

October 2024



Wiltshire Council Prevention & Well-being Strategy Consultation Report





“Prevention in social care is about encouraging people to be more proactive about their health and wellbeing. It can increase independence and reduce or delay the need for care and support services.”

**Prevention in social care, SCIE
May 2021**

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Voice It, Hear It

Community voices inspiring positive change to local support and services.

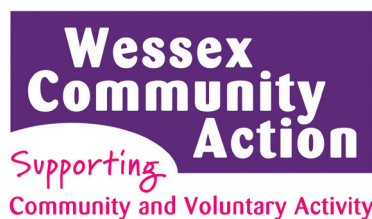
Voice it, Hear It is an engagement project that works with people aged 18+ living in Wiltshire to get involved in shaping the health and social care services they use.

We work with people with physical disabilities, sensory needs, mental health issues, learning disabilities, neurodiversity, long term conditions, complex needs, older people and people with dementia.

We also work alongside Wiltshire Council and the Bath and North East Somerset, Swindon and Wiltshire Integrated Care Board (BSW ICB) and people living and working in Wiltshire to co-produce, co-design and co-develop health and social care services in Wiltshire.

Voice It, Hear It is a partnership project led by Community First, working with Wiltshire Service Users' Network, Wessex Community Action, Age UK Wiltshire, Alzheimer's Support and Celebrating Age Wiltshire.

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Introduction

This report provides an overview of responses from recent consultations on the Wiltshire Council Prevention & Well-being Strategy. The strategy's goal is to promote proactive health and well-being measures, encouraging independence and reducing or delaying the need for care services. Wiltshire Council envisions building resilient communities where individuals can live independently, make informed decisions, and feel valued.

The engagement had two main objectives:



Promote the Prevention & Well-being Strategy: Gather community feedback to ensure the strategy's priorities align with public needs and identify any additional areas for consideration.



Clarify Terminology: Ensure the language used in the strategy is accessible and easily understood.

The consultation invited participants to review the strategy, express their agreement or disagreement with specific aims, and provide feedback on the clarity of terminology and concepts.

It sought to understand how well terms like *"Prevention," "Primary," "Secondary"* and *"Tertiary"* were understood by the community.

Additionally, the consultation aimed to capture community perspectives on key priorities within the strategy, including:

- Advice and information provision
- Technology Enabled Care (TEC)
- Collaboration with health partners
- Preventative measures

The purpose was to confirm that the strategy is clear, aligns with public needs, and effectively supports proactive health measures that increase independence while reducing or delaying the need for care services.

All quoted comments are recorded verbatim as expressed by individuals during the engagement process. This report offers a comprehensive analysis of the feedback gathered.

Key Highlights

The results revealed broad support for the Wiltshire Council Prevention Strategy, with significant agreement on the importance of advice, collaboration, and early intervention services.

Simplification of language

Many found the language used in the strategy too technical and recommended using simpler, clearer terms.

Focus on practical implementation

Respondents expressed a desire for the strategy to include more actionable steps and tangible outcomes.

Accessibility and awareness

Ensuring that all services and resources are easy to access, well-publicised, and inclusive for diverse needs.

Strong support for advice and information

Respondents emphasised the importance of clear, accessible guidance without limiting access to essential services.

Mixed feedback on Technology Enabled Care (TEC)

While the benefit of TEC was recognised, there were concerns about over-reliance on technology over human interaction.

Collaboration with health partners is critical

Respondents stressed the need for seamless coordination across services to enhance care delivery.

Importance of supporting transitions for young people

Participants highlighted the necessity for dedicated support to ensure smooth transitions from youth to adult services.

Call for clearer, simpler communication

Many respondents urged the use of plain language and consistent information sharing across sectors.

The Term “Prevention”

Participants had varied interpretations of the term “prevention.” It was generally understood as actions to stop health issues from escalating or requiring intervention.

“Preventing intervention from services like yours.”

“Stopping falls.”

“Stopping things from getting that desperate.”

“About things that can help us to keep in our own homes.”



The Terms Used for Approaches (Primary, Secondary, Tertiary)

The Care Act sets out a range of additional statutory duties for local authorities, including a number related to the prevention agenda. It is critical to the vision in the Act that the care and support system works proactively to promote wellbeing and independence, rather than waiting until people reach crisis point. The act states that preventative services should operate at three levels:

1. **Primary prevention**
2. **Secondary prevention**
3. **Tertiary prevention**

Participants had varied understandings and interpretations of the terms Primary, Secondary and Tertiary.

- **Primary:** Generally understood as the initial point of contact or care.
- **Secondary:** Viewed as follow-up or more specialised services after primary care.
- **Tertiary:** Considered advanced, specialised care or long-term management

Some felt these terms were overly technical and could benefit from clearer explanations. Here are some direct quotes from participants:

Primary Prevention:

"It's a way of labelling a stage of Multiple Sclerosis."

"Thought of as school level - primary care."

'Stop things getting that desperate'

"About things that can help us to keep in our own homes."

"The first point of contact or acute? First - initial, first point of access. Primary school - first section of education. Primary health care - first point of approach - i.e., GP."

"Ensuring things are in place to prevent disease or illness that could result in injury or harm; first point of contact."

These quotes reflect both clear associations with initial contact or priority and emphasise the need for clarity in how the term is used.

Secondary Prevention:

"Secondary level seems to suggest less important than primary."

"The second service I access after primary; next services in line like physiotherapy."

"Next - this could be a more specialised service; in health terms, a specialist."

"Secondary MS."

"Supports primary measures, it comes after. What is provided after initial support."

"Secondary level, already gone through one level."

These quotes highlight a common understanding of secondary care as services that follow primary care, often involving referrals and more specialised support.

"As a referral from a primary service for further or more comprehensive care/support."

Tertiary Prevention:

***"Tertiary - third part.
Tertiary education - sixth
form or college."***

***"Confusing for
someone with
dyslexia."***

***It's
corporate
speak."***

***"If I was to hear this I would
have to research what this
meant as not a familiar word
and could be a barrier to some."***

***"Supports both primary and
secondary, coming after.
They should aim to reduce the
need for further primary and
secondary interventions."***

***"What even
is that?"***

***"Management of long-term conditions.
Should NOT be seen as a failure service,
currently is, unfortunately!"***

These quotes illustrate a mix of understanding, with some associating "tertiary" with a third level or stage, while others express confusion and concern about its accessibility and perception.

Participants felt that these technical terms needed clearer explanations to be more relatable and less corporate sounding.

Engagement Methods

The engagement aimed to gather diverse perspectives on the Wiltshire Council Prevention Strategy. We employed multiple methods to reach and engage participants:

- Surveys (online and paper)
- Focus groups with community members and service users
- Workshops to encourage group discussions and idea sharing
- Public promotion through social media, community newsletters, and online platforms

We promoted the Prevention & Well-being Strategy through our contacts and partner organisations and also utilised the wider Wiltshire Together network.

We worked with people with lived experience to create case studies that explain the three prevention approaches – primary, secondary and tertiary in everyday life and language. **See Appendix 1.**

We engaged people with lived experience to create an audio and video version to raise awareness of the Prevention Strategy and its aims. **See Appendix 2.**

Through our action, we engaged a total of 75 people

- 56** Participated in the survey
- 9** From the Multiple Sclerosis (MS) Group
- 10** From the Co-production Group

Please note - total figures for quantitative responses in this report reflect the number of survey respondents answering each specific question. Not every respondent engaged with every question. Therefore the totals for each question might not necessarily reflect the figures above.

Demographics

Age range of participants

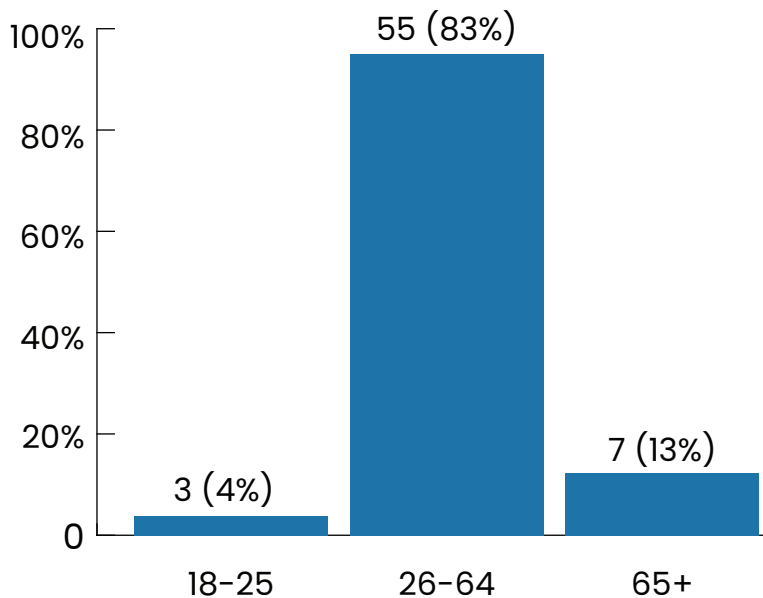


Figure 1: Age ranges for individuals who took part in engagement activity.

*Ages were not captured for workshop

Gender of participants

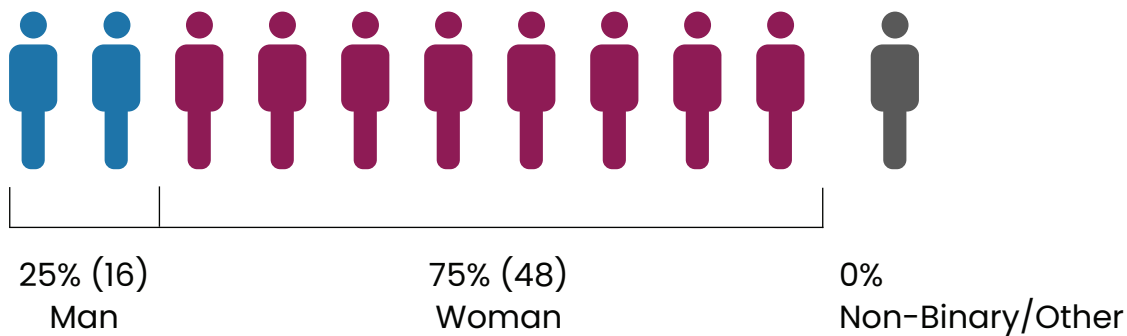


Figure 2: Gender of individuals who took part in engagement activity.

*Genders were not captured for workshop

Urban vs. Rural

Urban vs. Rural: A mix of responses from both urban and rural residents, highlighting diverse perspectives across different living environments.

Project Findings

1. Providing Advice and Information

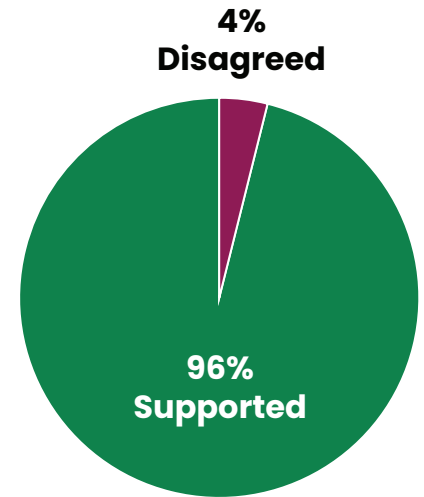
The strategy says:

"We ensure every contact matters and advice, and information is key to this. Adult social care needs to think about whether needs could be prevented, reduced, or delayed and which need support now."

- 96% (43 respondents) supported this statement
- 4% (2 respondents) disagreed with this statement

What was supported: Strong support for the provision of clear, accessible guidance. Respondents found existing information helpful for navigating care options.

What could be improved: Concerns about the strategy inadvertently creating barriers to access; suggestions to ensure information remains open and accessible.



"I agree with this aim but seems to be preventing people accessing these services by saying people's needs aren't high enough."

"I agree with this aim, as long as this approach is not used to create a locked front door with barriers to access."

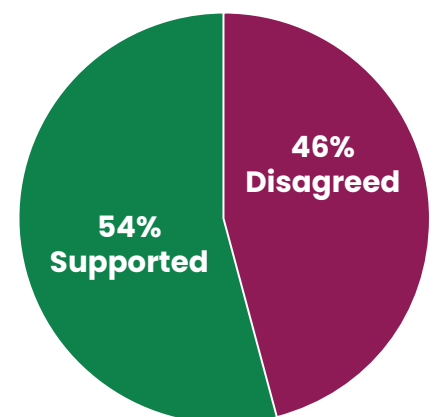
"I agree with this aim, but each contact needs sufficient investigation."

2. Utilising Technology Enabled Care (TEC)

The strategy says:

"Adopting a TEC first culture, utilising smart TEC devices, preventing the need for formal support."

- 54% (21 respondents) supported this statement
- 46% (18 respondents) disagreed with this statement



What was supported: Recognised benefits of TEC, especially in enhancing independence and providing safety through devices.

What could be improved: Mixed responses, with concerns about people’s ability to use technology, and over-reliance on technology at the expense of personal care. Emphasis on ensuring TEC complements, not replaces, human interaction.

“It should be a person-first culture, not technology-first.”

“TEC has great potential to allow people to live independently, especially if it can alert family members or carers in case of emergencies.”

“TEC- this uses language that may be alien to many people. There needs to be an explanation and examples to make it meaningful.”

“I agree with this aim, but with clear pathways and service user choice respected”

“Enable choice, don’t push something where it is not needed as this will also go against the strategy priorities stated.”

“Over-reliance on TEC is risky; human interaction is still essential.”

“Lots of people struggle with technology and it often seems like those people then miss out.”

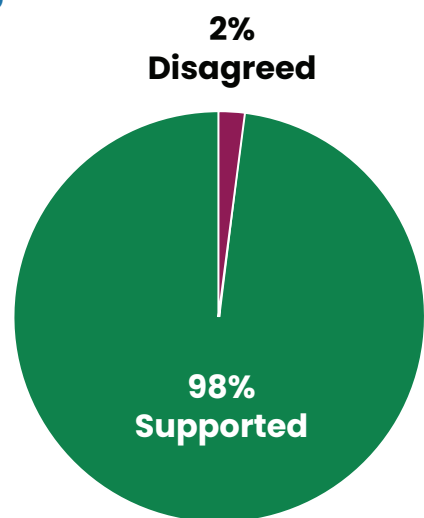
3. Enhancing ‘Your Care, Your Support’ Webpages

The strategy says:

“Working with health partners and public health we could enhance Your Care, Your Support webpages on prevention and the resource available in Wiltshire.”

- 98% (41 respondents) supported this statement
- 2% (1 respondent) disagreed with this statement

What was supported: Positive feedback on the value and accessibility of the webpages. Users appreciated having a reliable source of information.



What could be improved: Recommendations for improving visibility and making content easier to navigate for all users, including those less digitally proficient.

"These webpages are a great resource when you need information quickly, and they are easy to navigate."

"How do the council promote what is there to the people who might need it?"

'If they don't use it what the plan to get more people to use this resource? Seems like all the eggs in one basket approach'

"Why don't they (Wiltshire Council) put with the council tax form they send each year that there is an advice and contact number people can call or email?"

"Content should be designed with the service user in mind, this should also consider accessibility to webpages."

"What we really want is to know where to go or who to call to find out what is already available that we don't know about that might help us."

"The link to 'Your Care, Your Support' needs to be more visible on council websites."

4. Living Well Hub and Front Door Services

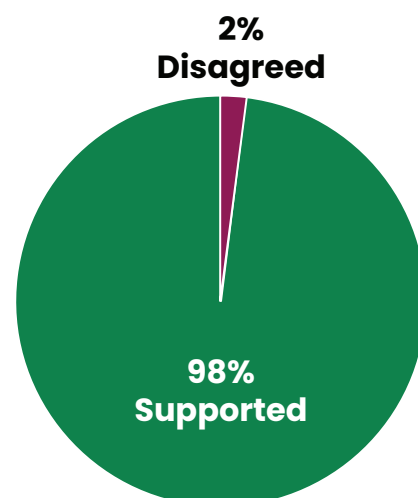
The strategy says:

"Utilising our 'Living Well Hub,' and closer working at the 'front door', enabling transfer of knowledge and a more efficient response to residents. Regardless of whether any eligible needs are identified, people are given information that helps them to prevent and reduce any needs developing, connect with their local community, and delay the onset of greater needs. Information and advice to help in the same way will also be provided to carers."

- 98% (41 respondents) supported this statement
- 2% (1 respondent) disagreed with this statement

What was supported: Strong support for the Living Well Hub, which helps connect residents to local support networks.

What could be improved: Ensure that services are accessible without creating unnecessary barriers. Collaboration with local charities can enhance the reach and effectiveness.



“Local charities can play a role here and may be more accessible for some people.”

“This statement makes no sense! Too much jargon!”

“The Living Well Hub can be a fantastic resource for connecting people to local support networks.”

“Dependant on timely front door responses.”

5. Providing Equipment Clinics

The strategy says:

“Providing equipment clinics – There is the potential to improve the independence and wellbeing of individuals and their safety in and around their homes, with low level/cost equipment, which is available and offered without delay e.g. The Hearing and Vision Resource Centre.”

- 100% (44 respondents) supported this statement
- No disagreements recorded

**100%
Supported**

What was supported: Universally positive feedback. Participants valued the accessibility and usefulness of equipment clinics.

What could be improved: Suggestions to increase awareness and promotion to ensure people know how to access these services.

“Clinics need to be easily accessible and well-promoted.”

“I believe this would reduce pressure on healthcare services.”

“As long as all areas of Wiltshire are treated equally.”

“This makes sense but clinics need to be in accessible locations in the community so it is easy for people to find out what might help them and test it out.”

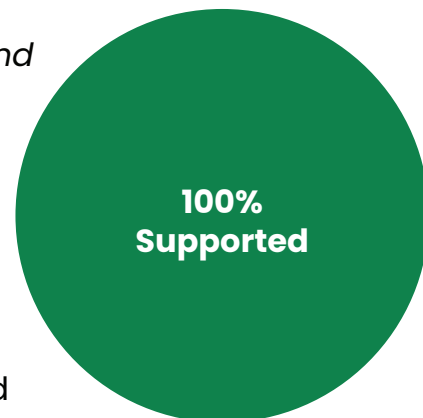
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6. Working Together

The strategy says:

“Working together with health, public health, primary care and wider Wiltshire Council services and social care to join up, promote and develop funded targeted services such as falls prevention and Health and Well-being coaches.”

- 100% (40 respondents) supported this statement
- No disagreements recorded



What was supported: The majority of respondents expressed strong support for the aim of working collaboratively across health, public health, primary care, and social care services to develop and promote targeted initiatives like falls prevention and Health and Well-being coaches. Participants recognised the value of clear referral pathways, the involvement of social care providers, and the need for services to be integrated and effectively coordinated. Several responses highlighted the importance of ensuring services are delivered in a timely manner, with straightforward and accessible routes for individuals to access the help they need.

What could be improved: There were also concerns about potential overlap with existing services, indicating a need for better clarity on what specific support would be provided. Additionally, comments emphasised the importance of not just promoting these services but ensuring they are implemented effectively, with timely responses and comprehensive communication across all sectors, including local charities that play a crucial role in community support.

“Sounds a bit like doubling-up on existing services.”

“Local charities are also crucial here.”

“I would need to understand what sort of help would be on offer and I would probably need help identifying that I needed the help in the first place.”

“Providing the support is delivered within a reasonable timeframe. I have been waiting more than 6 months for a wellbeing return phone call so no good if there is no response from the weight loss or stop smoking team for example.”

“It depends if those services are just more signposting services, which there seem to be a lot of at the moment.”

7. Moving on Service

The strategy says:

“Using the moving on service, ensuring early engagement and intervention, particularly in the space where young people are transitioning from children services to adult services. Preventative and well-being services need to be accessible and offered to all people, no matter their age.”

- 100% (38 respondents) supported this statement
- No disagreements recorded



What was supported: The feedback showed strong support for the aim of using the Moving On service to ensure early engagement and intervention, especially for young people transitioning from children’s services to adult services. Many participants agreed on the importance of accessibility and inclusivity of preventative and well-being services across all ages. Suggestions included having a named social worker to assist young people through the transition, emphasizing the need for clear and consistent support.

What could be improved: Several respondents highlighted a lack of understanding about what the “Moving On” service actually entails, suggesting the need for clearer explanations and more straightforward communication. Some felt the terminology was confusing, and there were questions about how the service could be relevant for all ages, as it appeared to be primarily aimed at young people. Clearer descriptions and practical examples could help to ensure the service’s purpose and benefits are better understood.

“I agree with this aim. Early engagement is always good but needs to be understood by the person, and its impact assessed.”

“I don’t know what the Moving On service is. As I am not a young person or someone who works in this field, I don’t feel informed enough to respond.”

“Would it be possible for young people transitioning to adult services to have a named social worker to help youngsters through the process?”

“I agree with this aim, but does this work in practice? Clear pathways and explanations are needed.”

“What is the Moving On service? The terminology is complicated, and it’s unclear how it applies to all ages.”

Suggested Improvements to the Strategy

Some respondents felt that the language used was too technical or filled with jargon, making it less accessible to the general public.

Feedback from participants highlighted that “prevention” is a broad term affecting the entire Wiltshire population. To improve understanding and engagement of the strategy, they stressed the need for plain language and the use of Easy Read formats, especially for those with learning disabilities, dyslexia, and non-native English speakers.



Clear definitions should be consistently referenced throughout the strategy to aid comprehension.

Other Key Suggestions:

Clarify and Simplify Language

Respondents found some sections of the strategy overly complex, particularly the first sentence, which they felt was too long and used terms like “resilient” that were unfamiliar. Shorter, clearer statements are recommended to make the strategy more accessible to all.

Incorporate video summaries to help convey key messages, ensuring clarity and understanding.

Clarify Independence Expectations

Acknowledge that independence might not be achievable for individuals with incurable conditions, which would help manage expectations.

Promote Balanced Use of TEC

TEC should enhance, not replace, personal care. Participants advocated for a balanced approach where technology complements human services without overshadowing the need for personal contact.

Resources Needed

Allocate funds for training and awareness campaigns to promote TEC effectively.

Improve Awareness and Accessibility

Increase the visibility of resources, especially online platforms. Also, ensure printed materials are available for those less digitally proficient to maintain inclusivity.

Accessibility Enhancements

Develop easy-read formats for strategy documents, catering to individuals with learning difficulties and language barriers.

Encourage Direct Engagement

Direct engagement with service users during the commissioning process was identified as essential. This would ensure that services are truly responsive to user needs and concerns, fostering a more user-centered approach.



Improvements to Processes

Enhance information-sharing pathways for residents and between health and social care sectors to ensure seamless communication.

Support Transitional Services

Participants stressed the need for dedicated support to help young people transition smoothly from youth to adult services. Early engagement and consistent communication would play key roles in this support.

Community Group Support

Participants highlighted the importance of supporting self-sustaining groups that provide vital social interaction, information, and emotional support. Many of these groups are self-funded, and they often represent the only social opportunity for some members, significantly improving their quality of life and mental well-being.



“If they want to prevent things getting worse for people like us, why not support this group? It does so much to help people, and it’s not just the ones in the room. There are people who can’t come but still get help.”

In summary, to refine the Prevention & Well-Being Strategy, Wiltshire Council should:

1. Simplify language and offer diverse, accessible formats for strategy documents.
2. Promote TEC as a complementary service, not a replacement for personal care.
3. Enhance awareness and accessibility of resources, ensuring inclusive reach.
4. Engage directly with service users during planning and commissioning.
5. Strengthen support for transitional services and community groups that play a key role in prevention and support efforts.

Conclusion

The survey results demonstrate community support for the Wiltshire Council Prevention Strategy, with particular emphasis on advice and information, collaboration, and equipment clinics. However, concerns around TEC usage, language accessibility, and the need for practical implementation were evident.

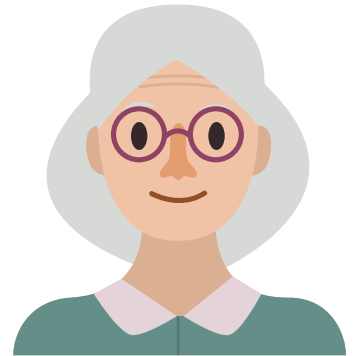
The feedback provides a foundation for refining the strategy, ensuring it aligns with the needs and expectations of residents. Future steps should focus on simplifying communication, enhancing collaborative efforts, and promoting greater accessibility of resources. Continued engagement with the community will be essential in achieving these goals.



Appendix 1: Case Studies

Daisy Primary Prevention

Daisy has just moved to Wiltshire and is enjoying exploring her local area. She takes regular medication for a mild health condition. Daisy has difficulty remembering to take her medication sometimes.



She knows it is important to take her medication and likes to live an independent and healthy life. She is aware that she can be forgetful and wants to find out if there is anything that can help her manage her medication. Her neighbour suggested she call the Council for some advice.

Daisy called Wiltshire Council and talked to a worker in the Advice and Contact team. She explained her situation and the worker asked her some questions about what Daisy wanted. Daisy was advised she could get an automatic medication dispenser that would remind her to take her medication. However, as the conversation developed it became apparent that Daisy enjoys using technology and has a laptop and smartphone. Together she and the worker agreed that she could use her phone as a reminder and can do this without any help.

They also agreed that if this does not work for Daisy she can call again to explore other options.

Daisy was given some links to websites where she could find out about local groups and clubs that she might like to get involved in. She was also given the opening times of her local library as she is keen to get a Wiltshire library card.

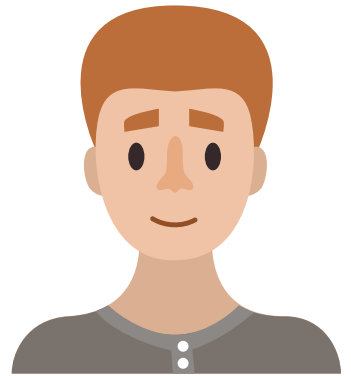
Bobby

Secondary Prevention

Bobby has just left college. He has moved back to Wiltshire and has just started living independently in his own flat. He has since realised that he needs support to manage his finances and with certain living skills such as cooking and cleaning.

His mum and dad knew of someone who's son had already gone through the process of getting support at home, so they got in touch with them and were advised to contact the Adult Social Care Team. They then set up a meeting with a Social Worker to discuss how much support he would need and in what areas. The Adult Social Care Team also advised Bobby would benefit from seeing an Occupational Therapist to discuss if there was any technology or equipment that would support him to live independently.

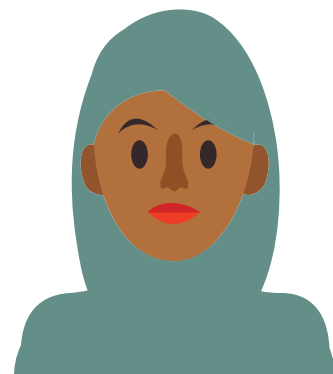
Bobby now has a support worker visiting him twice a week for three hours at a time to support him with his finances and cooking and cleaning skills. He also has a key fob to open and close his front door and a ring door bell so he can see who is at the front door whether he is at home or out. All of these things have enabled him to live more independently.



Zanab

Tertiary Prevention

Zanab lives at home with her daughter Zaisha who is her primary carer. Zanab has complex needs and needs 24 hour care. Zanab and Zaisha can go weeks without leaving the house except to do the shopping and Ziesha feels like she needs a break. During a discussion with a neighbour, Zaisha found out that she could get access to respite by contacting Wiltshire Council.



Zaisha contacted Adult Social Care and they sent someone to visit them for an assessment. After a lot of discussion and organisation, Zanab now goes away to a lovely residential home twice a year to enable Zaisha to go out socially and have a holiday. Zanab also has carers visit twice a week to give Zaisha a break and some personal time to herself.

They were also put in contact with a Community Connector who told Zaisha that there were support groups for carers in the area and she now attends a group once a week. The Connector also found out the details of a local community lunch club for Zanab. She now goes once a week and has made some friends.

Zanab and Zaisha feel that they are now getting the support they need and their mental health and wellbeing has improved.

Appendix 2: Video

As part of the project, the Voice It, Hear It team produced a short, explanatory video about the Wiltshire Council Prevention and Well-being Strategy. A still from the video is included below and a copy of the video will be shared alongside this report.



Acknowledgements

Our thanks to everyone who gave their time to take part in the survey, focus groups and workshops with us to help inform this important work.

This report has been produced by:



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