2023 – public, professionals, clinicians, Members (e.g. via Health Select) – over 400 people engaged, including 150+ people with dementia & carers
- Strengths-based approach, focus on prevention and early intervention, raising awareness, supporting communities, building resilience, enabling people
- **One Council approach – dementia is everybody's business, not just social care**

Wiltshire Council

Priority Outcomes

Preventing well

Diagnosing well

Supporting well

Living well

Dying well

Wiltshire Council

Priority Actions

- **Priority 1**
  - create a handbook (awareness, signposting) multiple languages and formats
- **Priority 2**
  - update dementia roadmap
- **Priority 3**
  - ensuring best practice is equitable across Wiltshire
- **Priority 4**
  - equitable coverage of Dementia Advisors, improve GP / PCN signposting

- **Priority 5**
  - audit of care professional's skillset, review accommodation provision
- **Priority 6**
  - equitable coverage of Dementia Community Services across Wiltshire
- **Priority 7**
  - extensive training matrix, professionals, carers, public (free and ££)
- **Priority 8**
  - high quality end of life care

Wiltshire Council

Commissioned Services

- Two community-based contracts delivered by Alzheimer's Support
  - Dementia Advisors (£240,000 per annum)
  - Dementia Community Services (£340,000 per annum)
- Section 75 agreement with Wiltshire Council holding contractual responsibility
  - 50/50 funding split ICB / Wiltshire Council
- Contracts started 1st April 2024
  - Contract term 2+1+1 (break clause yr2 & yr3)

Wiltshire Council

Dementia Advisors

- Service provides signposting, information and support
- Eligible people – with / suspected diagnosis and their carers who live in Wiltshire
- Access routes – self-referral, family, friends, healthcare professional, voluntary partners
- 5 key elements – Information, Identify needs, Support Plan, Reviews & Carers Support
- Work with Age UK, Citizens Advice Carer Support, Dorothy House, Acute Hospitals, Memory Service, & Care Homes
- Promote awareness and education campaigns
- Deliver training – Living with Dementia Programme
- Maintain Wiltshire Dementia Roadmap and 'Support Village'

Wiltshire Council

Dementia Community Services

- Service delivers 800+ sessions/groups pa with over 8500 attendees
- Key aims – active lifestyle, reduce isolation, provide practical / emotional support
- Access routes – self-referral, family, friends, healthcare professional, voluntary partners
- Types of groups – Memory Cafes, Music/Singing, Movement & Exercise, Discussion, Art/Craft, Memory Shed & Muddy Boots and Carers Support
- New contract asks for significant increases in offering aligned with stronger local partnerships to deliver equitable coverage across the county

Wiltshire Council

Dementia Diagnosis & Treatment

- 2013 introduction of Dementia Local Enhanced Service (LES)
  - Greater assessment & diagnosis in Primary Care & Memory Clinics
  - Specialist AWP clinicians
  - Greater capacity to diagnose across primary & secondary care
  - Resulting in significantly reduced waiting times for assessment and treatment (prior to LES waiting times were more than 2 years)
- Present waiting time GP referral to AWP memory nurse is 6 weeks, with a further 3 months wait for consultation and diagnosis
- Memory Service works closely with Alzheimer's Support to ensure speedy referral to Dementia Advisors

Wiltshire Council

Questions?

Wiltshire Council

Urgent Care in Rural Communities

Health Select Committee

20th November 2024

Overview of UEC approach across BSW

- Our focus and priority is to ensure we provide safe services with a system wide approach

- Key objectives are to improve ambulance response and A&E waiting times by supporting admissions avoidance and hospital discharge, maintaining increased acute bed and ambulance service capacity

- Providers to deliver the following key performance outcomes:

  – Improving A&E waiting times, compared to 2023/24, with a minimum of 78% of patients seen within 4hours in March 2025

  – Improve Category 2 response times to an average of 30 minutes across 2024/25

- Partners worked collaboratively to develop our system operational plan for 2024/25 and these were submitted in May 2024 which covers the whole of the financial year and not specific to Winter period (Oct 24 to Mar 25).

- In UEC system partners utilised the work of the demand and capacity to develop our local annual plans to support out of hospital capacity and the investment needed to support out of hospital pathways

- 3 key transformational work programmes (Care Coordination, Virtual Wards and Intermediate Care (now referred to Flow programme) and a number of improvement programmes

BSW Urgent Care and Flow 24/25 Plan

Urgent Care and Flow Delivery Group

Focus areas

Virtual Wards	System Care Coordination	Process Improvements	Locality Plans
Additional system capacity, national guidance statues requirement to provide additionality to acute trust beds in the system	Attendance and admission avoidance through diverting ambulances / attendances away from acute trusts	Opportunity to delivery improvements in LOS & improve alternatives in acute trust flow, timely interventions for patients by senior clinical decision makers	Out of hospital capacity to support out of hospital discharges to support delivery of NCTR

Activities / Opportunities

Virtual Wards
- BSW Integrated model (step up and step down)

Care Coordination
- Falls
- UCR
- Community Services

Acute
- Flow
- SDEC
- Ward Processes

Community
- Referral pathways P1-P3
- Intermediate Care
- Streaming and Redirection

Locality Plans
- Capacity
- NCTR

Outcomes & Measures (24/25 Impact)

- Increase utilisation of VW beds
- Reduce acute trust occupancy
- Reduce attendance and admission
- Reduce LOS of complex frail patients

- Reduce ambulance conveyance
- Reduce attendances and admissions
- Reduce LOS
- Reduce overcrowding in ED and associated harms
- Decrease in handover delays

- Reduction time between DRD and discharge date
- Increase productivity
- Reduce LOS and NCTR nos
- Increase <1 day LOS
- Improve 4 performance & Cat 2 response

- Reduce LOS in acutes and community pathways
- Reduce NCTR nos
- Achieve JB% in line with national guidance
- Reduce acute escalation capacity and associated costs

Reductions in activity expected in 24/25

Virtual Ward 24/25
- Step up = 120-300 NELs per month / 22-55 acute beds
- Step down = 12-29 acute beds

System Care Coordination
- 11 admission per month,
- 2 acute beds,
- 25 ED attendances per month. 33 ambulance conveyances per month

Process Improvement
- Handover delay reduction
- ED performance to 81.3%
- Reduction in bed occupancy to 96%
- NCTR 9%

Locality
- New NCTR target of 9% agreed across system

Forecasted Savings %

RUH
- Bed Occupancy – 92%
- Discharge lounge occupancy – 40pts per day (70% by 10 am and 100% by midday)
- % discharged by 12 midday – 33%
- Zero P0 delays > 24hrs post EDD
- < 1 day LOS (SDEC) – 45% of admissions
- > 7 day LOS – less than 188 patients
- >14 day LOS – less than 96 patients
- NCTR numbers – reduction to 55 patients

GWH
- Reducing daily UTC breaches by c50% (+5 breaches mitigated oer day) including Mar 2025 to improve Type 3 performance to 95+% consistency (92% in Mar 24)
- Rapid assessment and treatment model for majors chairs, improving ED non-admitted performance c1-2% and mitigates safety risk
- Further improvements identified that have not yet been quantified

SFT
- Establishing a formal CDU (pathway on SSEU with ring-fencing of 4 spaces. Trial in Mar 24 demonstrated the ability to avoid 8 breaches daily. – 3.6% estimated improvement*
- Establishing a booked minors clinic (6 slots) to send appropriate patients home overnight to reattend a booked appointment the next day – 2.6% estimated improvement*
- Removal of all expected patients attending ED and awaiting review (Av 3.3 per day). – 1.5% improvement*
- Improvement in bed occ to enable better flow

Demand management

Bath and North East Somerset, Swindon and Wiltshire Together

There has been an increase in non-elective demand. The table below outlines the areas where we have seen an increase in activity and outlines the actions being taken to address the challenges. Prevention will play a significant role in the future management of UEC demand and will be through the delivery groups that relate to Primary Care and Community, THRIVE (mental health) and Children & Young People.

Focus areas	Primary Care	111 and IUC	Ambulance and conveyance	Attendances	Admissions	Internal process improvements	Discharges
Issue	• Demand for appointments	• Dental calls • Repeat prescriptions • Respiratory	• UCR response • Mental Health Demand • H&T to ED • More activity through Care Co	• Paediatrics • Wound care at UTCs and MIUs • RTT waits • Plain Xray requirements	• Paediatrics	• Flow through acute trusts	• NCTR high numbers • Variation in processes
Actions	• Primary Care team to work with PCNs	• Repeat prescription • Respiratory – hay fever / covid • Primary care PB actions • Testing in the DOS for OOHs ranking	• UCR inc falls • THRIVE board to explore the data • Identify short, medium and long term • Prevention – short, medium and long term • Care Co steering plan to increase activity • Pilot dates for 111 online 999 validation	• Wound care T&F group established • Audit of ED attendances of patients on RTT lists with focus on gastro complaints • Investigate benefit of C-ray Car (Cornwall) • GP Practice prevalence for ED atts	• UEC CYP group to review activity growth data to understand demand • CYP virtual wards	• Robust oversight and delivery of each Acute's Trust improvement programmes • LOS improvements • Direct access to Hot Clinics and SDEC	• Flow programme to accelerate • Evaluation of Locality schemes • Relaunch of revised Escalation policy for OOA patients • UEC Demand and Capacity group to review impact of locality schemes supporting P1-P3 discharges from back door and identify additional requirements for Winter 24/25

Locality funded schemes 24/25

Wiltshire	
Plan	**Funding/Source**
Integrated Equipment (Excluding continence) – Discharge Fund	£0.800K (ASC BCF)
Dom care – in house	£0.829k (ASC BCF)
Dom Care to support 2hr rapid response (UCR)	£1.100k (ASC BCF)
Brokerage Support	£0.190k (ASC BCF)
WH&C in-reach Wilts Council in-reach	£0.310 UCR £0.339 ASC BCF)
Wilts Council Flow Staff (Supports UCR)	
Wilts Council reablement staffing	£0.228K (ASC BCF)
Intensive enablement support team (LDA & Mental health)	£0.066k (UEC s75)
Wiltshire P1 Home First Capacity	£1.640k (UEC BCF)
Wiltshire P1 Complex cases	£0.300k (UEC BCF)
RSV Childrens Winter clinic capacity (SFT)	£0.040k (UEC)

BSW primary care services are a vital part of our system serving almost one million patients

- Our primary care services serve a combined population of 940,000
- We are made up of 84 GP practices, 28 Primary Care Networks
- As an ICB, we spend c.£175m a year on primary care services including c.£12m on locally commissioned services.
- We are now responsible for the delegated commissioning for pharmacy, ophthalmology and dental services on behalf of NHS England.

GI2347– Bath and North East Somerset, Swindon and Wiltshire Primary Care Networks

GPs By Primary Care Network, Community, Acute & Specialist Hospitals

In recent years we have seen an increasingly challenging operating context for primary care
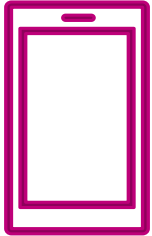
We are seeing increasing demand across all channels

- Significantly increased demand for same day appointments, with more patients considering their condition to be urgent
- Primary Care is seen as the default provider of care
- Particular increase in the working age, generally well population accessing general practice
- Increase in "health anxiety" and mental health consultations
- Increasing operational fragility

Clinical capacity stretched across routine, urgent, long term condition management and preventative services

- Backlog of routine chronic disease management including diabetes, respiratory and heart disease
- Continuing to see presentations of undiagnosed illnesses following lockdowns
- Continued effort to offer preventative services (immunisations and screening) and care navigation
- Continuing to manage increasing numbers of people on the waiting lists to access community and secondary care services

General practice financial, workforce and premises resilience pressures

- Increased staff turnover due to pressures in general practice
- Workforce capacity is stretched to maximum across all services
- Personal GP stress and burnout, and low morale
- Recruitment and retention issues for GP Practices and PCNs
- Inability to fully absorb cost of living and inflationary pressures
- High use of locum and agency staff required to maintain core services in some areas
- Longstanding premises pressures increasingly limiting ability to maintain or expand services

Pharmacy First

Pharmacy First enables GP and NHS111 referral of patients to Community Pharmacy for Minor Illnesses and includes 7 new clinical pathways.

The pathways enable community pharmacists to treat patients for the most common conditions without the need for a prescription.

The community **pharmacist will clinically assess the patient** and then:
- **Treat if clinically appropriate** via patient group direction (PGD)
- **A PGD allows a pharmacist to supply specific prescription only medicines.**
- Provide advice and support via over-the-counter medicines if appropriate
- Refer patient onto another health professional or GP practice if clinically required

All Wiltshire Pharmacies have signed up to deliver the Pharmacy First Service.

Currently we only have data at BSW level, but locality specific dashboards are in development, which we can share in future.

Since the service launched in January 2024 to end September, there have been **47,216 consultations** for minor illnesses or clinical pathways (PGD) in BSW pharmacies, **plus 10,142 consultations** for urgent supplies of repeat medicines.

The vast majority of consultations, around **96%,** are completed by the pharmacy with no need for an onward referral. Where referral is needed, the most patients are referred to their general practice.

NHS Providing NHS services

We can help you with seven common conditions without needing a GP appointment

- Sinusitis (adults and children aged 12 years and over)
- Sore throat (adults and children aged 5 years and over)
- Earache (children and young adults aged 1 year to 17 years)
- Infected insect bite (adults and children aged 1 year and over)
- Impetigo (adults and children aged 1 year and over)
- Shingles (adults aged 18 years and over)
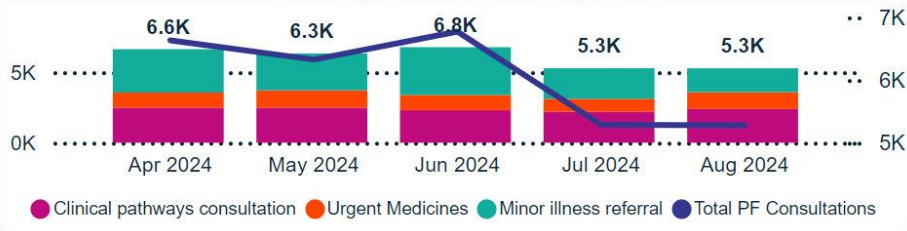- Urinary tract infection (women, aged 16 to 64 years)

Ask us for more information about this free* NHS service

Visit your Pharmacy First!

*NHS prescription charge rules apply where a medicine is supplied

Total number of Pharmacy First consultations across all pathways at pharmacy level

6.6K   6.3K   6.8K   5.3K   5.3K

Apr 2024   May 2024   Jun 2024   Jul 2024   Aug 2024

● Clinical pathways consultation ● Urgent Medicines ● Minor illness referral ● Total PF Consultations

No of Pharmacy First clinical pathways consultations -level - complaint/condition

● Acute Otitis Media
● Acute Sore Throat
● Impetigo
● Infected Insect Bites
● Shingles
● Sinusitis
● Uncomplicated UTI

885   858   759   651   711
632   637   593   611   508

Apr 2024   May 2024   Jun 2024   Jul 2024   Aug 2024
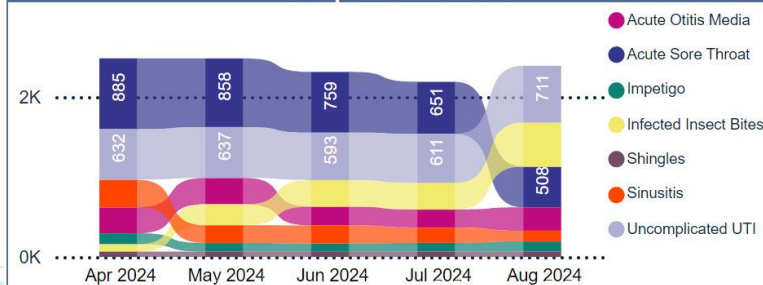
PF consultations by Services (weighted by list size)

BNSSG   DEV   BSW   DOR   SOM   GLOS   COIS

● SW ICBs   — National Average   - - - BSW ICB
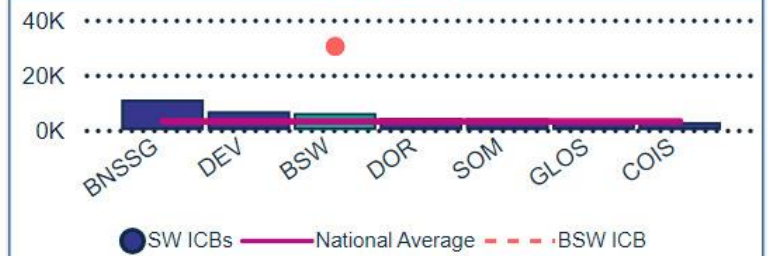
South Western Ambulance Service NHS Foundation Trust - Update

Category 1 Mean Response Times
By Local Authority Area

	ICB	2023				2024		
		Q1	Q2	Q3	Q4	Q1	Q2	Q3
Swindon	BSW	0:07:56	0:07:36	0:07:35	0:07:57	0:07:55	0:08:08	0:07:31
Bath and North East Somerset	BSW	0:09:15	0:08:38	0:08:16	0:08:55	0:09:11	0:08:40	0:08:19
Wiltshire	BSW	0:11:17	0:10:58	0:10:31	0:11:06	0:11:09	0:11:15	0:10:59
Vale of White Horse	BSW	0:12:36	0:11:23	0:12:35	0:13:34	0:11:51	0:16:52	0:11:09
South West Total	**ALL**	**0:09:39**	**0:09:22**	**0:09:20**	**0:09:58**	**0:09:48**	**0:09:38**	**0:09:36**

National Category 1 Mean Response Time		**0:08:36**	**0:08:22**	**0:08:23**	**0:08:39**	**0:08:23**	**0:08:16**	**0:08:14**

Category 2 Mean Response Times
By Local Authority Area

Local Authority	ICB	2023				2024		
		Q1	Q2	Q3	Q4	Q1	Q2	Q3
Bath and North East Somerset	BSW	0:42:35	0:38:41	0:32:09	0:46:04	0:42:26	0:37:13	0:35:00
Swindon	BSW	0:51:28	0:44:14	0:46:10	0:55:56	0:52:47	0:53:29	0:37:02
Wiltshire	BSW	0:48:24	0:44:07	0:40:53	0:50:20	0:47:04	0:47:30	0:40:01
Vale of White Horse	BSW	1:04:34	0:57:49	0:54:41	0:55:08	0:58:08	1:02:25	0:45:16
South West Total	**ALL**	**0:43:52**	**0:37:40**	**0:38:47**	**0:50:20**	**0:44:34**	**0:40:17**	**0:38:11**

National Category 2 Mean Response Time		**0:34:40**	**0:32:34**	**0:33:39**	**0:42:03**	**0:36:45**	**0:32:35**	**0:32:17**

Response Times / Activities

Response times across the South West have been under increasing pressure over the last two years, linked both to increases in activity volumes and hospital handover times at acute hospitals.

For the first six months of the current financial year (April to September 2024) the Trust has seen activity volumes increase in the BSW area by 6.6% compared to the same period in 2023.

The average hospital handover times during this period (in BSW) is around a 69 minute delay per patient (compared to the 15-minute national standard).

The Trust has invested in additional resourcing levels to help improve response times across BSW, but it is heavily reliant on consistent improvements in hospital handover times.

South Western Ambulance Service NHS Foundation Trust - Update

Hospital Conveyance and Handovers

The Trust currently manages a high proportion of activity without conveying the patient to an Emergency Department, which helps avoid unnecessary attendances.

In BSW, there is a Care Coordination (CareCo) Hub. The Hub brings together multi-disciplinary teams, including ambulance service clinicians and health and social care professionals. They provide real-time access for patients, to health and urgent care services based within the community or secondary care settings to ensure they get the right care, in the right place, first time. The hub supports a reduction in avoidable emergency department admissions and therefore avoidable ambulance dispatches and conveyances, whilst improving patient outcomes, quality of care and experience.

Handover delays at emergency departments remain one of the Trust's biggest challenges. In 2019/20 average handover times across the South West were around 13 minutes per patient.

In recent months, the average handover time in BSW has risen to over one hour per patient – significantly increasing the length of time taken to manage each incident and decreasing the remaining resource available to respond to other patients. This pressure is further increased overnight.

% of Incidents Conveyed to ED
By Local Authority Area

Local Authority	ICB	2023				2024		
		Q1	Q2	Q3	Q4	Q1	Q2	Q3
Swindon	BSW	35.8%	37.4%	36.4%	32.4%	31.8%	32.1%	37.1%
Vale of White Horse	BSW	33.6%	33.1%	36.1%	38.4%	32.4%	35.5%	37.1%
Wiltshire	BSW	37.0%	37.6%	39.3%	37.3%	37.1%	37.6%	38.3%
Bath and North East Somerset	BSW	39.7%	42.4%	42.3%	38.8%	39.2%	41.0%	41.3%
South West Total	**ALL**	**41.0%**	**43.1%**	**42.6%**	**39.6%**	**39.1%**	**39.4%**	**39.9%**

Average Handover Times at Acute Hospitals

Hospital	ICB	2023				2024		
		Q1	Q2	Q3	Q4	Q1	Q2	Q3
SALISBURY DISTRICT HOSPITAL	BSW	0:37:23	0:26:39	0:24:50	0:30:56	0:25:17	0:26:33	0:25:27
ROYAL UNITED HOSPITAL - BATH	BSW	1:14:57	0:51:51	0:38:23	1:06:46	1:14:07	1:17:43	0:56:48
GREAT WESTERN HOSPITAL	BSW	1:13:56	0:54:05	1:16:07	1:30:30	1:38:58	2:08:59	1:12:43
Average Handover Time Across All South West Hospitals		**1:10:52**	**0:44:30**	**0:48:28**	**1:15:18**	**1:09:06**	**0:59:27**	**0:49:30**
Average Handover Time Across - National (from Oct 23)					0:36:36	0:36:00	0:32:28	0:30:47

Wiltshire Council

Health Select Committee

20 November 2024

Service User Engagement Contract

Purpose of report

1. To update the Committee with details of the Service User Engagement contracts commissioned by Adults Commissioning and Wiltshire ICB, detailing projects conducted through 2024.

Background

2. In January 2024, the contracts for Service User Engagement were jointly commissioned by Wiltshire Council and Wiltshire ICB.
3. Service User Engagement (5-18) was awarded to Wiltshire Centre for Independent Living.
4. Service User Engagement (18+) was awarded to Voice It Hear It, a consortium of Voluntary Sector Organisations, Community First, AGE UK Wiltshire, Wiltshire Service Users Network, Alzheimer's Support, Wessex Community Action and Celebrating Age Wiltshire.
5. Each contract notes the importance of ensuring Wiltshire Communities are consulted and engaged with new innovations or changes to services provided by Wiltshire Council.
6. The providers of these contract are expected to undertake duties to facilitate coproduction enabling people using health and social care service to have input in every stage of the Commissioning cycle.

Main considerations for the committee

7. Since the awarding of the contracts the providers award have supported Wiltshire Council teams and Wiltshire ICB with many engagement projects to help officers understand resident's experiences of services in Wiltshire.
8. The contract notes that continuous engagement should include the following groups of people:
- Learning disabilities and difficulties
- Physical impairments
- Sensory impairments
- Mental health needs
- Autism spectrum conditions
- Older adults with conditions such as frailty and cognitive impairment
- Social, emotional, and behavioural needs
- Speech, language, and communication needs
- Substance use disorder

- Any other factors impacting on a child, adult or family's ability to achieve positive outcomes and for which service are provided (e.g trauma, domestic abuse, exploitation, etc)

The following engagement projects have been completed and/or are being completed this year:

Adult Social Care and Commissioning:

Prevention strategy
Understanding how Wiltshire residents believe the Prevention Strategy will affect them as users of social care, the provider is also supporting Wiltshire Council with creating videos and easy to understand documentation to make the strategy more accessible.

Accommodation strategy (Adults)
Presentation of the strategy detailing the approach to housing and support services for communities in Wiltshire. Due to an increase in current population of adults 65+ in Wiltshire by 22%. Provider will support people to communicate how they would like to have choice and control in their own home and remaining independent.

Technology Enabled Care (TEC) engagement
Provider will support young people aged 18-25 using social care services to engage with Commissioner on what technology enabled care they use to remain or support with independence, enabling the Commissioner to understand any new innovations.

Your Care Your Support Website
Provider to engage with users of the Your Care Your Support Adult Social Care website to advise the web team how easy the website is to use and what is relevant to the residents of Wiltshire.

Wiltshire homecare tender
Wiltshire Council completing a review of the current frameworks that cover care at home, keen to gain feedback of commissioned care, understanding experiences and what people want from care at home.

Independent Living strategy
Presentation of the draft strategic aims to ensure Commissioners understanding of what they mean for adults and their Unpaid Carers affected by this strategy.

Community equipment review
Provider to gain experience of people that have used the service of delivering and returning equipment as well as what Wiltshire residents would like out of the service in the future due to potential retender.

Children's Social Care, SEND and Commissioning:
The provider works in close collaboration with Wiltshire Council Youth Voice and Participation teams to ensure a joined-up approach to delivering engagement activity.

Short breaks scheme
Provider to support the Commissioner to understand from parents, carers and guardians how to support the future offer of short breaks to gain uptake.

SEND strategy

Provider to support creation of events and workshops with children and young people, including their parents, guardians and carers to understand what the priorities are of provision and support under the strategy.

Community And Mental Health Services (CAMHS) review
Understanding the service and experiences of people that have used these services, including partners that have referred young people to be supported. Engagement with the established participation group of young people.

Public Health:
Learning disabilities life expectancy
Engagement groups with people using The Medley services as a pilot project to understand how to support adults with a learning disability and their Unpaid Carers to complete their health checks due to current health inequalities data.

Dental care access
Understanding the barriers and experiences of people using health and social care services to access dental care services, especially interested in Care Home residents and the general understanding of oral hygiene.

Survivors of domestic abuse
Survey in association with libraires to support people who are experiencing or have experienced domestic abuse and how this has affected them, this is to understand the services needed to support in Wiltshire.

Other considerations of engagement:

Healthwatch Wiltshire
An addition contract was awarded on 1st January 2024 of The Care Forum trading as Healthwatch Wiltshire.

Healthwatch Wiltshire is a statutory organisation acting as champions of Wiltshire communities to report health issues and feedback to Wiltshire ICB, Wiltshire Council and CQC.

Healthwatch Wiltshire are currently supporting Wiltshire Council on:
- Engagement of Fijian and Nepalese military families
- Wiltshire's understanding of childhood vaccines

As well as understanding eating disorders and services supporting residents requested by Wiltshire AWP.

Each year Healthwatch Wiltshire set their priorities, 23/24 priorities are:

- Issues waiting for prescriptions at pharmacies, the availability of medication, and accessing the service outside of 'normal' hours.
- Concerns about how pharmacies would cope with the introduction of the new Pharmacy First scheme were also raised.
- Mental health and wellbeing support for young people is difficult to access.
- The need to join up health and social care and improve communication between the two.

- Better support for unpaid carers, particularly those who support people with conditions such as dementia.
- Challenges in accessing support for specific conditions such as Autism, and for those for whom English is not their first language.
- People also mentioned feeling the impact of the cost-of-living crisis, such as having to decide which medication to collect due to prescription charges and having to seek private dental treatment as no NHS appointments are available.
- The issues of living in a rural county, where getting around can be difficult due to poor transport links, triggering loneliness and isolation for some

Wiltshire Pioneers

Wiltshire Pioneers are a group of residents in Wiltshire with experience of Adult Social Care services who are working alongside Innovators (Wiltshire Council staff) to develop Adult Social Care services. The Pioneers are paid for their time and have been actively supporting the Transforming Adult Social Care (TASC) programme. Since going live in February 2024, the Pioneers have been involved in the following projects:

Review and coproduction of the Financial Benefits assessment form

Following engagement with people who have used this process, which also includes some of the Pioneers themselves. It was concluded that the Pioneers and Innovators would work together to re-write the assessment form to become more user-friendly. Subsequently a guide has also been produced to support people when completing the form.

Social care staff induction

The Pioneers and Innovators now support a segment of the Adult Social Care induction for new staff, explaining the importance of coproduction and engagement of people in their role. This is to ensure that the ethos of TASC is understood widely across Adult Social Care.
As part of this work, they are also including quarterly Disability ally training to all staff.

Experiences of Adult Social Care

The Pioneers have also been supporting Adult Social Care with the assessments process, after experience of this process the Pioneers coproduced communications expectation material that social care staff can leave at the home following an assessment.
The Pioneers have also supported Wiltshire residents to understand Adult Social Care more by creating positive content shared on social media, to breakdown the service and provide clarification of processes following a survey of Wiltshire residents that have used Adult Social Care services.

The Pioneers and Innovators work is set to continuously evolve setting out good practice such as:
- Trusted relationships between staff and residents of Wiltshire
- Advice and success sharing between staff and residents of Wiltshire.
- Involving other organisations supporting people in Wiltshire.
- Create a wider remit of Pioneers including young people.

As well as working with the University of the West of England to evaluate the project.

Conclusion

Wiltshire Council and Wiltshire ICB now have a greater understanding of experiences of using Health and Social Care services by Wiltshire residents. Both Wiltshire Council and Wiltshire ICB will be continuing this work throughout 2025.

Officers requesting engagement are committed to present the evidence of voice through 'you said we did' documentation 6 months after report created by Voice It Hear It has been finalised.

Recommendation to the committee for 6-month update of projects above and new projects started.

Name Alison Elliott
Director of Commissioning, Adults and Children

Report author:
Georgia Tanner
Georgia.tanner@wiltshire.gov.uk

Date of report: 29/10/204

This page is intentionally left blank

Health Select Committee

Forward Work Plan

Health Select Committee – Current Task Groups/Rapid Scrutiny			
Task Group/Rapid Scrutiny	Details of Rapid Scrutiny	Start Date	Final Report
Emotional Wellbeing and Mental Health Strategy	A joint rapid scrutiny with Children Select Committee members to review the development of the strategy (subject to agreement of CSC) **NB** a second meeting was agreed and will take place when the Delivery Plan has been drafted (possibly September 2024) to review how the (Mental Health) strategy will be implemented in Wiltshire.	26 April 2024	Tbc
Voluntary Sector provision of health and social care in Wiltshire	Inquiry session with representatives from the voluntary sector to understand their perspective	TBC	TBC

Standing items on agendas (at all meetings)	Type	Report author / Lead
NEW **Cabinet Member update** – To receive a brief verbal update from attending Cabinet Members (or Portfolio Holders on their behalf) highlighting any news, successes or milestones in their respective areas since the last meeting of the committee, not covered elsewhere on the agenda.	Verbal	Cabinet Members (or Portfolio Holders on their behalf)

Page 45

Agenda Item 10

Health Select Committee – Forward Work Plan	
Briefings for Chair and Vice-chair	
Timeframe	**Topic [Origins]**
March 2025	**Technology Enabled Care** • the data for the outcomes listed as priorities (on page 38 of the agenda) to indicate progress/direction of travel. • the implementation plan for TEC Care (including an update on the number supported with TEC care with regards to the 60% target of funding packages). *Nb – outcomes of the briefing will inform update to HSC in September 2025.* [HSC 10 September 2024 - minutes]
June 2025	**Wiltshire Joint Local Health and Wellbeing Strategy and Integrated Care System Strategy** - Progress and Performance Report Have a preview of the report to ensure it is in a more accessible format (last received at HSC 17 July 2024)
July 2025	Update on the **Implementation Plan of the Integrated Care Strategy** - Chair and Vice Chair to have sight of the report when it is being drafted to ensure that it provides performance information that the committee can meaningfully review. Report due to HSC in September 2025. [HSC 10 September 2024 - minutes]
September 2025	**Technology Enabled Care** A briefing on the delivery of the Technology for independence project with Swindon, 12-months into the 18-months project. This update should include performance measures and feedback from customers. *Nb – outcomes of the briefing will inform update to HSC in March 2026.* [HSC 10 September 2024 - minutes]

Health Select Committee – Forward Work Plan				
22 January 2025, 10.30am				
Pre-meeting briefing (10am in the meeting room) – topic: Co-opted member presentation NB to be agreed by HSC on 20 November 2024				
Type & timings (including Q&A)	**Item title**	**Details / Purpose of report** **Origins / history**	**Cabinet Member / Portfolio Holder**	**Report Author / Lead Officer**
Substantive 20 mins	Care Quality Commission (CQC) Inspection of Adult Social Care	*NB – date may change depending on availability of CQC report.* A brief report presenting the outcomes of the CQC inspection and how this compares with the position presented on slide 4 of the agenda supplement (which are the strengths and areas for further development). HSC may review its forward work programme, if required, based on the outcomes of the CQC inspection. HSC 10 September 2024 - minutes	Cllr Jane Davies	Emma Legg
Substantive 20 mins	Continuing Health Care (CHC) Funding in Wiltshire	Return to this item at a future meeting to allow the Committee time to review the information provided on 12 June 2024 and consider further financial information for Wiltshire and the additional queries raised at the meeting, including: • clarity around how many assessments result in eligibility for the CHC, specifically for Wiltshire and how they compare to national conversion rates • Wiltshire's ICB spend on CHC and if it was a percentage in comparison to other ICBs • Steps taken by ICB to ensure that vulnerable groups (including complex needs, learning disabilities and end of life fast-track) are able to access support and in a timely manner (concerns raised around complexity of CHC process) HSC 12 June 2024 - minutes	Cllr Jane Davies	Emma Legg Sarah-Jane Peffers (Associate Director for Patient Safety and Quality and All Age Continuing Care)

Substantive 10 minutes	Non-elected members	To review options for the appointment of non-elected members to the Health Select Committee		Julie Bielby
Informative 10 mins	Substance use grant	To review the succession plan before the end of the grant period (April 2025). HSC 27 February 2024 - minutes	Cllr Ian Blair-Pilling	Kate Blackburn Kelly Fry/Lizzie Shea
Informative 10 mins	Domestic Abuse Safe Accommodation Grant	To review the succession plan to support victims of domestic abuse before the end of the grant period. HSC 27 February 2024 - minutes	Cllr Ian Blair-Pilling	Kate Blackburn Hayley Morgan Daisy Manley
Informative mins	Wiltshire Joint Local Health and Wellbeing Strategy and Integrated Care System Strategy - **Collaboratives**	Brief updates on Collaboratives through the year, including: A) Chippenham, Corsham and Box Launch programme, starting with the roll out then measuring of impact/success. B) the Salisbury collaborative including roll out and measuring of impact/success. C) Progress on the target that each of the 13 areas would have an established collaborative by 2025. D) Understanding the role of community conversations in informing and developing the work of Neighbourhood Collaboratives (*NB from legacy forward work plan*) HSC 17 July 2024 - minutes	Cllr Jane Davies	Emma Higgins (Swindon and Wiltshire Integrated Care Board)
Informative 20 mins	NHS Dentistry and Oral Health Promotion	*NB – date to be confirmed* Request the following information when the item is rescheduled for consideration: • The impact of preventative work • Update on incentives for workforce • Access to dental services	Cllr Ian Blair-Pilling	Kate Blackburn

		• Pilot initiatives in the BaNES/Swindon/Wiltshire ICB area. HSC 12 June 2024 - minutes Outcome of Rapid Scrutiny exercise – 8 June 2023		
Informative 10 mins	Boater Community Survey – actions taken	An update on actions taken on the results of the Boater Survey carried out in September 2023, including: • Sharing the report and findings with Town and Parish Councils. HSC 12 June 2024 - minutes	Cllr Ian Blair-Pilling	Kate Blackburn Vicki Lofts Kiersty Rose

Health Select Committee – Forward Work Plan

12 March 2025, 10.30am

Pre-meeting briefing (9.30am in the meeting room) – topic: the different providers and their role in delivering the Unpaid Carers contract implementation report to be considered at the meeting)

Type & timings (including Q&A)	Item title	Details / Purpose of report Origins / history	Cabinet Member / Portfolio Holder	Report Author / Lead Officer
Substantive 20 mins	Wiltshire Council and Wiltshire Integrated Care Board (ICB) **Dementia Strategy Update 2023-2028**	Receives an update report to include: a. Demonstrating the implementation of the Dementia Strategy 2023-2028 (highlighting any key changes if required), including the eight key priorities listed in paragraph 40 of the report; b. A year's overview of delivery of the KPIs set for the Dementia Advisor Contract; c. A year's overview of delivery of the KPIs set for the Dementia Community Services contract. HSC 10 September 2024 - minutes	Cllr Jane Davies	Jo Body (Senior Commissioner), Alison Elliott (Director – Commissioning) and David Leveridge (NHS)
Substantive 20 mins	Unpaid Carers Contract Carers Strategy	Report detailing implantation of the new contracts, and: • KPIs to be used to monitor effective delivery, • delivery on the 8 priorities mentioned in paragraph 7 of the report, and • delivery on the future actions listed in paragraph 7, with a particular interest in Carer Champions linked to Area Boards. To review impact of the strategy following a presentation to committee, 4 July 2023.	Cllr Jane Davies	Georgia Tanner

Page 50

		HSC 17 July 2024 - minutes		
Substantive 20 mins	Wiltshire Council Business Plan	Adult Social Care performance against Business Plan targets. This would inform the HSC's areas of focus for its work in the new council.	Cllr Jane Davies	Emma Legg
Informative 20 mins	Pharmacy update	A review of the Pharmacy Needs Assessment (PNA) process and consideration of how commissioners (ICB) use PNA to commission pharmacy services, including: • an update on the work undertaken to date by the PNA steering group (started in October 2024)	Cllr Ian Blair-Pilling	Kate Blackburn / ICB Rich Francis David Bowater Victoria Stanley
Informative 20 mins	Better Care Fund	*NB may be brought forward sooner if issues are identified by the Health and Wellbeing board.* Update report with a focus on community equipment and any adjustments to budget to meet demand. HSC 10 July 2024 - minutes	Cllr Jane Davies	Helen Mullinger Karl Deeprose
Informative 10 mins	*Direct payments*	*A report on management of direct payments in Wiltshire* *Legacy forward work plan*	*Cllr Jane Davies*	*Emma Legg*
Informative 10 mins	*Self-directed support*	*A report on self-directed support in Wiltshire.* *Legacy forward work plan*	*Cllr Jane Davies*	*Emma Legg*

Page 51

Health Select Committee – Forward Work Plan				
5 June 2025, 10.30am				
Pre-meeting briefing (10am in the meeting room) – topic: Co-opted member presentation NB to be agreed by HSC on 20 November 2024				
Type & timings (including Q&A)	**Item title**	**Details / Purpose of report** **Origins / history**	**Cabinet Member / Portfolio Holder**	**Report Author / Lead Officer**
	Election of chair and vice-chair of the committee	Annual process	n/a	Democratic Services Officer
BC	Appointments of co-opted members - review	Annual review HSC 20 November 2024	n/a	Scrutiny Officer
Informative / substantive 30 mins	Adult Safeguarding	There would be two parts to the item: • A general update on the work undertaken by the Wiltshire Safeguarding Vulnerable People Partnership • A review of performance against Adult Safeguarding KPIs HSC 2 November 2023 - minutes	Cllr Jane Davies	Emma Legg
Informative 20 mins	Public Health Health Protection	A report providing: • an overview of the areas of work delivered by Public Health, with an understanding of the commissioning of Public Health Services in Primary Care. It should be noted that the following has previously been of interest to the HSC:	Cllr Ian Blair-Pilling	Kate Blackburn Alice Marriot

		o Wiltshire Health Coach Service o Wiltshire Health Inequalities Group and its annual / impact report if available (HSC 2 November 2023) • A review of the impact of health protection initiatives in Wiltshire. Following elections this would enable the newly formed HSC to familiarise itself with Public Health.		
Informative 20 mins	Wiltshire Health Improvement Hub and Smokefree Developments - update	A review of the Delivery Plan to be considered with other Primary Care Commissioned services. A report on the impact of the service including an update on the Smokefree Generation programme. HSC 12 June 2024 - minutes	Cllr Ian Blair-Pilling	Kate Blackburn Gemma Brinn / Sally Maynard-Smith / Katie Davies

Health Select Committee – Forward Work Plan

9 July 2025, 10.30am

Pre-meeting briefing (10am in the meeting room) – topic: Co-opted member presentation NB to be agreed by HSC on 20 November 2024

Type & timings (including Q&A)	Item title	Details / Purpose of report / Origins / history	Cabinet Member / Portfolio Holder	Report Author / Lead Officer
Informative 15 mins	Avon & Wiltshire Mental Health Partnership – performance update	Annual – to receive a performance update on the work undertaken by AWP in the last 12 months, including: o Key performance indicators, o Narrative on key successes and issues, o priorities for the year ahead. HSC 8 June 2023 - minutes	Cllr Jane Davies	Avon & Wiltshire Mental Health Partnership
Informative 15 mins	Wiltshire Health and Care – performance update	Annual – to receive a performance update on the work undertaken by Wiltshire Health and Care in the last 12 months, including: o Key performance indicators, o Narrative on key successes and issues, o priorities for the year ahead. HSC 8 June 2023 - minutes	Cllr Jane Davies	Wiltshire Health and Care
Informative 15 minutes	South West Ambulance Service Trust (SWAST) – performance update	Annual – to receive a performance update on the work undertaken by SWAST in the last 12 months, including: o Key performance indicators, o Narrative on key successes and issues, o priorities for the year ahead. HSC 8 June 2023 - minutes	Cllr Jane Davies	South West Ambulance Service Trust

Page 54

Health Select Committee – Forward Work Plan
9 September 2025, 10.30am
Pre-meeting briefing (10am in the meeting room) – topic: Co-opted member presentation NB to be agreed by HSC on 20 November 2024

Type & timings (including Q&A)	Item title	Details / Purpose of report Origins / history	Cabinet Member / Portfolio Holder	Report Author / Lead Officer

Substantive
20 mins
	Implementation Plan of the Integrated Care Strategy	Progress and Performance Report which would be in a more accessible format.
		
		This should include an update on:
		
		• the additional capacity for domiciliary care to support carer breakdown,
		• preventing avoidable admissions to hospital
		• delivery of the Wiltshire Priorities (page 55 of the agenda) for 2024-25 in relation to:
		   ○ Healthcare inequalities
		   ○ Neighbourhood collaboratives
		   ○ System flow
		
		HSC 17 July 2024 - minutes
		
		HSC 10 September 2024 - minutes
			Cllr Jane Davies	Emma Higgins (ICB)

Informative 20 mins	Technology Enabled Care – update	Update on: • Delivery of priorities • Implementation plan for TEC Care HSC 10 September 2024 - minutes	Cllr Jane Davies	Helen Mullinger (Commissioning Manager)

Informative 20 mins	Primary and Community Care Delivery Plan	Annual update on the delivery of Primary and Community Care, including key successes and issues in 2024-2025. HSC 2 November 2023 - minutes	Cllr Jane Davies	ICB

Page 56

Health Select Committee – Forward Work Plan

12 November 2025, 10.30am

Pre-meeting briefing (10am in the meeting room) – topic:

Type & timings (including Q&A)	Item title	Details / Purpose of report Origins / history	Cabinet Member / Portfolio Holder	Report Author / Lead Officer
			Cllr Jane Davies	

Page 57

Health Select Committee – Forward Work Plan

14 January 2026, 10.30am

Pre-meeting briefing (10am in the meeting room) – topic:

Type & timings (including Q&A)	Item title	Details / Purpose of report Origins / history	Cabinet Member / Portfolio Holder	Report Author / Lead Officer
			Cllr Jane Davies	

Page 58

Health Select Committee – Forward Work Plan

11 March 2026, 10.30am

Pre-meeting briefing (10am in the meeting room) – topic:

Type & timings (including Q&A)	Item title	Details / Purpose of report Origins / history	Cabinet Member / Portfolio Holder	Report Author / Lead Officer
Informative 20 mins	Technology for independence – outcome of pilot	Receives a short report once the pilot for Technology for independence is completed (18 months) presenting evaluation of the pilot, outcomes, feedback from customers, and the proposed way forward. Further information may be requested for this update report based on the briefing to Chair and Vice Chair requested 12-months into the pilot. HSC 10 September 2024 - minutes	Cllr Jane Davies	Helen Mullinger (Commissioning Manager)

Page 59

This page is intentionally left blank