

**BOURNEMOUTH, CHRISTCHURCH AND POOLE COUNCIL**  
**HEALTH AND WELLBEING BOARD**

Minutes of the Meeting held on 17 June 2021 at 10.00 am

Present:-

Cllr N Greene – Chairman

T Goodson – Vice-Chairman

Present: Cllr K Rampton, Cllr M White, Cllr B Dove, Jan Thurgood, Kate Ryan, Sam Crowe, D Fleming, E Yafele, Richard Jenkinson, Simon Watkins and Marc House

1. Apologies

Apologies for absence were received from Graham Farrant, Chief Executive BCP Council, Elaine Redding, Corporate Director BCP Council, Sian Thomas, Education Representative, Karen Loftus, Community Action Network and Sally Sandcraft from CCG.

2. Substitute Members

The Board was advised of the following substitutes for this meeting:

Kelly Twitchen, Virtual School and College Headteacher for Elaine Redding, Corporate Director BCP Council.

Steve Place for Karen Loftus Community Action Network

3. Election of Chairman

Councillor Nicola Greene was nominated and seconded for Chairman. There were no other nominations and Councillor Greene took the role of Chairman for 2021/22.

4. Election of Vice-Chairman

Tim Goodson was nominated and seconded for Vice-Chairman. There were no other nominations and Tim took the role of Vice-Chairman for 2021/22.

5. Declarations of Interests

Councillor Bobbie Dove declared an interest in respect of Agenda item 12 as a family member was receiving support from Special Educational Needs & Disabilities (SEND) Services.

6. Public Issues

There were no public issues for this meeting.

7. Confirmation of Minutes and action sheet

The minutes of the meeting held on 18 March 2021 were confirmed as a correct record.

Voting: Agreed

The Board considered and agreed the action sheet.

Voting: Agreed

8. Health and Wellbeing Board - Business protocol, membership and terms of reference

The Board considered the business protocol, membership and terms of reference, a copy of which had been circulated and which appears as Appendix 'A' to these minutes in the Minute Book.

The Chairman highlighted the need to consider how the Board could best undertake its business following the move back to face to face meetings. She indicated that the input from Members and the flexibility that was allowed by holding meetings virtually was welcome and saved considerable time and provided an opportunity to bring a number of partners together.

The Deputy Head of Democratic Services in presenting the paper indicated that it provided any opportunity to review the Board's practices but equally to consider the membership and make any changes as appropriate. As previously raised by the Chairman there was an opportunity to look at the quorum of the Board. A suggested proposal was to have a quorum of seven members of the Board to include one Councillor, one NHS representative and the Director of Public Health. A Councillor asked when any proposed changes would be effective. The Board was advised that it was anticipated that any proposed changes could be implemented quickly but the Deputy Head of Democratic Services reported that she would check on any further approvals that were required. The Chairman suggested that substitutes be used as appropriate eg for the Director of Public Health.

**RESOLVED that the Business protocol, membership and terms of reference be agreed subject to the proposed change to the quorum as detailed above and the arrangements for substitute members.**

Voting: Agreed

Jan Thurgood, Corporate Director BCP Council asked that the Board note that in respect of agenda item 14 there would be discussions on other independent chairs having observer status which would have an impact on the protocol.

9. Local Outbreak Management Plan

Sam Crowe, Director of Public Health presented the report on the Local Outbreak Management Plan which provided an update on current actions under the plan, a copy of which had been circulated and which appears as Appendix 'B' to these minutes in the Minute Book.

The Director of Public Health provided an update on the latest position against the four priorities in the refreshed plan. He reported on the increase in infection rates per 100,000 which had changed in the last couple of weeks with the rate in the BCP Council area currently around 60 cases per 100,000 with the infection rate expected to rise due to the data coming through local information systems. The Director of Public Health explained that it was a similar situation in many of the other Councils across the Southwest. He explained that Southwest England had an infection rate of around 45 cases per 100,000 with the rate for England well over 70 cases per 100,000. The Board was advised that these increases had been predicted through local modelling and the group operating would provide ongoing enhanced surveillance including the work being undertaken around variance of concern. The Director of Public Health reported that all national models had predicted that as we go through step 3 of the roadmap there would be an increase in infection rates however so far based on the information for hospital admissions it looked as if the link between high community infection rates and hospital admissions had been very much weakened. He reported that he welcomed the pause in the roadmap announced by the Prime Minister as it provided an opportunity to progress the vaccination programme which was progressing extremely well and highlight the importance of rolling out to the younger age groups. The Board was informed that it was predominantly younger age groups that were seeing the increase in infections.

The Director of Public Health reported that the Local Outbreak Engagement Board which was a sub-committee of the Health and Wellbeing Board had met yesterday had reviewed the current situation and agreed the communication on key messages. He highlighted that over the next few weeks the Health Protection Board communication colleagues in both Councils would promote the interventions namely the opportunities to get vaccinated, the importance of having two doses including working with local employers to reinforce messages about the vaccination. The Director of Public Health also highlighted the need for twice weekly lateral flow tests.

Tim Goodson, Vice Chairman referred to paragraph 7 of the report relating to the unvaccinated in the least and most deprived areas. He referred to the work being undertaken with community leaders and pop-up clinics to work with minority groups to encourage take up of the vaccination. Richard Jenkinson GP commented on his experience and the vaccination programme which was currently dealing with 18-year-olds. He explained that it was becoming more difficult to encourage people to be vaccinated and in particular younger people who do not perceive themselves to be at risk. Kelly Twitchen reported on care experienced young people and the opportunities to provide support for young people to take up the offer of a vaccination working with social care colleagues. The Chairman commented on existing partner networks that could be used to promote the message to take up the offer of a vaccination.

**RESOLVED that the report be received and noted.**

Voting: Agreed

10. Health & Wellbeing Strategy - Promoting Healthy Lives - supporting mental wellbeing and improving mental health

Paul Iggulden, Public Health Consultant, presented the report on the Health and Wellbeing Strategy – Promoting Health Lives – supporting mental wellbeing and improving mental health, a copy of which had been circulated and which appears as Appendix ‘C’ to these minutes in the Minute Book.

Mr Iggulden reported on three themes previously identified by the Board namely supporting our communities, supporting our staff well-being and working to prevent suicides. He explained that at the request of the Board a workshop was set up to take a stock check of the current position and to consider any additional activities that may be needed to support mental wellbeing. Mr Iggulden highlighted that the report set out key initiatives and recommendations. The Board was advised of the following themes:

- **Understanding the landscaping** – the workshop had discussed three levels – low level support, second level relating to initial diagnosis and a third professional intervention level. Mr Iggulden indicated that the focus of work for the Board would be around level one including wellbeing support that can be made available and in particular how we work to build shared understanding across our communities of the signs of good mental wellbeing, recognising when problems were emerging and where to go for help.
- **It's time to talk** – the workshop discussed people's ability to access offers of help which was often limited by either recognition or reluctance to ask for help or acknowledge that there were issues. Conversations highlighted the continuing existence of stigma around asking for help and that emotional distress was often poorly understood. Proposals included development of tools to help people recognise when either they need help to boost resilience or see that others may need help. In the statutory sector the view was staff wellbeing was well supported through the pandemic in terms of mental health and wellbeing, but it was less clear about what offers were in place for local business. It was suggested that the offers of training and support be extended to the wider workforce. In schools and educational establishments offers were being developed that were available to pupils but support for staff was less clear. He also highlighted that there was no mention of the offer to people in their homes or communities.
- **Improving joined up working** - there was a need to provide information, advice and guidance regarding preventative measures and non-medical support.

Mr Iggulden outlined the detail of each of the recommendations set out in the report. The Director of Public Health highlighted, in respect of initiative 2, the need to scope the proposal to know exactly what added value a digital offer can provide. Steve Place, Community Action Network referred to the bounce back fund through the R3 Group to develop a first stop shop including the option of an app in respect of anxiety about losing employment or going out to work. He highlighted the opportunity to discuss with the Citizen's Advice Bureau and to take a joined-up approach. The

Chairman referred to the role and input from the Council's economic development team the relevance of small businesses, larger employers and the establishment of a welfare group which was having similar conversations about mental health and wellbeing. The Chairman highlighted the need for focus and to ensure that there was not a duplication of efforts through existing networks. She encouraged partners to contribute and add value to existing systems and to liaise with Mr Iggulden as appropriate. The Director of Public Health referred to the work undertaken through mental health is everyone's business programme in Dorset and that one of the outputs was a community charter to increase the visibility of some of the low-level support. Eugene Yafele reported that the Charter had been started but was interrupted by the pandemic so there was a need to regroup. He reported that he was supportive of this work stream and using what already exists to provide a network that connects with communities.

Mr Iggulden advised the Board of the prevention concordat and reported that to be a signatory required agreement of the consensus statement with an action plan addressing the five domains of the framework. He explained that the concordat provided some access to PHE resources together with support. He referred to the interest from the Dorset Multi-Agency suicide prevention steering group in looking at the concordat. He highlighted in the longer term a need for project support to progress this approach. The Chairman confirmed at this stage the proposal was to start the discussion on the concordat. It was acknowledged that further work was needed, and Mr Iggulden indicated that he would like to channel it through the prevention concordat to provide more structure and visibility to the work. Richard Jenkinson indicated that during the pandemic there had been a step change in the number of people suffering with their mental health so there has never been a more important time when we need to address this. The Director of Public Health felt that a significant amount of work had been undertaken as a system for example the multi-agency and local authority suicide prevention plans. He indicated that this was about additional visibility within a clear framework, and which brings the work entrained to the fore. Debbie Fleming felt that this was an ideal way of progressing the issue which should be undertaken within a framework but she always asks the meaning of such concordats. The Chairman indicated that the Board would like a further report but would be happy to adopt the direction of travel.

**RESOLVED that:-**

- (a) Initiative 1- Raising awareness of the landscape of mental wellbeing / mental health and feedback from partners on the 'light on' campaign is encouraged (to [joanna.quinn@dorsetcc.gov.uk](mailto:joanna.quinn@dorsetcc.gov.uk)) be supported.**
- (b) Initiative 2 - Support for developing an on-line triage 'proof of concept' with a view to subsequent development of an App (or similar resource) as part of BCP Smart Cities work be supported at this stage subject to scoping the concept to ensure that it would add value.**

- (c) **Initiative 3 - Directory of (community) support resources – further work on this to develop the offer and consider how it might be maintained is supported.**
- (d) **Initiative 4 - The identified funded training opportunities to SMEs be promoted is supported.**
- (e) **In respect of initiative 5 - Signing up to the national Prevention Concordat - the direction of travel be supported and the concordat agreed in principle subject to a further report being submitted to the Board on the approval of the concordat.**

Voting: Agreed

11. Health and Wellbeing Strategy Empowering Communities - Deprivation

Cat McMillan, Head of Community Engagement at BCP Council, gave a presentation focussed on proposals to develop vibrant Communities in priority neighbourhoods, using strength-based approaches in partnership with communities. The Board was advised that part of this involved a culture shift in the language used moving away for phrases such as tackling deprivation and regeneration with a focus on deficits inside communities to develop vibrant communities and highlighting what was strong not what was wrong.

The Board was advised that key communities the Council want work with, in a vibrant way, have been identified. The next stage was how to engage with communities and work with them to identify strength-based approaches. The Board was advised that services were already delivered in a vibrant and dynamic way eg innovative parks, large impactful festivals and award-winning behaviour changing services which helped people across the area to make lifestyle changes to improve their wellbeing. Cat explained that there was considerable evidence that public services that were delivered in partnership with the communities provided more sustainable and better outcomes for residents. This was apparent during the presentation given earlier in the year by Cormac Russell who was a world-renowned expert in asset-based community development or ABCD. The issue to consider was are partners going far enough to give communities enough ownership in the decisions that affect their lives.

The Board was advised of the outcomes that had been achieved by East Ayrshire in Scotland which had transformed the way in which they work with their communities including the process they adopted eg through community events to engage with residents. Cat explained the fundamental change which was the shift of power from the Local Authority to communities, that ABCD had been embedded throughout the Council and that the Local Authority's role was to serve the communities. The Board was informed of the development of the community led action plan which the local community then delivered in partnership with the Council and wider partners. Cat outlined the ABCD model and the various stages. The Board was advised that this approach was used to work with the priority neighbourhoods across BCP those that were within the 20% most deprived under the indices of deprivation. Cat outlined the development of the strategies that would support this approach, the future for vibrant

communities beyond area action plans and the evaluation of the model. The Board was advised of the work streams and the structure for the development of the model for priority neighbourhoods in the BCP Council area and the associated timelines.

Steve Place, Community Action Network, welcomed the proposal, the detail that underpinned the approach and the time taken by the Council to consider this initiative. He highlighted the expected long-term improvements and reported that there were plenty of communities of interest that suffer disadvantages and asked how their needs would be addressed. Mr Place also referred to neighbourhood plans that were supported as part of the planning system which would be an option within the ABCD approach with statutory status in terms of planning development going forward. He referred to the opportunity to learn from rural areas such as parish planning systems.

The Vice-Chairman outlined his support for the approach and that ABCD provided a good foundation to build on the strengths of communities. He referred to Wigan which was also a good source of learning and emphasised that this structured approach could add the most value. Louise Bate, Healthwatch felt that it was a great plan, referred to the way in which communities had pulled together to support each other during Covid and that it was the right time to build on that momentum. She also highlighted that communities of interest should not be missed. Mr Iggulden asked about the work stream in lane three and how partners could better respond and be receptive to the vibrancy of communities. Councillor Rampton highlighted that she would like to see innovative ways of reaching out and engaging with communities and less reliance on social media. She also supported previous comments on the geographical boundaries and whilst it was important to go to more deprived communities that ABCD should be a conurbation-wide approach with the concept embedded in the whole conurbation and not just in a few communities.

Kate Ryan, Corporate Director, in response to a question commented on the governance arrangements which would result in setting up a new sub-group that would report into the Health and Wellbeing Board. It therefore means that that community agenda would be at the heart of the Health and Wellbeing Framework with links to the Health and Wellbeing Strategy which included the priority to empower communities and tackle inequalities. Debbie Fleming asked who was overseeing this activity. The Board was advised that this initiative provided an opportunity to provide the forum and the approach that all partners could support alongside existing networks into communities. Marc House felt that this was an incredibly positive opportunity for partners to work collaboratively and put communities at the heart of everything that was undertaken. He explained that for the service it was about developing healthier and safer lives with learning and engagement and he welcomed the opportunity to be engaged in the project.

Cat McMillan explained that this project was not being undertaken to the exclusion of other communities of interest all the work in these areas continued. She confirmed that in terms of West Howe the reference in the report was recognition that there was an incredibly strong charity already operating and well established.

**RESOLVED that the Board support the approach outlined in the presentation to develop vibrant communities on a strength-based approach and that the Board is engaged as appropriate applying the commitment of the partnership.**

Voting: Agreed

12. Special Educational Needs & Disabilities SEND Improvement Journey

Terry Reynolds, Education Consultant working for BCP Council, presented the report which provided an update on the SEND improvement journey and key progress to date as evidenced by performance, a copy of which had been circulated and which appears as Appendix 'D' to these minutes in the Minute Book.

Mr Reynolds referred to the Local Government Association Peer review of SEND Services undertaken in January 2020 that identified a number of issues requiring improvement and that subsequently partners had established the SEND Improvement Board. The Improvement Board received a report in October 2020 from Anthony Douglas, Independent Children's Advisor, on a diagnostic of statutory SEND services to look at the most critical issues needing improvement. Mr Reynolds explained that there was the Improvement Board and a Learning and Improvement Plan arising out of the reports referred to above. The Board was advised that the issues facing BCP Council were common in almost all Local Authorities around the provision of effective SEND services. Mr Reynolds referred to a recently published Ofsted report which indicated that there were systemic issues reflected in SEND area inspections highlighting common weaknesses. These weaknesses included the lack of joint commissioning, that co-production does not work effectively and the development of poor-quality health and care plans. He highlighted that there were 151 Local Authorities and all of them had deficits in their high needs block budget which funded SEND services. Therefore, the conclusion of the Ofsted report was that reforms of the SEND services was now even more urgent following the pandemic than it was before. Mr Reynolds reported that the aspirations of those working in the service was to provide the best possible service for children and families so that Children with SEND can live healthy fulfilled and successful lives. The Board was advised that there was a number of challenges in providing the service that the Council wants to provide and there were two elements which BCP Council does not yet have which was the continuum of provision from mainstream through to very specialist provision and the budget pressures were not only substantial but were increasing due to increased demand on the system. The Board was informed that there was a challenge to provide an effective system and manage the budget.

The Vice-Chairman acknowledged that it was clearly a challenging area and was very emotive for anyone who had been involved in the system. He explained that it was an area that needs improvement, and it was good to see the progress made.

Kelly Twitchen commented on the extra support and oversight for children in care to ensure that those with SEND were receiving what they needed.

She commented on the upskilling of the SEND team and that staff had been seconded to provide support. The Board was advised that a lead for inclusion had been appointed within the virtual school to provide an extra layer of oversight to ensure timeliness for the completion of plans, annual reviews and early identification of need. Louise Bate, Healthwatch referred to the young listeners who were designing an engagement project and as part of that initiative they would be speaking to young people who were in the SEND category. Louise confirmed that she would feed the insights into the Board.

Kate Ryan, Corporate Director referred to her area of service delivery and in particular preparation for adulthood and the need for suitable independent housing options. She highlighted the work with care leavers and the various commissioning strategies being developed to support this work. Jan Thurgood, Corporate Director reported on the preparation for adulthood and the work being undertaken to promote independence and choices to enable young people and young adults to achieve what they want. She highlighted one of the key areas which was training and employment and asked partners to consider potential employment opportunities in their organisations for young people and those coming through SEND services and adults with disabilities.

**RESOLVED that the update report and progress made to date be received and noted.**

Voting: Agreed

13. Hospital Discharge Programme 2021/22

Jan Thurgood, Corporate Director presented the report on the hospital discharge programme 2021/22, a copy of which had been circulated and which appears as Appendix 'E' to these minutes in the Minute Book.

The Corporate Director explained that the report was to seek delegation to the Chairman and Vice-Chairman of the Board in consultation with the Cabinet Member for Adults to take any decisions that were required on funding for the Dorset Integrated Care System to support the Hospital Discharge Programme for the period April – September 2021. The Board was informed that since the pandemic all partners across the NHS, Councils and voluntary sector had been engaged in radically changing the way that they manage patients leaving hospital but ensuring that only those people that need to go into hospital were admitted. The Corporate Directorate explained the changes to the hospital discharge process and reported that the aim was for patients to return home if appropriate but to ensure that they continue their care treatment and recovery in the right place.

The Corporate Director reported that the Government had provided funding for various schemes. She explained that capped funding was now being directed to Integrated Care Systems. This had raised an issue in respect of how the capped sum was divided between different health and wellbeing areas. The Corporate Director reported that it should be acknowledged that there may be issues on whether the capped sum would meet all the costs and if the model was sustainable. The Board was informed that further

guidance was awaited through the national adult social care routes. The Corporate Director in response to a question confirmed that the cap applied to the £8.4m.

The Vice-Chairman supported the paper and felt that it was a pragmatic way in managing the issue going forward. He highlighted that the cap would be a challenge due to the level of spend.

The Chairman in providing assurance to Board Members reported that the Council has its own appropriate schemes of delegation.

**RESOLVED that the Chair and Vice-Chair of the Board (following discussions with the Cabinet Portfolio Holder and subject to Council and CCG governance processes) are given delegated authority to make relevant decisions on behalf of the Board related to Dorset Integrated Care System funding for the Hospital Discharge Programme for the period April to September 2021 if needed in advance of a report coming to the Board in October 2021.**

Voting: Agreed

14. Development of the BCP Council area and Dorset Integrated Care System Strategic Partnership Framework

Jan Thurgood, Corporate Director presented the report on the development of the BCP Council area and Dorset Integrated Care System Strategy Partnership Framework, a copy of which had been circulated and which appears as Appendix 'F' to these minutes in the Minute Book.

The Corporate Director explained that the report provided information on the development of local strategic partnerships and outlined the national requirements for new partnership arrangements being introduced in April 2022 as part of legislation and guidance related to formation of Integrated Care Systems (ICS). The Board was informed that all relevant partners and stakeholders would be working over the coming months to ensure that the future framework of partnerships brings best value and impact in terms of improving outcomes for local communities and residents, particularly those who experience inequality and/or who have additional or complex needs.

The report makes recommendations to strengthen relationships between the Health and Well-Being Board and relevant other partnerships and recommends that prior to the end of 2021, the Health and Well-Being Board considers and approves a document which sets out the framework within which all relevant strategic partnerships will work within the BCP Council and the Dorset ICS areas.

The Director of Public Health highlighted the design principles for the ICS which had been published yesterday which can be provided to the Board and highlighted the importance of place-based partnership forums in bringing forward an integrated plan which looks at the improvement of outcomes for health and care services.

**RESOLVED that :-**

- (a) The Chairs of i) the Pan-Dorset Safeguarding Children Partnership; ii) the Children and Young People's Partnership iii) the BCP Safeguarding Adults Board and iv) the BCP Community Safety Board are given an open invitation to attend Health and Well-Being Board meetings and can make requests to the Chair of the Health and Well-Being Board to put items on the Board's agenda.\***
- (b) The Health and Well-Being Board holds a development session to consider the new requirements in relation to partnerships as part of Integrated Care Systems and develops recommendations as to how the BCP Health and Well-Being Board can work most effectively in the context of Dorset ICS from April 2022.**
- (c) The Health and Well-Being Board considers and approves a document which sets out a framework for the future working arrangements between relevant strategic partnerships across the BCP Council and the Dorset ICS areas before 31st December 2021.**

**\* It was acknowledged that the Board's terms of reference would need to be amended to take account of the decision at (a) above**

Voting: Agreed

15. Forward Plan

**RESOLVED that the Forward Plan as presented be noted and the items proposed during the meeting acknowledged.**

The Chairman paid tribute to the following members of the Board

- James Vaughan, Chief Constable, who would shortly be retiring from his role. The Chairman thanked him on behalf of the Board for all the support that he had given in his years of service and wished him well for the future.
- Jan Thurgood, Corporate Director, who would shortly be retiring from her role with BCP Council. The Chairman thanked Jan for her service and extraordinary support to the Board and predecessor Board together with her service to BCP Council and previously the Borough of Poole Council and that she left with very warm wishes.

The meeting ended at 11.43 am

CHAIRMAN