

**BOURNEMOUTH, CHRISTCHURCH AND POOLE COUNCIL**  
**HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY**  
**COMMITTEE**

Minutes of the Meeting held on 07 March 2022 at 6.00 pm

Present:-

Cllr J Edwards – Chairman

Cllr L-J Evans – Vice-Chair

Present: Cllr D Butler, Cllr S Gabriel, Cllr C Johnson, Cllr A Jones,  
Cllr S Moore, Cllr M Robson, Cllr S Phillips and Louise Bate

186. Apologies

Apologies were received from Cllrs D Farr, C Matthews and K Wilson.

187. Substitute Members

Cllr S Gabriel substituted for Cllr D Farr and Cllr S Moore substituted for Cllr C Matthews.

188. Declarations of Interests

The Vice-Chair declared, for transparency, that she was an employee of the University Hospitals Dorset Foundation Trust.

Cllr C Johnson declared, for transparency, that she was an employee of the University Hospitals Dorset Foundation Trust.

189. Confirmation of Minutes

The minutes of the meeting held on 17 January 2022 were agreed as a correct record.

190. Public Issues

There were none.

191. Action Sheet

In relation to Action Sheet number 170, the BCP Carers Strategy, the Chair provided an overview of the Carers Review and Strategy engagement session that was held on Monday 21 February 2022. The main points were as follows:

- 11% of all carers in Dorset are unpaid.
- There are 5300 carers that are registered with the Carers Information Service, however there is a need to reach those who have not registered or are unaware of the information and services available to them.

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- 90% of the responders to the Carers Survey said that they felt lonely.
- 81% of carers reported that they had taken up more care due to the Covid pandemic.
- 69% of carers reported worsening mental health and 64% reported worsening physical health.
- The highest number of those cared for were: a spouse or partner, followed by a younger relative, followed by a parent.
- Not all carers had the information they felt they need, including information on payments, self-directed support, residential respite and CRISP (carers resource and info support programme).
- 2400 paper copies of the Carer's survey were sent out and of those that responded, 131 said they were happy to be part of a focus group.
- The majority of responders were spouses and/or partners of those they cared for. They preferred the label of 'recognised carer'.
- 33% were not happy with the carer assessments but the majority were happy and were confident with the latest technology required.
- CRISP events would also be helpful if offered during evenings as well as daytimes.
- Many were pleased with the BCP website, especially the 'my life and my care' section.
- Some carers were happy to be mentors in order to give tips and techniques to others.
- Direct payments would be helpful with day-to-day chores such as dog walking, gardening and cleaning.

Cllr D Butler requested an update on Action Sheet number 171, Dementia Services Review, and asked for a monthly update on the diagnostic waiting times in order to monitor the target of reduction from 16 to 6 weeks.

The Committee noted the Action Sheet.

192. COVID Update

The Director of Public Health for Public Health Dorset introduced the progress report on Public Health response to the COVID-19 Pandemic. The main points raised during the presentation were as follows:

- The national strategy for dealing with Covid had changed and plans were in place for the Living with Covid strategy.
- Current data showed that cases of the Omicron variant were extremely high in January 2022, with a rebound in February, before appearing to fall at present.
- There was a significant change in public behaviour around the seeking of tests and more people were simply relying on PCR tests – therefore data is becoming less reliable.
- The National Prevalence Survey conducted by the ONS showed that prevalence rates were at 4.8% as of 23 February.

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- The Government data shows that hospital admission rates for Covid are going down and that hospitals are showing a mixture of people who are admitted due to covid and those that are admitted for other reasons but also have covid.

Living with Covid Strategy:

- The Prime Minister announced a series of legal and policy changes regarding the national response to Covid on 21 February.
- This policy change saw the end of the legal requirement to self-isolate, with all regulations lifted, the end of universal free PCR and LFT testing to end on 1 April 2022 and a focus shift to protecting only the most vulnerable in the highest risk settings.
- Local authorities were asked to maintain limited responses to Covid as part of a wider health protection response, including other infectious diseases and hazards.
- Contact tracing was to stop (Test and Trace) from 24 February, which was to have a consequent impact on the local contact tracing teams.
- Surveillance would also change from relying on confirmed cases via testing to the use of prevalence surveys in the population – for example the ONS seroprevalence survey.
- There is currently no evidence of new variants that would pose a risk.

Public Health locally:

- Public Health teams would continue to offer a day response to support higher risk settings such as care, healthcare and education (especially for children with additional needs).
- Public Health would work with all local partners to review national guidance as it changes.
- Targeted community testing programme would end on 31 March.
- There is a limited supply of lateral flow tests that are to be held to support outbreak management and higher risk settings.
- Work would continue with contact tracing teams to retain skilled people who want to carry on working with the Covid response, this would involve some wider redeployment.
- The Health Protection Board would be maintained but would shift its focus to a broader health protection remit.
- PCR testing would end on 1 April with further clarification to be given on how to access testing if needed.

Vaccination programme:

- The Booster programme was slowing in its delivery, from 15,000 jabs given per day to 1500 per day.
- 83% of the eligible population had now had their booster, which was recognised as a huge achievement.

- The JCVI had recommended a limited 4<sup>th</sup> booster in the spring of 2022 for the most vulnerable groups.
- Focus was turning to understanding how best to shift to a sustainable model of vaccination, away from emergency rollouts.
- Public Health were awaiting more information about vaccines that would be available in Autumn which may provide longer term protection.
- Trusted Voice and Vaccine Ambassadors were continuing to work with communities to deliver impartial information about the vaccination campaign and improve the take up in those groups who were still yet to receive any vaccinations.
- The Committee heard that children aged 12+ were now being offered the vaccines. A data collection survey was being conducted on vaccinating children aged 5 and above, but that was not currently government policy.

193. Health Infrastructure Plan Update

The Transformation Director, University Hospitals Dorset introduced the Health Infrastructure Plan Update. The main points raised during the presentation were as follows:

- The Hospital Infrastructure Programme had been nationally renamed as the Dorset New Hospitals Programme (NHP).
- The programme's Strategic Outline Case (SOC) was submitted in the Summer period of 2021.
- The programme is cross-trust and the current management team straddles the three existing trusts (UHD, Dorset County and Dorset Healthcare) with a programme lead in each of the three respective areas.
- The programme is 5 schemes and is Dorset-wide.
- The Dorset area is an advanced system with good engagement at a local system level.
- The Dorset NHP programme is both community acute and mental health focused and covers all aspects of health and integrated social care.
- In August 2021 the Strategic Outline Case was submitted to the Joint Investment Committee and subsequently approved. The SOC was the first step and the Outline Business Case is to be submitted in the Summer of 2022.
- Each of the hospitals across Dorset will include varying specialist services.
- There are four cohorts in the national NHP and Dorset is within Cohort 2 – meaning it is an agile scheme and can be ready to deliver by 2024.
- There has been significant investment for the programme and the wider system will include £305,000,000 of societal benefits coming through this scheme.

The Transformation Director, University Hospitals Dorset answered questions and comments from the Committee. The main questions and answers were as follows:

- A question was posed as to whether the renaming to ‘new hospitals programme’ was misleading, the Committee heard that the programme did not include the creation of new hospitals but rather improvements to existing hospitals. The Committee heard that in Dorset the physical improvements being made were new wings or refurbishments to existing buildings.
- The Committee were informed that the new build at the Royal Bournemouth Hospital will be finished in September/October 2024.
- Members heard that regarding Dorset County Hospital, for those living in Dorset, patients will continue to have choice in the Dorset system though this is dependent on the nature of the hospital visit.
- It was clarified that, once the new Bournemouth A&E was opened in October 2024, Poole would change to urgent care in accordance with the Clinical Services Review
- The Committee heard that ambulance access to the RBH would include covered access for any patient that is visiting.

**RESOLVED that the Committee noted the update.**

194. Suicide Prevention Plan Progress Update - 2022

The Chair informed the Committee that due to programme timeframes the Suicide Prevention Plan Progress Update item would be heard at the next Committee meeting on the 23 May 2022.

195. Portfolio Holders Update

The Portfolio Holder for Tourism and Active Health provided the following points of update:

- Covid management and the offer of regular vaccinations will be similar but not identical to the flu vaccine.
- In terms of budget, the last Full Council meeting saw the approval of the budget, including the public health budget for 2022/2023. There were no cuts to public health; the underspend in 2021/2022 is to be redirected to urgent needs in the community, such as vulnerable children.
- Dorset Integrated Care System (ICS) is to supersede the CCG. It is a national programme. Dorset’s ICS sees Patricia Miller as its new Chief Executive.

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- The Integrated Chair Board (ICB) is a body that is chaired by the Chief Executive of the ICS and includes a number of health professionals. Its primary concern will be on the money and funding that is handed down by the Department for Health. Below the ICB is the broader Integrated Care Partnership (ICP). At present, discussions are ongoing on what the makeup of this partnership will be. It will be a multi-partnered body that include Local Authorities and specialist care providers for example. These groups will be able to have a seat in the partnership and be able to input on the joint up working. Overall the aim is to prevent people coming through the door of social care and healthcare.

Following the Portfolio Holder's update, the Committee asked questions and made comments. The answers given included:

- That Dorset Council had made a decision that they wish to set up their own care company, Care Dorset (CD), and will transfer the Dorset based services from Tricuro to CD. BCP Council have made a declaration that they will commit to Tricuro and continue working with Tricuro given the confidence in their ongoing service. Dorset Council explained in their statement that they wanted to have more control over their care; geographically and demographically Dorset are different to BCP and in setting up their own, new organisation they can focus on the needs of the Dorset area.
- The Committee heard that the 'village hotel' is up and running and planned to be in place until 31 March. This centre is there to assist people to plan for their onward journey after leaving hospital.

**RESOLVED that the Committee noted the update.**

Following the Portfolio Holder's Update, the Chair invited the Manager of Healthwatch Dorset to provide an update on their recent work and projects. The main points of the update were as follows:

Healthwatch Dorset were in the process of planning their work programme for the coming year. This process involved working with a steering group made up of volunteers to evaluate the feedback gathered from the previous year as well as looking at projects taking place both locally and nationally.

The three projects to be focused on are:

1. Dentistry.

The Government said new funding was going into dentistry however this was time limited until the end of March to help give people more access to local dentists. It was explained that there was opportunity for Healthwatch Dorset to work further on this especially with creation of the new ICS, given that they will be responsible for commissioning dentistry.

2. Carers.

Phone call interviews would be taking place during March 2022 with carers who have experience of the Home First process. This project will aid in understanding what the experience was like for carers and care receivers. Dorset Community Action would be working alongside Healthwatch Dorset on this and the work undertaken will feed into the wider work on support for carers.

3. Access to GP Services.

This was highlighted as a top concern for those individuals that contacted Healthwatch Dorset. The specific focus was on children and young people and mental health. Preparatory work was being done at the Boscombe hub in supporting people, at a low level, on their mental health issues and their access to care.

Members heard that there were to be follow ups on Healthwatch Dorset's Young Listeners' project and the A&E project. Reports on these will be published at the end of the month as well as the survey results of people using A&E at Dorset County hospital.

Face to face engagement on access to non-emergency transport were being undertaken; the CCG were carrying out a survey on this matter and so Healthwatch Dorset also wanted to gather peoples' views on this.

**RESOLVED that the Committee noted the update.**

196. Forward Plan

Members discussed the Forward Plan and raised the following topics:

- Think Big Project Update
- Tricuro Update
- Health Inequality report as highlighted in the Local Government Information Unit (LGIU) paper.

It was agreed that these would all be added to the Committee's Forward Plan and that the scope and appropriate timing of the items would be discussed and finalised with Officers.

**RESOLVED that the Forward Plan be agreed by the Committee.**

The meeting ended at 7.00 pm

CHAIRMAN