

BOURNEMOUTH, CHRISTCHURCH AND POOLE COUNCIL
HEALTH AND WELLBEING BOARD

Minutes of the Meeting held on 04 June 2020 at 10.00 am

Present:-

Cllr V Slade – Chairman

T Goodson – Vice-Chairman

Present: Cllr L Dedman, Cllr S Moore, Cllr K Wilson, Jan Thurgood,
Kate Ryan, Sam Crowe, D Fleming, E Yafele, S Sandcraft,
D Richardson, L Bate, K Loftus and S Why

37. Apologies

Apologies for absence were received from Graham Farrant, Chief Executive BCP Council, Judith Ramsden, Corporate Director, Children's Services BCP Council and James Vaughan, Chief Constable, Dorset Police.

The Chairman welcomed Jenni Douglas-Todd, Chairman of the ICS for Dorset who was attending as an observer.

38. Substitute Members

Julie Fielding attended as substitute from James Vaughan and Julian Radcliffe, Director of Inclusion and Family Services, BCP Council attended as a substitute for Judith Ramsden.

39. Declarations of Interests

Councillor Kieron Wilson reported that he was currently working at the Royal Bournemouth Hospital.

40. Public Issues

There were no public issues submitted for this meeting.

41. Minutes of the meeting held on 30 January 2020

The Minutes of the meeting held on 30 January 2020 were confirmed as a correct record.

42. Action Sheet

The Board noted the action sheet as presented.

The Chairman referred to the CAMHS Transformation Update and highlighted the request that a similar report be presented, as soon as possible to the BCP Council Children's Overview and Scrutiny Committee.

43. The Response to Covid 19 of Health and Wellbeing Board Partners

The Chairman reported that Covid 19 had led to deaths in the BCP local area and she acknowledged the loss and pain of everyone who had been personally affected and thanked all key workers across all Board partners

including NHS staff, care sector staff, police, fire, Council and the voluntary sector who had supported the public through the period.

The Chairman introduced the item and called on Health and Wellbeing Board Partners to outline their response to the pandemic.

The Director of Public Health reported on the number of cases and deaths in the area. He explained that the local outbreak was characterised by ongoing transmission in clusters associated with high risk settings such as hospitals and care homes – not widespread community transmission. The Board was advised of the Covid 19 command and control structure, how the local approach fed into the regional and national response to the pandemic and in particular the role of the Local Resilience Forum Strategic Co-ordinating Group.

The Vice-Chairman of the Board echoed the comments of the Chairman about the sad loss of life due to the pandemic and the fantastic work done by key workers across Dorset. He highlighted the focus nationally in terms of the surge in demand for hospital care which was being foreseen for the NHS and the need to protect acute hospitals and create critical capacity. The Board was informed that routine elective care had been stopped but was now beginning to restart. The Vice-Chairman reported on the temporary building work which had been undertaken in acute settings to manage the flow around sites and keep social distancing in place as much as possible. The Board was informed of the plans to create additional critical care capacity in Dorset. The Vice-Chairman reported that outpatient appointments and training had been stopped during the pandemic period. Members were informed that Community Hospitals had played a part in discharging some patients to increase capacity. The Vice-Chairman referred to 'hot' and 'cold' sites, the role of primary care GP sites which had all remained open and the support provided to care homes. The Board was informed of the huge demand for PPE and the requirement to provide equipment for staff to undertake their day to day procedures with supplies being shared across Dorset where needed. The Vice-Chairman reported that PPE had not run out, but it had been 'close to the wire' due to demand. He reported on the testing requirements and the increase in focus with the introduction of public testing and mobile sites across Dorset. The Board was informed of the level of transformation including the use of technology which had provided the opportunity for staff to work remotely where appropriate, e-consultation and the huge take up of the 111 website. The Board was informed of the NHS' concerns relating to the dramatic drop in referrals to non Covid 19 related services such as cancer, children's and cardiac and the focus to promote the message that the NHS was open and people should make contact with their GP if they needed to access such services. The Vice-Chairman explained that it was evident that there had been a prescribing surge at the start of the pandemic which had now settled down and was back to normal levels. The Vice-Chairmen referred to the reduction in the level of mental health contacts and emphasised that the NHS wanted to see patients who needed to access services as concerns had been expressed about the long-term implications. The Board was informed that the NHS was now moving into phase 2 with diagnostic and elective work being switched on and the private sector being used to support this work. Members were advised that the Primary Care Networks

had worked really well and supported practices with staff and equipment and the creation of hot and cold sites with hot sites offering services to people with Covid 19 symptoms. The Vice-Chairman explained the importance of keeping the public engaged to promote the message that the NHS was open for business and reported that community groups had also been used to disseminate this message. The Board was informed that nationally and across Dorset there was still a major incident, but the NHS was starting to look at recovery planning.

Debbie Fleming reported on the current level of patients with Covid 19 in the two trusts. She explained how hugely disruptive the pandemic had been to existing services and how proud she was of both trusts and partners across the BCP area and Dorset. She referred to the level of transformation that has been achieved and how positively staff had responded. Ms Fleming emphasised that it would be a long time before anything that looks like normal across the acute area would be seen. She reported that both patients and the public were frightened and as an employer ensuring the provision of services and looking after staff who were at risk was a priority.

Julian Radcliffe, Service Director Inclusion and Family Services, BCP Council reported on the approach taken to protect the most vulnerable children and how the Council was fulfilling its responsibilities working with schools so that vulnerable children could have access to education. In respect of the safeguarding systems schools in the BCP area provided good intelligence on vulnerable children. He reported that staff had been redeployed into priority areas including into the community with link workers sending out as much communication as possible. The Service Director commented on the Council's statutory responsibilities in respect of annual reviews. He explained that the service had created consultation lines which had resulted in excellent feedback from parents and carers. The Board was advised of school attendance levels and that 90% of schools were open in the BCP area.

Jan Thurgood, Corporate Director Adult Social Care, BCP Council outlined the approach taken by Adult Social Care and the collective work undertaken to ensure that hospitals had capacity. She explained that the service had changed the way it worked and the level of contact from the public to Adult Social Care had increased in relation to referrals relating to financial hardship and access to essentials such as food. The Board was informed that safeguarding had seen an increase in referrals and there had been a focus on supporting carers through the pandemic including the introduction of group video contact. The Corporate Director reported on how the adult social care services had provided support across the whole adult social care sector and particularly to care homes.

Kate Ryan, Corporate Director Environment and Community, BCP Council updated that Board on the work undertaken with partners to ensure that no one was having to sleep rough during the pandemic. She reported that 193 council places had been found together with 300 B&B places. The Board was advised that some people may be 'sofa surfing' and potentially a small group of people rough sleeping. The Corporate Director reported on the limited number of rough sleepers registered with a GP. She commented on referrals to other services with positive improvements in mental health and

increased take up of methadone prescriptions which would be a challenge going forward. The Corporate Director reported on the Homelessness Reduction Board and the work with partners to learn lessons and to exceed expected outcomes.

Julie Fielding, Assistant Chief Constable reported on activity including the weekly Partnership Co-ordinating Group and the fortnightly Community Safety Partnership Board explaining that the Board had temporarily amended its emphasise to Covid19 and the impact. She commented on the reduction in crime at the start of the pandemic which had now started to level off. The Board was advised that there were now increases in ASB some of which was related to the Covid restrictions and increases in domestic abuse which was primarily in lower risk groups. The ACC reported on the specific response to the domestic abuse plan which included the provision of safe accommodation, bringing perpetrators to justice, early intervention and safeguarding for children and vulnerable adults.

Seth Why, Dorset and Wiltshire Fire and Rescue Authority, outlined activity. He explained that there had been low levels of sickness within the service and core services were still being delivered though business continuity planning. The Board was advised of the Wareham fire and the impact on the service. The surge in the use of disposable barbecues which in some cases had not be disposed of safely was highlighted and in particular how to communicate the message to the local population and visitors to be aware of the dangers. Mr Why also explained that the safe and well service was continuing via a triage method.

Sam Crowe, Director of Public Health updated the Board on the impact on wellbeing. He referred to a new Public Health review and provided a weblink for Board Members to access. The Director reported that there had been a disproportionate impact in some groups including on going concern for the BME Group which was covered by the new Public Health review. He explained that the true impact of the indirect impact on inequality was still awaited. The Board was advised of an ONS survey and the national levels of wellbeing explaining that people were feeling anxious due to their economic circumstances and concerns about housing tenure. The Director reported on the increase in the access to services such as LiveWell Dorset and that fewer people were exercising. In conclusion he stated that more people believe the UK would be more united and kinder after the outbreak than before.

Karen Loftus reported on the huge response across the voluntary sector to Covid 19. She commented on the phone exercise to understand the state of the sector and that her organisation had spoken to 50 bodies. The Board was informed that people had been directed to the Dorset Community Foundation who distribute funds to charities across the County. Members were advised of the huge surge in volunteers and the collaboration in the sector. It was acknowledged that a quarter of organisations furloughed staff and there was concern about the long-term sustainability. Louise Bate, Healthwatch commented on access to GP services, pharmacy, mental health and hospital services.

The Board was advised that all partners were beginning to work as single agencies and in partnerships on a recovery and reset agenda with the intention to learn from positive innovations made in response to Covid 19.

The Board was informed that it was proposed that the BCP Health and Well-Being Strategy would be considered for approval at its next meeting.

The Board was reminded that its Annual theme for 2020/21 was agreed to be promotion of physical activity for all local people. The Board's views were invited on how to progress in light of the pandemic. The Board noted that the issues of mental health and well-being had been highlighted in the reports to the board and so a view was given that this was an important theme to address while acknowledging that physical activity was a key component in supporting mental well-being.

Jenni Douglas-Todd Independent Chair of the ICS Dorset highlighted the need to capture the lessons on how partners were currently working but felt that the recovery and reset phase would be more challenging including infection control, social distancing and budget implications.

The Board commented on the differing levels of infections across the UK and the R figure. The Director of Public Health reported that advice had been sought from Public Health England on estimating the R figure and whether this was achievable for a particular local area. He referred to the development of Local Outbreak Management Plans.

RESOLVED that the Board notes the current position and update from partners on the response to Covid 19 and progresses the theme of mental health and wellbeing for 2020/21.

Voting – agreed

44. Community Response to Covid 19

The Director of Communities, BCP Council 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 which summarised the community response activity across Bournemouth, Christchurch and Poole in respect of Operation Shield, Together We Can and the Voluntary and Community Sector.

The Director outlined how Operation Shield worked and that telephone contact had been made with every shielding resident who was clinically vulnerable, or a welfare visit arranged if contact could not be made. She explained that currently the Council was awaiting advice from the Government on the future arrangements for shielding residents and what support would be provided.

The Board was informed of the development and operation of Together We Can with the dedicated helpline and volunteer hub. The services responded to calls for assistance across multiple support areas, as well as making proactive calls to the Operation Shield cohort within the BCP area - assessing need and providing assistance by signposting, providing advice or directly deploying a volunteer to assist. A Board member referred to the hotline and the rapid and efficient response provided to patients that had been directed to the service and that he hoped such a system would

continue to operate in the future. A Member asked that if there was any change to the current services provided that this would be communicated.

The Director reported that the future of food parcels was under review and the quality of the food was being feedback to the MHCLG.

Karen Loftus outlined the mobilising of volunteers across the BCP area. She reported that it was volunteers' week and arrangements had been made to cheer for volunteers this evening and encouraged everyone to take part to recognise all the work and support being undertaken by volunteers.

RESOLVED that the update provided be noted.

Voting – agreed

45. The Application of Care Act Easements for BCP Adult Social Care

The Corporate Director 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 which advised the Board that BCP Council Adult Social Care had implemented three easements to the Care Act (2014) under powers granted by the Coronavirus Act 2020.

The Director reported that the easements followed a comprehensive evaluation of service changes resulting from the Covid 19 pandemic undertaken by the Principal Social Worker. The Coronavirus Act (March 2020) had created the ability for Councils to enact Easements to specific legal duties of the Care Act 2014 at four levels and the BCP Council Easements were at Level 2. The Board was informed that these easements had been introduced because Government recognised that the Covid 19 pandemic had placed unprecedented pressures on adult social care and that the full requirements of the Care Act 2014 may be difficult for Local Authorities to discharge.

RESOLVED that the Health and Wellbeing Board note three easements to the Care Act 2014 introduced by BCP Adult Social Care:

- (a) **Assessments for people who are deaf are delayed in some cases because these can only be undertaken face-to-face with interpreters. Further work is in hand to explore whether technology may provide a solution which would allow this easement to be lifted.**
- (b) **Changes in the provision of Occupational Therapy prescribed adaptations and community equipment provisions in response to suppliers and builders operating a reduced or suspended service. There will be delays to some adaptations and equipment provision but, where appropriate, Occupational Therapy services will arrange interim solutions.**
- (c) **Day services have been closed in order to comply with social distancing measures. Their function has been replaced by alternative provision within the community or client's homes, including information, advice and welfare checks.**

Voting – agreed

46. Better Care Fund - Planning for 2019/20

The Head of Strategic Planning and Quality Assurance ASC Commissioning BCP Council 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 which provided an update on progress of the Better Care Fund (BCF) Plan for 2019/20 up until the end of February 2020, including information on the strategic themes and operational schemes and performance against the national BCF Metrics.

The Head of Strategic Planning and Quality Assurance reported on how service delivery had been adapted. The report highlighted national targets which unfortunately were not being met. The Board was informed that there had been a particularly difficult winter within hospital settings with an increase in adults going into care homes and with regard to delayed transfers of care winter funds were used to provide extra domiciliary care to aid discharge from hospital.

The report also set out budget issues, including the arrangements for extending existing BCF 75 agreements to include Covid 19 pooled expenditure as a national decision had been taken to provide free funding out of hospital for all patients requiring care and reablement on discharge from hospital. This fund is being administered by CCGs and there is a national requirement to put in place a Section 75 agreement to govern this fund. It was proposed that authority be delegated to the Chair and Vice-Chairman to sign off the revised BCF 75 agreements.

The Head of Strategic Planning and Quality Assurance reported that a national programme of work was taking place led by NHS England to consider changes to the BCF from 2021 onwards.

In response to a question from the Chairman the Head of Strategic Planning and Quality Assurance reported that there was national and local interest in the discharge to assess model whilst emphasising the need to understand the user experience and to take the opportunity to look at new models.

Sally Sandcraft, CCG reported that there has been a considerable amount of transformation with opportunities for learning and great partnership work in respect of new models of care and ways of working. She acknowledged that there would be implications on how partners engaged with other sectors and used collective resources to enable that to happen. Ms Sandcraft highlighted the need for complete packages of support in primary and community settings emphasising the work undertaken in providing wrap around support for care homes and moving forward with these achievements.

Jan Thurgood, Corporate Director endorsed the comments on the partnership working and the learning process from Covid 19. She reported on the close working with the adult social care representatives of the sector and thanked the sector for the work undertaken by providers with statutory partners. She also highlighted the need to think about the shape of the ASC sector market going forward.

RESOLVED:-

- (a) That having considered the delivery of the plan and performance the report be noted.**
- (b) That authority be delegated to the Chair and Vice-Chair for approval of the additions to the BCF Section 75 agreement in relation to the enhanced supply of out of hospital care and support services during the Covid 19 pandemic.**

Voting – agreed

47. Coronavirus (Covid 19) Care Home Support Plan

Jan Thurgood, Corporate Director 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 on the development of the coronavirus care home support plan.

The Corporate Director highlighted the impact across communities and in care homes of the sad loss of life due to Covid and in particular for the families and staff who have been affected. She wanted to recognise the tremendous contribution, effort and professionalism of all care staff and leaders and to thank them for all their work.

The Board was informed that the Government had announced on 14 May 2020 a national care home support package. She explained this required Councils, NHS and care providers to work together to develop the Local Care Home Support Plan. The Plan was designed to prevent the spread of Covid 19 into and within Care Homes and would cover issues such as PPE, accommodation available in care homes, how staff were used, clinical support given to care homes and testing available for residents and staff. The Corporate Director reported that a draft plan had been submitted regionally to NHS England and Local Government on 29 May 2020. She explained that the plan would be published when a process of regional and national evaluation had been completed in the coming weeks. The Corporate Director reported on the provision of PPE and that all Care Homes were reporting that they had sufficient PPE which was a mark of the collective work undertaken across the Local Resilience Forum, the Council and the sector. The Board was informed that the Government had made available resources through the infection control fund which would be passported to the Adult Social Care sector, 75% of the funding to care homes for infection control measures for staff with 25% allocated based on local discretion.

The Director of Public Health reported on national testing in care homes and the registration of care homes for testing kits.

Sally Sandcraft reported that in terms of the NHS there was a strong recognition of the need to support care homes. She explained that the key strategy was how to identify those who were most vulnerable and to provide the necessary care they need. Ms Sandcraft reported on the acceleration of the work programme of enhancing support in care home. She reported on the prescriptive nature of the NHS England advice which had proved challenging. Sally reported that the LRF chair would now be provided with

the clinical lead for each care home which fits alongside the proposal for a Primary care network to be aligned to each care home in the BCP area.

The Chairman referred to the nature of the tests which seemed to be very invasive and the frequency of testing in care homes. The Director of Public Health commented and informed the Board that testing cannot be done in care homes without supporting them and understanding the context. He explained that this area would be kept under review. He also reported on the development of the Local Outbreak Management Plan which would address ongoing testing and where it was focussed.

The Director of Public Health in response to a question on the timescale for results of Covid tests reported that the turnaround was improving but that this area would be monitored.

In view of the feedback from care homes on the availability of PPE a Member suggested that an email be sent to all Councillors to provide reassurance on access to PPE locally.

RESOLVED that:-

- (a) the Board reviewed the implementation of the national care home support package in the BCP area.**
- (b) at this stage there were no additional significant actions identified which will assist in the implementation of the local care home support plan.**
- (c) The Board be circulated with the final local care home support plan when it has been published and requests a further report on the implementation of support to local care homes.**

Voting – agreed

48. SEND - LGA Peer Review

The Board received a presentation from Julian Radcliffe, Director Inclusion and Family Services, BCP Council on the SEND LGA Peer Review.

The Director reported that the Council had invited this 4-day review which was held at the end of January 2020. He explained that the team had been helpful and came with broad experience. The Board was advised of the process of the review as detailed in the presentation which included self-evaluation, document and data review, review of EHCPs and interviews with all partners, focus groups and visits. The Director outlined the areas of review.

He explained that there was a multi-agency approach in respect of the SEND provision. The Board was referred to a series of recommendations from the LGA report and how they were themed. The Director reported on some of themes which included that EHCPs were a real concern and there had been challenge on communication and engagement with all partners and in particular parents, carers, children and young people, co-production and the ability to develop new solutions, challenge on schools and whether they were sufficiently inclusive and joint commissioning work. The Director reported on how the recommendations were being dealt with and the role of the Send Development Transformation Board. He explained that the LGA

recommendations had been included in the Send Development Plan and outlined the workstreams. The Board was informed that there was a really strong sense of a local area partnership, a significant amount of work had been undertaken in respect of inclusion for those with complex SEND needs and to ensure that children had the best education experience, work was on going in respect of the process for EHCPs acknowledging there had been delays, significant progress was being made on the preparation of children and young people for adulthood including maintaining local arrangements, the capacity of BCP schools had been extended to provide for children with complex needs, joint commissioning was moving with some pace and there was progress in engaging parents and carers on co-production.

Sally Sandcraft reported on the absolute commitment to continue to work with the Council and make faster progress and that the NHS recognises the need to grow capacity. She reported that there was currently a recruitment exercise for an additional designated clinical officer which would help with the above activities. Ms Sandcraft reported on obvious links around the learning from care education treatment reviews, the development work and how we review the effectiveness of the behaviour pathway.

Councillor Moore thanked officers for all the hard work being put into improving SEND services and requested feedback to the Board and the Children's Overview and Scrutiny Committee on the needs of Children and Young People and how they were being supported.

The Chairman asked that the LGA Peer Review team be thanked for the support and work in undertaking the Review.

RESOLVED that the presentation be received and noted and it be acknowledged that regular SEND update reports would be submitted to the Board.

Voting – agreed

49. Forward Plan

The Board considered the latest forward plan.

The Chairman reported that the meeting on 17 June 2020 would be cancelled and rescheduled. She referred to the Local Outbreak Management Plan that was required and the need to arrange a meeting at short notice. She also referred to the development session for the Local Plan and Housing Strategy and that the timing for the session was being considered.

RESOLVED that the Forward Plan be received and noted.

Voting – agreed

Local Outbreak Management Plan

The Director of Public Health reported on the national requirements for the development of a Local Outbreak Management Plan to be in place by the end of June. He referred to the statutory responsibilities of Directors of Public Health and the 7 themes that would be reflected in the Plan. The Board was informed that the final theme was around governance

arrangements and the requirement for a public engagement board. It was proposed that the Health and Wellbeing Board in each area would be used to carry out this function with the sign off of the plan in early July and some discussion on how the Board could function quickly as the public engagement board. The Director of Public Health, in response to a question, commented on the need to consider the membership of the proposed board.

RESOLVED that the above approach and direction of travel be supported and arrangements be made for a meeting of the Board in early July 2020.

Voting – agreed

Note – in addition to the items contained within the agenda the Chairman agreed to the above item being included as a matter of urgency in order to comply with the deadlines to produce a Local Outbreak Management Plan.

The meeting ended at 12.25 pm

CHAIRMAN