

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

Minutes of the Meeting held on 02 December 2024 at 6.00 pm

Present:-

Cllr P Canavan – Chairman

Cllr L Dedman – Vice-Chairman

Present: Cllr J Edwards, Cllr H Allen, Cllr D Farr, Cllr M Gillett,
Cllr C Matthews, Cllr J Richardson, Cllr J Salmon and Cllr A-
M Moriarty

Also in attendance: Cllr D Brown

39. Apologies

There were none.

40. Substitute Members

There were no substitute members.

41. Declarations of Interests

Cllr J Salmon advised of a disclosable pecuniary interest as he worked for Dorset Healthcare.

Hazel Allen advised of a disclosable pecuniary Interest in agenda Item 7 - Health and Social Care for the Homeless as they managed the homeless health team at the Royal Bournemouth Hospital.

42. Minutes

The minutes of the meeting held on 24 September were approved as a correct record.

43. Action Sheet

The action Sheet was noted

44. Public Issues

There were no public questions or petitions. One public statement was received from Mrs Susan Stockwell and was circulated to Committee Members prior to the meeting and read out by the Democratic Services Officer as follows:

HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY
COMMITTEE
02 December 2024

Could the work plan please include considering the health implications of licensing Bournemouth's two sex shops including likelihood of injury to health mental and physical using items sold, risk of transmission of infection, risk of damage to fertility, whether items for consumption are MHRA licensed or food labelling compliant as appropriate, whether items sold are ISO 3533 compliant to reduce risk of injury. Also to consider the health implications of sexual offences committed in the BCP area with a view to reducing them by refusing to license sex establishments. Also to liaise with Dorset Crime Panel to lobby for sexual harm prevention orders to include not attending licensed sex establishments and with licensing to include conditions not to admit people subject to these orders in order to protect performers from injury.

The Chair advised that this would be considered under the Work Plan item.

45. Bournemouth, Christchurch & Poole (BCP) Safeguarding Adults Boards Annual Report 2023-2024

The Independent Chair of the BCP Safeguarding Adults Board presented a report, a copy of which had been circulated to each Member and a copy of which appears as Appendix 'A' to these Minutes in the Minute Book.

The BCP Safeguarding Adults Board (SAB) published an Annual Report each year and was required, as set out in the Care Act 2014, to present this to the Council's Health & Wellbeing Board. Many Councils also request that the report is presented to Scrutiny as the report enables a discussion on the work of the Safeguarding Adults Board.

The Committee considered the report for the year April 2023 to March 2024. The report had been agreed at the September meeting of the BCP Safeguarding Adults Board (SAB). The BCP SAB had successfully worked together with the Dorset SAB with joint meetings over the year. Two separate Annual Reports, one for each of the Boards had been published as they were separately constituted. Throughout 2023/24 the BCP SAB had delivered against all priorities which were set out in the annual work plan. The Committee were informed that the Annual Report provided a summary of what the Board has achieved. The Committee discussed a number of issues related to the annual report including:

- The Assisted Dying Bill – The Committee asked about implications from this for the SAB. It was thought that the main regulator would be the Care Quality Commission, and this would need to be processed through regulations before this is known. The most significant issue around assisted dying was assessment of mental capacity.
- Engagement between SAB and CSP – previously the Chair's of the CSP and CSP met quarterly to share any issues, however this was no longer in place but it was expected these would be re-established in the new year. Business officers for the bodies were in contact with each other.
- Right Care right person – This was regularly on the Board's agenda, the next report was due in March and this would consider if there was an impact on capacity of Social Services and Health Services but at present there was no data on this. It was noted that this may be reported

HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY
COMMITTEE
02 December 2024

separately within Adult Social Care. The Director of Adult Social Care advised that a steering group had also been established to look at this.

RESOLVED that the report which informs how the SAB has carried out its responsibilities to prevent abuse, harm and neglect of adults with care and support needs during 2023-2024 be noted.

Voting: Nem. Con.

46. Health & Social Care for the Homeless

The Principal Programme Lead, NHS Dorset presented a report, a copy of which had been circulated to each Member and a copy of which appears as Appendix 'B' to these Minutes in the Minute Book. The Committee was advised that following the recent publication of [Healthwatch Dorset report](#) looking at health inequality for people experiencing homelessness NHS Dorset and BCP Council welcomed the opportunity to consider how current systems through existing services seeks to address inequality for people experiencing or at risk of homelessness. A number of areas of concern and enquiry had been raised. The Committee was informed that the services available across the BCP area were varied to address this issue. In response to the recommendations within the research, the report described how services, their interactions, together with how emerging plans and opportunities, were developing to address these themes. The Committee discussed a number of issues including:

- The timeline for reconsideration of contracts – It was noted that most of the contracts were out of date in terms of the current situation. It was noted that there had been slow progress on this but discussion had been taking place and just before September the commissioning intentions for it went to Dorset Healthcare for consideration as part of a new contract.
- Wound Care – At present there was no forward plan to address this other than improving the access to primary care and it was agreed that this should be something which was picked up in future.
- Service delays - Services were overstretched in terms of housing and the Committee questioned whether this was the case in delivery of health services. It was noted that people who were homeless rarely considered health as a priority, and it was therefore important to build rapport with people and have a degree of flexibility in services. It was noted that sometimes the inability to access housing may be due to a person's complex situation, but it could also be just a lack of available accommodation.
- Housing Strategy – The Committee wanted to follow up on some of the issues raised and it was noted that a housing strategy was being developed which would be taken to Cabinet and would be considered by the Environment and Place Overview and Scrutiny Committee.
- Mental Health – In response to a query it was explained that the Homeless Health Service had both physical and mental health practitioners and the whole partnership was important in providing a joined-up offer.

HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY
COMMITTEE
02 December 2024

- Integrated Care Board – The Committee enquired as to whether this issue had been previously considered by the Board and it was noted that it was going to its Prevention, Quality and Outcomes sub-committee and then it was thought to be coming to the Board in January.

The Committee expressed concerns about the current situation and suggested that there should be a more joined up offer in terms of service provision to homeless people. It was felt that there needed to be better ways to address the needs of people who did not have a local connection but who were homeless in the area and to address the significant housing shortage which currently existed within BCP. It was noted that the Integrated Care Partnership had membership from a range of areas which was working with housing health and social care.

The Committee gave further consideration to recommendations which it would like to make.

RESOLVED: That the Health Overview and Scrutiny Committee Recommend that Cabinet discuss the issues caused by a lack of funding for rough sleepers with no local connection and those without an identified priority need with a view to developing solutions in partnership with other local authorities and key stake holders such as the Integrated Care Board and relevant ministers to create a robust system that does not fail our most vulnerable or unfairly place the responsibility for caring for these people on local particular local authorities, with a view to getting something in place before the new strategy.

Voting: Nem. Con.

47. Transforming Urgent and Emergency Care Services

The Director of Adult Social Care and the Corporate Director for Wellbeing presented a report, a copy of which had been circulated to each Member and a copy of which appears as Appendix 'C' to these Minutes in the Minute Book. The Committee was informed that a system-wide transformation programme to transform and improve urgent and emergency care services for Dorset residents was underway. The programme involved health and care partners, and was anticipated to take 2 years to deliver and should substantially reduce the number of people admitted into hospital when better outcomes could be achieved elsewhere and should result in fewer people waiting in hospital to be discharged while ongoing care was arranged. Work had now progressed and in parallel with other health and care organisations across Dorset the Council must consider whether to participate in the next phase of the programme. Issues raised by the Committee in discussion of this item included:

- Key areas of the Programme Partnership Agreement – It was close to being signed off and was going through all of the different partners. It was expected there may be further minor amendments to the

HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY
COMMITTEE
02 December 2024

agreement. There would also be further legal consideration of the item. The programme operated on a fee guarantee. The Partnership agreement set out that the BCP share of the fee would be proportionate to the Council's share of the benefits. In July 2025 the programme would be reviewed to ensure confidence in making the share of costs and benefits work.

- Oversight of the Programme - There were mechanisms in place to address how the Council would monitor this as a system. The operational mechanism behind this was that there would be 6 workstreams and each of these work streams would have an SRO, and each of the work streams would be very clear about the diagnostic work that was undertaken with Newton's support.
- External Partner involvement - It was noted that there were many different factors impacting on this and it would not be possible to work through this as an individual organisation. It needed to be done in partnership with a systems-based approach. There would be much greater impact and improved outcomes for individuals if this was done as a partnership. There were governance and monitoring plans in place. Concern was raised regarding the involvement of Newton in an extremely complex process as it appeared that they hadn't delivered on this scale previously. The Committee felt that it would be good to see more robust evidence for them being the right partner to take this forward. The Committee was advised that Dorset Council was the lead partner and BCP were involved in the initial decision to bring in Newton to work on the diagnostic. The Corporate Director confirmed that Newton did have significant experience in this area. Other local authorities were already engaged in similar work which was being delivered through Newton and assurance had been received on how the programme had progressed. Measures of success – The Committee questioned what success would look like for this programme. It was explained that this would be based on the outcomes of people's experience, for example a reduction in the need for acute hospital beds and improved short term interventions.
- Fulfilled Lives Programme – The Committee questioned how the programme would be separated. It was noted that the fulfilled lives programme is broader and less directed. The reablement strand of the programme was the area with synergies with this programme.
- Financial implications – The Committee asked about the savings which would be generated through the programme. Assessed the extent of the cashable benefits and looked at £3.6 million by 27/28 being able to be included within the balance sheet for the BCP budget.

The Committee requested that the issues which the Committee had raised be communicated to Cabinet. The Committee wanted BCP to achieve the outcomes which the programme was seeking to achieve. The Committee suggested that there should be an opportunity to check progress prior to the time of the Mid-year review and that Cabinet should ensure that all options, including not using a partner to deliver the programme and keeping it as an inhouse project, had been fully considered. It was noted that the basis for the partnership agreement was on a share of costs and benefits

HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY
COMMITTEE
02 December 2024

and there was a fee guarantee which was set out in the agreement. Newton would be an ongoing partner in the programme and there had been robust negotiations around fees and benefits.

RESOLVED that the Committee supported the following recommendations to Cabinet:

- (a) Notes the summary of the diagnostic review, including improved outcomes for residents and financial benefits for the Council.**
- (b) Notes that under the draft Partnership Agreement with Dorset health and care partners, anticipated benefits are significantly in excess of costs to the Council.**
- (c) Delegates to the Corporate Director for Wellbeing, in consultation with the Portfolio Holder for Health and Wellbeing, the Director of Law and Governance and the Director of Finance, authority to enter into the Partnership Agreement to undertake the proposed transformation programme.**

Voting: Nem. Con. happy with recs an Chair will make comments to Cabinet.

48. Adult Social Care – Compliments, Complaints and Learning Annual Report 2023/24

The Director of Adult Social Care presented a report, a copy of which had been circulated to each Member and a copy of which appears as Appendix 'D' to these Minutes in the Minute Book. The Director and the Head of Transformation and Integration gave a presentation to the Committee which outlined the key aspects of the annual report. The Committee was informed that Adult Social Care had a statutory responsibility to produce an annual report on complaints received, issues that have been raised and any action that has been taken to improve services. Adult Social Care encourages feedback from a range of sources including complaints, compliments, comments. The report provided a summary of complaints and compliments, including learning, for BCP Council Adult Social Care from 1 April 2023 to 31 March 2024.

The Committee asked how the complaints team dealt with complaints that spanned more than just the Adult Social Care service area and it was explained that the complaints team were really experienced and had formed productive relationships with other areas of the Council and sometime a joint response would be required. There was also a joint working protocol with Health partners. However, it was acknowledged that it was complex and often difficult to manage people's expectations.

The Committee congratulated the service on receiving so many compliments as it was felt that this was fairly unusual with complaints being much more common.

HEALTH AND ADULT SOCIAL CARE OVERVIEW AND SCRUTINY
COMMITTEE
02 December 2024

The Chairman asked the Committee to consider any actions or issues arising from the report and either raise these during the Work Plan item or contact the Chairman after the Committee meeting.

49. Adult Social Care Waiting Times

This report was provided for information the Committee was requested to note and respond, as appropriate to the update provided, with a recommendation that a further update be presented in twelve months (December 2025). The report provided an update to the Committee on the Adult Social Care (ASC) demand management of the waiting times for individuals who have requested a Care Act Assessment (CAA) from BCP Council.

50. Gender Identity Disorder (GID)

This report was provided for information at the request of a Committee Member. The Committee was informed that the CASS Review undertaken in 2022 had led to a new model of care for Gender Identity Disorder Services with a move away from one specialist provider to specialist regional centres which will continue to be commissioned by NHS England. A total of six specialist regional centres would be operational by 2026. Two were currently live with one further centre based in Bristol due to be operational in November 2024.

Local processes had been developed and aligned with national requirements as a means of supporting the safe transition of those waiting to access specialist support. This had entailed the offer of assessment to all those waiting along with a conversation and development of a support plan where needed. In the future all referrals to the specialist regional centres would solely be via local CYP mental health or paediatric services.

51. Portfolio Holder Update

The Portfolio Holder for Health and Wellbeing provided a verbal update which included his work around the items which had been discussed at the meeting.

He advised that he had visited the construction of the new COAST building at the Royal Bournemouth Hospital. Which was the catering operations and specialty treatment building. The building included catering operations for the whole site as well as 4 floors of wards. It was due to be ready for operation by next autumn/winter.

He had also attended the Health Inequalities Conference and met with a number of colleagues which had been really useful. A positive Adult Social Care colleagues' event had taken place with over 300 social care staff and there had been opportunities for really good communication.

Discussions had been taking place concerning budgets and the latest information from central government. It was also noted that there were a number of new senior members of staff to be appointed including a new Director of Public Health.

52. Work Plan

The Chairman presented a report, a copy of which had been circulated to each Member and a copy of which appears as Appendix 'E' to these Minutes in the Minute Book. The Overview and Scrutiny (O&S) Committee was asked to consider and identify work priorities for publication in a Work Plan. The Chairman referred to the public statement received at the beginning of the meeting and advised that the suggestion could be added to the list of items for the Committee to give further consideration to. Issues concerning the request and the relationship to the Council's licensing function were raised and it was noted that these would need to be given further thought to ascertain if it was appropriate for the Committee to consider these issues.

The Chairman reminded the Committee that it was due to receive an informal briefing on Mental Health at its briefing session in February.

It was noted that the Clinical Services Strategy should be added to the Work Plan for the Committee meeting in March. The Committee also asked that a meeting with the new Director of Public Health be arranged when they were in post.

RESOLVED that the Work Plan be noted and updated as outlined and the Chairman in consultation with officers give consideration to the priority of further items.

The meeting ended at 8.45 pm

CHAIRMAN