

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

Minutes of the Meeting held on 28 November 2022 at 6.00 pm

Present:-

Cllr J Edwards – Chair

Cllr L-J Evans – Vice-Chair

Present: Cllr D Butler, Cllr L Dedman, Cllr C Johnson, Cllr S Phillips,  
Cllr M Robson and Cllr S C Anderson

Also in attendance: Cllr H Allen, Leader Member for Homeless  
Cllr J Kelly, Portfolio Holder for Communities, Health and Leisure  
Cllr K Rampton, Portfolio Holder for People and Homes  
Louise Bates, Healthwatch Dorset Manager

41. Apologies

Apologies were received from Councillor Dion.

42. Substitute Members

Councillor S Anderson substituted for Councillor Dion.

There was a request from the Chair that the Conservative vacancy be filled.

43. Declarations of Interests

Councillor L-J Evans declared a personal interest as a bank employee for University Hospitals Dorset NHS Foundation Trust, Councillor C Johnson declared a personal interest as a Staff Nurse employed by the University Hospitals Dorset NHS Foundation Trust and Councillor H Allen declared a personal interest as an employee of University Hospitals Dorset and one of her roles was the strategic lead for the Homeless Health Service.

44. Minutes

**RESOLVED** that the Minutes of the Health and Adult Social Care Overview Scrutiny Committee held on 26 September 2022, having previously been circulated, be confirmed as read and accurate and signed by the Chair.

45. Action Sheet

The Chair advised that the action relating to Suicide Prevention would be moved to the Forward Plan to be heard when the National Strategy for Suicide was in place.

In response to a query about the Dementia Services Review, the Committee was advised that an update had been circulated to the Committee.

46. Public Issues

There were no public issues received on this occasion.

47. Dorset and Bournemouth, Christchurch & Poole Safeguarding Adults Boards Annual Report 2021-2022

The Independent Chair, Dorset and Bournemouth, Christchurch & Poole Safeguarding Adults Boards presented the Boards Annual Report (2021/22), 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.

It was a statutory requirement for the Dorset & BCP Safeguarding Adults Boards (SABs) to publish an Annual Report each year and to present that report to the Council's Health & Wellbeing Board. Many Councils also requested that the report was presented to Scrutiny as the report enabled a discussion on the work of the Safeguarding Adults Board.

The report was for the year April 2021 to March 2022 and represented a full year under the governance of the current Chair – the report was agreed at the September meeting of the Safeguarding Adults Boards (SABs).

During this year the Board had agreed to join together with the Dorset Safeguarding Adults Board for meetings and subgroups. This had enabled a more efficient governance structure as many of the statutory and other partners cover both local authority areas. However, each Board was still separately constituted and in September 2021, it was agreed that Board meetings would have a single agenda and joined reports; though retaining the ability for place-based separate meetings, should the need arise.

This year it was agreed to publish one Annual Report for both Dorset and BCP SABs. Throughout this year the SAB had delivered against all its priorities which were set out in the annual strategy and work plan; this Annual Report summarised what the Board had achieved.

The Committee discussed the Report and presentation, and comments were made, including:

- In response to a query regarding violence against woman and girls, the Vice Chair highlighted that BCP Council was shortly going to

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debate whether it should become 'White Ribbon accredited', which the Chair of the SAB praised as a positive step to raising awareness of domestic abuse across BCP.

- In response to a query regarding financial implications and the proposal for equitable contribution from both Councils, the Committee was provided of the historic stance when both boards were separate, information regarding BCP hosting the joint business team, and an increase in contribution from Dorset Council to match BCP's contribution together with possible increased contributions from statutory partners.
- In a response to the Dorset Safeguarding Adult Review (SAR) detailed and the coercive and controlling behaviour which occurred, a Committee Member advised of the need to raise awareness in the older community and the Committee was informed it was being highlighted and promoted in the safeguarding partnerships.
- The Committee was advised of the meaning of Section 42.1 in the Care Act and how it was the process for referring concerns about safeguarding (neglect, abuse and harm) against adults with care and support needs. The process it instigated was detailed.
- The Director - Commissioning for People advised that a training session on safeguarding could be arranged if the Committee were interested, however it was highlighted that Member training had recently been provided which had received reasonable attendance.
- In response to a query regarding transitional safeguarding work, the Committee was advised of the focused work between Children's and Adults social care. The remit of the Chair of the Board was highlighted as a leadership role and it was noted that transitional safeguarding was a key strategy of the Board, about which the Board seeks assurance.
- In response to a query about liaising with multi-faith leaders, the Committee was advised that work had commenced with the local Christian based charities and further work reaching out to smaller faith communities was currently being mapped out. A Committee Member advised of a contact who could be instrumental in helping bring faith communities together which could be passed to the Chair to make contact. **ACTION.**
- It was confirmed that Adult Safeguarding commenced at age 18 and the age brackets where data was collected were 18-64 (classed as working age) and 65 and over. It was noted that most referrals were for those aged 65 and over.
- In response to connections with the Police, the Committee was advised that Adult Social Care was the lead and that the Police were a statutory partner. There was an increase in referrals for Adult Safeguarding Reviews and the Police co-chaired the Boards' Safeguarding Adult Review sub group. It was highlighted there were very clear processes in place regarding information sharing and working together.
- In response to a query regarding neglect, the Committee was advised that self-neglect made up a higher percentage of the data

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which was detailed within the Annual Report. The different types of neglect were discussed and the follow up work which would be undertaken was detailed including investigating and addressing the cause and ensuring an appropriate level of support continued.

- An outreach team was highlighted which was doing excellent work in reaching out to vulnerable individuals and their work was explained to the Committee.
- In response to a query from the Chair regarding dementia and any safeguarding concerns, the Committee was advised that it was an issue across all areas of safeguarding and the need to ensure appropriate support and advice was provided. The responsibility of the Board was detailed within this area which included seeking assurance about preventative support.

**RESOLVED that the Committee note the report which detailed how the SAB had carried out its responsibilities to prevent abuse and neglect of adults with care and support needs during 2021-2022.**

The Chairman advised that Agenda Item 10 Portfolio Holder Update would be considered next by the Committee.

48. Portfolio Holder Update

Councillor H Allen and the Principal Programme Lead Mental Health from NHS Dorset presented a verbal update around the positive work around Homeless Health which included the following:

- That there was good services, charities and voluntary organisations already supporting the homeless, however partnership working had been strengthened and progressed to ensure all stakeholders worked together collaboratively to deliver an integrated, system wide model and pathways including Multi-Disciplinary Team working (MDT).
- The Committee was advised of the ongoing and extensive work around the Hub at St Stephens and the MDT in addition to other projects.
- The partners who contributed to the MDT were detailed including mental health services, drug and alcohol services, advocacy and housing.
- The extensive work being undertaken in the Out of Hospitals model was highlighted to the Committee.
- The Principal Programme Lead Mental Health detailed her joint role across NHS Dorset and BCP Council which included focus on homeless and the formalisation of the MDT offer.
- It was noted that the MDT had started to meet in July with a Memorandum of Understanding and currently focused on rough sleepers using a share point system to ensure each individual had a personalised plan.

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- The Committee was advised of a couple of examples of the good work the MDT was undertaking relating to specific individuals.
- The Committee was advised that since Covid awareness of homelessness had been raised with the difficulties and challenges highlighted and the need to bring together a strategic document which would be Pan Dorset was detailed.
- A Committee Member was grateful for the ongoing work and update and highlighted the issues of self neglect amongst the homeless community and the possible reasons for it were detailed.
- In response to a query about whether a Housing First model was being used, the Committee was advised that there was one in place, but it was not being used in all cases. It was noted that it would be beneficial to use the housing first model for all rough sleepers however cost implications could be preventing this.
- In response to a query whether the target of ending all rough sleeping by 2024 would be met, the Committee was advised that realistically, this probably would not be achievable.
- In response to a query regarding the Health Bus, the Committee was advised that it started as a charity and offered gaps in the health responsiveness for clients. It was noted that there was currently a governance issue which was trying to be resolved as it had negatively affected the timeliness in which healthcare could be offered to those in need.
- The Director of Operations advised of the homeless intervention team and their work which was embedded within the MDT and the housing colleagues and social work teams identifying people at front door which was ensuring a much stronger visible profile and work in those areas.
- The Lead for Homelessness advised of the good data gathering which demonstrate positive outcomes including holistic patient centred care and cost effective care.
- The Chair concluded by thanking everyone involved for all the work that had been detailed in the presentation.

The Portfolio Holder with responsibility for People and Homes provided an update on the following:

- The Proud to Care Campaign, which was BCP Council supporting care provider recruitment via promotional videos, had been well viewed and received.
- The financial support, including a grant from central Government being provided to care providers to recruit from overseas to increase the numbers of posts and hours for carers was detailed.
- Work was also highlighted around the winter discharge grant to enable people to be discharged from hospital and remain in their homes.

The Committee discussed the difficulties experienced with recruitment and retention in the social care workforce. The Committee was advised that

delay in the introduction of social care reform had meant that funding would be received from Government. The Committee was advised of the ongoing work with NHS Dorset to employ people through the NHS with a training package to provide a better offer. The Committee was advised that more detail could be provided on this at a future date.

The Portfolio Holder for Communities, Health and Leisure advised of the following:

- That infection rates for Covid were continuing to fall with fewer hospital patients testing positive and the autumn booster programme was continuing.
- The Committee was advised of the concerns with public sector finances meaning that National Public Health had moved away from primary prevention such as sugar tax to secondary prevention in NHS settings which was more of a physical prevention campaign.
- The agreed underspend of £610k public health grant from the Joint Public Health Board was being returned to BCP and how it would be used was being considered.
- The Health checks programme was being relaunched in April 2023 with a targeted approach in areas of higher deprivation and was progressing in an community engagement model with Livewell Dorset
- Drug and Alcohol Performance would in the future be via the Combating Drugs Partnership which was detailed

The Chairman requested a message be passed back to Dorset Healthcare regarding providing the urgent need to provide the Covid booster vaccine to the home bound elderly. **ACTION.**

In response to a query about younger people and children being offered the vaccine, the Committee was told this could be investigated and reported back. **ACTION.**

49. Annual Compliments, Complaints and Comments report

The Quality Assurance Team Manager 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.

Adult Social Care had a statutory responsibility to produce an annual report on complaints received, issues that had been raised and any action taken to improve services. Adult Social Care encouraged 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<sup>st</sup> April 2021 to 31<sup>st</sup> March 2022.

The Committee discussed the report and comments were made, including:

- In response to a query regarding the training model and low uptake, the Committee was advised that historically it was mandatory however the issues which were encountered and the way in which the team were working to ensure managers were trained to ensure robust responses to any complaints were detailed. The training offered was around case learning and relevant to teams and areas which had resulted in a decrease in number of complaints.
- In response to a query regarding the complaints process, it was noted that it was available on the website and information about the fact sheet given to users wishing to complain was provided
- The Chair praised the number of compliments received and enquired about the complaints relating to the hospital discharge process, the Committee was advised that many of those complaints were when a new discharge process was introduced during the pandemic possibly with reduced care and choice as well as other reasons for complaining.
- In response to a query about Appendix 3 and the breakdown of equality information and proportions to reference the split within BCP, the Quality Assurance Team Manager advised that is something they could consider in future reports. **ACTION.**
- The Committee was advised that a lot of work was undertaken with the Dorset Race Equality Council to promote Adult Social Care Services and increase engagement.

**RESOLVED that the Committee consider and scrutinise the information contained in this report and consider any actions or issues for inclusion in the forward plan.**

50. Adult Social Care Contact Centre

The Head of Access & Carer Services 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 report provided a further update to Committee about the transformation of the Adult Social Care Contact Centre which launched in October 2020.

The paper focused on recent initiatives to embed a new practice model at the adult social care 'front door' and test different ways of working from those that had been traditionally used over recent years.

The Committee discussed the report and comments were made, including:

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- In response to a query from the Chair, the Committee was advised that a queue was in place and callers were informed of their position in it when on hold. The possible reasons for people hanging up were provided including alternatively accessing the required information online or calling back later in the day.
- The Contact Us webpage was detailed which ensured the relevant information was being provided to ensure more effective and efficient responses.
- The Vice Chair thanked the team for the amazing work in place, the positive case studies provided and the savings to the Adult Social Care budget detailed in the report.
- In response to a query regarding community hubs, the Committee was advised that the two principal hubs would be at Christchurch library and in Poole Dolphin Centre, however most of the teams' activity was at BCP Town Hall.
- In response to a query regarding follow ups on existing care, the Committee was advised of the process including being worked through to a locality team. It was noted that the 3 Conversations model being introduced should reduce the amount of work being passed to localities teams and reduce the need for follow up emails.

**RESOLVED that the Committee note and comment on the content of the report.**

51. Healthwatch - Young Listeners Project Update

The Healthwatch Dorset Manager provided a verbal update on the Young Listeners Project which included the following:

- The Committee was advised that Healthwatch had supported eleven young volunteers to carry out a peer-led engagement project. The recommendations from the report were detailed including clearer communication, that young people wanted to feel listened to and heard, clearer language, staff training and awareness and waiting times for young people services.
- The follow up work with NHS Dorset and both Councils regarding communication and language was detailed which included Special Education Needs Offer language which had been informed by young listeners report.
- The Committee was advised of the 100 conversations for the Integrated Care System and the next stage was focused on training young people to go out and talk with other young people.
- The Committee was advised of the GPs enhanced access plans who were tasked with providing better access to communities and particularly reaching out to young people and involvement in patient groups.
- The Committee was advised that the volunteers were aged between 17 to 25 and those talked to were approximately aged 16 to 25.



- The Committee was advised that educating young people on how to access services would assist in the future and that some of the young volunteers were now working within health and social care settings following their involvement with the project.

52. Forward Plan

In response to a query regarding the Winter Plan, the Committee was advised that the plan would be available to share in December.

The Chairman advised that of the Memory assessment service update which had been circulated and if any Committee Members had any queries, please email them through Democratic Services and that it was hoped the information regarding the NHS readmission rates would also be circulated when available.

The meeting ended at 8.45 pm

CHAIR

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